

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0111028

Insp Area: 2

Thos Bros: 317C2

Site Address: 4000 SOUTH LAND PARK DR SAC

Parcel No: 017-0071-004

Sub-Type: NOTHR

Housing (Y/N): N

CONTRACTOR

WEST COAST CANOPIES
9220 G ST
OAKLAND CA 94603

OWNER

EQUILON INTERPRISES LLC
10602 NE 38TH PL #101
KIRKLAND WA 98083

ARCHITECT

Nature of Work: INSTALL NEW ARCH. DETAIL ON CANOPY AND STORE OF EX. GAS STATION.SIGN ON SEP PERMIT

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 _____ 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 _____ License Number 259820 _____ Date _____ Contractor 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.)

AC 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 10-23-01 _____ Owner Signature Amy Castro

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 10-23-01 _____ Applicant/Agent Signature Amy Castro

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 _____ Policy Number _____ Exp Date _____

AC (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 10-23-01 _____ Applicant Signature Amy Castro

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.

PERMIT SUMMARY DOCUMENT

Bldg Commercial
PROCESS

Address: **4000 SOUTH LAND PARK DR SAC** Date Issued:

Area:

2
Permit #: **0111028** Thomas Bros: 317C2

Location:
APN: 017-0071-004

Owner: EQUILON INTERPRISES LLC
10602 NE 38TH PL #101
KIRKLAND WA
98083
Phone: 425-889-3242

Contractor: WEST COAST CANOPIES
9220 G ST
OAKLAND CA
94603
Phone: 510 562 5910

JOB DESCRIPTION: INSTALL NEW ARCH. DETAIL ON CANOPY AND STORE OF EX. GAS
STATION.SIGN ON SEP PERMIT

DBA:

PlanChecker's Update Screen:

Occupancy: S-3
Const Type: II-NH
Fire Spk/1hr sub?:N / N
Flood Zone: NR
Square Footage: 0

General Info Screen:

Change of Use: N
Sub-Type: NOTHR
Activity Code: S02
Cert Req'd: N

Zoning: ??
DR:
Fed Code: 13
Balance: \$354.10

VALUATION: \$10,000.00 Reg San: \$0.00 School Fees Req'd: Y or N

BLDG Y MECH N PLBG N ELEC Y SITE Y FIRE N

	<u>BLDG</u>	<u>L/S</u>	<u>MECH</u>	<u>PLBG</u>	<u>ELEC</u>	<u>SITE</u>	<u>FIRE</u>	<u>UTIL</u>	<u>PW</u>
Cycle 1	JST	JST			GMC	GRS			
Cycle 2					GMC				
Cycle 3									
Cycle 4									

CONDITIONS:

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0111028	Insp. Area 2C
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 4000 Southland Park Dr. Suite _____
 PARCEL # 017-0071-004

CONTACT		LICENSED CONTRACTOR Lic No. # <u>259820</u>	
Name <u>Tait & Assoc./Attn: Amy Castro</u>		Name <u>West Coast Canopies</u>	
Street Address <u>2880 Sunrise Bl., #206</u>		Address <u>9220 G St.,</u>	
City/State/Zip <u>Rancho Cordova, CA 95742</u>		City/State/Zip <u>Oakland, CA 94603</u>	
Phone <u>(916) 669-1816</u> FAX <u>(916) 635-2606</u>		Phone <u>(510) 562-5910</u> FAX <u>(510) 562-5514</u>	
E-mail: <u>castro@sac.tait.com</u>		E-mail: _____	
ARCHITECT/ENGINEER		OWNER	
Name _____		Name <u>Equilon Enterprises LLC</u>	
Address _____		Address <u>10602 NE 38th Pl., #101</u>	
City/State/Zip _____		City/State/Zip <u>Kirkland, WA 98083</u>	
Phone _____ FAX _____		Phone <u>(425) 889-3242</u> FAX _____	
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: Install new architectural detail on canopy and store of existing gas station.

OCCUPANT/TENANT: SHELL VALUATION: \$10,000.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI ()	(REM) ()	SW	FIRE	ADD	OTH
INSPECTION 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>B</u>	<u>II</u>	SPR	ALARM		[H]	[Quad]
<u>(B)</u>	<u>(D)</u>	<u>P</u>	<u>M</u>	<u>(E)</u>	<u>F</u>	<u>(S)</u>		<u>D</u>	<u>PW</u>	<u>UTIL</u>

COMMENTS: _____

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