

CITY OF SACRAMENTO

Permit No: 9803223

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 2100 Q ST SAC

Sub-Type: ACOM

Parcel No: 0070324005

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

MC CLATCHY NEWSPAPERS
SACRAMENTO C AA
95816

LIONAKIS BEAUMONT DESIGN
1919 19TH ST
SACRAMENTO CA

95814

Nature of Work: INT OFFICE REMODEL

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 N/A 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 & B License Number 28C934 Date 6-22-98 Contractor Signature Michael D. Menarini

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 & PC 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 6-22-98 Applicant/Agent Signature Michael D. Menarini

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 FUND Policy Number 046-98

____ (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 6-22-98 Applicant Signature Michael D. Menarini

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.

Date: 8-31-98

REQUEST FOR CERTIFICATE OF OCCUPANCY

- Final Certificate of Occupancy
 Extension - Temporary Certificate of Occupancy
 Temporary Certificate of Occupancy
 Certificate of Occupancy Questions

Project Address: 280 Q STREET

Type of Project (Remodel, New Construction, etc.): REMODEL

Permit No(s): 980322310

Contact Person: MIKE MERCARINI

Contact Phone No: 383-4825 FAX: 383-6014

Have ALL requirements (INCLUDING the Dept. Requirements) been signed off by the inspector?
 Yes No N/A

*Temporary Certificate of Occupancy and extension requests are issued at the discretion of the Building Official. If this is a request for a temporary Certificate of Occupancy or an extension of a temporary Certificate of Occupancy, explain the reason below.

N/A

COMMENTS:

Mail to Mike Mercarini

700 ...

POST THIS CARD IN A CONSPICUOUS PLACE!

SACRAMENTO CITY FIRE DEPARTMENT
 1231 I STREET, SUITE 401
 SACRAMENTO, CA 95814-2979
FIRE PREVENTION DIVISION
INSPECTION SERVICES

FOR INSPECTIONS _____ CALL (916) 264-5480

NOTICE OF 48 HOURS REQUIRED FOR INSPECTIONS

PERMIT # 9803223 APPROVED BY EHC
 PROJECT Remodel
 ADDRESS 2100 Q St.
 OWNER Sacramento Bee

NOTE

- 1) DO NOT COVER WALLS, CEILINGS OR PIPING UNTIL THE FOLLOWING ITEMS ARE SIGNED OFF.
- 2) ALL-WEATHER EMERGENCY ACCESS ROADWAYS AND FIRE HYDRANTS (IN SERVICE) SHALL BE PROVIDED PRIOR TO ANY COMBUSTIBLE CONSTRUCTION OR STORAGE ON SITE.

SITE

INSPECTIONS	INITIALS	DATE
→ UNDERGROUND WATER MAINS/THRUST BLOCKS		
→ HYDROSTATIC TEST OF WATER MAINS		
FLUSHING OF WATER MAINS		
REFLECTIVE MARKERS		
PAINTING OF EQUIPMENT		
MARKING OF FIRE LANES		
ADDRESS POSTED		
EMERGENCY ACCESS KEY BOX (KNOX)		
FIRE HYDRANTS		

FIRE & LIFE SAFETY

EXITING SYSTEMS		
FIRE DOORS		
SMOKE VENTING		
HIGH PILED STOCK		
FLAMMABLE LIQUIDS		
HAZARDOUS MATERIALS		
SPECIAL HAZARDS		
INTERIOR FINISH		
POSTED SIGNS FOR OCCUPANT LOAD		

EQUIPMENT

→ FIRE SPRINKLER WELDED OUTLETS		
→ FIRE SPRINKLER SYSTEM PIPING	<u>K.K. Lee</u>	<u>7/20/58</u>
→ FIRE SPRINKLER HYDROSTATIC TEST		
→ STANDPIPES		
→ FIRE ALARMS/TESTING CONTRACT		
KITCHEN HOOD & DUCT SYSTEM		
SPECIAL EXTINGUISHING SYSTEM		
FIRE EXTINGUISHERS		
PRIVATE WATER SYSTEM		

SPECIAL REQUIREMENTS

FINAL APPROVAL

APPROVED FIRE FLOW		
OCCUPANCY GRANTED/F.D. APPROVAL	<u>K.K. Lee</u>	<u>7/20/58</u>

NOTICE:
 FAILURE TO COMPLY WITH AN ORDER OF THE FIRE DEPARTMENT MAY RESULT IN THE
 ISSUANCE OF A CITATION AND/OR DISCONTINUED USE OF THE BUILDING OR PREMISES.
 1994 UFC SECTIONS 103.4.3.1, 103.4.3.2, 103.4.4.

KEEP THIS CARD FOR REFERENCE
 THIS IS YOUR RECORD OF FIELD INSPECTIONS

CITY OF SACRAMENTO
CERTIFICATE OF OCCUPANCY
For Information Contact (916) 264-5716

Building Address 2100 Q STREET Permit No. 98-03223
Building Use Office Occupancy BC
Building Owner McClatchey Newspaper Construction Type II FR
Owner Address 2100 Q Street, Sacramento, CA 95814 Sprinkled Yes No
Portion of Building Occupied Locker room Area 320 Sq. Ft.

08 / 31 / 98 BRADFORD J. BOEHM, P.E. *Bradford J. Boehm, P.E.*
City Building Official

Date Issued By: Print Sign
Ffietas/Gilpin/Krinks/Lee
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 9 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
 DEPARTMENT OF PLANNING AND DEVELOPMENT
 BUILDING INSPECTION DIVISION
 1231 I Street, Room 200
 Sacramento, CA 95814
 (916) 264-7619 FAX 264-7046

ADDRESS 2100 Q STREET P.C. # 5989
 PARCEL # ~~007-004-04~~ 007-0324-005 SUITE # _____
 AREA # 1C

CONTACT LICENSED CONTRACTOR LIC# _____
 NAME LIONAKIS BEAUMONT DESIGN GROUP NAME HANBISON MATHON & HIGGINS
 ADDRESS 1919 19TH STREET ADDRESS 8509 THYS CR.
SACRAMENTO ZIP 95814 SACRAMENTO ZIP 95828
 PHONE 558-1900 FAX: () 558-1919 PHONE () - FAX: () -

ARCH./ENG. OWNER _____
 NAME LIONAKIS BEAUMONT DESIGN GROUP NAME McCLATCHY NEWSPAPERS INC
 ADDRESS 1919 19TH STREET ADDRESS 2100 Q STREET
SACRAMENTO ZIP 95814 SACRAMENTO ZIP 95814
 PHONE 558-1900 PHONE () 321-1616 FAX () -

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE? YES NO
 NATURE OF WORK IN DETAIL: _____

D.B.A. THE SACRAMENTO BEE VALUATION \$25,000
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS Cost * S.C.A.T. _____

JOB DESCR. BLDG SHEL APT TI() REM SW FIRE ADD OTH
 ENSP. DISCIPLINES BLDG MECH PLUMB ELEC SITE FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	OCCUP. GROUP	CONST. TYPE	FIRE SPRENK.	FIRE ALARM	FED. CODE	VIO. FILE
				<u>IFFE</u>	<u>Y/A</u>	<u>Y/N</u>	<u>15</u>	<u>OK</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>
	<u>GYL</u>	<u>BO</u>	<u>BD</u>	<u>GM</u>	<u>EHC</u>		<u>WT</u>	

COMMENTS: Reg'r contractor's cost break down
Check with Brad for Handicap reg't

Worker's Comp Policy #
Company
Exp Date