

**CITY OF SACRAMENTO**

**Permit No: 9900418**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 1**

**Site Address: 122 J ST SAC**

**Sub-Type: ACOM**

**Parcel No: 006-0071-045**

**Housing (Y/N): Y**

**CONTRACTOR**

CAPITOL RECONSTRUCTION  
204 21ST ST  
SACRAMENTO CA

95814

**OWNER**

RISCH GARY S/GRACE M  
122 J ST  
SACRAMENTO CA

95814

**ARCHITECT**

**Nature of Work: REPLACE ROOF STRUCTURE - FIRE REPAIR [NO PLANNING ISSUES PER W.J.]**

**CONSTRUCTION LENDING AGENCY :** I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name N/A Lender's Address \_\_\_\_\_

**LICENSED CONTRACTORS DECLARATION:** I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class B License Number 522603 Date 3-9-99 Contractor Signature [Signature]

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

\_\_\_\_ I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

\_\_\_\_ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

\_\_\_\_ I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_

Date \_\_\_\_\_ Owner Signature \_\_\_\_\_

**IN ISSUING THIS BUILDING PERMIT,** the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date March 9, 1999 Applicant/Agent Signature [Signature]

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm under penalty of perjury one of the following declarations:

\_\_\_\_ I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier SUPERIOR NAT'L INS CO Policy Number WPN60518F Exp Date 04/01/1999

\_\_\_\_ (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date March 9, 1999 Applicant Signature [Signature]

**WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.**

**THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.**

CITY OF SACRAMENTO  
APPLICATION FOR **[REDACTED]** BUILDING PERMIT

99004184

DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES SECTION

1231 I Street, Rm. 200  
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # \_\_\_\_\_ Insp. Area AT1

Applicant **MUST** complete ALL Unshaded areas this page only

ADDRESS 120 - 124 J STREET Suite \_\_\_\_\_

PARCEL # 006-0071-045-0000

<p><b>CONTACT</b></p> <p>Name <u>ROBERT SCHEIDEMAN</u></p> <p>Address <u>204 21<sup>st</sup> ST.</u></p> <p><u>SACRAMENTO</u> Zip <u>95814</u></p> <p>Phone <u>446-2774</u> FAX <u>446-5573</u></p>		<p><b>LICENSED CONTRACTOR</b> Lic No. # <u>522603</u></p> <p>Name <u>CAPITOL RECONSTRUCTION CO., INC.</u></p> <p>Address <u>204 21<sup>st</sup> ST</u></p> <p><u>SACRAMENTO</u> Zip <u>95814</u></p> <p>Phone <u>446-2774</u> FAX <u>446-5573</u></p>	
<p><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>BPP/Brian GOODWRIGHT</u></p> <p>Address <u>2130 21<sup>st</sup> ST STE. B</u></p> <p><u>SACRAMENTO</u> Zip <u>95818</u></p> <p>Phone <u>453-1000</u> FAX <u>453-0460</u></p>		<p><b>OWNER</b> <u>[REDACTED]</u></p> <p>Name <u>GARY RESCH</u></p> <p>Address <u>122 J ST</u></p> <p><u>SACRAMENTO</u> Zip <u>95814</u></p> <p>Phone <u>442-8256</u> FAX <u>N/A</u></p>	

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # WPN 60518 F EXPIRATION DATE: 4-1-99

NAME OF INSURANCE COMPANY: SUPERIOR NATIONAL INS. CO.

NATURE OF WORK IN DETAIL: FIRE REPAIR  
ROOF STRUCTURE REPLACEMENT REMOVE EXISTING ROOF STRUCTURE  
ROTTEN, CRACKS, BRACING AND BLOCKING. REMOVE EXISTING STAINLESS IMPLEMENTS ON  
SECOND FLOOR. REPLACE ROOF STRUCTURE COMPLETE AS PER ENGINEERED DRAWINGS AND  
CALIF. ROOF COVER TO BE (1) PUT EXISTING ROOF  
Replace Roof Structure - Fire Repair

DBA: PIONEER HALL & BAKERY VALUATION: 63,000

FLOOD STATUS:		S.C.A.T.							
JOB DESCRIPTION		SHEL	APT	STIC	RE	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File
<u>2</u>		<u>2405</u>		<u>B</u>	<u>VN</u>			<u>18</u>	
						Spr	Alarm		
<u>B</u>	<u>L</u>	<u>P</u>	<u>[REDACTED]</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>R</u>
<u>07C</u>								<u>1081</u>	

COMMENTS:  
 1. Wall Anchorage to Roof Trusses details @ (C) on p 9  
(p) 67x  
 2. (A) EQUIPMENT ON ROOF UNDER SEPARATE PERMIT  
 3. ALL ELEC & PLUMBING @ 72 (if any) UNDER SEPARATE PERMIT

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

BLDGFRM. (REV 05/98)  WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS  Yes  No

City of Sacramento Development Services Division  
Planning and Zoning Information Request

Project Address: 120 J ST

Assessor's Parcel Number: 006-0071-045

Current Land Use: RETAIL

Description of Request/Proposed Use: \_\_\_\_\_

Fire Repair

Zoning Designation: C-3

Prior Applications for Project Site(P#,Z#,DRPB#): \_\_\_\_\_

Comments: \_\_\_\_\_

No planning reqs.  
for Old Sacramento

Are There Any Planning Issues?: (Circle One) YES  NO

Site Plan Check Required? (Circle One) YES  NO

Design Review/ Preservation Required?: (Circle One) YES  NO

Planning Review by/Date: W. Hoover 1/19/99

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

**CITY OF SACRAMENTO**  
 BUILDING INSPECTION DIVISION  
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

*As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form*

1. Business Name: MUNCHIES CANDY STORE Phone: \_\_\_\_\_  
 Site Address: 120-124 J ST. SAC. 95314 Suite: \_\_\_\_\_  
(Street) (Zip)  
 Business Owner/Representative: ROBERT SCHEIDEMAN Phone: 446-2774  
 Nature of Business: CANDY STORE  
 Property Owner: RISCH FAMILY TRUST Phone: \_\_\_\_\_  
 Address: 120-124 J STREET SAC 95314 Suite: \_\_\_\_\_  
(Street) (City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes \_\_\_ No  Is this permit for a shell building? Yes \_\_\_ No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes \_\_\_ No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes \_\_\_ No

**CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.**

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes \_\_\_ No \_\_\_

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes \_\_\_ No \_\_\_

7. Is/Will your business be located within 1,000 feet of a school? Yes \_\_\_ No \_\_\_

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes \_\_\_ No \_\_\_

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

**Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials:**

**PENALTY:** Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Robert Scheideman  
(Print)  
[Signature] (Signature) 3-9-99 (Date)

BID Use Only: Plan Ck# _____	Permit # <u>9900418</u>
OK to issue permit? <input checked="" type="checkbox"/> <u>3-9-99</u>	F.D. Appr Req'd? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<small>init date</small>	
Hold on Certificate of Occupancy? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Fire Dept. Use Only:	
OK to issue permit? ini* _____ date _____	
OK to issue Certificate of Occupancy? ini _____ date _____	

**CITY OF SACRAMENTO  
 DEVELOPMENT SERVICES DIVISION  
 1231 I STREET, ROOM 200, SACRAMENTO, CA 95814**

Prior to issuance of a permit, the applicant shall complete Part I of this form. Part II and Part III shall be completed by the project Architect/Engineer and the Development Services Department as a part of the plan review process. Before permit issuance all parties must sign this agreement. Please note that failure to comply with special inspection requirements could be expensive in terms of retrofit design and construction as well as delays in the project.

**PART I - SPECIAL INSPECTION AND TESTING AGREEMENT**

PROJECT NAME 124 J ST. FIRE DAMAGE REPAIR  
 PROJECT ADDRESS 124 J ST. SACRAMENTO  
 PLAN REVIEW NUMBER 99-00418H  
 PERMIT NUMBER \_\_\_\_\_  
 OWNER'S NAME GARY RISCH  
 OWNER'S ADDRESS 124 J ST. SACRAMENTO 95814  
 OWNER'S REPRESENTATIVE POUL SCHEIDMAN PHONE NUMBER 446.2774  
 TESTING/INSPECTION FIRM(S) ITEMS  
CAPITOL ENGINEERING LABORATORIES, INC.  
631. COMMERCE DR. ROSVILLE 95678 786.2488 / Fax 786-9372  
 CONTACT PERSON: BARRY LOE

**PART II - SPECIAL INSPECTION AND TESTING AGREEMENT - INSPECTION REQUIRED**

In accordance with Chapter 17 Section 1701 of the UBC, as adopted by this jurisdiction, SPECIAL INSPECTION is required as noted below:

PRECONSTRUCTION MEETING ( ) REQUIRED ( ) WAIVED

CODE SECTION	TYPE OF WORK	CONTINUOUS	PERIODIC
1701.5.1	CONCRETE		
1701.5.2	BOLTS INSTALLED IN CONCRETE		
1701.5.3	SPECIAL MOMENT - RESISTING CONCRETE FRAME		
1701.5.4	REINFORCING STEEL AND PRESTRESSING STEEL TENDONS		
1701.5	STRUCTURE WELDING		
1701.5.1	GENERAL		
	FIELD STRUCTURAL WELDING		
	SHOP STRUCTURAL WELDING (REQUIRING SPECIAL INSPECTION)		
1701.5.2	SPECIAL MOMENT - RESISTING STEEL FRAMES		
1701.5.3	WELDING OF REINFORCING STEEL		
1701.5.6	HIGH STRENGTH BOLTING		
1701.5.7	STRUCTURAL MASONRY		
1701.5.8	REINFORCED GYPSUM CONCRETE		
1701.5.9	INSULATING CONCRETE FILL		
1701.5.10	SPRAY APPLIED FIREPROOFING		
1701.5.11	PILING, DRILLED PIERS AND CAISSONS		
1701.5.12	SHOTCRETE		
1701.5.13	SPECIAL GRADING, EXCAVATION & FILLING		
1701.5.14	SMOKE CONTROL SYSTEM		
1701.5.15	SPECIAL CASES		
1702	STRUCTURAL OBSERVATION PER SECTION 307 REQUIRED: ( ) YES ( ) NO		

SCC 9.26.1004 FLOOD PROOFING INSPECTION & CERTIFICATION  
 OTHER: SPECIAL INSPECTION @ EPOXY ANCHOR INSTALLATION  
 SPECIAL INSTRUCTIONS:

DATE

2/15/99

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 TION OF SPECIAL INSPECTIONS AND TESTING WORK, PROVIDE THE CITY'S PLAN CHECK ENGINEER  
 FINAL SPECIAL INSPECTIONS TEST REPORT, WET STAMPED AND SIGNED BY THE RESPONSIBLE  
 ENGINEER.

...ING INSPECTOR ON SITE AS CONSTRUCTION PROGRESSES.  
 ... LABORATORY REPORTS SHALL BE SENT TO THE PLAN CHECK ENGINEER  
 ... ARCHITECT OR ENGINEER OF RECORD.



CAPITOL ENGINEERING LABORATORIES, INC.

631 Commerce Drive, Suite #200, Roseville, California 95678 • (916) 786-2488

JOB REPORT

PAGE: \_\_\_\_\_

PROJECT NAME: Capitol RECONSTRUCT

FILE NO. 5033

INSPECTOR: J. Rede

DATE: 4-20-99

PERSONS CONTACTED: Red

PERMIT #: 99-00418C

REFERENCE DOCUMENTS: DWGS 1/52

WEATHER: \_\_\_\_\_

SERVICE PROVIDED: CONCRETE (INSP./SAMPLE ONLY / PU)  MASONRY  WELDING (SHOP / FIELD)  SOILS

OTHER  WITNESS

Witness epoxy install of 3/4" diameter threaded rod in black & concrete. Eight installed in north wall - 12" embedment verified and five installed in south wall 9" embedment (10' wall) verified.

Simpson Strong-Tie epoxy used (ICB 4945) exp. date 1/01

COMPLIANCE OF WORK: OK - All holes blown clean prior to epoxy - Good workmanship.

ATTACHMENTS: \_\_\_\_\_

EQUIPMENT/SUPPLIES USED: \_\_\_\_\_

NEXT VISIT: \_\_\_\_\_

START TIME: \_\_\_\_\_ ARRIVED JOB: \_\_\_\_\_ LEFT JOB: \_\_\_\_\_ OFFICE USE ONLY:

REGULAR TIME: [Signature] OT: \_\_\_\_\_ MILES: \_\_\_\_\_ BILLABLE R/T: \_\_\_\_\_

REMARKS: \_\_\_\_\_ BILLABLE O/T: \_\_\_\_\_

REVIEWED BY: \_\_\_\_\_ BILLABLE MILES: \_\_\_\_\_

3/



**CITY OF SACRAMENTO**  
**DEVELOPMENT SERVICES DIVISION**  
 1231 I STREET, ROOM 200, SACRAMENTO, CA 95814

**SPECIAL INSPECTION AND TESTING AGREEMENT**

When special inspection is required by Section 1701, the architect or engineer of record shall prepare an inspection program which shall be submitted to the Building Official for approval prior to issuance of the building permit. The special inspector shall be employed by the owner (other than owner-builder/developer), the engineer or architect of record, or an agent of the owner, BUT NOT the contractor, or any other person responsible for the work (such as an owner-builder/developer).

The special inspection firm(s) named in Part I have been authorized to perform the special inspection and testing services designated in this agreement, and in accordance with the Uniform Building Code (UBC) requirements, and to report all activities to the Building Official, and other parties as listed. It is understood that special inspections are required in addition to the normal inspections performed by the Building Inspector.

The undersigned hereby affirm, under penalty of law, that the special inspection program is in accordance with the requirements of the UBC and the City of Sacramento.

The undersigned has used all reasonable diligence in completing this form and to the best of his/her knowledge the information contained herein is true and complete. The undersigned hereby certifies under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

	SIGNATURES	PHONE NUMBER
OWNER		
ARCHITECT		
ENGINEER	<i>[Signature]</i>	
CONTRACTOR		916 453-1000
DEVELOPER		
SPECIAL INSPECTOR		

**WARNING:** Any person, who certifies under penalty of perjury in any case where certification is permitted by law and willfully states as true any material matter which he or she knows to be false, may be found guilty of perjury and subject to penalties which may include fines or imprisonment under the California Penal Code.

**PART III • GEOTECHNICAL INSPECTION REQUIREMENTS**

GEOTECHNICAL FIRM \_\_\_\_\_  
 GEOTECHNICAL FIRM ADDRESS \_\_\_\_\_  
 GEOTECHNICAL ENGINEER \_\_\_\_\_  
 REPORT NUMBER \_\_\_\_\_  
 REPORT DATE \_\_\_\_\_  
 RECEIPT NUMBER \_\_\_\_\_  
 REVISION DATES \_\_\_\_\_

SITE PREPARATION/FILL COMPACTION	TYPE OF WORK	REQUIRED
FOUNDATION OBSERVATION		
DRILLED PIERS AND CAISSONS		

IF THE EARTHWORK INSPECTION IS NOT BEING DONE BY THE ABOVE GEOTECHNICAL ENGINEERING FIRM THEN A REVISED REPORT MUST BE SUBMITTED TO AND APPROVED BY THE CITY'S DEVELOPMENT SERVICES DIVISION.

**ACCEPTED FOR THE BUILDING DEPARTMENT**

PLAN CHECK ENGINEER (Please Print)

PLAN CHECK ENGINEER SIGNATURE

*GAR-YUN LEE*

DATE

*2/15/99*

**INSTRUCTIONS TO THE SPECIAL INSPECTOR**

- 1 • PROVIDE DAILY FIELD REPORTS TO THE BUILDING INSPECTOR ON SITE AS CONSTRUCTION PROGRESSES.
- 2 • A COPY OF ALL SPECIAL INSPECTIONS LABORATORY REPORTS SHALL BE SENT TO THE PLAN CHECK ENGINEER IDENTIFIED ABOVE AND THE ARCHITECT OR ENGINEER OF RECORD.
- 3 • UPON COMPLETION OF SPECIAL INSPECTIONS AND TESTING WORK, PROVIDE THE CITY'S PLAN CHECK ENGINEER WITH A FINAL SPECIAL INSPECTIONS TEST REPORT, WET STAMPED AND SIGNED BY THE RESPONSIBLE PROFESSIONAL ENGINEER.