

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0012255
Insp Area: 4

Site Address: 3725 MARYSVILLE BL SAC
Parcel No: 251-0122-003 STE 100

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

CONTRACTOR
KDA INC
350 FRANKLIN RD
MARIETTA GA 30067

OWNER
GRTR SAC TO URBAN LEAGUE
3732 BALSAM ST
SACTO 95838

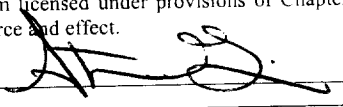
ARCHITECT
ENGLISH HARPER RETA ARCH
707 COMMONS DR STE 250
SACRAMENTO CA 95825

Nature of Work: 1ST TIME T.I. CREDIT UNION

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 735672 Date 11-17-00 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 the project and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

CITY OF SACRAMENTO

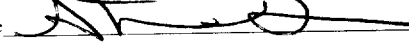
I am exempt under Sec. _____ B & PC for this reason: _____
Date _____ Owner Signature _____

NOV 17 2000

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.

**NEIGHBORHOODS PLANNING
EQUIPMENT SERVICE**

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.

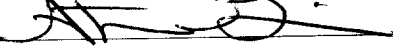
Date 11-17-00 Applicant/Agent Signature 

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 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 NORTHERN INS CO OF NEW YORK Policy Number TC155743489 Exp Date 10/01/2001

(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 11-17-00 Applicant Signature 

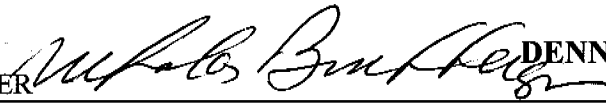
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address:	<u>3725 MARYSVILLE BLVD</u>	Permit No.:	<u>0012255</u>
Building Use:	<u>OFFICES</u>	Occupancy:	<u>B</u>
Building Owner:	<u>GREATER SAC URBAN LEAGUE</u>	Construction Type:	<u></u>
Owner Address:	<u>3732 BALSAM ST</u>	Sprinkled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Portion of Building Occupied:	<u>SUITE 100</u>	Area:	<u>697</u> Sq. Ft.
7/3/03	NICHOLAS BUCHBERGER		DENNIS RICHARDSON CHIEF BUILDING OFFICIAL
Date	By: (Print)	Sign	

[Finaled By: NRB,JXE,BK,MJG,SB]

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

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 # 00-12255	Insp. Area 4C
---	---

Applicant MUST complete ALL Unshaded areas

ADDRESS 3725 Marysville Blvd. Suite 100
 PARCEL # 251-0122-003

<p style="text-align: center;">CONTACT</p> <p>Name <u>Carl C Lubawy</u> Street Address <u>580 University Ave Ste 100</u> City/State/Zip <u>Sacramento, CA 95825</u> Phone <u>916.568.0824</u> FAX <u>916.568.0388</u> E-mail: <u>clubawy@ehra.com</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>735672</u></p> <p>Name <u>KDA Financial, Inc.</u> Address <u>2151 River Plaza Dr. Ste 195</u> City/State/Zip <u>Sacramento CA 95833</u> Phone <u>916.561.3180</u> FAX <u>916.561.3181</u> E-mail: <u>mgreen@kda-fin.com</u></p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Engelhardtper Retz Architects, Inc</u> Address <u>580 University Ave Ste 100</u> City/State/Zip <u>Sacramento, CA 95825</u> Phone <u>916.568.1821</u> FAX <u>916.568.0389</u> E-mail: <u>X312</u></p>	<p style="text-align: center;">OWNER INC ET AL</p> <p>Name <u>GREATER SACRAMENTO URBAN LEAGUE</u> Address <u>3732 BALSAM ST.</u> City/State/Zip <u>SACRAMENTO Ca. 95838</u> Phone _____ FAX _____ E-mail: _____</p>

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

NATURE OF WORK IN DETAIL: FIRST TIME Tenant Improvement - Credit Union Work includes installation of exterior stairs, millwork, modifications to fire protection, electrical and ty. in tile ceiling

OCCUPANT/TENANT: American River Health Pro Credit Union VALUATION: \$ 19,000⁰⁰

FLOOD STATUS: <u>NR</u>		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHELL	APT	TI <input checked="" type="checkbox"/>	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" type="checkbox"/> SITE	<input checked="" type="checkbox"/> FIRE		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vio. File	
		<u>697</u>		<u>B</u>		<input checked="" type="checkbox"/> SPR <input type="checkbox"/> ALARM	<u>18</u>	[H]	[Quad]
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S	<u>100%</u>	D	PW UTIL

COMMENTS: DES. REV.

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

Date of Request: 10/12/00
By: BT

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 3725 Marysville Pl Ste 100 (aka 3732 Balsam St)

Assessor's Parcel Number: Apr: 251-0127-003

Previous Use: Vacant shell

Description of Request/Proposed Use: replac³ windows w. ATM + night Credit Union drop.
incl facade change

Is This a Change of Use? yes

Prior Applications for Project Site (P#, Z#, DRPB#): 41m 299-093, P 99-026 Zoning Designation: C2
DR 99-045 Del Paso Hgts Des Rev. Area
(ind 500)

Comments: ~~add DR 99-045~~
Needs Design Review

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: M May 10-12-00

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

MICROFILM AFTER FINAL