

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9914238
Insp Area: 4

Site Address: 3555 AUBURN BL SAC
Parcel No: 240-0342-005 BLDG B

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

CONTRACTOR
UNGER CONSTRUCTION
2112 SUTTERVILLE RD
SACRAMENTO CA 95822

OWNER
COUNTY OF SACRAMENTO
4936 CRESTWOOD WY
SACRAMENTO CA 95822

ARCHITECT

Nature of Work: 4530 SQ FT DORMITORY.. BLDG B

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 B,A License Number 306690 Date 6-8-00 Contractor Signature See OL

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 6-8-00 Applicant Agent Signature See OL

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 FUND Policy Number 692-98 UNIT 0002442 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 6-8-00 Applicant Signature See OL

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.

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 _____
 OWNER'S ADDRESS _____
 PROJECT ADDRESS 3555 Auburn Ry (Bld B)
 PARCEL NUMBER _____ LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS 7

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 _____
 TITLE OF APPLICANT _____
 DATE 4/17/00 PHONE NUMBER _____

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 1.1 253
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA _____
 SIGNATURE _____ DATE 4/17/00
 TITLE _____

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT SAN JUAN UNIFIED SCHOOL DISTRICT
 DISTRICT CERTIFICATION NO. 55-00-7788 / 755
 EXEMPT COMMENTS Plan filed for rezoning

| | | | | | |
|-----------------------|--------------|------------|----------|------|----------|
| RESIDENTIAL/APT/CONDO | <u>4,530</u> | SQ FT X \$ | <u>0</u> | = \$ | <u>0</u> |
| COMMERCIAL/INDUSTRIAL | | SQ FT X \$ | | = \$ | |
| OTHER FEE | TYPE | SQ FT X \$ | | = \$ | |
| TOTAL FEES COLLECTED | | | | = \$ | <u>0</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 Richard J. Edwards
 TITLE _____ DATE 4/24/00

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

| | |
|---|--|
| BUILDING OWNER'S NAME CHILDRENS RECEIVING HOME | For Insurance Company Use: Policy Number |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 3555 AUBURN BOULEVARD | Company NAIC Number |
| CITY SACRAMENTO | STATE CA |
| | ZIP CODE 95821 |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 240-0342-005 | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) DORM - B BLDG | |
| LATITUDE/LONGITUDE (OPTIONAL) (##'-##"-##.##" or ##.####") | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 |
| SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: | |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | |
|--|--------------------------------------|---|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER City of Sacramento 060266 | B2. COUNTY NAME SACRAMENTO | B3. STATE CALIFORNIA |
| B4. MAP AND PANEL NUMBER 060266 0005 | B5. SUFFIX F | B6. FIRM INDEX DATE JULY 6, 1998 |
| B7. FIRM PANEL EFFECTIVE/REVISED DATE 7 APRIL 6, 1999 | B8. FLOOD ZONE(S) AE | B9. BASE FLOOD ELEVATION(S) (Zone AO use depth of flooding) 63 |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): | | |
| B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: | | |

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

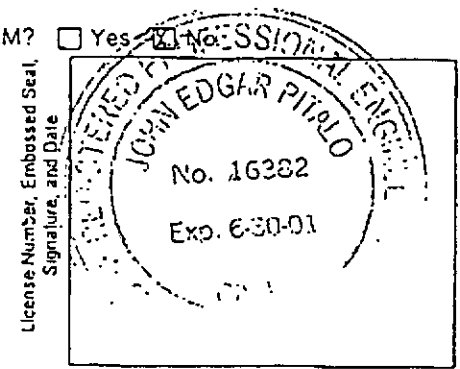
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, ARIA/AE, ARIA1-A30, ARIAH, ARIA/O
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum NGVD Conversion/Comments

Elevation reference mark used 12-14 Does the elevation reference mark used appear on the FIRM? Yes No

| | |
|--|-----------------------------|
| o a) Top of bottom floor (including basement or enclosure) | <u>76</u> <u>50</u> ft.(m) |
| o b) Top of next higher floor | <u>NA</u> <u> </u> ft.(m) |
| o c) Bottom of lowest horizontal structural member (V zones only) | <u>NA</u> <u> </u> ft.(m) |
| o d) Attached garage (top of slab) | <u>NA</u> <u> </u> ft.(m) |
| o e) Lowest elevation of machinery and/or equipment servicing the building | <u>77</u> <u>00</u> ft.(m) |
| o f) Lowest adjacent grade (LAG) | <u>75</u> <u>00</u> ft.(m) |
| o g) Highest adjacent grade (HAG) | <u>76</u> <u>20</u> ft.(m) |
| o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | <u>NA</u> |
| o i) Total area of all permanent openings (flood vents) in C3h | <u>NA</u> sq. in. (sq. cm) |



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

| | |
|---|--|
| CERTIFIER'S NAME JOHN E. PITALO | LICENSE NUMBER RCE 16382 |
| TITLE CIVIL ENGINEER | COMPANY NAME MORTON & PITALO, INC. |
| ADDRESS 1788, TRIBUTE ROAD, SUITE 200, SACRAMENTO | CITY SACRAMENTO |
| | STATE CA |
| SIGNATURE <i>[Signature]</i> | ZIP CODE 95815 |
| DATE 4-13-00 | TELEPHONE (916) 927-2400 |

**CITY OF SACRAMENTO
APPLICATION FOR COMMERCIAL BUILDING PERMIT**

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

ACTIVITY # 9914232 Insp. Area AC

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

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3555 Auburn Blvd. Suite Bldg B
PARCEL # 240-042-005-0000

| | | | |
|--|--|--|--|
| <p align="center">CONTACT</p> Name <u>Scott Maxwell / Sean Olsen</u> Address <u>2112 Sutterville Rd. Sacramento</u> Phone <u>916-452-1458</u> FAX <u>452-2612</u> E-mail _____ | | <p align="center">LICENSED CONTRACTOR Lic No. # 301690</p> Name <u>Unger Construction</u> Address <u>2112 Sutterville Rd.</u> Phone <u>916-452-1458</u> FAX <u>452-2612</u> E-mail _____ | |
| <p align="center">ARCHITECT/ENGINEER</p> Name <u>Williams & Paddon</u> Address <u>3001 Douglas Blvd # 330</u> Phone <u>916-786-8178</u> FAX <u>786-8265</u> E-mail _____ | | <p align="center">OWNER</p> Name <u>Children's Receiving Home of Sac</u> Address <u>3555 Auburn Blvd. Sacramento</u> Phone <u>916-482-2370</u> FAX <u>482-1539</u> E-mail _____ | |

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Fund
 → WORKER'S COMPENSATION POLICY # 692-99 2442 EXPIRATION DATE: 10-1-00

NATURE OF WORK IN DETAIL: New dormitory - 4530 sq. ft
PORCH COVER 1600 SF
NO SITE WORK

OCCUPANT/TENANT: Children's Receiving Home of Sac VALUATION: \$343,944.60

| | | | |
|--|-----------------------|--|---------------------|
| FLOOD STATUS: <u>AE-63</u> | | S.C.A.T. <u>X1, X11, X12, X14, X17, X12, X13, 100, 200, 201, 207</u> | |
| JOB DESCRIPTION: <u>BLDG</u> SHELL APT TI () REM () SW FIRE ADD OTH | | | |
| INSPECTION DISCIPLINES: <u>BLDG</u> <u>MECH</u> <u>PLUMB</u> <u>ELEC</u> <u>SITE</u> <u>FIRE</u> | | | |
| # Stories: <u>1</u> | 1st flr Area: _____ | Total Area: <u>4530</u> | Use Zone: _____ |
| Occp Group: <u>RI</u> | Const type: <u>VI</u> | Fire Req: <u>Y/N</u> | Fed Code: <u>17</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>PW</u> | <u>UTIL</u> | | |

COMMENTS: This plan check is also for bldgs B, C & D. This is to be the Master Plan set for bldg
Site work on 9908994C

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

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE *995*
 PERMIT AND CALCULATION SHEET *4/20/06*

| | | | |
|---|----------------------|---|-----------------------------|
| APPLICATION NO: <u>City</u> | | BLDG PERMIT NO: | |
| GENERAL INFORMATION | | THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER | |
| | | <i>258796</i> <i>4/20/06</i> THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE | |
| FEE CALCULATION | | BUILDING USE | |
| INSPECTION | <i>0</i> | RESIDENTIAL SF <input type="checkbox"/> | MF <input type="checkbox"/> |
| CSD-1 | <i>18,413</i> | COMMERCIAL USE | UNITS |
| SRCSD | | | |
| CONSTRUCTION | | <i>Children's Receiving Home</i> | |
| IN-LIEU | | <i>[4 Dorm. Units]</i> | |
| TOTAL FEE | <i>18,413</i> | | |
| APN: <i>240-0342-005</i> | | | |
| DESCRIPTION/ SUBDIVISION | | LOT: | |
| PROPERTY ADDRESS <i>3555 Auburn Blvd.</i> | | | |
| OWNER <i>Children's Receiving Home of Sacramento</i> | | | |
| MAILING ADDRESS <i>3555 Auburn Blvd.</i> | | | |
| CITY-STATE-ZIP <i>Sacramento, CA</i> | | PHONE <i>95821</i> | |
| ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT. | | | |
| APPLICANT SIGNATURE <i>[Signature]</i> | | | |
| CONSOLIDATED UTILITY BILLING USE ONLY | | | |
| ACCT _____ | INPUT _____ | START _____ | |

INSPECTOR'S COPY

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 3555 AUBURN BL BLD. B Permit No. 9914238

Building Use: DORMITORY Occupancy: R1

Building Owner: CHILDREN'S RECEIVING HOME Construction Type: V1

Owner Address: 3555 AUBURN BL SAC. Sprinkled? [] Yes [] No

Portion of Building Occupied: ENTIRE Area: 4530 Sq. Ft.

1/14/02 *Nicholas A. Richardson* DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By:MW,JXE,RDH,FJ,MG]

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 City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE