

CITY OF SACRAMENTO

Permit No: 0600710

1231 I Street, Sacramento, CA 95814

Insp Area: 1
Thos Bros: 298B5

PAID
CITY OF SACRAMENTO
JAN 18 2006
NEW CITY HALL

Site Address: 701 UNIVERSITY AV SAC

Sub-Type: REM

Parcel No: 295-0030-018

STE 108

Housing (Y/N): N

CONTRACTOR
ANTHONY & SONS
1790 TERMINAL ST.
WEST SACRAMENTO CA

OWNER
SPIEKER PROPERTIES L P
PO BOX 194610
SAN FRANCISCO, CA 94119

ARCHITECT
NIELSEN & ASSOCIATES
1731 E ROSEVILLE PKWY
ROSEVILLE CA 95661

Nature of Work: REMODEL 1,453SF OFFICE, NEW INT. PARTITIONS, FINISHES, MODIFYING LIGHTS, FIRE SPRINKLERS, & HVAC

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.C.61/D63 C-9 License Number 360117 Date 7/31/06 Contractor Signature Kari Hamblin

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 1/18/06 Applicant/Agent Signature Kari Hamblin

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.

X 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 0000126-2005 Exp Date 10/01/2006

(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 1/18/06 Applicant Signature Kari Hamblin

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.



**STANTON
MECHANICAL
INC.**

Microfilm

Job Number: _____
 Job Name: 701 Univ. #108
 Date: 3-6-05
 Tech: Nathan
 System: Pneumatic

DOUBLE DUCT VAV DISTRIBUTION REPORT

Instrument: Flow Hood

AREA	OUTLET				DESIGN			PRELIMINARY			FINAL			NOTE
	No.	Type	Size	AK	H Max	C Min	C Max	H Max	C Min	C Max	H Max	C Min	C Max	
VAV	1				300		325	310		350	310		350	
	1-1				/		/	/		/	/		/	
					300		325	310		350	310		350	
VAV	1				225		250	240		270	240		260	
	1-2	2			225		250	235		280	235		245	
					225		250	220		300	220		230	
					/		/	/		/	/		/	
					675		750	695		850	695		735	
VAV	1				200		225	240		200	230		235	
	1-3	2			300		325	260		260	290		310	
		3			200		225	180		230	195		235	
					/		/	/		/	/		/	
					700		775	680		690	715		770	
VAV	1				125		150	80		110	115		150	
	1-4	2			125		150	110		200	115		165	
		3			125		150	100		170	120		150	
					/		/	/		/	/		/	
					375		450	290		470	350		465	

REMARKS:

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
Development Services Department - Building Division

New City Hall
915 I St., Floor 300
Sacramento, CA 95814
Fax: 916-808-1901

North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834
Fax: 916-808-8370

ACTIVITY # 0000710	Isnp. Area
------------------------------	------------

Applicant MUST complete ALL Unshaded areas

ADDRESS 701 University Avenue Suite 108
PARCEL # 295-0030-018

<p style="text-align: center;">CONTACT</p> <p>Name <u>Joel Auzela</u> Street Address <u>1790 Terminal Street</u> City/State/Zip <u>West Sacramento, CA 95691</u> Phone <u>(916) 373-0707</u> FAX <u>(916) 373-1523</u> E-mail:</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>360117</u></p> <p>Name <u>ASI Anthony & Sons General Contractors, Inc.</u> Address <u>1790 Terminal Street</u> City/State/Zip <u>Carmichael, CA 95608</u> Phone <u>(916) 373 0707</u> FAX <u>(916) 373-1523</u> E-mail:</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Nielsen & Associates Architects</u> Address <u>1731 East Roseville Parkway, Ste 250</u> City/State/Zip <u>Roseville, CA 95661</u> Phone <u>916/781-6800</u> FAX E-mail:</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>CA University Avenue Limited Partnership</u> Address <u>c/o Equity Office</u> <u>16101 Arden Way Ste 250</u> City/State/Zip <u>Sacramento CA 95815</u> Phone <u>916/614-8850</u> FAX <u>916/614-8840</u> E-mail:</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Comp
→ WORKER'S COMPENSATION POLICY # 126-2005 EXPIRATION DATE: 10/1/06

NATURE OF WORK IN DETAIL: underside of ceiling walls, modify of existing HVAC
(3) Sprinklers, lighting

OCCUPANT/TENANT: B VALUATION: \$ 18,923

FLOOD STATUS						S.C.A.T.								
JOB DESCRIPTION						BLDG <input type="checkbox"/>	SHELL <input type="checkbox"/>	APT <input type="checkbox"/>	TI () <input type="checkbox"/>	REM () <input type="checkbox"/>	SW <input type="checkbox"/>	FIRE <input type="checkbox"/>	ADD <input type="checkbox"/>	OTHER <input type="checkbox"/>
INSPECTION DISCIPLINES						BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1 st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code		Vio. File				
						SPR	ALARM			PW	UTIL			
B	(L) 13 ST	P	M	E	F	S		D						
			13 RmH	13 T.L.M.	13 PRR									

COMMENTS:

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