

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0101286
Insp Area: 3

Site Address: 6271 FLORIN PERKINS RD SAC
Parcel No: 062-0050-021

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

CONTRACTOR
BUZZ OATES
8615 ELDER CREEK RD
SACRAMENTO, CA 95828

OWNER
FLORIN ASSOCIATES LTD
SACRAMENTO CA
95829

ARCHITECT

Nature of Work: FOUNDATION/SLAB ONLY

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-1 License Number 18725 Date 2-28-01 Contractor Signature [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 & P for this reason: _____
Date 1-29-01 Owner Signature [Signature] NEIGHBORHOODS, PLANNING & DEVELOPMENT SERVICES

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 1-29-01 Applicant/Agent Signature [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 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 COMP INS FUND (CA) Policy Number 1579398-00 Exp Date 03/01/2001

(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 1-29-01 Applicant Signature [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.

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 916-7046

ACTIVITY # 0002185 Insp. Area 1

Applicant **MUST** complete **ALL Unshaded areas**

ADDRESS: 4189 Florin Perkins Rd. SACRAMENTO Suite BLDG
 PARCEL # 062-0050-021 + 030

CONTACT	LICENSED CONTRACTOR Lic No. # <u>702621</u>
Name _____	Name <u>BUZZ OATES ENT.</u>
Address <u>8615 ELDER CREEK RD. SAC</u>	Address <u>8615 ELDER CREEK SAC.</u>
Phone <u>916 381-3600</u> FAX <u>916 381 4707</u>	Phone <u>381-3600</u> FAX <u>381 4707</u>
E-mail <u>danroy@buzzoates.com</u>	E-mail <u>danroy@buzzoates.com</u>
ARCHITECT/ENGINEER	OWNER
Name <u>LEO MCGUNDE & ASSOCIATES</u>	Name <u>BUZZ OATES ENT.</u>
Address <u>3417 ARDEN WAY STE A SAC.</u>	Address <u>8615 ELDER CREEK RD. SAC.</u>
Phone <u>916 488-8380</u> FAX _____	Phone <u>381-3600</u> FAX <u>381 4707</u>
E-mail _____	E-mail _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: CALIFORNIA INDEMNITY INS
 → WORKER'S COMPENSATION POLICY # 125048119 EXPIRATION DATE: 3-1-00

NATURE OF WORK IN DETAIL: 57,000 SF WAREHOUSE

OCCUPANT/TENANT: _____ VALUATION: \$ 684,000

FLOOD STATUS: <input checked="" type="checkbox"/> <u>on</u>		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	Vio. File	
<u>1</u>		<u>57,000</u>		<u>S1</u>	<u>III-N</u>	<u>SPR</u>	<u>ALARM</u>	<u>10</u>	[H]	[Quad]
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>PW</u>	<u>UTIL</u>	

COMMENTS: Yearly updated workers comp

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




1/26/2001

The City of Sacramento
Brian Nakashima

This letter is to state that Buzz Oates Construction will take full responsibility at this time for the foundation permit. If a map is NOT recorded or it changes in any way the owner will assume responsibility for taking care of any necessary changes. That includes removing the foundation.

The owner acknowledges that the city will not issue the remainder of the permit (building) until the map is recorded.

Thank You,


Marvin L. Oates

CITY OF SACRAMENTO
BUILDING INSPECTION DIVISION
APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: Buzz Cases Ent. II Phone: 381-3600
Site Address: ⁹²⁷¹~~4155~~ FLOREN PERKINS Rd 95828 Suite: _____
(Street) (Zip)
Business Owner/Representative: Mike Schaecher Phone: _____
Nature of Business: Warehouse
Property Owner: BOE II Phone: 381-3600
Address: 8615 Elder Creek Rd. Suite: _____
(Street) (City) (State) (Zip)
SACRAMENTO CA 95828
(City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes ___ No Is this permit for a shell building? Yes ___ No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes ___ No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No

7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Mike Schaecher
Mike Schaecher (Print) 10-11-00
(Signature) (Date)

BID Use Only: Plan Ck# <u>0001285</u> Permit # <u>0001285</u>	
OK to issue prmt? <input checked="" type="checkbox"/>	F.D. Appr Req'd? <input checked="" type="checkbox"/> No
init date <u>4/19/00</u>	
Hold on Certificate of Occupancy? <input checked="" type="checkbox"/> Yes No	
Fire Dept. Use Only:	
OK to issue permit? init ___ date ___	
OK to issue Certificate of Occupancy? init ___ date ___	

Certification of Compliance

School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT

OWNER'S NAME Burr Oaks Etc.
 OWNER'S ADDRESS 8015 Elder Creek Rd. Sac CA 95828
 PROJECT ADDRESS 6271 Fleming Perkins Rd
 PARCEL NUMBER 092-0050-007 LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS _____

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE M. Schuck
 TITLE OF APPLICANT Project Manager
 DATE 4-17-01 PHONE NUMBER 916-381-3600

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 000215SC
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 57000
 SIGNATURE Tom Kish
 TITLE Blg Insp DATE 4/17/01

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT Elk Grove Unified
 DISTRICT CERTIFICATION NO. 22274
 EXEMPT _____ COMMENTS _____

RESIDENTIAL/APT/CONDO _____	SQ FT X \$ _____	= \$ _____
COMMERCIAL/INDUSTRIAL <u>57,000</u>	SQ FT X \$ <u>.33</u>	= \$ <u>18,810.00</u>
OTHER FEE _____ TYPE _____	SQ FT X \$ _____	= \$ _____
TOTAL FEES COLLECTED _____		= \$ <u>18,810.00</u>

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature]
 TITLE _____ DATE 4/19/01

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

BUZZ OATES CONSTRUCTION

8615 ELDER CREEK ROAD
 SUITE 100
 SACRAMENTO, CA 95828

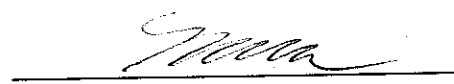
BANK OF AMERICA NT & SA
 REID DEPOSIT CENTER #1425
 PO BOX 471
 SACRAMENTO, CA 95812-0471

11-35
 1210

DATE: April 13, 2001
 CHECK NO.: 21839
 AMOUNT: \$****158,235.00

Pay: *****158* thousand *235* dollars and no cents

PAY TO THE ORDER OF: S.R.C.S.D.
 9660 ECOLOGY LANE
 SAC. CO. REG. SANITATION DISTRICT
 SACRAMENTO, CA 95827-3881



THE REVERSE SIDE OF THIS DOCUMENT INCLUDES AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

⑈0021839⑈ ⑆121000358⑆ ⑆4257⑈52086⑈



**Sacramento Regional
 County Sanitation
 District**

18845 Armstrong Avenue
 Suite 101
 Mather, California
 95653

Marshall Caston
 Senior Engineering
 Technician
 Customer Service/Sewer
 Fees

Office: (916) 870-8913
 Fax: (916) _____

E-mail: castonm@saccounty.org

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
 04-16-01 **SEWER IMPACT FEE**
 PERMIT AND CALCULATION SHEET

APPLICATION NO: GENERAL INFORMATION	BLDG PERMIT NO: THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
<i>CITY OF SACR.</i>	THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

IPATTD
 APR 16 2001
 BY *MC*

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	\$ 26,015	COMMERCIAL USE	UNITS
SRCS D	\$ 132,220	3 WAREHOUSE	
CONSTRUCTION		57,000 sq. Ft. EA.	
IN-LIEU			
TOTAL FEE	\$ 158,235		

APN: *002-0060-067*

DESCRIPTION/SUBDIVISION _____ LOT: _____

PROPERTY ADDRESS: *6251, 6261, 6271 FLORIN PERKINS RD.*

OWNER: *BUZZ OATES CONST.*

MAILING ADDRESS _____

CITY-STATE-ZIP _____ PHONE _____

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE: *W. Schaefer*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____