

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9907821

Insp Area: 2

Site Address: 7120 WOODBINE AV SAC

Parcel No: 041-0073-011

Sub-Type: NOTHR

Housing (Y/N): N

CONTRACTOR

ASI - ANTHONY & SONS
1790 TERMINAL ST
WEST SACRAMENTO CA 95691

OWNER

PARATRANSIT
2501 FLORIN RD
SACRAMENTO, CA 95822

ARCHITECT

DARRYL CHINN
2612 J ST #2
SACRAMENTO CA

Nature of Work: SITE WORK: PAVED PARKING, LANDSCAPING & DRIVEWAY

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 360117 Date 4/14/00 Contractor Signature Sandra Kustal

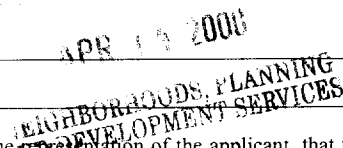
OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior 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 4/14/00 Applicant/Agent Signature Sandra Kustal

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 713-98 UNIT 126 Exp Date 10/01/2000

____ (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 4/14/00 Applicant Signature Sandra Kustal

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 COMMERCIAL BUILDING PERMIT

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

ACTIVITY # 9907821 Insp. Area 2

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 7120 WOODBINE AVE Suite -
 PARCEL # 041 - 0073 - 011 + 015

CONTACT Name <u>Techspace / Sudesh Varma</u> Address <u>2814 H Street Sac</u> Phone <u>442-8500x11</u> FAX <u>442-8584</u> E-mail _____		LICENSED CONTRACTOR Lic No. # <u>360117</u> Name <u>ASI</u> Address <u>1791 Terminal W Sac</u> Phone <u>373-0707</u> FAX <u>373-1523</u> E-mail _____	
ARCHITECT/ENGINEER Name <u>Daryl Chinn Architects</u> Address <u>2612 J St #2</u> Phone <u>446-1293</u> FAX <u>446-2690</u> E-mail <u>DChinnArch@aol.com</u>		OWNER Name <u>Paratransit Inc.</u> Address <u>2501 Plann Rd Sac</u> Phone <u>429-2009</u> FAX _____ E-mail _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # 71396 EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: SITE WORK : PAVED PARKING + LANDSC.
DRIVE WAY

OCCUPANT/TENANT: PARATRANSIT FACILITY PARKING VALUATION: \$ 150,000

FLOOD STATUS:		S.C.A.T.									
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	<u>OTR</u>	
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE				
# Stories	1st flrArea	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N	Fed Code	File	[Quad]		
		<u>72,850</u>	<u>011 + R2A</u>			SPR ALARM	<u>20</u>	<u>NO</u>			
<u>B</u>	<u>L</u>	<u>P</u>	M	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>PW</u>	<u>UTIL</u>		
							<u>513</u>				

COMMENTS: _____

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

City of Sacramento Development Services Division
Planning and Zoning Information Request

Project Address: 7120 Woodbine Ave.

Assessor's Parcel Number: 041-0073-0119 015

PREVIOUS USE: vacant

Current Land Use: vacant

Description of Request/Proposed Use: Construct parking area for fleet parking

IS THIS A CHANGE OF USE? Yes - vacant

Zoning Designation: -011 = R2A & -015 = R-1

Prior Applications for Project Site (P#, Z#, DRP#): P98-090

Comments: Comply with all conditions of approval of P98-090; Review & comply with phasing requirements

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: D. Decker 2/16/99

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

PLAN CHECK ROUTING PROCEDURE

Date Received: 7-16-99 Plan Check #: 9907821
Project: PARATRANSET FACILITY PARKING
Address: 7120 WOODBURN AVE
Legal Description: _____
Contact Person: SUDESH VARMA Telephone: 442-8500
Address: 2814 H. ST
Architect or Civil Engineer: ARCHITECT Telephone: _____

PUBLIC WORKS - DEVELOPMENT SERVICES STREET IMPROVEMENTS

Approved: _____ Date Received: _____
Total frontage length of New Street Improvements: _____ If
Comments: _____

Right of Way Dedication	: Approved _____	Disapprove _____
Public Improvement Agreement:	Approved _____	Disapprove _____
Surety Bond, etc.	: Approved _____	Disapprove _____
Staking and Inspection Fee	: _____	\$ _____

PUBLIC WORKS - DEVELOPMENT SERVICES DRIVEWAY

Driveway Required: Yes No Date Received: _____
Approved: _____ Disapproved: _____
Removal of abandoned driveway: _____
Comments: _____

PUBLIC WORKS - DEVELOPMENT SERVICES ENCROACHMENT/EXCAVATION PERMIT

Encroachment/Excavation Permit Required: Yes No
Approved: _____ Disapproved: _____
Comments: _____

DEPT. OF UTILITIES DRAINAGE, SEWER, & WATER

Approved: _____ Date Received: _____
Disapproved: _____
Comments: _____

PLANNING AND DEVELOPMENT SERVICES SITE CONDITIONS

Approved: _____ Date Received: _____
Approved with Changes: _____ Disapproved: _____
Review Zone: _____ Special Permit: _____ Variances: _____
Parking Spaces Furnished: _____ Parking Spaces Required: _____
Comments: _____