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

Insp Area:

Permit No: 0602988

CITY OF SACRAMENTO Thos Bros:

318F6

Site Address: 8626 ELDER CREEK RD SAC

MAY 0 3 2006

Sub-Type: TI

Parcel No:

BUILDING C

Housing (Y/N):

**NEW CITY HALL** 

ARCHITECT

<u>CONTRACTOR</u>
B AND D CONSTRUCTION SERVICES 130 BURNHAM COURT FOLSOM, CA 95630

**OWNER** 

Nature of Work: BUILD 549 SQ FT OF OFFICE SPACE IN EXISTING 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 Address Lender's Name LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that arm 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. Date 3 My OL License Class B-\ License Number 833022 \_\_ 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). B & PC for this reason: \_I am exempt under Sec.\_ Owner Signature Date 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes. \_ 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:

NO EMPLOYEES

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, Ishall 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 3 My 06

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 OF THE LABOR CORE INTERPRETATION OF THE COST OF THE COST OF THE LABOR CORE INTERPRETATION OF THE COST OF THE COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

## APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO PLANNING & BUILDING DEPARTMENT PERMIT SERVICES SECTION 1231 I Street, Suite 200 Sacramento, CA 95814 (916) 264-7619 FAX (196) 264-7046	ACTIVITY # Isnp. Area    October 2988   State   State
ADDRESS <u>8626</u> <u>Elder</u> (reek PARCEL# <u>064-0020-001</u>	12d Suite SLDG C
Name Marty Bechtel  Street Address 86/5 Elder ereen 12cl  City/State/Zip Sacramento, CA 95828  Phone 997-24/1 FAX 381-9/01  E-mail:  ARCHITECT/ENGINEER	Name 13 + 12 Construction  Address 130 134 rn 44 m Ct.  City/State/Zip Folsom, (A 95-630  Phone 984-8995 FAX 984-1563  E-mail:  OWNER
Name <u>Carol Vac 4</u> Address <u>180 130x 1891</u> City/State/Zip <u>Juc 4 50 4 4 9 5 6 4 2</u> Phone 204 - 223 - 3450 FAX E-mail:	Name   MLO + 130   D  Address   8615   Elder Cree4   Rd  City/State/Zip   Sq cramento (4 45828)  Phone   981-3600   FAX 381-9/01  E-mail:
Will permittee have any employees on the jobsite? No New Yes → INSURANCE CO: American Zarich  → WORKER'S COMPENSATION POLICY # WC 3486802 EXPIRATION DATE: L/-1-06  NATURE OF WORK IN DETAIL: Construct 549 SF of office	
OCCUPANT/TENANT: 1000 Spee Spee C	VALUATION: \$ 18, 320 000
SCAT.     SW   FIRE   ADD   OTHER     INSPECTION DISCIPLINES   BLDG   MECH   PLUMB   ELEC   SITE   FIRE	
COMMENTS:	
REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Yes No	