

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0005020  
Insp Area: 4

Site Address: 2389 GATEWAY OAKS DR SAC  
Parcel No. 274-0320-096 BLDG B --- PHASE II

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

CONTRACTOR  
HMH BUILDERS INC  
8589 THYS CT  
SAC 95828

OWNER  
NATOMAS WEST INVESTORS/LLD PTNR  
7919 FOLSOM BL #300  
SACRAMENTO CA 95826

ARCHITECT  
LPA  
1215 G ST  
SACRAMENTO 95814

Nature of Work: NEW COMMERCIAL SHELL BLDG

**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, CW 03).

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 AB08 License Number 786-499-443-0335 Date 6/15/07 Contractor Signature Heri Serrudo

**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 \_\_\_\_\_ 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 6/25/07 Applicant/Agent Signature Heri Serrudo

**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 INS CO OF TH STATE OF PA Policy Number 7083206/07 Exp Date 08/01/2003

\_\_\_\_\_, (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 6/25/07 Applicant Signature Heri Serrudo

**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

**CERTIFICATE OF OCCUPANCY**

For Information Contact (916) 264-5716

Building Address: 2389 GATEWAY OAKS DR -BLDG B Permit No. 0005020

Building Use: COMMERCIAL OFFICE SPACE Occupancy: B

Building Owner: NATOMAS WEST INVESTORS Construction Type: II-N

Owner Address: 3610 AMERICAN RIVER DR Sprinkled? [  ] Yes [  ] No

Portion of Building Occupied: ALL 1<sup>ST</sup> FL/PART 2<sup>ND</sup> FL. Area: 61,622 Sq. Ft.

7/3/02

Date

By:Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[ Finaled By: DRP,MJB,JZB,MJG,CP ]

*This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.*

**POST IN A CONSPICUOUS PLACE**

**CITY OF SACRAMENTO  
APPLICATION FOR BUILDING PERMIT**

**DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES DIVISION**

1231 I Street, Rm. 200  
Sacramento, CA 95814

(916) 264-7619 FAX 264-7046

→ Applicant must complete ALL Unshaded areas ←

PC# 01-12316 AREA # 4C

ADDRESS 2389 Gateway Oaks Drive, Sacramento Suite \_\_\_\_\_  
PARCEL # not available 274-0320-096

<p align="center"><b>CONTACT</b></p> <p>Name <u>CHRIS WILSON</u> Address <u>30 MAIN AVE. #3</u> <u>SACRAMENTO CA</u> Zip <u>95838</u> Phone <u>916 563 1700</u> FAX <u>916 563 1755</u></p>	<p align="center"><b>LICENCED CONTRACTOR</b> Lic No. # <u>767473</u></p> <p>Name <u>UNIVERSAL SECURITY &amp; FIRE</u> Address <u>30 Main Avenue, Suite #3</u> <u>Sacramento, CA 95838</u> Zip _____ Phone <u>916/563 1700</u> FAX <u>916 563 1755</u></p>
<p align="center"><b>ARCHITECT/ENGINEER</b></p> <p>Name _____ Address _____ Zip _____ Phone _____ FAX _____</p>	<p align="center"><b>OWNER</b></p> <p>Name <u>Auger Pyras Associates</u> Address <u>655 University Ave. #215</u> <u>Sacramento</u> Zip <u>95825</u> Phone _____ FAX _____</p>

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # 046-01 Unit 0008335 EXPIRATION DATE: 1/1/02

NAME OF INSURANCE COMPANY: State Fund Insurance

NATURE OF WORK IN DETAIL: Fire sprinkler system waterflow alarm and supervisory service

DBA: <u>NATIONAL WEST INVESTORS</u>					VALUATION: <u>\$10,774</u>					
FLOOD STATUS: <u>N/A</u>					S.C.A.T.					
JOB DESCRIPTION		BLDG	SHEL	APT	TI( )	REM( )	SW	FIRE	ADD	OTH
INSP. 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>2</u>				<u>B</u>		Spr	<u>Alarm</u>	<u>15</u>		
<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>R</u>	

COMMENTS: DEFERRED FROM PC# 00-05020  
CUSTOMER REQUEST 2 STAMPED SETS BACK @ PROCESSING

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No



**WALLACE • KUHL & ASSOCIATES INC.**  
 GEOTECHNICAL ENGINEERING • CONSTRUCTION TESTING

3050 Industrial Blvd.  
 PO Box 1137  
 West Sacramento  
 California 95691  
 916-372-1434

DATE <i>11-7-01</i>	JOB NO. <i>4259 DS</i>	WEATHER	TEMP. ° at	AM			
PROJECT <i>Natomas West D.E.</i>	Technician I <input type="checkbox"/>	Staff E/G <input type="checkbox"/>					
LOCATION <i>Bldg. B</i>	Technician II <input type="checkbox"/>	Project E/G <input type="checkbox"/>					
TYPE OF WORK <i>Rebar / Structural Steel</i>	Technician III <input checked="" type="checkbox"/>	Senior E/G <input type="checkbox"/>					
Inside 50 mi. radius <input checked="" type="checkbox"/>	Outside 50 mi. radius <input type="checkbox"/>	Nuclear Densities <input type="checkbox"/>	Principal E/G <input type="checkbox"/>				
PERSONNEL	REG. HRS	OT HRS	TOTAL HRS	TRAVEL	ON JOB	VEHICLE	MILES
<i>A Windhorst</i>						# <i>101</i>	

OBSERVATIONS:  
*Observed placement of rebar at the following locations:*

① Closure strips lines: D-E-6, A-E-1, A-1-9 area complete except for minor clean-up + clearance problems. Rebar placed per S4.10 details A+D.

② Closures around shear walls lines: B-C-3 B-C-6.7 + B-C-8 area complete per S3.2/C. A325TC bolts are torqued and complete at 2<sup>nd</sup> Floor lines A-D-1-5 except at B-3 unable to torque with gun will have to be hand torqued.

**FIELD REPORT**

Signed *[Signature]*

6/1/06 SF  
LVA SF

### Natomas Unified School District

1515 Sports Drive, #1 • Sacramento, CA 95834-1905  
Phone 916/641-3300 • Fax 916/928-1629  
547-5400

1401  
11/20/04

## CERTIFICATION OF COMPLIANCE

### SCHOOL DISTRICT DEVELOPMENT FEES

PART I: TO BE COMPLETED BY APPLICANT	
Property Owner's Name	Natomas/West Investor
Owner's Address	c/o KKID Inc, 2010 American River Drive #170, Sacramento, CA 95864
Project Address	2389 Gateway Oaks Drive
Parcel Number	274-0330-096
Subdivision Name	N/A
Number of Units	N/A
Print Applicant's Name	Natomas/West Investor
Title of Applicant	A California Limited Partnership
Date	4/24/06
Applicant's Signature	[Signature]
Telephone Number	916-978-4897
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT	
Plan Identification Number	0605620
Building Type (Check One)	<input type="checkbox"/> Residential <input type="checkbox"/> Apartment/Condominium <input checked="" type="checkbox"/> Commercial/Industrial
Square Feet of Chargeable Building Area	51,652 sq. ft.
Signature	[Signature]
Title	Building Inspector III
Date	6-22-01
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT	
District Certification Number	01-2258
Fees Collected:	
Residential:	Sq. Ft. X \$ = \$
Apartment/Condominium:	Sq. Ft. X \$ = \$
Commercial/Industrial:	Sq. Ft. X \$ 133 = \$ 20,217.16
<b>NOTICE TO APPLICANT:</b> Pursuant to government code section 66020 (d), this will serve to notify you that the 90-day approval period in which you may protest the fees, or other payment identified above, will begin to run on the date in which the building or installation permit for this project is issued, or on which they are paid to the District, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.	
Applicant Signature:	[Signature]
Date:	4/24/06

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: Michael Morman DATE: 6/22/07  
TITLE: Michael Morman  
Facilities Planning Director

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE** *EFB*  
 PERMIT AND CALCULATION SHEET *6-25-01 City*

County of Sacramento  
 Accounting and Fiscal Services

Date: 06/25/2001 Cashier #: 1

Receipt #: 1200113738

Check #: 2475

Permit #: SUD2001-00509

Fee Type Amount  
 SRCSD Sewer Fees \$80,500.00

Total Due \$80,500.00

Check Tendered: \$80,500.00

APPLICATION NO:		BLDG PERMIT NO: <i>SUD2001-00509</i>	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER  <i>272828 EFB</i> <i>6-25-01</i>	
FEE CALCULATION		BUILDING USE	
INSPECTION	<i>\$</i>	RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	<i>\$</i>	COMMERCIAL USE	UNITS
SRCSD	<i>80,500</i>		
CONSTRUCTION			
IN-LIEU			
<b>TOTAL FEE</b>	<b><i>80,500</i></b>		
APN: <i>274-0920-096</i>			
DESCRIPTION/ SUBDIVISION		LOT:	
PROPERTY ADDRESS <i>2397 GATEWAY PARK DR.</i>			
OWNER <i>Mitigation West Investors</i>			
MAILING ADDRESS <i>510 AMERICAN RIVER DR. #140</i>			
CITY-STATE-ZIP <i>Sacramento CA 95864</i> PHONE <i>978-4890</i>			
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____		INPUT _____ START _____	

RECEIPT

**City of Sacramento  
Water and Sewer Service Quotation**

FY 99/00

Date: 11/16/00	Time:	Planning No.:	Plan Check No.: 0005020
Address: 2389 Gateway Oaks Dr.		Parcel No.: 274-0320-096-000	
Description: Office Building B			
Subdivision Map: Gateway Centre (343A) portion of lot 2		Water Page No.: 9N	
Estimate By: RT			
Engineering Firm: Psomas and Associate 2295 Gateway Oaks Dr., Suite 250 Sacto, CA95833		Project Engineer: Allan Rosier Phone No.: 929-7100 Fax No.: 929-6380	
Sewer Jurisdiction: <input checked="" type="checkbox"/> County <input type="checkbox"/> City			
Comment No.1 Comment No.2 Comment No.3 Comment No.4 Comment No.5 Comment No.6			
TOTAL WATER DEV. FEES: \$25,172		27 hrs x \$75 per hour = \$2,025 or \$300.00 (whichever is greater)	
TOTAL SEWER DEV. FEES: \$0		Total on-site grading and drainage review fee: \$2,025	

**Water Service Quotations**

Main Size	Serv. Size			St. Tap	Esmt. Tap	Description	No. of Tap	No. of Meter	Tap Fee/ea.	Meter Fee/ea.	Total Tap cost	Development Fees
	D	I	F									
12			12		x	Fire Loop	1		\$3,396		\$3,396	
8		1 1/2			x	Irrigation	1	1	\$765	\$500	\$1,265	\$3,692
											\$0	
											\$0	
											\$0	
											\$0	
<b>4" TAP AND 3" METER</b>												
8	4				x		1	1	\$1,395	\$1,790	\$3,185	\$21,480
<b>ABANDONMENT</b>												
	Abandon				in.							
	Abandon				in.							
<b>CREDIT</b>												
	Credit for				in.							
	Credit for				in.							
							0			Fire Hydrant		
<b>Total for Water</b>											<b>\$7,846</b>	<b>\$25,172</b>

**COUNTY SEWER**

Main Size	Service Size	Description	QTY	Full St W (FT)	No. OF MH	Total Tap cost	Development Fees
		Development Fee Only				\$0	
		Easement Tap + MH + Dev. Fee				\$0	
		Street Tap + MH + Dev. Fee				\$0	
		Credit					\$0
<b>Total for Sewer</b>						<b>\$0</b>	<b>\$0</b>

Note: Total cost = Qty. x Street/2 x Tap Fee + MH Fee, MH Fee is \$1200.00

*RLM*  
*11/28/00*

Sewer Tap Construction Charge: \$0  
 Water Main Construction Charge: \$7,846  
**Total For Address: \$7,846**

# 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 # <span style="font-size: 1.5em; font-family: cursive;">000 5020</span>	Insp. Area
---	------------

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2389 Gateway Oaks Dr Suite \_\_\_\_\_  
 PARCEL # 274-0320-096

<p style="text-align: center;"><b>CONTACT</b></p> Name <u>LPA Sacramento, Mike Hoss</u> Street Address <u>1215 G Street</u> City/State/Zip <u>Sacramento, Ca 95814</u> Phone <u>443-0335</u> FAX <u>441-2823</u> E-mail: <u>mihoss@lpasacramento.com</u>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> Name <u>HMH</u> Address <u>8589 Thys Ct.</u> City/State/Zip <u>Sacramento, Ca</u> Phone <u>383-4825</u> FAX <u>383-6014</u> E-mail: _____
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> Name <u>LPA Sacramento</u> Address <u>1215 G Street</u> City/State/Zip <u>Sacramento, Ca 95814</u> Phone <u>443-0335</u> FAX <u>441-2823</u> E-mail: _____	<p style="text-align: center;"><b>OWNER</b></p> Name <u>Natomas West Investors: % KKN, Inc.</u> Address <u>3610 American River Dr.</u> City/State/Zip <u>Sacramento, Ca 95864</u> Phone <u>978-4890</u> FAX <u>978-4950</u> E-mail: _____

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

NATURE OF WORK IN DETAIL: New commercial Bldg. Shell and full site build out.  
TYPE II-N 61,662 #

OCCUPANT/TENANT: _____						VALUATION: \$ <u>3.8 million</u>				
FLOOD STATUS: <u>X</u>		S.C.A.T. <u>X1.11, X1.12, X1.16, X1.17, X1.31, X1.32, 100, 200, 201</u>								
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM( )	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC		SITE		FIRE	
# Stories <u>2</u>	1st flr Area	Total Area <u>61662</u>	Use Zone	Occp Group <u>G</u>	Const type <u>II-N</u>	Fire Req <u>Y</u> N		Fed Code <u>15</u>		Vio. File [H] [Quad]
B	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





REQUEST FOR SEWER FEE QUOTE

PCT#

DATE	May 11, 2000	NUMBER OF PAGES	1	PHONE	264-7046
FROM	City of SACRAMENTO	REQUESTOR		FAX	
TO	SRCSO Customer Service	RESPONDER	DULORIE ROSS	FAX	875-6253

URGENT -- Applicant is in office or ready to pay permit.  
If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.  
Press zero to speak to the operator.

1 WEEK WOULD BE FINE

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME	PHONE
	MIKE HOSS	443-0335
Property	ASSESSOR'S PARCEL NUMBER(S)	PROPERTY ADDRESS
	274-0320-096	2389 Gateway Oaks Dr Sac.
Project	PLAN CHECK / BUILDING PERMIT NO	TYPE OF USE
	0005020	New construction
		Remodel
	CURRENT // PREVIOUS	PLANNED
USE	vacant land	commercial office bldg
	CURRENT // PREVIOUS	PLANNED
SQUARE FOOTAGE	vacant land	61,662

FAX 11:30 AM 5-11-00

Date of Request: 5-11-00  
By: Mike Hoss

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION  
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 2389 Gateway Oaks Dr.

Assessor's Parcel Number: 274-0320-096

Previous Use: Vacant Parcel

Description of Request/Proposed Use: new office shell  
& site, commercial

Is This a Change of Use? No

Prior Applications for Project Site(P#, Z#, DRPB#): (P99-097) P00-040  
Zoning Designation: OB-PND

Comments: Subject to conditions of  
Spec. Permit (P00-040) Review in Process.  
OK to submit for concurrent  
plan check per M.O.U.

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: W. J. GORR 5/11/00

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

MICROFILM AFTER FINAL



CITY OF SACRAMENTO  
CALIFORNIA

PLANNING AND BUILDING  
DEPARTMENT

1231 "I" STREET, ROOM 300  
SACRAMENTO, CA 95814-2998  
PH (916) 264-5381

**MEMORANDUM OF UNDERSTANDING RELATED TO  
CONCURRENT REVIEW OF PROJECT PLANS,  
(BUILDING PERMIT AND PLANNING ENTITLEMENTS)**

In order to proceed with concurrent review of the project plans located at 2389 Gateway Oaks Dr  
Sacramento, Ca, Plan Check/Permit Number 000 5020

I agree to comply with all Mitigation Measures and Planning Conditions associated with project P00-040.  
(File Number)

I also agree to pay any additional fees if revised plans are required for building plan check review as indicated in  
the attached letter for concurrent review.

The above language shall not be deemed a waiver by the City of Sacramento of any Mitigation Measure, Planning  
Condition or Zoning Ordinance Provision applicable to the project whether or not the measure, condition or  
provision is listed above.

Signature: [Handwritten Signature] Date: 5-11-00

Name & Title: Michael Hoss, Project Architect, LPA Sacramento

Address: 1215 G Street, Sacramento, CA 95814

Phone Number: 443-0335

\*\*\*\*\*  
Reviewed by: [Handwritten Signature] Date: 5/11/2000  
(PROJECT PLANNER - P00-040)



May 11, 2000

Phil Reed  
Associate Planner  
City of Sacramento, Planning Department  
1231 I Street, Suite 300  
Sacramento, CA 95814

Re: Gateway Center / Natomas West Phase 2

Dear Phil:

The purpose of this letter is to inform the City of Sacramento that we are applying for a Building Permit (PC #0005020 for 2389 Gateway Oaks Drive) and at the same time have a Special Permit application currently under Planning review, P00-040.

At this time we would like to request concurrent processing for the above mentioned project for Special Permit and Building Permit. We agree to hold the City of Sacramento harmless if the final approved plans for Special Permit are different from the current proposal and the Construction Documents submitted for Building Permit.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Hoss", written over a horizontal line.

Michael Hoss, AIA, CSI  
Project Architect  
LPA Sacramento, Inc.

Architecture  
Planning  
Landscape Architecture  
Interior Design

1215 G STREET  
SACRAMENTO, CA 95814  
PHONE 916.443.0335  
FAX 916.441.2823  
EMAIL AND WEB SITE  
lpasacramento.com



Architecture  
 Planning  
 Landscape Architecture  
 Interior Design

1215 G STREET  
 SACRAMENTO, CA 95814  
 PHONE 916.443.0335  
 FAX 916.441.2823

# FAX TRANSMITTAL

Date: 4/5/02  
 To: Harbison Mahony Higgins, Inc.  
 2399 Gateway Oaks Drive  
 Sacramento, CA 95833  
 Attn: Mark Hilton  
 Fax No.: 916-648-3071  
 Project: Kelly Phase II  
 Project No.: 5910004  
 From: Michael Hoss, AIA, CSI  
 Email Address: mhoss@lpasacramento.com  
 No. of Pages: 2

<input type="checkbox"/> Shop Drawings	<input type="checkbox"/> Approval	<input type="checkbox"/> No Exceptions Taken
<input type="checkbox"/> Letter	<input checked="" type="checkbox"/> Your Use	<input type="checkbox"/> Make Corrections Noted
<input type="checkbox"/> Prints	<input checked="" type="checkbox"/> As Requested	<input type="checkbox"/> Returned after Loan
<input type="checkbox"/> Change Order	<input type="checkbox"/> Review and Comment	<input type="checkbox"/> Review and Resubmit
<input type="checkbox"/> Plans		<input type="checkbox"/> Submit
<input type="checkbox"/> Samples		<input type="checkbox"/> Returned
<input type="checkbox"/> Specifications	<input type="checkbox"/> Attached	<input type="checkbox"/> Returned for Corrections
<input type="checkbox"/> Other:	<input type="checkbox"/> Separate Cover Via:	<input type="checkbox"/> Bids Due:

ITEM NO.	QUANTITY	DATE	DESCRIPTION
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1 1 3/21/02 Skylight Framing

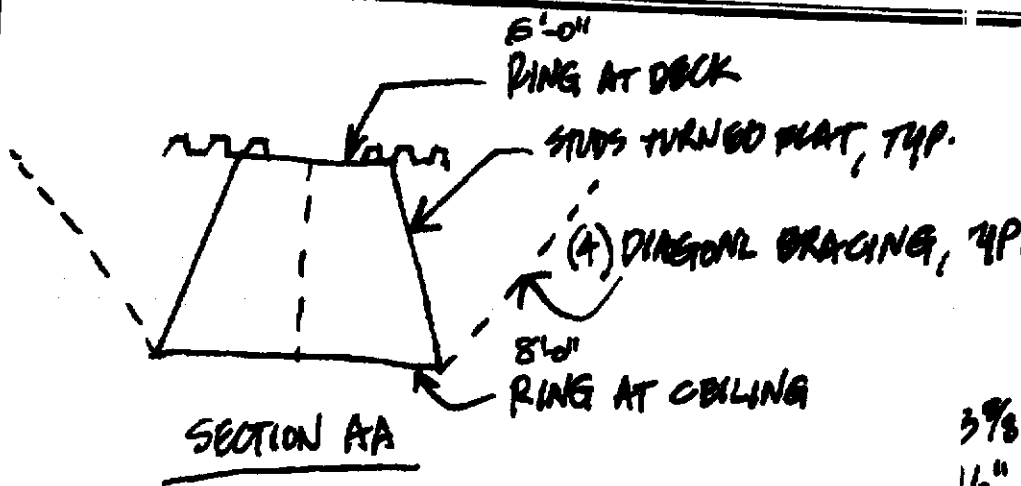
Remarks:  
 Mark,  
 enclosed is a sketch showing the framing for the skylight shaft. This sketch is based on the meeting we had with your Framing Contractor, where you and I discussed the framing support with him. Please copy your Framing Contractor and ask if this is in agreement with our conversation and what was installed. This sketch may also be used for the framing of the skylight shaft in bldg. C, 2379 Gateway Oaks.

Also, you may use this to copy the Building Dept. Inspector.

Thanks,  
 Mike

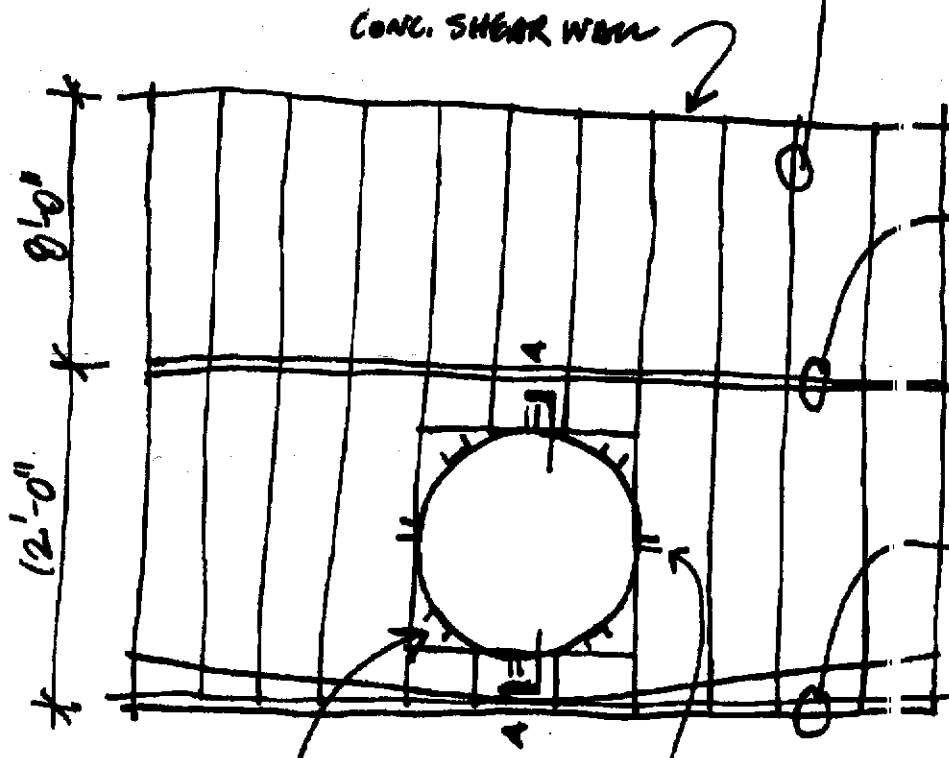
cc: Ref: Skylight Framing

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SECTION AA

3/8" 20 GA. @  
16" O.C.  
TYP. UNO



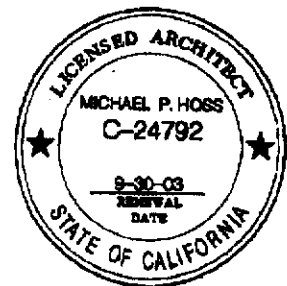
CONC. SHEAR WALL

STRONG BACK  
6", 16 GA.  
BRACED @  
6'-0" O.C. WELDED  
TO WF BEAM  
ABOVE W/(3) 1"  
WELDS

STRONG BACK  
BRACED @ 4'-0"  
O.C. VERTICAL &  
@ 8'-0" O.C.  
DIAGONAL

STUDS TURNED FLAT  
TO FRAME SHAFT.

(4) DIAG.  
BRACES, TYP.



DETAIL NO.	DETAIL TITLE: SKYLIGHT FRAMING
SHEET NAME	
NATOMAS WEST PH. 2, BLDG. B 2389	
SACRAMENTO, CA	

**LPA**  
SACRAMENTO, INC.  
Architects  
Planning  
Landscape Architecture  
Interior Design  
1216 G Street  
Sacramento, CA 95814  
916.443.0335  
916.443.0322 FAX  
5910004

3.21.02

MB 2-6-02

Approved from  
2-4-02



SACRAMENTO (916)853-6280 • LIVERMORE (925)454-1363



FULL MEMBER

### GROUND FAULT SYSTEM TEST REPORT-1

CUSTOMER:		HAROLD NUTTER ELECTRIC		LOCATION:	2399 GATEWAY OAKS DRIVE		JOB NO.:	S-6287		
					BUILDING B		DATE:	2-4-02		
					TEST EQUIPMENT USED:		MULTI-AMP MS-2, AVO MEGGER			
				ELECTRICAL TEST DATA						
MFG. SQUARE D		TYPE MICROLOGIC SER B		RELAY PICKUP		575 AMPS				
CAT. NO. MICROLOGIC STANDARD SERIES B				RELAY TEST AT 10%		0.197 SECONDS				
RANGE 940-1200 AMPS		0.1-0.5 SECONDS		RELAY TEST AT 120%		0.192 SECONDS				
SYSTEM CONFIGURATION		NEUTRAL INSULATION RESISTANCE		ACCEPTABLE		NOT ACCEPTABLE		X		
X RESIDUAL		ZERO SEQ.		MONITOR PANEL OPERATION		ACCEPTABLE		NOT ACCEPTABLE		
BREAKER/SWITCH INFORMATION		NEUTRAL SENSOR POLARITY		ACCEPTABLE		NOT ACCEPTABLE		NOT APPLICABLE		
MFG. SQUARE D		TYPE PXL								
STYLE NO. PFE320000PFL		VISUAL INSPECTION								
RATING 2000 AMPS 480 VOLTS		NEUTRAL GROUND LOCATION		ACCEPTABLE		NOT ACCEPTABLE		NOT APPLICABLE		
		NEUTRAL LINK ACCESSIBILITY		ACCEPTABLE		NOT ACCEPTABLE		NOT APPLICABLE		
GROUND FAULT SYSTEM SETTINGS (1)		CURRENT 640 AMPS		SENSOR ADJUSTINGS		ACCEPTABLE		NOT ACCEPTABLE		
TIME 0.20 SECONDS										
REMARKS (1) SETTINGS ARE FOR TESTING PURPOSES ONLY. PROJECT ENGINEER SHOULD DETERMINE FINAL SETTINGS.										

CITY OF SACRAMENTO

**CERTIFICATE OF OCCUPANCY**

For Information Contact (916) 264-5716

Building Address: 2389 GATEWAY OAKS DR BLD B Permit No.: 0005020  
Building Use: OFFICE Occupancy: B  
Building Owner: NATOMAS WEST INVESTORS/LTD Construction Type: II-N  
PTNR  
Owner Address: SACRAMENTO, CA Sprinkled?  Yes  No  
Portion of Building Occupied: BLD SHELL Area: 61622 Sq. Ft.  
7/3/02 DAVID HAY [Signature] DENNIS RICHARDSON  
Date By: (Print) Sign CHIEF BUILDING OFFICIAL

[ Finaled By: DRP,MJB,JZB,MJG,CP ]

*This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.*

**POST IN A CONSPICUOUS PLACE**