

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0110049

Insp Area: 3

Thos Bros: 318E4

Site Address: 8295 FRUITRIDGE RD SAC  
Parcel No: 061-0171-005 1ST FLR

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

**CONTRACTOR**  
KEHEMAN ROEBBELUN  
1244 HAWKS FLIGHT CIRCLE #100  
EL DORADO HILLS 95762

**OWNER**  
PACIFIC TELEPHONE AND TELEGRAPH COMPANY  
3707 KINGS W RM B-15  
SACRAMENTO CA 95851

**ARCHITECT**

**Nature of Work:** INSTALL WELDED WIRE CAGE FOR EXISTING TELECOMMUNICATION SWITCHING GEAR, INTERIOR ONLY

**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. Code)

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 B License Number 77562 Date 8-7-01 Contractor Signature Ken Hanson

**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 Section \_\_\_\_\_ B & P. 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 8-7-01 Applicant Agent Signature Ken Hanson

**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 ST PAUL FIRE & MARINE Policy Number WVK8300625 Exp Date 07/01/2002

(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 8-7-01 Applicant Signature Ken Hanson

**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>0110049</u>	Insp. Area <u>3C</u>
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ADDRESS 8295 Fruitridge @ P SACRAMENTO Suite 1ST FRR  
 PARCEL # \_\_\_\_\_

Applicant MUST complete ALL Unshaded areas

**CONTACT**

Name Ronald Hansen  
 Street Address 955 West L St  
 City/State/Zip Berkeley CA 94710  
 Phone 707 745-1048 FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**LICENSED CONTRACTOR** Lic No. # 737562

Name Kleeman Boehlen  
 Address 1741 Hawks Flight Court  
 City/State/Zip El Dorado Hills CA 95702  
 Phone 916-939-0500 FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**ARCHITECT/ENGINEER**

Name Buehler Buehler  
 Address 7300 Elson Blvd Suite 103  
 City/State/Zip SACRAM  
 Phone \_\_\_\_\_ FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**OWNER**

Name Pacific Bell  
 Address 3707 Kings Way DM B15  
 City/State/Zip SACRAM CA 95821  
 Phone 916-972-4928 FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: \_\_\_\_\_  
 → WORKER'S COMPENSATION POLICY # ARBONAUNT ins cov EXPIRATION DATE: 6-30-02

NATURE OF WORK IN DETAIL: Welded wire cage for switching equipment

OCCUPANT/TENANT: \_\_\_\_\_ VALUATION: \$ 2,000

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		
				B	I	SPR	ALARM		[H]	[Quad]	
(B)	(L)	P	M	E	(F)	S		(D)	PW	UTIL	
13 st	13 st				13 B5F			2E.B			

COMMENTS: \_\_\_\_\_

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

Date of Request: \_\_\_\_\_  
By: \_\_\_\_\_

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION  
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: 8291 Fruitridge Rd.

Assessor's Parcel Number: 061-0171-005

Previous Use: exist. Pac Bell telecom/equip. bldg.

Description of Request/Proposed Use: interior addition of new spaces for relocation tenants

Is This a Change of Use? NO

Prior Applications for Project Site(P#, Z#, DRPB#): N/A Zoning Designation: M-2S

Comments: interior work only

Are There Any Planning Issues?: (circle one) YES  NO

- \* Staff Site Plan Check Required? (Circle one) YES  NO
- \* Field Inspection Required? (Circle one) YES  NO
- \* Design Review/Preservation Required?: (Circle one) YES  NO

Planning Review by/Date: PHIL REED 8/07/01

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL