

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0005491
Insp Area: 1

Site Address: 1215 K ST SAC
Parcel No: 006-0111-012 21ST. FLOOR SUITE 2100

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

CONTRACTOR

OWNER
ESQUIRE PARTNERS L.L.C.
3100 ZINFANDEL DR #160
RANCHO CORDOVA, CA 95670

ARCHITECT

Nature of Work: NEW OFFICE T.I.

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.)

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 _____ 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 _____

(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 _____ 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.

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT
FROM: Troy Malaspino
Fire Marshal
SUBJECT: FIRE SYSTEM INSPECTION

DATE: 11-16-00

A final inspection of the newly installed fire system at:

1215 K ST 21st floor

Has been conducted by Inspector

C. PACK

On

8-1-00

00-05491-100
Permit Number 200

Square Footage

FIRE ALARM
OH SPRINKLES
Type of Inspection

They system is acceptable by this department.

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

00-171
F.D. Reference Number

CITY OF SACRAMENTO
APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION
 123! I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0005491 Insp. Area 1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1215 K ST 21st Floor Suite 2100
 PARCEL # 006-0111-012

CONTACT		LICENSED CONTRACTOR Lic No. # _____	
Name <u>MARK RUBY</u>		Name _____	
Address <u>3100 ZINFANDEL #160</u>		Address _____	
Phone <u>638-0242</u> FAX <u>638-0380</u>		Phone _____ FAX _____	
E-mail _____		E-mail _____	
ARCHITECT/ENGINEER		OWNER	
Name <u>VITIELLO & ASSOCIATES</u>		Name <u>LANKFORD & TAYLOR</u>	
Address <u>1931 H ST</u>		Address <u>3100 ZINFANDEL #160</u>	
Phone <u>446-0206</u> FAX <u>446-0894</u>		Phone <u>638-0242</u> FAX <u>638-0380</u>	
E-mail _____		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 OFFICE TI

OCCUPANT/TENANT: PORTER NOVELLI VALUATION: \$ 203400

FLOOD STATUS:		S.C.A.T. <u>X200; X100; 207</u>								
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 <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vio. File		
		<u>13560</u>		<u>B</u>	<u>1-FR</u>	<input checked="" type="checkbox"/> SPR <input type="checkbox"/> ALARM	<u>15</u>	[H]	[Quad]	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input type="checkbox"/> S	<input type="checkbox"/> D	<input type="checkbox"/> PW	<input type="checkbox"/> UTIL	

COMMENTS: _____

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



Insp. Area 12

AUTHORIZATION TO START WORK

CITY OF SACRAMENTO, BUILDING INSPECTIONS DIVISION
1231 I ST., ROOM 200, SACRAMENTO, CA 95814

Company: LANKFORD & TAYLOR PC # 000 2111
 Address: 3100 ZINFENDEL #160 BID App. 1
 Job Phone: 638-0242 Office Ph. 446-6334 Fee 350⁰⁰
 SUBJECT: Project Address: 1215 K ST Suite # 2100

I request permission to start the following work FRAMING / ELEC / HVAC /
FIRE SPRAWLERS

I realize that all work will be at the owner's and contractor's risk without assurance that the permit for the project will be granted. Any code conflicts will be corrected. I agree not to cover or conceal any work or portion thereof. I realize that inspections will not be made on this project until a building permit is issued. All changes required to conform to the approved plans will be completed without dispute. Work affecting the structural integrity of the existing building is not permitted.

I will expedite necessary revisions, corrections and clarifications as required to obtain the building permit.

If it should be determined subsequently by the City that changes in the design of the building are necessary after commencement of the work authorized, I assume full responsibility and all risk of loss which may result by reason of such changes. I agree that the building shall conform to the approved final plans as amended, without regard to the stage of completion.

This authorization is valid for 30 days while the plans are being processed for permit. These state required declarations must be properly executed before this authorization is valid. This authorization is valid when initialed by authorized Building Department personnel and stamped approved. Keep posted on job site at all times.

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 the Business and Professions Code and my license is in full force and effect.

Lic. Class: _____ Lic. Number: _____
 _____ COMPANY NAME
 _____ 5-22-00 _____
 SIGNATURE DATE

CITY OF SACRAMENTO
 BUILDING INSPECTION DIVISION
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: ACE Dry Cleaning Phone: 446-6334
 Site Address: 1215 L Street Suite: 2100
 (Street) (Zip)
 Business Owner/Representative: John Williams Phone: 804-7341
 Nature of Business: Office
 Property Owner: ANNE W. WEAVER Phone: 685-2042
 Address: 310 N. T Street Suite: 100
 (City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes No Is this permit for a shell building? Yes No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes No

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes No

7. Is/Will your business be located within 1,000 feet of a school? Yes No

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes No

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: _____
 (Print)

 (Signature) (Date)

BID Use Only: Plan Ck# <u>000549</u> Permit # _____ OK to issue prmt? <u>DBL 6/15/00</u> F.D. Appr Req'd? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> init date	
Hold on Certificate of Occupancy? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Fire Dept. Use Only: OK to issue permit? ini' _____ date _____ OK to issue Certificate of Occupancy? ini' _____ date _____	

SWATT ARCHITECTS

Permit No. 0005491C

Address : 1215 K St. 21st flr.

Rev Δ 8/4/00

Robert Swatt AIA

Steven Sept AIA

MEMORANDUM

Date: July 19, 2000

J. Tang

To: John Tang, City of Sacramento

CC w/o encl.: Rose Thornton, DLR Vitello
Mark Ruby, Lankford & Taylor
Eric Gilmore, Lankford & Taylor
Denise Fullmer, Tom Storelli, NCG Porter Novelli

From: Steven Sept, AIA

Project: NCG Porter Novelli Offices (9917)
Subject: Revision to floor plan

On July 14, 2000, 11:30 am, we discussed the proposed changes via telephone and you confirmed that the changes presented on Swatt Architects Sketch, SK-12, dated 07/11/00, were acceptable. The changes included the removal of a wall to a small office to allow access from the suite north of the reception area to the reception/conference area. We discussed that an exit sign is not required.

At the request of the General Contractor and the Architect of Record I made a subsequent follow up phone call today to clarify whether a formal drawing was required for submission to the Building Department. You indicated that 2 - 8-1/2 x 11 wet signed and stamped copies should be submitted. One copy will be submitted to the contractor and the other attached the approval plans.

Please find attached these documents as requested.

Thank you.

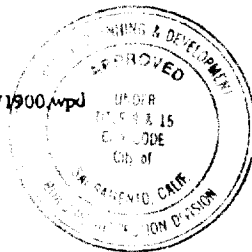
Encl.

Y:\Projects\1999\9917\Admin\Lang\071900.wpd

ISSUED

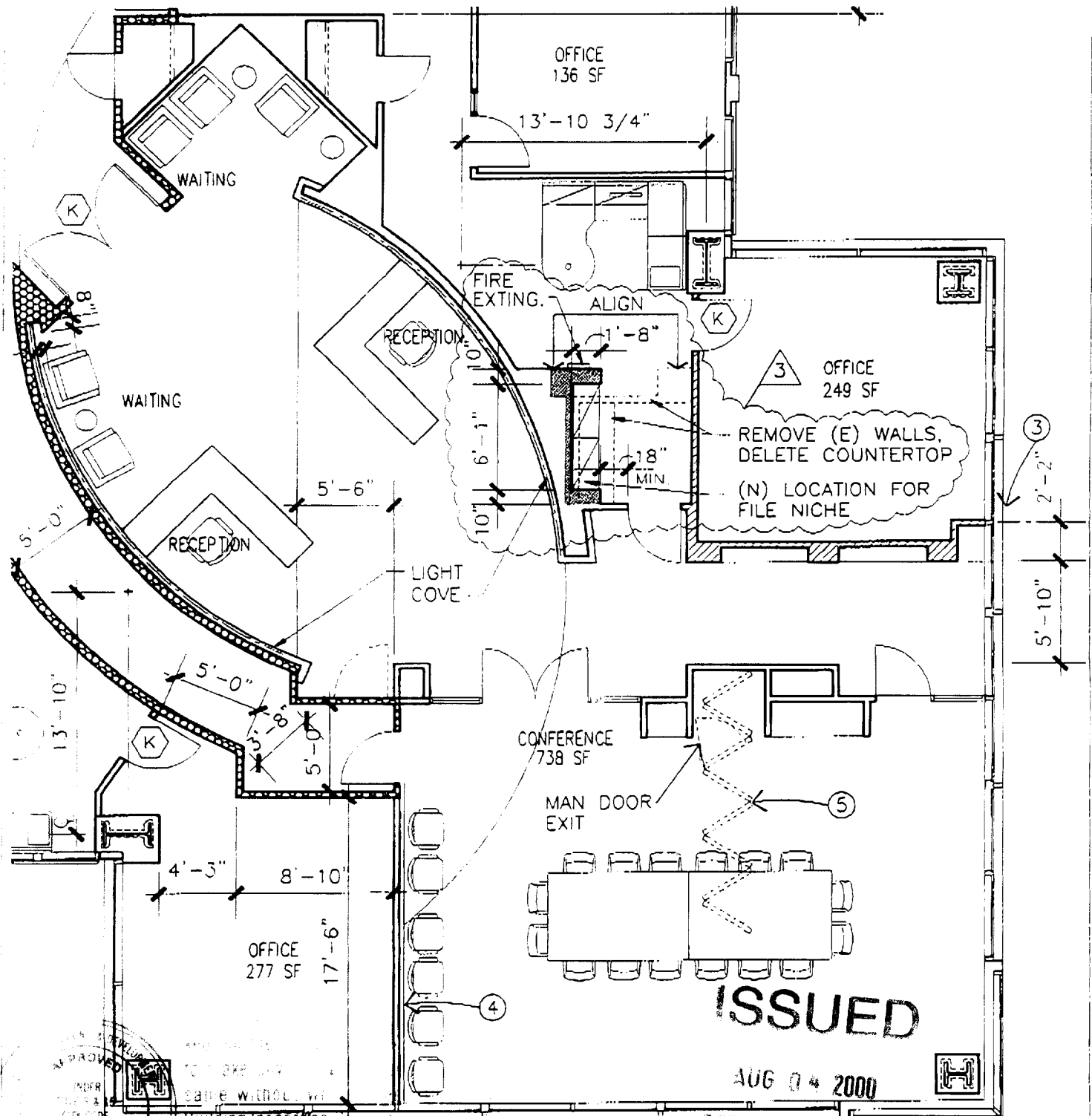
JUL 24 2000

DEPARTMENT OF PLANNING & DEVELOPMENT



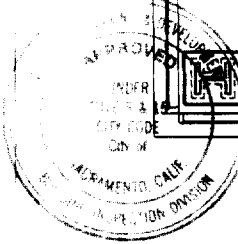
This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

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

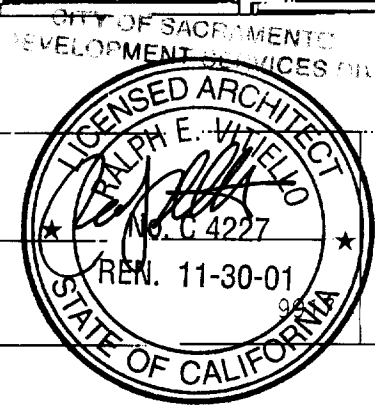


ISSUED

AUG 04 2000



Building Inspection
 The approval of this plan does not constitute a warranty of any kind, and shall not be held responsible for any violation of any City ordinance or State law.



SWATT ARCHITECTS
 350 Fulton Street
 San Francisco, CA 94105
 ph. 415.541.8520
 f. 415.541.8541
 email: swatt@aol.com

Date:	7/11/00	Subject:	REVISION
Scale:	1/8" = 1'-0"	Project Name & Number:	NOIS/SC PORTER NUVELLI OFFICES

Sheet Number

SK-12