

CITY OF SACRAMENTO

Permit No: 9810890

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 83 SCRIPPS DR SAC

Sub-Type: ACOM

Parcel No: 2950370004

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

AUGER DOREEN
83 SCRIPPS DR
SACRAMENTO CA 95825

Nature of Work: INTERIOR 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 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);

X 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 11/16/98 Owner Signature Doreen Auger

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 11/16/98 Applicant/Agent Signature Doreen Auger

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

X (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 11/16/98 Applicant Signature Doreen Auger

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.

CITY OF SACRAMENTO
APPLICATION FOR ~~RENOVATION~~ BUILDING PERMIT

9810890

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # _____ Insp. Area 1

Applicant **MUST** complete ALL Unshaded areas this page only

ADDRESS 63 Scripps Drive # 110 Suite #110
PARCEL # 295-0370-004

CONTACT Name <u>Doreen Auger</u> Address <u>4204 Boone Lane</u> <u>SAC CA</u> Zip <u>95821</u> Phone <u>(916) 641-6843</u> FAX <u>(916) 920-4477</u>		LICENSED CONTRACTOR Lic No. # _____ Name _____ Address _____ _____ Zip _____ Phone _____ FAX _____	
ARCHITECT/ENGINEER Name <u>JACK STRIENGL</u> Address <u>(on file - architect)</u> _____ Zip _____ Phone <u>157-5650</u> FAX _____		OWNER REDACTED Name <u>Doreen Auger</u> Address <u>4204 Boone Lane</u> <u>SAC CA 95821</u> Zip _____ Phone <u>487-5252</u> FAX _____	

→ Will the permittee have any employees on the jobsite? Yes No

→ If yes, WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NAME OF INSURANCE COMPANY: STATE FUND

NATURE OF WORK IN DETAIL: ~~RENOVATION OF EXISTING SPACE~~ ~~RENOVATION OF EXISTING SPACE~~
tenant improvement
interior remodel

DBA: _____ VALUATION: 12,000 - 13,000

FLOOD STATUS:				S.C.A.T.							
JOB DESCRIPTION		BLDG	SHEL	APT	TI (X)	REM ()	SW	FIRE	ADD	OTH	
INSP. DISCIPLINES		BLDG		MECH		PLUMB		ELEC		SITE FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Red. Y/N		Fed Code	Vio. File		
<u>13</u>	<u>13</u>	<u>13</u>	<u>M</u>	<u>B</u>	<u>F</u>	<u>Spr</u>	<u>Alarm</u>	<u>D</u>	<u>R</u>		

COMMENTS:
All disciplines OK need one or more
shortened drawing to issue -
will be Monday 11-16-98

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

BLDGFRM. (REV 05/98) WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS Yes No

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement. (yes or no) NO

2. I (~~have~~ have not) _____ signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name NO Address _____
City _____ Telephone _____
Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name NO Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name Address Phone Type of Work

DAVE Stewart	Alber Point RD (783)	Rosville Ca	Drywall walls
Susan / DAN Roy	M SIMMONS WAY (054)	Folsom Ca	over-see Building BUILT w/owner
	→ help with ceiling/electrical	(916) 989-0753	

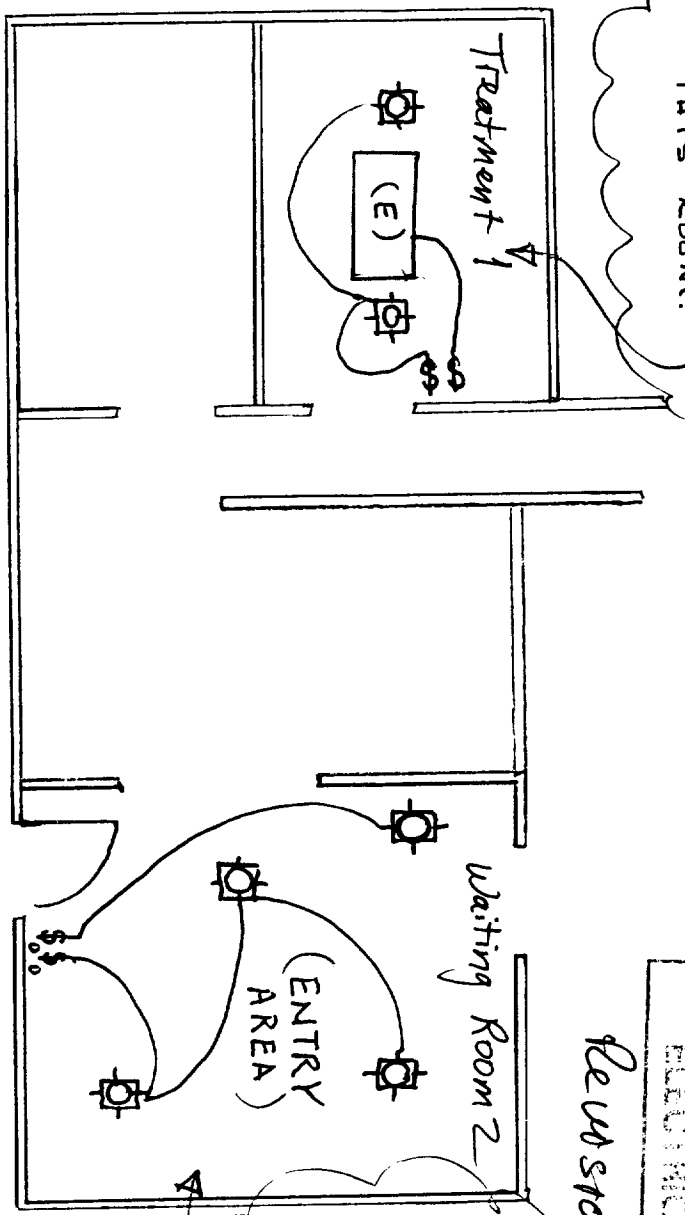
Signed [Signature]
Job Address 83 Scrapps Pkade Syc Date 11/16/05
Permit No.: _____

Field

ADDITIONAL RECESS LIGHTING FOR AUGER BEAUTY SALON

fluorescent

NOTE:
 TWO FIXTURES
 ADDITIONAL FOR
 THIS ROOM.



APPROVED PER 1993
 NATIONAL ELECTRICAL CODE
 AND CITY OF SACRAMENTO
 AMENDMENTS:
 12-15-98 *John*
 ELECTRICAL DIVISION

Revised

NOTE:
 EXISTING FIXTURES
 REMOVED AND
 REPLACED WITH FOUR
 RECESSED EXNS.
 THIS ROOM

EDMONDS ELECTRIC LICENSE # 709098 (530 633 9156)

83 Scripps Dr 98-10890c Rev.

MEMORANDUM

Sacramento Fire Department

To: BUILDING DEPARTMENT

Date: 12-17-98

From: Gordon Duncan,
Fire Marshal

Subject: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

83 SCRIPPS DRIVE #10

has been conducted by Inspector R. Robles

on 12-16-98.

98-10890-C
Permit Number

896 sq
Square Footage

Remodel
Type Inspection

The system is acceptable by this department.



By: Ross L. Woodman,
Fire Prevention Officer II

TJ-220

F. D. Reference Number