

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0407374
Insp Area: 2
Thos Bros: 337H2

Site Address: 7300 FRANKLIN BL SAC St: #104
Parcel No: 049-0270-018 STE 104

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

CONTRACTOR
WORKNEH SIRAK & NIGIST FEKADE
3811 FLORIN RD
SACRAMENTO CA 95823

OWNER
WORKNEH SIRAK & NIGIST FEKADE
3811 FLORIN RD
SACRAMENTO CA 95823

ARCHITECT

Nature of Work: INTERIOR REMODEL FOR STE 104

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 _____ 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 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.)

Sy 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 7-28-04 Owner Signature _____

PAID
CITY OF SACRAMENTO
JUL 28 2004
BUILDING PERMIT

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 7-28-04 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:

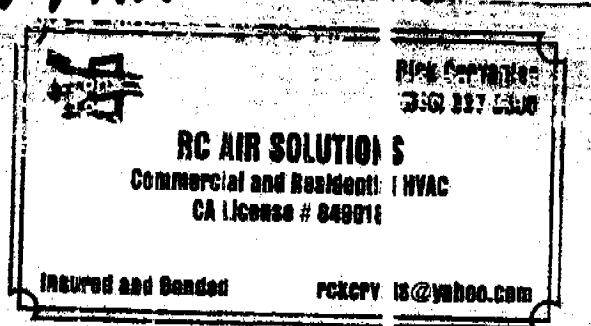
Carrier _____ Policy Number _____ Exp Date _____

Sy (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 7-28-04 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.



PROJECT _____

SYSTEM: A/B

DATE: 9-1-04

AREA SERVED:

VAV NUMBER	OUTLET NO.	TYPE	SIZE	DESIGN		PRELIMINARY		FINAL		NOTE
				MIN	MAX	MIN	MAX	MIN	MAX	
R-1		Supply	10"		190				195	
R-2		Supply	10"		190				198	
R-3		Supply	10"		190				188	
R-4		Supply	6"		45				48	
R-5		Supply	6"		60				62	
R-6		Supply	8"		100				105	
R-7		Supply	6"		60				64	
R-8		Supply	8"		150				152	
R-9		Supply	8"		150				148	
R-10		Supply	10"		200				203	
R-11		Supply	10"		200				202	
R-12		Supply	10"		200				197	
R-13		Supply	10"		200				197	
R-14		Supply	10"		200			195	198	
R-15		Supply	6"		90				91	
OUTSIDE AIR			10 To 8		260				250	
RETURN AIR TOTALS: SYSTEM 2-TON -					660				650	
RETURN AIR TOTALS: SYSTEM 5.0 TON					1200				1250	

REMARKS: ALL MAX AIR AND T-TMS - FINAL MEASUREMENTS.

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address: 7300 FRANKLIN BL #104 Permit No.: 0407374
Building Use: DENTIST OFFICE Occupancy: B
Building Owner: SIRAK WORKNEH & NIGIST FEKADE Construction Type: VN
Owner Address: SACRAMENTO, CA Sprinkled? Yes No
Portion of Building Occupied: SUITE 104 Area: 1700 Sq. Ft.
6/28/05 Carolyn Cooper **RON BEEHLER**
Date By: (Print) Sign CHIEF BUILDING OFFICIAL

[Finalcd By: JRR, JBB, KR, MJG, JH]

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
PLANNING & BUILDING DEPARTMENT
 1231 I Street, Suite 200 or 2101 Arena Bl., 200
 Sacramento, CA 95814 Sacramento, CA 95834
 (916) 264-5656, 1-866 EZ PERMIT or www.cityofsacramento.org

ACTIVITY # 0407374 Insp. Area _____

Applicant to complete all areas down to valuation

ADDRESS 7300 Franklin Blvd Suite 104
 PARCEL # 049.0270.018

<p style="text-align: center;">CONTACT</p> <p>Name <u>Sirak Workneh</u> Street Address <u>3811 Florin Rd #12</u> City/State/Zip <u>SAC, CA 95823</u> Phone <u>4284325</u> FAX <u>4287858</u> E-mail: <u>202-9406 cell</u></p> <p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p> <p style="text-align: center;">OWNER</p> <p>Name <u>Sirak Workneh</u> Address <u>3811 Florin Rd #12</u> City/State/Zip <u>SAC, CA 95823</u> Phone <u>4284325</u> FAX _____ E-mail: _____</p>
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→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: Dentist

OCCUPANT/TENANT: Dentist VALUATION: \$ 100,000⁰⁰

FLOOD STATUS		S.C.A.T.																	
		BLDG <input type="checkbox"/>		SHELL <input type="checkbox"/>		APT <input type="checkbox"/>		ITC <input type="checkbox"/>		REM <input type="checkbox"/>		SW <input type="checkbox"/>		FIRE <input type="checkbox"/>		ADD <input type="checkbox"/>		OTHER <input type="checkbox"/>	
JOB DESCRIPTION		BLDG		MECH		PLUMB		ELEC		SITE		FIRE							
INSPECTION DISCIPLINES		Use Zone		Occp Group		Const type		Fire Req. Y/N		Fed Code		Vio. File							
# Stories	1 st flr Area	Total Area						SPR	ALARM	15				PW	UTIL				
<u>1</u>	<u>L</u>	<u>1700</u>		<u>M</u>		<u>B</u>		<u>S</u>	<u>F</u>	<u>D</u>									

COMMENTS:

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

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 7300 FRANKLIN BLVD	APN: 049-0270-018
DRPB AREA / PUD / SPD: NONE	ZONING: OB
EXISTING LAND USE: CHURCH & VACANT OFFICE BUILDINGS	
PROPOSED USE: 1690 SQ FT DENTAL OFFICE	
PROPERTY SOLD PRIOR TO OPENING OF PRESCHOOL PROPOSED ON 4/16/03	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input type="checkbox"/>	Application(s) COMPLETED: Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input checked="" type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: Existing church requires 9 parking stalls. Addition of 1690 sq ft dental office also requires 9 parking spaces. 14 spaces proposed at this time. 50% shade requirement questionable. All proposed work will be done to interior of existing building. No additions or alterations to exterior of building proposed. No signage proposed with this submittal. HVAC unit will be relocated.	
DATE: 05/12/04	BY: Bonnie Surgeon



CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION



Help Line: 1-916-264-5656 OR 1-866-EZ-PERMIT
 Inspection: 1-916-808-4677

Downtown Permit Center 1-916-264-6807
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-916-808-2354
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

OWNER-BUILDER VERIFICATION
 ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this form is received.

- I personally plan to provide the major labor and materials for construction of the proposed improvements
 Yes No
- I have / have not signed and application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name TBD Address _____
 City _____ Telephone _____
 Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____
 City _____ Telephone _____
 Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of Work

Signed [Signature]
 Job Address 7300 Franklin Blvd 104
 Permit No: 0407374