

**CITY OF SACRAMENTO**  
**1231 I Street, Sacramento, CA 95814**

**Permit No: 0011101**  
**Insp Area: 2**

**Site Address: 2931 FLORIN RD SAC**  
Parcel No: 041-0111-005  
N

WAREHOUSE BLDG (AKA 7101 INDIAN LN)  
Sub-Type: COM  
Housing (Y/N):

CONTRACTOR  
EVANS BROTHERS INC  
PO BOX 5099  
EL DORADO CA 95762

OWNER  
PAYLESS CASHWAYS INC  
SACRAMENTO CA  
64141

ARCHITECT

**Nature of Work: DEMO**

**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.

X License Class AB, C2 License Number 443018 Date 9/18/00 Contractor Signature Evans Bros Inc. [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.

X Date 9/18/00 X Applicant/Agent Signature Evans Bros Inc [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 STATE FUND Policy Number 430-99 UNIT 0000039 Exp Date 10/01/2000

\_\_\_\_\_, (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.

X Date 9/18/00 X Applicant Signature Evans Bros, Inc [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.**

Sacramento Metropolitan Air Quality Management District

ASBESTOS SURVEY AND DEMOLITION NOTIFICATION FORM

NOTE: Please read instructions on the back of this form.

**1** Contractor EVANS BROTHERS, Inc. Owner Sacramento Regional Transit District  
 Address 7589 NATIONAL DRIVE Address 1400 29th STREET  
 City LIVORNADER City SACRAMENTO  
 State/Zip CALIFORNIA 94550 State/Zip CALIFORNIA 95816  
 Telephone (925) 443-0225 Telephone (916) 321-2800

**2** Structure Name RYLOSS/LUMBERYARD Use STORAGE COVER BLDG  
 Address 7101 INDIAN LANE City/Zip SACRAMENTO, CA 95822

**3** Structure Age 30 (years) Number of floors: 0 Size: 9534 sq. ft.

**4** Has RACM reported by the consultant been removed? (circle) YES NO (N/A)  
 Asbestos contractor who removed or will remove RACM \_\_\_\_\_

**5** DEMOLITION <sup>PERMIT</sup> Start Date 9/19/00 Completion Date 11/10/00

**6** Preference for return of form:  Mail  Pick-Up (after 2 working days)

**7** Applicant Name (Print) Bruce Schmidt  Owner  Contractor  
 Applicant's Signature [Signature] Date 8/30/00

*I have read and understand the directions. The information on this form is true and accurate.*

**8** To be completed by CAL OSHA Consultant. (See SMAQMD list or OSHA list)  
 Company Name: \_\_\_\_\_ Telephone: (916) 372-1100  
 Surveyor's Name: \_\_\_\_\_ Survey Date: 8/16/00  
 Company Address: \_\_\_\_\_ City/State/Zip: Yuba City, TX  
 Amount of RACM: \_\_\_\_\_ sq. ft. \_\_\_\_\_ square feet \_\_\_\_\_ cubic feet  
 Amount of Category I: \_\_\_\_\_ Amount of Category II: \_\_\_\_\_  
 Analytical Procedure: PCM  
 Consultant's Signature: [Signature] Date: \_\_\_\_\_

**9** REVISION #: 1 2 3 4 5 6 7 8 9 (circle)  
 Old: Start Date \_\_\_\_\_ Completion Date \_\_\_\_\_  
 New: Start Date \_\_\_\_\_ Completion Date \_\_\_\_\_

DEMOLITION PERMIT SHALL NOT BE ISSUED PRIOR TO

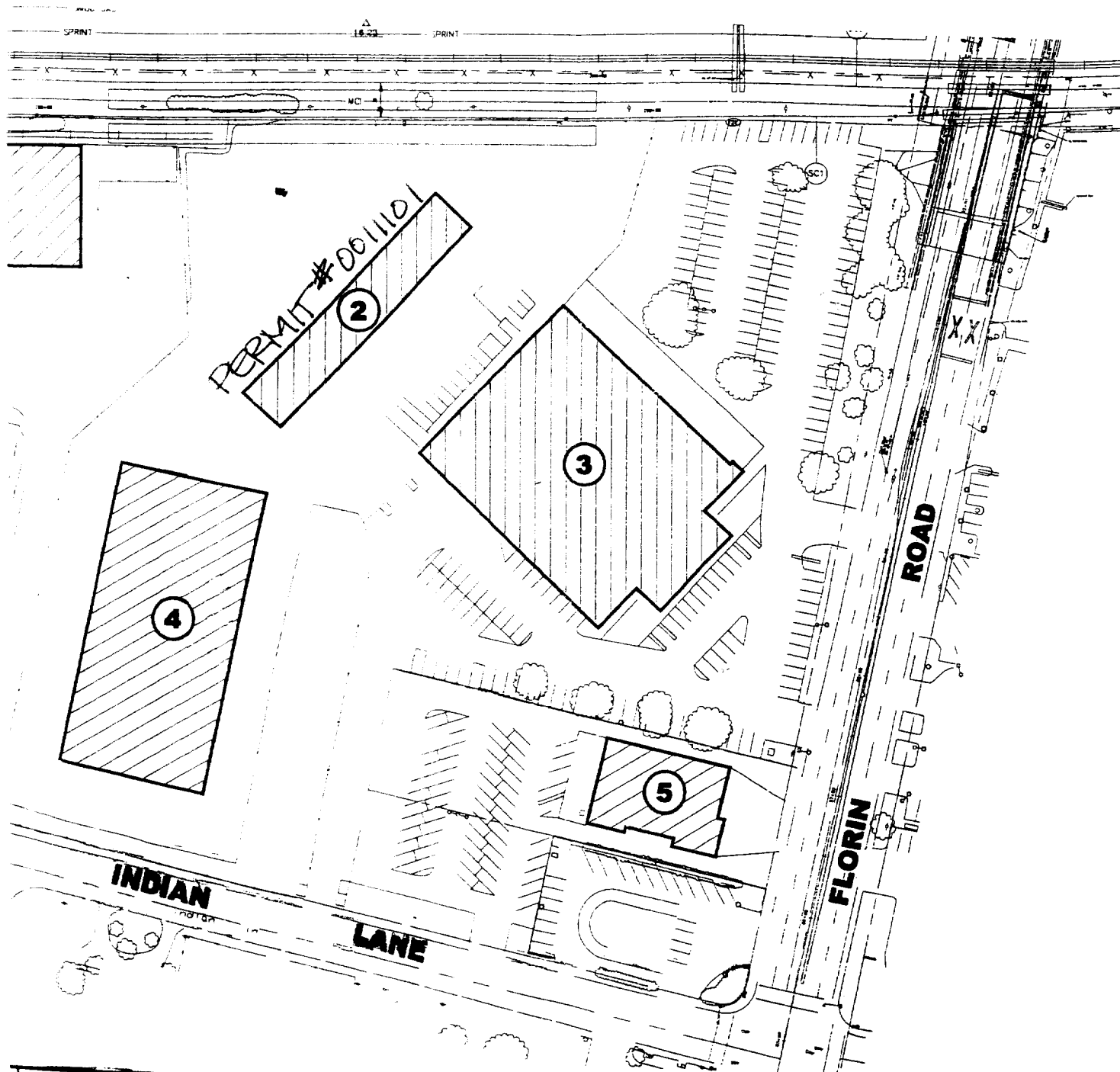
SACRAMENTO METROPOLITAN

SEP 19 2000

AIR QUALITY MANAGEMENT DISTRICT

SMAQMD USE ONLY: PROJ. # \_\_\_\_\_ RECEIVED DATE/POSTMARK 9/6/00 NESHAPS: \_\_\_\_\_  
 CK# \_\_\_\_\_ REC'T # \_\_\_\_\_ AMT. PAID 150 STAFF 1 DATE APPROVED 9/7/00  
Hon. Comm. \_\_\_\_\_

# TH SACRAMENTO CORRIDOR PROJECT OLITION OF COMMERCIAL BUILDINGS: PHASE DEMOLITION AND ABATEMENT



SCALE: VERTICAL: AS NOTED  
 HORIZONTAL: AS NOTED  
 ORIGINAL SCALE IN INCHES  
 FOR REDUCED PLAN

PROJECT ENGINEER: <u>L. SPRINGER</u>	REG. NO.	DATE
DESIGNED BY: <u>L. SPRINGER</u>		10/99
DRAWN BY: <u>A. COMPO</u>		10/99

CI:	
FILE:	
G1	

2 INSPECTION PERMIT

ADDRESS: aka 2931 Florin Rd  
7101 INDIAN LANE 041-011-206005

OWNER: SACRAMENTO REGIONAL TRANSIT DISTRICT

Approval by the following City Departments must be obtained prior to the issuance of a wrecking permit by the Building Inspection Division. Design Review approval required on all wrecking permits in Central City/Alhambra Blvd. corridor prior to sewer disconnect permit being issued.

DESIGN REVIEW 1231 I Street, Room 200 (916)264-5604 <i>Ray</i> <i>8-24-00</i>
PLUMBING DIVISION (All) 1231 I Street, Room 200 (916)264-7619 (or) Housing (916)264-5404
WATER DEPARTMENT (All) 1391 35 <sup>TH</sup> Avenue (916)264-5371
FIRE DEPARTMENT (All) 1231 I Street, Room 401 (916)264-5416 <i>R Woodin</i> 8-24-00
TRAFFIC ENGINEER (Commercial) 1000 I Street (916)264-5307
ARBORIST/TREE SERVICE ( <u>Downtown</u> and <u>Commercial</u> Buildings) 5730 24 <sup>th</sup> Street (916)433-6345

- 1.) Route to Planning and Fire
- 2.) Sewer Disconnect after we call 264-5371 Kill Tap  
Bring Permit (signed off by plumbing inspector) back to the building department to add Wrecking.  
\* Unless City Awarded Contract.
- 3.) Commercial Buildings Required to have Asbestos Form and not to be issued Before Air Quality Date on Asbestos Form (bottom right corner)



DEPARTMENT OF  
PLANNING AND DEVELOPMENT

CITY OF SACRAMENTO  
CALIFORNIA

1231 I STREET  
ROOM 200  
SACRAMENTO, CA  
95814-2998

WRECKING PERMIT # \_\_\_\_\_

BUILDING INSPECTIONS  
916-264-5716  
Permit Services  
916-264-7619  
FAX 916-264-7046

## DEMOLITION PERMIT NOTIFICATION

A Demolition Permit for a 1 story building at:

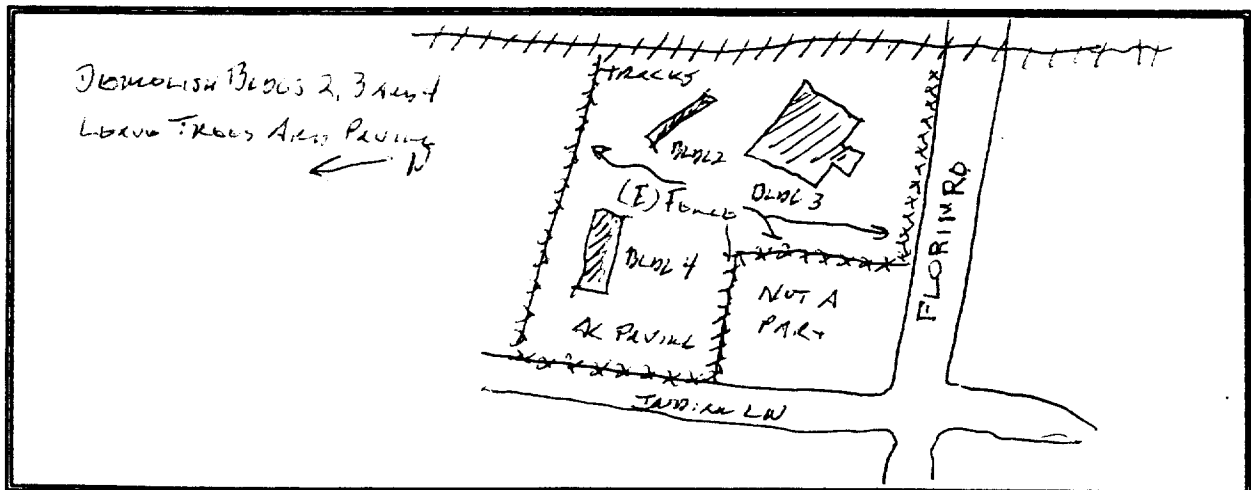
7101 INDIAN LANE SACRAMENTO  
(Address)

Parcel number: 041-0111-005

has been issued on \_\_\_\_\_  
(date)

The structure is scheduled for demolition within 30 days.

Please update your service and billing records accordingly.



(SAMPLE SITE PLAN)

cc: P.G. & E (Terry Clark)  
SMUD  
SOLIDWASTE (3141)  
UTILITIES (3350)  
UTILBILLING (1125)  
FIREDEPT. (2510)

INITIAL: \_\_\_\_\_ DATE: \_\_\_\_\_

DEVELOPMENT SERVICES  
DIVISION

# APPLICATION FOR WRECKING PERMIT

916-264-7619  
FAX 916-264-7046

## LOCATION

ADDRESS: 7101 INDIAN LAKE SACRAMENTO  
LOT: 041-011-005 TRACT: \_\_\_\_\_  
LOT DEPTH: 600' LOT WIDTH: 500' CORNER LOT: \_\_\_\_\_ INTERIOR LOT X  
OWNER: SACRAMENTO REGIONAL TRANSIT DISTRICT  
ADDRESS: 1400 29th STREET SACRAMENTO

## BUILDING DATA 204x177 227x41 251x121

LENGTH: 204 WIDTH 177 FIRST FLOOR AREA 67343 (SQ.FT.) NO. STORIES 1  
USE OF BUILDING: RETAIL CONSTRUCTION TYPE STEEL FRAME HEIGHT 16'  
# OF UNITS NA REAR YARD NA SIDE YARD NA SET BACK 30'  
CITY SEWER ✓ WATER ✓ SEPTIC \_\_\_\_\_ WELL \_\_\_\_\_

## CONTRACTOR

NAME: EMMS BROTHERS INC STATE LICENSE NO. 443018  
ADDRESS: 7539 NATIONAL DR. LIVERMORE CALIFORNIA 94550  
PHONE: (925) 443-0225 FAX: (925) 443-0229  
LIABILITY INSURANCE P.L. K20 513010 P.D. K2B 513 010 POLICY ON FILE \_\_\_\_\_

## CODE REQUIREMENTS

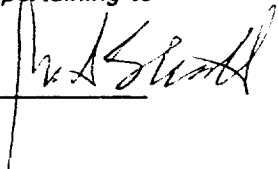
NOTIFICATION OF ADJACENT PROPERTY OWNERS NA DATE: \_\_\_\_\_  
COPY OF NOTIFICATION ON FILE: \_\_\_\_\_ USE OF PROPERTY REQUIRED: \_\_\_\_\_  
PEDESTRIAN PROTECTION REQUIRED: NONE REQUIREMENTS ATTACHED \_\_\_\_\_  
BASEMENTS OR OTHER EXCAVATIONS ON LOT: NONE TO BE FILLED \_\_\_\_\_ FENCED \_\_\_\_\_

PREPARE PLOT PLAN SHOWING LOCATION OF BUILDING ON LOT AND TYPE AND LOCATION OF BUILDING BARRICADE.

## SPECIAL CONDITIONS:

*I have read the above application and know the contents thereof; the same is true and correct. I further state that I am familiar with the laws governing the demolition of buildings within the City of Sacramento and the State of California and that the above structure will be razed in conformity therewith. I further state that I understand that this permit may be revoked for any violation of the provisions of the Code of the City of Sacramento pertaining to or affected by the demolition procedure to be used on the above building.*

No. W \_\_\_\_\_  
DATE: \_\_\_\_\_  
FEE: \_\_\_\_\_

APPLICANT: EMMS BROTHERS INC   
TITLE: CONTRACTOR  
(APPLICANT/OWNER)

PERMIT EXPIRES		
MONTH	DAY	YEAR

✓ THIS IS A REVOCABLE PERMIT