

CITY OF SACRAMENTO

Permit No: 9809699

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Site Address: 3499 BUSINESS DR SAC

Sub-Type: COM

Parcel No: 0150311043

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

SAC VALLEY ALARM SECURITY SYSTEM

EKSTROM DONALD C/ANNE H

5933 FOLSOM BL
SACRAMENTO CA

95819

2555 3RD ST
SACRAMENTO CA

95818

Nature of Work: FIRE ALARM

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 402532 Date 10-29-98 Contractor Signature *Stanley F. Sporn*

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 10-29-98 Applicant/Agent Signature *Stanley F. Sporn*

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 _____

(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 10-29-98 Applicant Signature *Stanley F. Sporn*

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
BUILDING INSPECTION DIVISION
COMMERCIAL PLAN CHECK FEE RECEIPT
(916) 264-7619

9809699

YOUR PLAN CHECK # IS: 6430

PROJ. VAL. \$ 900

DATE 9-30, 19 98

PLAN CHECK FEE \$ 29⁰⁰

PAID
CITY OF SACRAMENTO

PARTIAL FEE (BALANCE OF P.C. FEE DUE \$ _____)

PROJECT ADDRESS: 3499 BUSINESS DR

SEP 30 1998

JOB DESCRIPTION:

BLDG SHELL APT T.I. REM SITE FIRE ADD OTHER

NEIGHBORHOOD PLANNING
AND DEVELOPMENT SERVICE

RECEIVED OF SAC VALLEY ALARM IN ACCORDANCE WITH SECTION 9.51
OF THE SACRAMENTO CITY BUILDING CODE FOR SERVICES TO BE RENDERED IN CHECKING THE PLANS SUBMITTED
PLANS ARE SCHEDULED FOR THE FOLLOWING REVIEW:

BLDG L/S PLUMB MECH ELECT FIRE SITE DEV. FEES P.W. ROUTE

RECEIVED BY: JM

COMBPT. WK1
12/14/98

Permit # 9809699

CITY OF SACRAMENTO
BUILDING INSPECTIONS DIVISION
PERMIT SERVICES SECTION

PCI 6430

Address 3999 BUSINESS DR

This application will need one or more of the following items before it can be issued.

- Owner/Builder form
- Current Certificate of Worker's Comp. (City of Sacramento listed as Certificate Holder.)
- Letter of Authorization for employees to sign (Contractor).
- School Impact Fee Form
- Driveway Permit - 1231 I Street, #200, 264-7995
- County Regional Sanitation Permit (Howard Richmond)
827 - 7th Street, Rm. 105, Window 10 - Ph: 875-6679
- Special Inspection Fees
- PERMIT FEES \$ 79.52
- A-99 Flood Waiver Form
- Hazardous Materials Form
- SCAT
- Other: _____

Date Notified 10/21
Initials [Signature]

Plans in Bin # 99
"D" By: _____

9809699

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION
1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # 6430 Insp. Area 3

Applicant MUST complete ALL Unshaded areas
this page only

ADDRESS ~~3499~~ 3499 BUSINESS DRIVE Suite _____
PARCEL # 015 0311-043

CONTACT	LICENSED CONTRACTOR Lic No. # <u>402532</u>
Name _____	Name <u>SAC VALLEY ALARM</u>
Address _____	Address <u>SECURITY SYSTEMS INC</u>
Zip _____	<u>5933 FOLSOM BLVD</u> Zip <u>95019</u>
Phone _____ FAX _____	Phone <u>452-1461</u> FAX _____
ARCHITECT/ENGINEER	<u>CA 600-4</u> OWNER/ XXXXXXXXXX
Name _____	Name <u>STARKSON CONSTRUCTION</u>
Address _____	Address _____
Zip _____	<u>5665 POWERLINE RD</u> Zip <u>95825</u>
Phone _____ FAX _____	Phone <u>381-0113</u> FAX _____

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

→ If yes, WORKER'S COMPENSATION POLICY # N5042144 F EXPIRATION DATE: 5-26-99

NAME OF INSURANCE COMPANY: CALIFORNIA INDEMNITY

NATURE OF WORK IN DETAIL: CONNECT TO SPRINT FIRE SWITCH AND TAMPERS. INSTALL FIRE CONTROL SMOKE, SMOKE HORN, PULL STATION.

DBA: _____ VALUATION: 900.00

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

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
BLDGFRM. (REV 05/98) WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS Yes No