

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0110215

Insp Area: 1

Thos Bros: 298C5

Site Address: 77 CADILLAC DR SAC

Parcel No: 295-0020-005

SUITE #210

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

OSBORNE BUILDERS
PO BOX 244
FAIR OAKS, CA

OWNER

SACA ANTON J/ILHAM
3801 RANDOM LN
SACRAMENTO CA 95864

ARCHITECT

Nature of Work: INTERIOR REMODEL OF DR OFFICE

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 601333 _____ 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 Professions 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 8-21-01 _____ Owner Signature *Antonio Laca*

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 8-21-01 _____ Applicant/Agent Signature *Antonio Laca*

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 _____

(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 8-21-01 _____ Applicant Signature *Antonio Laca*

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

**60 DAY TEMPORARY
Certificate of Occupancy**

For Information Contact (916) 264-5716

Building Address: 77 Cadillac Drive Suite 210 Permit No. 01-10215

Building Use: Office Occupancy: B

Building Owner: Saca, Anton J/Ilham Construction Type: V-1 hr

Owner Address: 3801 Random Lane, Sacramento Sprinkled? [] Yes [x] No

Portion of Building Occupied: Suite #210 Area: 4,544 Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

10/12/01 Nicholas Buchheiser DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[TCO approvals:: DRP, RDH, MJS]

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
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <u>0110215</u>	Insp. Area
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 77 Cadillac Dr. Suite Suite 210
 PARCEL # 295.0020.005

<p align="center">CONTACT</p> Name <u>TONY SACA</u> Street Address <u>77 Cadillac Dr.</u> City/State/Zip <u>SACRAMENTO, CA 95825</u> Phone <u>916-970-0400</u> FAX <u>978-3455</u> E-mail:		<p align="center">LICENSED CONTRACTOR Lic No. #</p> Name <u>OSBORN CONSTRUCTION CO</u> Address <u>244 Fair Oaks Blvd.</u> City/State/Zip <u>Fair Oaks CA 95628</u> Phone <u>248-3611</u> FAX E-mail:	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>JEFF SIMMONS</u> Address <u>916-12 St.</u> City/State/Zip <u>SACTO, CA 95814</u> Phone <u>447-5790</u> FAX <u>447-9448</u> E-mail:		<p align="center">OWNER</p> Name <u>TONY SACA</u> Address <u>77 Cadillac Dr #210</u> City/State/Zip <u>SACTO, CA 95825</u> Phone <u>920-0400</u> FAX <u>978-3455</u> E-mail:	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # 1342886 EXPIRATION DATE: ONE YEAR

NATURE OF WORK IN DETAIL: INTERIOR T.I. ONLY.

OCCUPANT/TENANT: PULMONARY GROUP VALUATION: \$ 30,000⁰⁰

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(X)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC	SITE	FIRE		
# Stories	1st fl Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y (N)	Fed Code	Vio. File		
2		4544		B	V-1H	SPR ALARM	15	[H]	[Quad]	
B	L	P	M	E	F	S	D	PW	UTIL	
1304	1304	15 1/4	13 Bl		13 Bl					

COMMENTS: need drawings showing water & waste sizing, length. Mech'l is register relocation only

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed