

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9712721
Insp Area: 4

Site Address: 1962 SAN JUAN RD SAC
Parcel No: 2250230061 #41, 42

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

CONTRACTOR

OWNER

ARCHITECT

CERTE APARTMENT INVESTMENTS LTD
4400 ANTELOPE RD
ANTELOPE CA 95833
Phone: 916-348-6462

Phone:

Phone:

Nature of Work: INSTALL LAUNDRY HOOKUPS INCL PLBG, VENT, ELECT

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 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 or 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 or 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 9-12-97 Owner Signature [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.

Date 9-12-97 Applicant/Agent Signature [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 Accordia Reevera Policy Number 696214910

____ (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 9-12-97 Applicant Signature [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 BUILDING PERMIT
 DEPARTMENT OF PLANNING AND DEVELOPMENT
 BUILDING INSPECTION DIVISION
 1231 I Street, Room 200
 Sacramento, CA 95814
 (916) 264-7619 FAX 264-7046

9712721

WICKETS Comp Policy # 696614910
 COMPANY Aradia Lease EXP. DATE 12/19

ADDRESS 1962 San Juan Rd P.C. # _____
 PARCEL # 225-0230-061 SUITE # 41/42
 AREA # _____

CONTACT
 NAME Chris Rokey LICENSED CONTRACTOR
 ADDRESS 2028 San Juan Rd NAME _____
Sac ZIP 95833 ADDRESS _____
 PHONE 925-8658 FAX: () _____ PHONE _____ ZIP _____

ARCH./ENG. OWNER/TENANT
 NAME _____ NAME Concepcion
 ADDRESS _____ ADDRESS 4400 Antelope Rd
 _____ ZIP _____ PHONE 925-4000 ZIP 95843
 PHONE _____ PHONE 348-6462

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE? YES NO
 NATURE OF WORK IN DETAIL:

install laundry hookups including plumb, vent, elec.

D.B.A. Woodbridge Apts VALUATION 1000⁰⁶
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS _____ S.C.A.T. _____

JOB DESCR. BLDG SHEL APT TI() REM() SW FIRE ADD OTH
 INSP. DISCIPLINES BLDG MECH PLUMB ELEC SITE FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	USE ZONE	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FED. CODE	VIO. FILE
B	L	P	M	E	F	S	D	R

COMMENTS: _____

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) yes

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 _____ 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 _____ 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

Signed CKR

Job Address 1962 San Juan Rd # 41/42 Date 9-11-97

Permit No.: _____



EXHIBIT 1

I have read and am familiar with the contents of City's standard Owner-Builder Notification and Owner-Builder Verification, as required by California Health and Safety Code Section 19830 and 19831.

I authorize my agent(s) CHRIS ROCKEY
to sign the Owner-Builder Verification on my behalf.

and authorization to sign for permits.

Signature

R. Schmitt

Print Name

ROBIN SCHMITT

Address

4400 ANTELOPE RD
ANTELOPE CA 95843

Telephone

348-6462

ACORD. CERTIFICATE OF INSURANCE CIS 06172 ISSUE DATE (MM/DD/YY) 01/06/97

PRODUCER
ACORDIA REEVES INS SRVCS
LICENSE NO. 0553499
1750 CREEKSIDE OAKS #220
SACRAMENTO CA 95833

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- COMPANY LETTER **A** CAL COMP INSURANCE CO
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED
CERTE* APARTMENT INVESTMENTS, LTD.
4660 LA JOLLA VILLAGE DR
SUITE #1080
SAN DIEGO, CA 92122-4601

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR. <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.				GENERAL AGGREGATE	\$
					PRODUCTS-COMP/OP AGG.	\$
					PERSONAL & ADV. INJURY	\$
					EACH OCCURRENCE	\$
					FIRE DAMAGE (Any one fire)	\$
					MED. EXP. (Any one person)	\$
					COMBINED SINGLE LIMIT	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOG <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE	\$
					EACH OCCURRENCE	\$
					AGGREGATE	\$
A	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	G96C149410	12/01/96	12/01/97	STATUTORY LIMITS	
					EACH ACCIDENT	\$ 1,000,000
					DISEASE-POLICY LIMIT	\$ 1,000,000
					DISEASE-EACH EMPLOYEE	\$ 1,000,000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
SUBJECT TO TEN DAY NOTICE OF CANCELLATION FOR NON-PAYMENT OF PREMIUM

CERTIFICATE HOLDER

CITY OF SACRAMENTO
ATTN: BARBARA
1231 I STREET
SACRAMENTO CA 95814

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Clare Ruth Johnson

©ACORD CORPORATION 1990

171

CITY OF SACRAMENTO

100 AMP SUBPANEL

SUBMIT TWO COPIES

THIS COPY SHALL BE ON JOB SITE AT ALL TIMES

CONTRACTOR/OWNER _____ JOB ADDRESS: _____

LOAD CALCULATION - N.E.C. 220-30

TOTAL SQ. FT. _____

NUMBER	ITEM	WATTS	Air conditioning example (Not heat pump)
655	Sq. ft @ 3 watts per sq. ft.	1965	Compressor 20 amps Fan 5 amps
2	20 Amp. Appliance circuits @ 1,500 watts each	3000	Unit Total Load - 25 amps x 240V
1	Range (Nameplate Rating = N.P.R.) 7.4 kW @ 208V	2400	Electric Furnace @ N.P.R. - 6,000 watts X 65% = 3900 Watts
	Oven (N.P.R.)		Use 6000W., since it is larger.
	Cooking Units (N.P.R.)		Heat Pump Note: Be careful when doing load calculations where heat pumps are installed. The load for most heat pumps that are equipped with auxiliary heat strips will be larger under the demand for heat. For the purposes of load calculations only, on heat pumps, use 100% of the heat pump compressor and fans and 65% of auxiliary heat load to show total heat pump load.
1	Water Heater (N.P.R.)	1800	Heat Pump Example Compressor 20 Amps Fans 5 amps
1	Dishwasher (N.P.R.)		Heat Pump Load = 25A X 240V = 6,000
	Disposal (N.P.R.)		Aux. Heat Strip = 6,000W X 65% = 3,900W
	Washer [1500 watts min. - N.E.C. 220-16(b)] STACKABLE	3000	Total Heat Pump Load = 9,900W
	Dryer [5000 watts min. or N.P.R. if larger] N.E.C. 220-181.		
	Meters (N.P.R.)		
	Other (N.P.R.)		
	Other (N.P.R.)		
Air Conditioning Equipment			
Air Conditioning [cooling @ (N.P.R. X 100%)] =			Sub-Total = 17165 (Less 1st 10KW) - 10,000 @ 100% = 10,000 Watts
Electrical Heating @ (N.P.R.) X 65% =			Remainder @ 40% 7165 @ 40% 2866
NOTE: USE THE LARGEST LOAD - HEAT OR COOL =			Total Air Cond. and/or heat pump load = 6500 Watts
Heat pump (compressor & fans) X 100% = 3180			Total Service Load = 19366 Watts
Aux. heat strips (or elect. furnace) X 65% = 5200 (3380)			watts + 240V = 80.7 Amps
Total Heat Pump Load = 6500			
NOTE = AMPS X CIRCUIT VOLTAGE = WATTS			