

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0011638
Insp Area: 1

Site Address: 1100 FRONT ST SAC
Parcel No: 006-0075-003

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

CONTRACTOR
DIDDENDORF CONST.

OWNER
CITY OF SACRAMENTO
SACRAMENTO CA
95812-1834

ARCHITECT

Nature of Work: FIRE REPAIR OF FRAMING AND SHEETROCK.

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 5 License Number 576593 Date 9-29-00 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 & PC for this reason: _____

Date _____ Owner Signature _____

CITY OF SACRAMENTO
OCT 17 2000
NEIGHBORHOODS, PLANNING AND 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 above mentioned property for inspection purposes.

Date 9-29-00 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 Cent Policy Number _____ Exp Date _____

_____, (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 9-29-00 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.

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 # <u>6011678</u> <u>006-0025-005</u>	Insp. Area <u>11</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS _____ Suite _____
 PARCEL # _____

CONTACT Name <u>Retro City Cafe</u> Street Address <u>1110 Front St</u> City/State/Zip <u>Sac.</u> Phone <u>442 8226</u> FAX _____ E-mail: _____	LICENSED CONTRACTOR Lic No. # <u>576593</u> Name <u>Middendorf const</u> Address <u>229 Redstone cir</u> City/State/Zip <u>Scissors CA</u> Phone <u>707-434-8820</u> FAX _____ E-mail: _____
ARCHITECT/ENGINEER Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	OWNER Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # 1157045 EXPIRATION DATE: 9-2001

NATURE OF WORK IN DETAIL: Fire repair of framing and sheetrock water damage

OCCUPANT/TENANT: _____ VALUATION: \$1,200.00

FLOOD STATUS:				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	
						SPR	ALARM		[H]	[Quad]
(B)	L	P	M	E	F	S	D	PW	UTIL	
<u>1301</u>										

COMMENTS:
* ALL REPAIR WORK WILL BE SUBJECT TO FIELD APPROVAL !

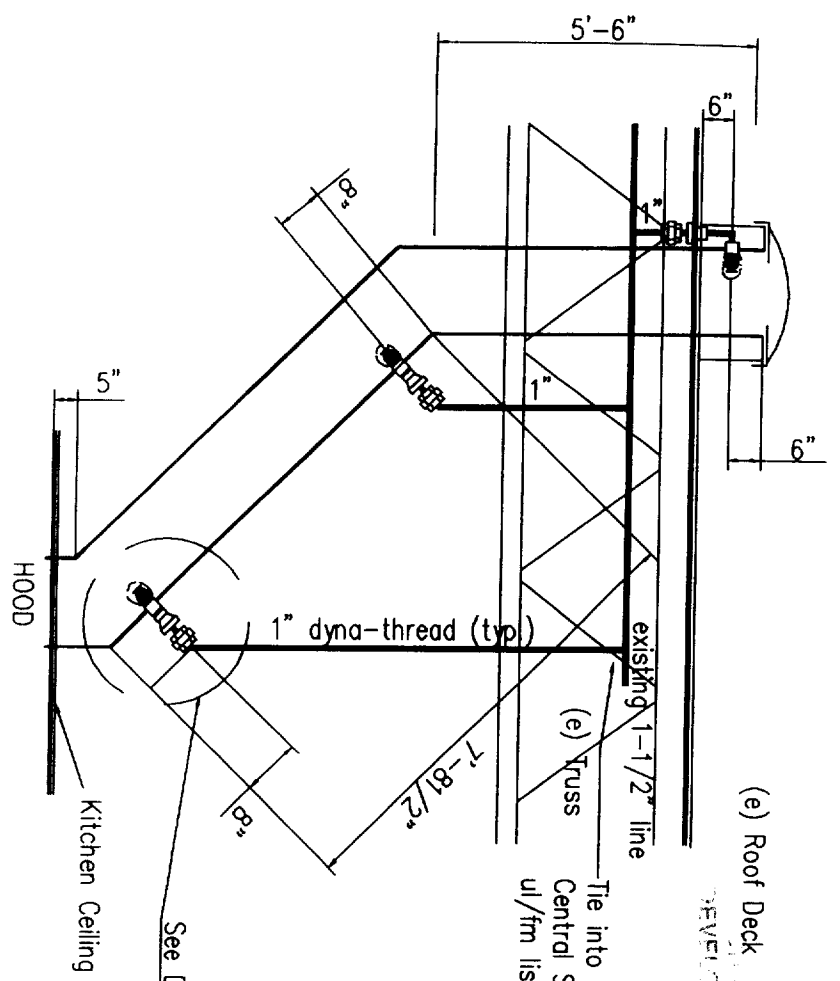
REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

ISSUED

APPROVED

A.R. Davis 10/19/00

Sacramento Fire Department
PENDING FIELD INSPECTION



Tie into (e) line with Central Strap saddle ul/fm listed.

- NOTES:**
1. HEAD LOCATIONS FOR GREASE DUCT SHALL BE PER. NFPA 13
 2. HEADS SHALL BE PROTECTED FROM GREASE BUILDUP WITH SMALL PAPER BAGS OVER HEADS.
 3. ALL PIPING SHALL BE 1" DYNA-THREAD
 4. ACCESS TO HEADS FOR YEARLY CLEANING AND MAINTENANCE SHALL BE PROVIDED BY OTHERS.

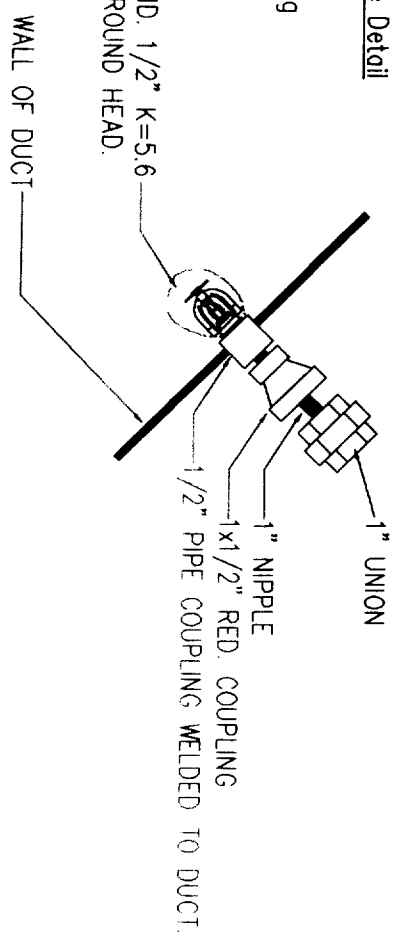
DUCT PLAN

plans and specifications shall be in accordance with the following: ALL BRASS PEND. 1/2" K=5.6
 1. Report on the job at all times and if W/ANY PAPER BAG AROUND HEAD.
 to make any changes or alterations from the same without written permission from the Building Inspection Division.

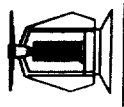
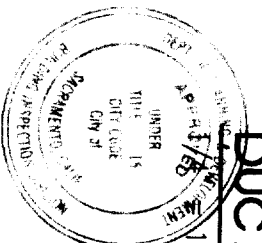
The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

DETAIL

N.T.S



Grease Duct Prot.



SYSTEMS-TECH

5037 COLLEGE OAK DRIVE, SUITE H
 SACRAMENTO, CA 95841
 (916) 332-1288 FAX: 332-1256

SYMBOLS AND ABBREVIATIONS

○	ROOF	FOR	TRUSS	CALC.		
—	1/2"	Ø	PIPE	OR	TRUSS	MEMBER
—	1/2"	Ø	PIPE	OR	TRUSS	MEMBER
—	1/2"	Ø	PIPE	OR	TRUSS	MEMBER
—	1/2"	Ø	PIPE	OR	TRUSS	MEMBER

CONTRACT RESPONSIBILITIES

NO.	DESCRIPTION	DATE



RIO CITY CAFE
 1110 Front St.
 Old Sacramento, Ca.

DATE AS NOTED	DATE	BY	REVISION
	10-00		

FP1

0011638

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 25 OCT 00

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

1100 FRONT ST.

Has been conducted by Inspector

R. ROBLES

On

25 OCT 00

00-11638-200
Permit Number -194

Square Footage

O.H. SPK
Type of Inspection

They system is acceptable by this department.

R. Woodman
By: Ross L. Woodman,
Fire Prevention Officer II

00.391
F.D. Reference Number

✓