

NOTE: DO NOT COVER OR CONCEAL ANY BUILDING, ELECTRICAL, PLUMBING OR MECHANICAL WORK WITHOUT INSPECTOR'S SIGNATURE IN PROPER PLACE.

INSPECTION	INSPECTOR	DATE
B10 FOUNDATION FORMS		
E009111 UFER GROUND		
B12 CONCRETE SLAB FORMS		
P40 PLUMB. UNDERFLOOR/SLAB		
M30 MECH/UNDERFLOOR/SLAB		
E01 ELECT. UNDERGROUND		
E62 ELECT. CONDUIT-SLAB		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B13 FLOOR JOISTS OR GIRDERS		
DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED		
B1416 INSULATION/WALL/FLOOR		
P41 TOP PLUMBING		
M31 TOP MECHANICAL/WALL/CEIL.		
E03 ROUGH ELECTRICAL/WALL/CELL.	<i>J. M. ...</i>	3-9-08
B19 FRAME		
B17 ROOF PLYWOOD MAIL, COMM. & APTS.		
B16 EXTERIOR LATH/SIDING		
ALLS ONLY		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B22 INT. LATH OR WALL BD. NAILING		
DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED		
E66 SERVICE UNDERGRD CONDUIT		
P43 SEWER SERVICE		
P42 WATER SERVICE		
P46 SPRINKLER SYSTEM		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
P47M33 GAS TEST		
P48 TEMP GAS	ISSUED	EXPIRES
E68 POWER POLE		
E67 TEMP POWER #		
SWIMMING POOLS ONLY		
P47 GAS TEST		
P47 PLUMBING PRE-GUNITE		
P47 PLUMBING PRE-DECK		
E70 ELECTRICAL PRE-GUNITE		
E71 ELECTRICAL PRE-DECK		
E72 ELECTRICAL UNDERGRD		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
ENERGY COMPLIANCE CERTIFICATE TO BE ON FILE PRIOR TO FINAL APPROVAL.		
DATE	SIGNED	
FINAL APPROVALS		
B29 BUILDING	FINAL Insp. NO.	
E79 ELECTRICAL	3-13-08	<i>J. M. ...</i>
P59 PLUMBING		
M39 MECHANICAL		
DO NOT OCCUPY BUILDING UNTIL ALL OF THE ABOVE HAVE BEEN SIGNED AND CERTIFICATE OF OCCUPANCY ISSUED		
THIS CARD TO BE POSTED ON JOB AT ALL TIMES UNTIL FINAL APPROVAL		

BUILDING SITE ADDRESS: 2100 Q STREET SUITE 1C
 INSPI AREA: 1C

ASSESSOR PARCEL NO. 007-324-004 ADDRESS: 2100 Q STREET COMMUNITY PLAN NO. 916-321-1754

NAME OF APPLICANT: THE SACRAMENTO BEE LICENSED CONTRACTOR: ARCH. ENGR. LICENSE NO. PHONE NO.

NO. OF STORIES: NO. OF ROOMS: ROOF COVERING: AREA 1ST FLOOR: TOTAL AREA: GARAGE AREA: PATIO AREA: USE ZONE: STREET WIDTH:

THIS PERMIT IS FOR: BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL: INTERIOR OFFICE REMODEL, ADD LIGHT SWITCH & SUPPLY/RETURN DUCT

FLOOD STATUS: SPECIAL CONDITIONS ATTACHMENTS: CITY OF SACRAMENTO BUILDING INSPECTION DIVISION PERMIT SERVICES 264-7619

VALUATION \$6,000.00 ISSUED BY: DATE ISSUED: BUILDING PERMIT FEE: PLAN CHECK/PROC. FEE: S.M.L. FEE: CONST. EXCISE TAX: CITY BUS LICENSE: TECH. FEE: WATER DEV. FEE: CITY SEWER DEV. FEE: SEWER FEE: RESIDENTIAL CONST. TAX: TOTAL FEES \$

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.
 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: _____
 Policy Number: _____

WARNING: FAILURE TO SECURE WORKERS' 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 FEES.

DATE: _____ APPLICANT: _____ (Signature)
 I HEREBY AFFIRM THAT I AM THE OWNER OF THE ABOVE DESCRIBED PROPERTY AND I HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS OF THIS PERMIT AND I AGREE TO BE BOUND BY THE TERMS AND CONDITIONS OF THIS PERMIT AND I AGREE TO BE BOUND BY THE TERMS AND CONDITIONS OF THIS PERMIT AND I AGREE TO BE BOUND BY THE TERMS AND CONDITIONS OF THIS PERMIT.

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**CITY OF SACRAMENTO
APPLICATION FOR COMMERCIAL BUILDING PERMIT**

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION
 123 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0001573 Insp. Area _____

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2100 C ST Suite _____
 PARCEL # 007-324-04

CONTACT		LICENSED CONTRACTOR	
Name <u>JOHN KERSTHAW</u>		Name <u>C/B</u>	
Address <u>2100 C ST</u>		Address _____	
Phone <u>321-1754</u> FAX <u>321-1998</u>		Phone _____ FAX _____	
E-mail _____		E-mail _____	
ARCHITECT/ENGINEER		OWNER	
Name <u>C/B</u>		Name <u>THE SACRAMENTO BEE</u>	
Address _____		Address <u>2100 C ST</u>	
Phone _____ FAX _____		Phone <u>321-1754</u> FAX <u>321-1998</u>	
E-mail _____		E-mail _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: INTERIOR OFFICE REMODEL ADD LIGHT
SWITCH & APPLY RETURN DUCT

OCCUPANT/TENANT: Bee VALUATION: \$ 6,000

FLOOD STATUS:		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input type="checkbox"/> SITE	<input type="checkbox"/> FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vio. File		
		<u>110</u>		<u>F</u>	<u>E</u>	<input checked="" type="checkbox"/> SPR <input type="checkbox"/> ALARM	<u>10</u>	[H]	[Quad]	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input type="checkbox"/> S	<input checked="" type="checkbox"/> D	PW	UTIL	
<u>G.L.</u>	<u>G.L.</u>		<u>13</u>	<u>13</u>	<u>13</u>		<u>13</u>			<u>2-25-00</u>

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed