

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9906968
Insp Area: 3

Site Address: 5370 SOUTH WATT AV SAC
Parcel No: 063-0053-021 BUILDING C

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

CONTRACTOR
BUZZ OATES ENTERPRISES
8615 ELDER CREEK RD
SACRAMENTO CA 95828

OWNER
BUZZ OATES ENTERPRISES II
8615 ELDER CREEK RD 200
SACRAMENTO CA 95828

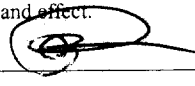
ARCHITECT

Nature of Work: CONCRETE TILT UP WAREHOUSE

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 Self (Bo E) 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.

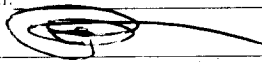
License Class AAB License Number 702621 Date 14 Feb 95 Contractor Signature 

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.)

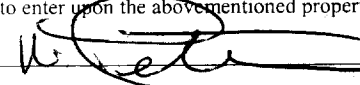
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code) The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. _____ B & PC for this reason: _____

Date May 14 00 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 19 May 00 Applicant/Agent Signature 

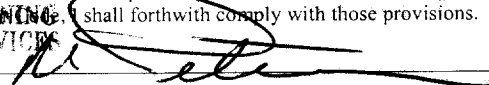
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

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 CALIFORNIA INDEMNITY INS Policy Number N5048119D Exp Date 03/01/2000

(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.

Date 19 May 00 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.

CITY OF SACRAMENTO
APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

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

ACTIVITY # 9906968 Insp. Area 3C

Applicant MUST complete ALL Unshaded areas

ADDRESS 5370 S. Watt Bldg C Suite Bld C

PARCEL # 063-0053-021 (294018) 40 BC MERCED

CONTACT		LICENSED CONTRACTOR Lic No. # <u>20621</u>	
Name <u>Michael J. Peters</u>	Name <u>Buzz Oates Guler, II</u>		
Address <u>8615 Elder Creek Rd 95828</u>	Address <u>8615 Elder Creek Rd 95828</u>		
Phone <u>391-3600</u> FAX <u>381-4707</u>	Phone <u>391-3600</u> FAX <u>381-4707</u>		
E-mail <u>mpeters@buzzoates.com</u>	E-mail <u>rm.peters@buzzoates.com</u>		
ARCHITECT/ENGINEER		OWNER	
Name <u>Leo McGlade & Assoc</u>	Name <u>Buzz Oates Guler, II</u>		
Address <u>3417 Aeden Way Suite A</u>	Address <u>8615 Elder Creek Rd 95828</u>		
Phone <u>488-8380</u> FAX <u>488-2062</u>	Phone <u>3813600</u> FAX <u>386-0760</u>		
E-mail	E-mail <u>386 0760</u>		

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: Calif. Indemnity
 → WORKER'S COMPENSATION POLICY # N5048119D EXPIRATION DATE: 3/1/00

NATURE OF WORK IN DETAIL: Spec tilt-up Concrete Shell
Buildings Building C - 22,940 SF
EST. Site 300 X SF BLDG.

OCCUPANT/TENANT: _____ VALUATION: \$ _____

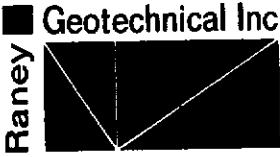
FLOOD STATUS: <u>ZONE X</u>		S.C.A.T. <u>XI</u>								
JOB DESCRIPTION		BLDG	<u>SHELL</u>	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>	<u>SITE</u>	<u>FIRE</u>			
# Stories	Lst. flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Viol. File		
		<u>22,940</u>		<u>S-1</u>	<u>III-N</u>	SPR ALARM	<u>10</u>	[H] [Quad]		
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>PW</u>	<u>UTIL</u>	

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

NOISE FREE ONLY



DAILY FIELD REPORT

Project #: 146-315-01	Date: 8-17-01	Day: FRI	Weather: CLOUDY	PAGE: 1/1
Project Name: SO. WPT. BUS. PK. II		Project Location: SO. WPT.		Permit #:
Client: BOZZ CATS		Client's Representative:		
General Contractor:		Superintendent: M...		
Sub-Contractor:		Other Persons Contacted:		
Type of Work: REPAIR JCS	Location/Element: PAVEMENT	Equipment used:	Time: 1.5	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: L&L Mc LAUGHLIN 5-6-99				
<p>Received approval from BOZZ CATS for 10' of PAVEMENT BELOW</p> <p>DATE 8/17/01</p> <p>17 P.M. 8/17/01</p> <p>INSPECTED BY: [Signature] APPROVED BY: [Signature]</p> <p>DATE: 8/17/01</p>				
<p>ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER:</p>				
Copy received by/given to: [Signature]		Arrived: 7:30	Departed:	Report by: [Signature]

DAILY FIELD REPORT

Blly 2

Project #: 1416-315-01	Date: 9/11/01	Day: THURS	Weather:	PAGE: 11
Project Name: South Hill Business Park	Project Location: SOUTH HILL AVE SAC, CA		Permit #:	
Client: D.O.C.		Client's Representative:		
General Contractor:		Superintendent:		
Sub-Contractor: Blue Line		Other Persons Contacted:		
Type of Work: Reinforcement of concrete	Location/Element: Bldg C	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: See attached plans				
<p><i>The reinforcement was placed in accordance with the plans for Panel # 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.</i></p> <p><i>All reinforcement was placed in accordance with the plans and specifications. No deviations were noted.</i></p> <p><i>All work was completed in accordance with the plans and specifications. No deviations were noted.</i></p>				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER:				
Copy received by/given to: <i>Mike</i>	Arrived:	Departed:	Report by: <i>[Signature]</i>	

Certification of Compliance

School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT

OWNER'S NAME Buzz Adams
 OWNER'S ADDRESS 2115 Elder Creek Rd Sec 95626
 PROJECT ADDRESS 5370 South Wattle Av
 PARCEL NUMBER 063-0053-021 LOT NO. _____
 SUBDIVISION NAME S. WATT Business Park
 NUMBER OF UNITS 1

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT Director of Construction Management
 DATE 11 Dec 99 PHONE NUMBER 381 3100

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 99-06768
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 22,940
 SIGNATURE [Signature]
 TITLE Control Manager DATE Nov 9 1999

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT EGUSD
 DISTRICT CERTIFICATION NO. 25042
 EXEMPT _____ COMMENTS _____

RESIDENTIAL/APT/CONDO	_____	SQ FT X \$	= \$	<u>17570.20</u>
COMMERCIAL/INDUSTRIAL	<u>22,940</u>	SQ FT X \$	<u>.03133</u>	<u>\$ 7114.46</u>
OTHER FEE	_____	TYPE	_____	_____
TOTAL FEES COLLECTED	<u>22,940</u>	X	<u>.33</u>	= \$ <u>75,70.20</u>

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature] DATE MAR 16 2000
 TITLE _____

PAID
MAR 16 2000
 Facilities Planning
 Elk Grove Unified School District
 3rd copy: Applicant

Original: School District 1st copy: School District 2nd copy: Building Department

COUNTY SANITATION DISTRICT NO. 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE *PM*
PERMIT AND CALCULATION SHEET *87*

APPLICATION NO:		BLDG PERMIT NO: <i>City</i>	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
		<i>25 1 1 3 2011</i> THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1		COMMERCIAL USE	UNITS
SRCSD			
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	<i>2.00</i>		
APN:			
DESCRIPTION/ SUBDIVISION		LOT: <i>101</i>	
PROPERTY ADDRESS <i>5370 S. Watt Ave</i>			
OWNER <i>F. J. ...</i>			
MAILING ADDRESS <i>...</i>			
CITY-STATE-ZIP <i>...</i>		PHONE <i>...</i>	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE <i>[Signature]</i>			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

RECEIPT