

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0401312

Insp Area: 1

Thos Bros: 297D4

Site Address: 1415 L ST SAC

Sub-Type: REM

Parcel No: 006-0116-013

ELEVATOR LOBBY 7TH FLOOR Housing (Y/N): N

CONTRACTOR

MARKET ONE BUILDERS INC
CALPO HOM AND DONG ARCH.
1419 N MARKET BL #1
SACRAMENTO CA 95834

OWNER

SACRAMENTO AREA COUNCIL GOVT FINANCE

555 CAPITOL MALL STE #950
SACRAMENTO CA 95814

ARCHITECT

2150 CAPITOL AVE #200
SACRAMENTO CA 95816

Nature of Work: CONSTRUCT TWO ONE HOUR CORRIDORS IN ELEVATOR LOBBY ON THE 7TH FLR

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 License Number 737694 Date 4/12/04 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 _____ **PAID**
CITY OF SACRAMENTO
APR 12 2004

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant that the applicant has 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 the 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 4/12/04 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 FUND Policy Number 692-0002229-2003 Exp Date 10/01/2004

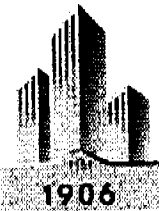
____ (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 4/12/04 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.

Microfilm

FAX COMMUNICATION FORM



NORMAN S. WRIGHT

Mechanical Equipment Corporation

4901 Warehouse Way • Sacramento, CA 95826 • (916) 381-6666 • Fax (916) 381-8057

DATE 6.4.04 TIME 8:30

TO: Brian @ Market One (For Scott Baehae @ Fm Booth)

COMPANY: c/o Allen Group. FAX#:

MESSAGE: See attached letter from Ruskin for corridor fire/smoke damper installation.

Thanks

FROM: Denise

Total pages including this sheet 2 Please send FAX reply Please call A.S.A.P.

IN YOU HAVE ANY PROBLEMS RECEIVING THIS TRANSMISSION, PLEASE CALL US AT (916) 381-6666 AS SOON AS POSSIBLE.

RUSKIN®

3900 Dr. Greaves Rd.

Kansas City, Mo. 64030

Date: 6/4/04

To: **Norman S. Wright Mech. Equip. Corp.**
4901 Warehouse Way
Sacramento, CA 95826-4905

Attn: Denese Soto

Subject: Meridian Plaza

When installing the retaining angles to a combination fire/smoke damper, it does not matter if the angles faces away from the wall/ceiling or extend into the wall/ceiling. See attached installation instruction of Transfer Openings and Grille Duct Terminations.

Sincerely

Kent Maune

Fire & Smoke Damper
Sales Application Engineer
Phone (816) 761-7457 ext. 210
Fax (816) 761-1936
Email: kmaune@ruskin.com

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 # 0401312	Insp. Area
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Applicant to complete all areas down to valuation

ADDRESS 1415 L STREET Suite 7TH FLOOR
PARCEL # 006.0114.013

CONTACT		LICENSED CONTRACTOR Lic No. # <u>737614</u>	
Name <u>TOM FORD</u> c/o →	Street Address <u>X101</u>	Name <u>MARKETONE BUILDERS</u>	Address <u>1419 N. MARKET ST.</u>
City/State/Zip	Phone _____ FAX _____	City/State/Zip <u>SACTO, CA. 95834</u>	Phone <u>916-928-7474</u> FAX <u>916-928-7475</u>
E-mail:		E-mail: <u>TFORD@M1B.COM</u>	
ARCHITECT/ENGINEER		OWNER	
Name _____	Address _____	Name <u>SAC AREA COUNCIL</u>	Address <u>555 CAP ML # 950</u>
City/State/Zip _____	Phone _____ FAX _____	City/State/Zip <u>SAC 95814</u>	Phone _____ FAX _____
E-mail:		E-mail:	

→ Will permittee have any employees on the jobsite? No Yes → **INSURANCE CO:** STATE FUND
 → **WORKER'S COMPENSATION POLICY #** 0002329-2003 **EXPIRATION DATE:** 10-1-04

NATURE OF WORK IN DETAIL: CONSTRUCT TWO 1-HOUR CORRIDORS IN ELEVATOR LOBBY

OCCUPANT/TENANT: MERIDIAN FLAZA **VALUATION: \$** 66,000

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					
<u>12</u>				<u>B</u>	<u>1-FR</u>	<u>SPR</u>	<u>ALARM</u>							
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