

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0105257
Insp Area: 3

Site Address: 8321 DEMETRE AV SAC
Parcel No: 062-0010-018 BLDG 7 BAY 4

Sub-Type: REM
Housing (Y/N): N

CONTRACTOR
CAL RAM
1891 ENTERPRISE
W SARAMENTO CA 95691

OWNER
CITY OF SAC
SACRAMENTO CA

ARCHITECT

Nature of Work: OFFICE REMODEL

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 B License Number 466622 Date 5/1/01 Contractor Signature Shell Qualley

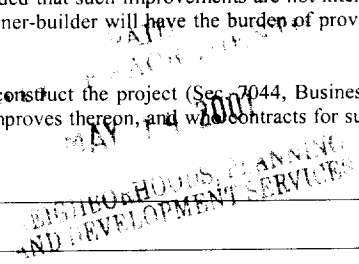
OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish or repair any structure, prior 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 5/1/01 Applicant/Agent Signature Shell Qualley

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 STATE FUND Policy Number 391-2001 Exp Date 04/01/2002

(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 5/1/01 Applicant Signature Shell Qualley

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

30 DAY **TEMPORARY**
Certificate of Occupancy

For Information Contact (916) 264-5716

Building Address: 8321 DEMETRE AV Permit No. 01-05257

Building Use: OFFICE DBA: RSA Occupancy: B

Building Owner: DEPOT BUSINESS PARK Construction Type: V-N

Owner Address: 16 BUSINESS PK WY SACRAMENTO Sprinkled? [] Yes [] No

Portion of Building Occupied: BLD. 7, BAY 4 Area: _____ Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy: PRIOR TO FINAL C OF O, FINAL PERMIT 01-05458(3" DRAIN LINE)

6/26/01 Willie Harris
Date By Print

DENNIS RICHARDSON
CITY BUILDING OFFICIAL

[TCO approvals: V, F, JZB, MJS, SB, GRS]

BC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure

POST IN A CONSPICUOUS PLACE

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

1250 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0105257	Insp. Area 3C
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ADDRESS 8321 JEMETTE AVENUE BLDG 7, BAY 4 Suite _____
 PARCEL # 062 0010 018

Applicant **MUST** complete ALL Unshaded areas

<p>CONTACT Name <u>DAN FREITAS (FREITAS)</u> Street Address <u>1891 Enterprise Boulevard</u> City/State/Zip <u>W. Sacramento, CA 95691</u> Phone <u>(916) 372-1610</u> FAX <u>372-1245</u> E-mail: _____</p>	<p>LICENSED CONTRACTOR Lic No. # <u>466622 (B)</u> Name <u>Cal Ram Construction Co., Inc.</u> Address <u>1891 Enterprise Boulevard</u> City/State/Zip <u>W. Sacramento, CA 95691</u> Phone <u>(916) 372-1610</u> FAX <u>372-1245</u> E-mail: _____</p>
<p>ARCHITECT/ENGINEER Name <u>KENT BURROW</u> Address <u>1818 29TH STREET</u> City/State/Zip <u>SACRAMENTO CA 95816</u> Phone <u>452-2788</u> FAX <u>451-3502</u> E-mail: _____</p>	<p>OWNER Name <u>DEPOT BUSINESS PARK</u> Address <u>16 BUSINESS PARK WAY</u> City/State/Zip <u>SACRAMENTO CA 95828</u> Phone <u>(916) 381-8200</u> FAX <u>381-8202</u> E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: STATE FUND ~~Fremont Compensation Ins Co~~
 → WORKER'S COMPENSATION POLICY # WN00-795293-02-238-01 EXPIRATION DATE: 04/01/0402

NATURE OF WORK IN DETAIL: office remodel
UNIT 391

OCCUPANT/TENANT: RSA VALUATION: \$ 155,000

FLOOD STATUS:		S.C.A.T.									
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM	SW	FIRE	ADD	OTH	
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>BLEC</u>	<u>SITE</u>	<u>FIRE</u>				
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req (Y/N)		Fed Code	Vio. File		
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>B</u>	<u>V-N</u>	<u>SPR</u>	<u>ALARM</u>	<u>15</u>	[H]	[Quad]	
						<u>S</u>		<u>D</u>	PW	UTIL	

COMMENTS: _____

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

Date of Request: 4/26
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 8321 Demetre Av

Assessor's Parcel Number 062 0010 018

Previous Use: WAREHOUSE

Description of Request/Proposed Use: office remodel in whse

Is This a Change of Use? ADDITION OF INCIDENTAL OFFICE SPACE
Zoning Designation: M2(S)

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

Comments: EXISTING BAY 43560 SF TI FOR OFFICE SPACE 2800 SF
~~ADDITION OF MULTIPLE BAYS~~
~~OFFICE SPACE NOT EXCEEDING 25% IN BAY~~
SPD GUIDELINES STATE OFFICE SPACE NOT TO EXCEED 341,748 SF IN ENTIRE DISTRICT

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: [Signature] 4/25/2001

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

MICROFILM AFTER FINAL

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 6-26-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

8321 DREMETRIZ AVE

Has been conducted by Inspector

S. Rodick

On

6-21-01

01-05257
Permit Number

2800
Square Footage

Remodel w/ sprinklers
Type of Inspection

They system is acceptable by this department.

R. Woodman
By: Ross L. Woodman,
Fire Prevention Officer II

01-91
F.D. Reference Number

