

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0008583

Insp Area: 4

Site Address: 4400 EAST COMMERCE CR SAC
Parcel No: 225-0070-077

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

CONTRACTOR

OWNER
OATES MARVIN L
8615 ELDER CREEK RD 100
SACRAMENTO CA 95828

ARCHITECT

Nature of Work: ROUGH GRADING

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 A/B License Number 702621 Date 24 Aug 00 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.)

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.

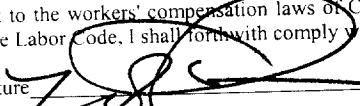
Date 24 Aug 00 Applicant/Agent Signature 

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~~ city 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 _____
NEIGHBORHOOD AND DEVELOPMENT SERVICES

(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 24 Aug 00 Applicant Signature 

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.

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 # 0008583	Insp. Area AC
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 4400 E. Commerce Wy (Maybe Palantless Dr) Suite _____
 PARCEL # 225-070-077-078

CONTACT Name <u>Mike Peters</u> Street Address <u>8615 Elder Creek Rd</u> City/State/Zip <u>Sacto 95829 CA</u> Phone <u>381-3600</u> FAX <u>381-4707</u> E-mail: <u>mpeters@buzznotes.com</u>		LICENSED CONTRACTOR Lic No. # _____ Name <u>Vittorio</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
ARCHITECT/ENGINEER Name <u>Alex Mouton & Pitalo</u> Address <u>1788 TR1 Bute Tr Sacto</u> City/State/Zip <u>Sacto 95815</u> <u>567-0120</u> Phone <u>927-2400</u> FAX <u>927-96</u> E-mail: <u>engr@mplngr.com</u>		OWNER Name <u>Buzz Notes Enterprises</u> Address <u>8615 Elder Creek Rd</u> City/State/Zip <u>Sacto 95829</u> Phone <u>381-3600</u> FAX <u>381-4707</u> E-mail: <u>mpeters@buzznotes.com</u>	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Long Term Fund
 → WORKER'S COMPENSATION POLICY # 1579398 EXPIRATION DATE: Mar 2001

NATURE OF WORK IN DETAIL: Rough Grading Permit

OCCUPANT/TENANT: _____ VALUATION: \$ 10,000

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	Viol. File	
				B	IR-N	SPR	ALARM		[H]	[Quad]
S	L	P	M	E	F	S		D	PW	UTIL

COMMENTS: _____

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



August 23, 2000

City of Sacramento Building Department
927 10th Street
Sacramento, California 95814-2702

Dear Sir/Madam:

Buzz Oates Enterprises has disked and treated the ground on parcel numbers 225-0070-077 and 225-0070-078, respectively, to prepare the soil for future building and development.

Best regards,

A handwritten signature in black ink, appearing to read "Michael R. Stodden", is written over the typed name.

Michael R. Stodden
Chief Operations Officer

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 4400 & 4450 E. Commerce Wy (maybe Belvedere Dr)

Assessor's Parcel Number: 225-0070-077+078

Previous Use: Vacant

Description of Request/Proposed Use: 2 Bldgs

Grading Only

Is This a Change of Use? _____

Zoning Designation: EC40 PUD

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

Comments: Bldg Plans will require special permits

Grading may proceed at developer's risk (if plans change grading it will be dealt with)

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] 7-27-00

grading only Per Bldg approval grading only

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

MICROFILM AFTER FINAL

WATER SUPPLY TEST - DEPARTMENT OF UTILITIES

1395 35TH AVENUE SACRAMENTO, CA. 95822 PHONE: 916 / 264-1430 FAX: 916 / 264-1497	TEST NO: <u>0071</u> COMPLETE DATE: <u>8.7.00</u> ANALYSIS FEE: \$90.00 FIELD TEST FEE: \$360.00	FILE NO: <u>R00-0071</u> PC# DATE PAID: <u>8.3.00</u> DATE PAID: <u>8.3.00</u>
CONTACT PERSON: <u>Mike Peters</u>	PHONE NO: <u>381-3600</u>	FAX NO: <u>381-4707</u>
COMPANY: <u>Buzz Oates Enterprises</u>	CELL PHONE NO: <u>997-0291</u>	
COMPANY ADDRESS: <u>8615 E. Lee Creek</u>	STREET ADDRESS OF TEST: <u>4450 EAST COMMERCIAL</u>	
PURPOSE OF TEST: <u>H.O. For Fire</u>	ASSESSOR'S PARCEL NUMBER: <u>225-0070-077</u> <u>225-0070-078</u>	

The undersigned agrees to the following items and conditions:

- (1) The street address shown above is correct.
- (2) Water supply data is developed from several sources of information which may include water supply test data, pipe network computer models, and continuous pressure recording stations. The design water supply data given below is to be used for design purposes.
- (3) Although the water supply data reported herein is believed to be accurate, the City makes no warranty, guaranty, certification or other representation of any kind that such data is accurate or correct, or that the pressures and/or flow rates reported herein can or will be maintained. The undersigned agrees that the City, its officers and employees shall not be liable for any damages of any kind resulting from the use of or reliance upon the water supply data reported herein by the undersigned or by any third party.
- (4) If the undersigned desires to witness the water supply test performed by the City, please check the box below:
 - I want to witness this water supply test, which will be scheduled at the convenience of the Department of Utilities.
- (5) If the undersigned elects to hire a licensed engineer, at the undersigned's sole expense, to witness and certify the water supply test performed by the City, please check the box below:
 - At my expense, I will arrange for a licensed engineer to witness and certify this water supply test, which will be scheduled at the convenience of the Department of Utilities.

Print Name: Mike Peters Signature: [Signature] Date: 8 Aug 2000

ENGINEERING REQUEST DATE: 8.3.00 DATE OF TEST: 8.4.00 TIME OF TEST: 9:10 AM
 WATER MAIN SIZE: 12" TEST CONDUCTED BY: Steckline - TASH-ERIC

	HYDRANT NO.	MAP PAGE	STATIC PRES. (PSI)	RESIDUAL PRES. (PSI)	PISTON PRES. (PSI)	OUTLET DIA. (IN.)	COEFFICIENT		CALC. FLOW @ PRES. (G.P.M.)	FLOW @ 20 PSI (G.P.M.)
							C ₁	C ₂		
RESIDUAL	<u>1</u>	<u>59N</u>	<u>53</u>	<u>44</u>						
FLOWED	<u>3</u>	<u>59N</u>			<u>22</u>	<u>4 1/2</u>	<u>0.90</u>	<u>0.83</u>	<u>2116</u>	
FLOWED	<u>9</u>	<u>59N</u>			<u>23</u>	<u>4 1/2</u>	<u>0.90</u>	<u>0.83</u>	<u>2164</u>	
FLOWED							<u>TOTAL</u>		<u>4280</u>	<u>8652</u>
FLOWED										

- THE WATER SUPPLY TEST DATA IS NOT TO BE USED FOR THE DESIGN OF DOMESTIC WATER SYSTEMS.
- (STATIC PRES. - RESIDUAL PRES.) / (STATIC PRES. - 20 PSI) IS LESS THAN 25%. THEREFORE, THESE RESULTS ARE ONLY VALID FOR FLOWS NOT EXCEEDING _____ G.P.M.

	ACTUAL	DESIGN (1)
STATIC PRESSURE	<u>53</u> PSI	<u>40</u> PSI
RESIDUAL PRESSURE	<u>44</u> PSI	<u>31</u> PSI
TOTAL FLOW @ RESIDUAL	<u>4300</u> G.P.M.	<u>4300</u> G.P.M.
TOTAL FLOW @ 20PSI	<u>8600</u> G.P.M.	<u>6600</u> G.P.M.

(1) The Design Water Supply Data reflects fluctuations and future demands on the water distribution system. It is to be used for design purposes.
 10/12/99