

CITY OF SACRAMENTO

Permit No: 9807306

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 501 J ST SAC

Parcel No: 0060026018

# 610, 630

Sub-Type: ACOM

Housing (Y/N): N

CONTRACTOR

SANDSTROM CO THE
4200 SOUTH LAND PARK DR
SACRAMENTO CA 95822

OWNER

SACRAMENTO CORPORATE CENTER L P
1075 HOLLY JILL LN #300
GREENWICH CT 06830

ARCHITECT

Nature of Work: TI 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 296493 Date 3 18 98 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 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 3 18 98 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 Policy Number

(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 3 18 98 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 BUILDING PERMIT  
DEPARTMENT OF PLANNING AND DEVELOPMENT  
BUILDING INSPECTION DIVISION

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

9807306

ADDRESS 501 J street P.C. # 6306X  
 PARCEL # 006-0026-018-000 SUITE # 610 1630  
 AREA # \_\_\_\_\_

CONTACT  LICENSED CONTRACTOR Lic # 291649

NAME STAFFORD SPACE PLANNING  
 ADDRESS 7585 GOLD DR.  
 Loomis CA ZIP 95650  
 PHONE (916) 652-3400 FAX: (916) 652-7805

NAME SANDSTROM COMPANY  
 ADDRESS 4200 S. LAND PARK DR.  
 SACRO CA ZIP 95822  
 PHONE (916) 544-3800 FAX (916) 929-6738

ARCH./ENG.  OWNER

NAME STAFFORD SPACE PLANNING  
 ADDRESS 7585 GOLD DR  
 Loomis Ca ZIP 95650  
 PHONE (916) 652-3400

NAME Sacramento Corporate Center, LP  
 ADDRESS 501 J ST, Ste 605  
 Sacto. Ca ZIP 95814  
 PHONE (916) 492-9430 FAX (916) 492-9477

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE?  YES  NO

NATURE OF WORK IN DETAIL: MINOR REMODEL - NEW INT. PARTITIONS, NEW PAT,  
DEMOLITION, NO NEW HVAC, PUMBING OR LIGHTING.  
RELOCATE

D.B.A. \_\_\_\_\_  VALUATION \$69,000.00  
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	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FIRE ALARM	FED CODE	VIO. FILE
<u>6</u>			<u>B</u>	<u>I</u>	<u>Y/N</u>	<u>Y/N</u>		
<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>R</u>

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

Worker's Comp Policy #  
Company  
Exp. Date

CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION

# EXPRESS PLAN REVIEW

SUBMITTAL DATES					
First Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
7/13/98	1/1	1/1	1/1	1/1	1/1

PLAN CHECK # 6308 X  
 ADDRESS: 501 J ST  
 Commercial     Residential



ACCEPTED by (Staff):  
JACK

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY	13	JT	7/31/98						
STRUCTURAL	13	JT	7/31/98						
MECHANICAL/PLUMBING	13	MRM	7/31/98						
ELECTRICAL	13	AM	7/21/98						
FIRE									
PLANNING									

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

**CITY OF SACRAMENTO**  
 BUILDING INSPECTION DIVISION  
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

*As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form*

1. Business Name: Department of Corrections - Health Care Service Phone: 323-0229  
 Site Address: 501 J Street Suite: 610 9630  
 Business Owner/Representative: Janet Lewis (Street) (Zip) Phone: 323-0229  
 Nature of Business: Health Care Administration for Correctional Facilities  
 Property Owner: Continental Asset Management Phone: 492-9430  
 Address: 501 J Street Suite: 605  
Sacramento (City) Ca (State) 95814 (Zip)

2. Are you developing an undetermined tenant space? Yes \_\_\_ No X Is this permit for a shell building? Yes \_\_\_ No X

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes \_\_\_ No X

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes \_\_\_ No X

**CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.**

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes \_\_\_ No \_\_\_

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes \_\_\_ No \_\_\_

7. Is/Will your business be located within 1,000 feet of a school? Yes \_\_\_ No \_\_\_

If you answered "yes" to questions #6 and/or #7, complete the RMPP Informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes \_\_\_ No \_\_\_

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

**Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.**

**PENALTY:** Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Sacramento Corporate Center LP  
By Continental Asset Management, Inc  
Sarah Madrell (Print)  
[Signature] (Signature) 7/21/98 (Date)

BID Use Only: Plan Ck# <u>6306X</u> Permit # <u>9807306</u> OK to issue prmt? Y <u>08-1-99</u> F.D. Appr Req'd? Yes No init date	
Hold on Certificate of Occupancy? Yes <u>NO</u>	
Fire Dept. Use Only: OK to issue permit? init ___ date ___ OK to issue Certificate of Occupancy? init ___ date ___	