

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0604680

Insp Area: 1

Thos Bros: 297C4

Site Address: 455 CAPITOL ML SAC

Parcel No: 006-0143-039

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

CAL*WEST FIRE PROTECTION
11431 SUNRISE GOLD CIR STE D
RANCHO CORDOVA CA 95742

OWNER

MONTEREY GREAT PACIFIC CORP
455 CAPITOL MALL #100
SACRAMENTO, CA 95814

PAID
CITY OF SACRAMENTO ARCHITECT

APR 06 2006

Nature of Work: DEMO 19 DOMESTIC SUPPLIED NEIGHBORHOOD BACKS CABINETS TO REMAIN FOR DRY CHEM FIRE EXTINGUISHERS) AND DEVELOPMENT SERVICES

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 CVC License Number 765218 Date 4-6-06 Contractor Signature [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 above mentioned property for inspection purposes.

Date April 6, 2006 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 STATE COMP. INS. FUND Policy Number 565-000159 Exp Date 05/22/2006

(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 April 6, 2006 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.

455

CAPITOL MALL COMPLEX

November 9, 2005

**Sacramento City Fire Department
Fire Prevention Division
5770 Freepoint Blvd. Ste. 200
ATTENTION: Troy Malaspina, Fire Marshal**

Mr. Malaspina,

Our facility is currently looking into replacing the aging domestic water booster pump system that serves our 8 story office building. This system also serves a portion of the buildings original domestic fire hose system.

It is my understanding that since our facility was fully fire sprinklered in 1991, it may not be required to maintain this fire hose system. This same building is also served by two dry standpipes.

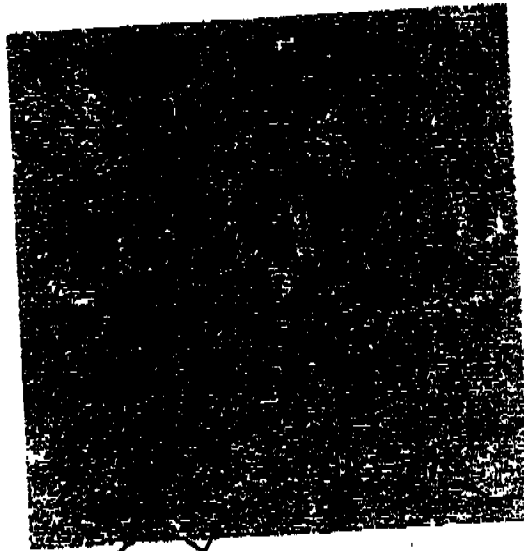
We are asking that we be allowed to permanently remove the domestic fire hose system from service. The valves and hoses would be removed and lines capped. In most cases the cabinets would remain as vessels for the dry chemical fire extinguishers that we will continue to maintain.

Thank you for your consideration.

Sincerely,
455 Capitol Mall Complex

Mark Sullivan

Mark Sullivan
Chief Engineer



*This is acceptable
since they are fully sprinklered.*

[Handwritten signature]

Approved
[Handwritten signature]

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
 1231 I Street, Suite 200 or 2101 Arena Bl., 200
 Sacramento, CA 95814 Sacramento, CA 95834
 (916) 264-5656, 1-866 EZ PERMIT or www.cityofsacramento.org

ACTIVITY # #0604680	Insp. Area
-------------------------------	-------------------

Applicant to complete all areas down to valuation

ADDRESS ASS CAPITOL MALL **Suite** _____

PARCEL # _____

CONTACT		LICENSED CONTRACTOR Lic No. # <u>765210</u>	
Name <u>CAL*WEST FIRE PROTECTION, INC.</u>		Name <u>CAL*WEST FIRE PROTECTION, INC.</u>	
Street Address <u>1131 SURPRISE GOLD CIR, SUITE D</u>		Address <u>1131 SURPRISE GOLD CIR, SUITE D</u>	
City/State/Zip <u>RALPHO CORDOVA, CA 95742</u>		City/State/Zip <u>RALPHO CORDOVA, CA 95742</u>	
Phone <u>916-951-1700</u> FAX <u>916-951-1727</u>		Phone _____ FAX _____	
E-mail: <u>cfpi@ascifire.com</u>		E-mail: <u>cfpi@ascifire.com</u>	
ARCHITECT/ENGINEER		OWNER	
Name <u>N/A</u>		Name <u>MONTEREY & GREAT PACIFIC CORP.</u>	
Address _____		Address <u>ASS CAPITOL MALL, SUITE 215</u>	
City/State/Zip _____		City/State/Zip <u>SACRAMENTO, CA 95814</u>	
Phone _____ FAX _____		Phone <u>916 444-5475</u> FAX <u>916 444-7117</u>	
E-mail: _____		E-mail: _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Fund
 → WORKER'S COMPENSATION POLICY # 159-2004 EXPIRATION DATE: 5-22-06

NATURE OF WORK IN DETAIL:
DEMOLITION OF 19 DOMESTIC SUPPLIED FIRE HOSE PACKS.

OCCUPANT/TENANT: _____ **VALUATION: \$** 2211.00

FLOOD STATUS						S.C.A.T.								
JOB DESCRIPTION						BLDG <input type="checkbox"/>	SHELL <input type="checkbox"/>	APT <input type="checkbox"/>	TI () <input type="checkbox"/>	REM () <input type="checkbox"/>	SW <input type="checkbox"/>	FIRE <input type="checkbox"/>	ADD <input type="checkbox"/>	OTHER <input type="checkbox"/>
INSPECTION DISCIPLINES						BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1 st 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	PW	UTIL				

COMMENTS:

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