

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9914396

Insp Area: 1

Site Address: 2225 16TH ST SAC

Parcel No: 009-0213-024

Sub-Type: AOTHR

Housing (Y/N): N

CONTRACTOR

FILLNER CONST.
3633 SEAPORT BL
WEST SAC, 95691

OWNER

ATLANTIC RICHFIELD CO
CERRITOS, CA
90701

ARCHITECT

Nature of Work: BATHROOM ADDTION AND 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 N/A 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 A-B-142 License Number 177928 Date _____ Contractor Signature D. R. P. R.

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 5-10-00 Applicant/Agent Signature D. R. P. R.

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 FRONTIER INS. CO Policy Number W202300347 Exp Date 10/01/2000

____ (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 5-10-00 Applicant Signature D. R. P. R.

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

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

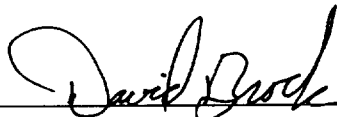
Building Address: 2225 16TH STREET Permit No. 9914396
Building Use: COMMERCIAL RETAIL/RESTROOM Occupancy: M
Building Owner: ARCO PRODUCTS Construction Type: V1
Owner Address: 4 CENTER POINT DR Sprinkled? [] Yes [X] No
Portion of Building Occupied: ALL Area: 196 Sq. Ft.

9/29/00

Date

DAVE BROCK

By:Print



Sign

DENNIS RICHARDSON

CHIEF BUILDING OFFICIAL

[Finaled By:]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

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

ACTIVITY # 9914396 Insp. Area 1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2225 16th ST Suite _____
 PERMIT # 009 0213 02A

CONTACT	LICENSED CONTRACTOR Lic No. # _____
Name <u>TIM FAKE</u>	Name <u>TO BE DETERMINED</u>
Address <u>330 SUIVIE BLVD # 200</u>	Address _____
Phone <u>916 244</u> FAX <u>916 2000</u>	Phone _____ FAX _____
E-mail _____	E-mail _____
ARCHITECT/ENGINEER	OWNER
Name <u>AT ASSOCIATES</u>	Name <u>ARCO PRODUCTS</u>
Address <u>330 SUIVIE BLVD # 200</u>	Address <u>4 CENTERPOINT DR</u>
Phone <u>916 244</u> FAX <u>916 2606</u>	Phone <u>(714) 670-5300</u> FAX _____
E-mail _____	E-mail _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: BATHROOM ADDITION / REMOVE N EXIT DOOR

OCCUPANT/TENANT: ARCO PRODUCTS VALUATION: \$ 31,500.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD <input checked="" type="checkbox"/>	OTH
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" type="checkbox"/> SITE	FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y <input type="checkbox"/> N <input checked="" type="checkbox"/>		Fed Code	Vio. File	
		<u>19654</u>		<u>M</u>	<u>V-I</u>	SPR	ALARM	<u>18</u>	[H]	[Quad]
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	F	S		D	PW	UTIL

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided M Faxed

Assessor Corp

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 2ECO Products Co.
 OWNER'S ADDRESS 2225 16th St. Connelton IA
 PROJECT ADDRESS 2225-16th St. Connelton IA
 PARCEL NUMBER _____ LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS _____

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 CEO
 DATE 5/11/00 PHONE NUMBER (319) 572-1155

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 9914396
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 196 SQ. FT.
 SIGNATURE KIM ROBINSON
 TITLE BUILDING INSPECTOR I DATE 05.11.00

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT 62510
 DISTRICT CERTIFICATION NO. 6781
 EXEMPT _____ COMMENTS _____

RESIDENTIAL/APT/CONDO	SQ FT X \$	= \$	
COMMERCIAL/INDUSTRIAL	<u>196</u> SQ FT X \$ <u>.28</u>	= \$	<u>54.88</u>
OTHER FEE	TYPE	SQ FT X \$	= \$
		<u>05-11-00P12:04 RCVD</u>	= \$
TOTAL FEES COLLECTED			<u>54.88</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]
 TITLE CIVIC INTERESTS DATE 5/11/00

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
First Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
12/22/99	/ /	1/28/00	/ /	/ /	/ /

PLAN CHECK # 991396 C
 ADDRESS: 2225 16th St
 Commercial Residential

ACCEPTED by (Staff):

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY	03	Gyl	12/22						
STRUCTURAL	03	Gyl	12/22						
MECHANICAL/PLUMBING	12/13	KAL	13/13						
ELECTRICAL	3	JM	12/22/99						
FIRE									
PLANNING *	3	W	12/22/99						

STAFF COMMENTS:

* (N) Track Enclosure & Relocated wheel stops on St + A51-1
