

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0409516

Insp Area: 2

Thos Bros: 337A2

Site Address: 7385 GREENHAVEN DR SAC

Parcel No: 031-0053-019

Sub-Type: NGRDNG

Housing (Y/N): N

**CONTRACTOR**

VALLEY OAK DEVELOPMENT  
3196 LA MANITA DR  
YUBA CITY, CA 95993

**OWNER**

L. DAVID RAI  
P.O. BOX 3665  
YUBA CITY, CA

**ARCHITECT**

**Nature of Work:** ROUGH GRADING ONLY 1.2 ACRE SITE

**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 611861 \_\_\_\_\_ Date \_\_\_\_\_ Contractor 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 abovementioned property for inspection purposes.

Date \_\_\_\_\_ Applicant/Agent 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 NO EMPLOYEES Policy Number \_\_\_\_\_

\_\_\_\_\_, (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 6-30-04 Applicant 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.**

PAID  
CITY OF SACRAMENTO  
JUN 30 2004  
NORTH PERMIT CENTER  
Exp Date

# 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 # <span style="font-size: 1.5em; font-family: cursive;">0409516</span>	Insp. Area
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Applicant to complete all areas down to valuation

ADDRESS 7385 Greentown Drive, Sac. Ca. Suite ~~100~~  
 PARCEL # 03-0053-019

<p style="text-align: center;"><b>CONTACT</b></p> Name <u>Jack F Farley</u> Street Address <u>3196 La Marita Drive</u> City/State/Zip <u>Yuba City Ca. 95993</u> Phone <u>(930) 908-1671</u> FAX <u>(916) 990-9895</u> E-mail: _____	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # <u>611861</u></p> Name <u>Chander Selhev.</u> Address <u>3196 La Marita Dr.</u> City/State/Zip <u>Yuba City Ca. 95993</u> Phone <u>(930) 471-7701</u> FAX <u>(916) 990-9895</u> E-mail: _____
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> Name <u>Studio SMS</u> Address <u>424 Vernon Street #100</u> City/State/Zip <u>Presville,</u> Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;"><b>OWNER</b></p> Name <u>L. David Rai</u> Address <u>P.O. Box 31665</u> City/State/Zip <u>Yuba City CA</u> Phone <u>530-671-2509</u> FAX _____ 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: Grading 1.2 Acre

VALUATION: \$ 11,500

OCCUPANT/TENANT: \_\_\_\_\_

FLOOD STATUS										S.C.A.T.									
JOB DESCRIPTION										<input type="checkbox"/> 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									
INSPECTION DISCIPLINES										BLDG MECH PLUMB ELEC SITE FIRE Fire Req. Y/N Fed Code Vio. File									
# Stories	1 <sup>st</sup> flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code		Vio. File		PW		UTIL					
B	L	P	M	E	F	S		D											

COMMENTS:  
 \_\_\_\_\_  
 \_\_\_\_\_

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



State Water Resources Control Board  
**NOTICE OF INTENT**  
 TO COMPLY WITH THE TERMS OF THE  
 GENERAL PERMIT TO DISCHARGE STORM WATER  
 ASSOCIATED WITH CONSTRUCTION ACTIVITY (WQ ORDER No. 99-08-DWQ)



**I. NOI STATUS (SEE INSTRUCTIONS)**

MARK ONLY ONE ITEM    1.  New Construction    2.  Change of Information for WQID# \_\_\_\_\_

**II. PROPERTY OWNER**

Name <b>Golden State Development</b>	Contact Person <b>Chander Sidher</b>	
Mailing Address <b>3196 La Manita Dr.</b>	Title <b>Owner</b>	
City <b>Yuba City</b>	State    Zip <b>CA    95993</b>	Phone <b>( 530 ) 671 -- 0121</b>

**III. DEVELOPER/CONTRACTOR INFORMATION**

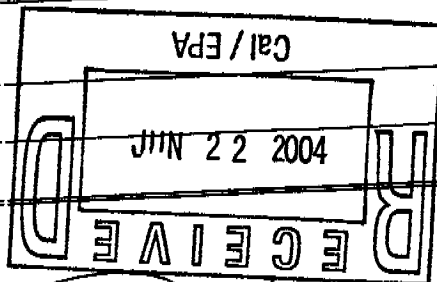
Developer/Contractor <b>Valley Oak Construction &amp; Development</b>	Contact Person <b>Jack Farley</b>	
Mailing Address <b>PO Box 3665</b>	Title <b>Project Manager</b>	
City <b>Yuba City</b>	State    Zip <b>CA    95992</b>	Phone <b>( 530 ) 671 -- 0121</b>

**IV. CONSTRUCTION PROJECT INFORMATION**

Site/Project Name <b>Greenhaven Retail Center</b>		Site Contact Person <b>Jack Farley</b>	
Physical Address/Location <b>7385 Greenhaven Drive</b>		Latitude	Longitude
City (or nearest City) <b>Sacramento</b>		County <b>Sacramento</b>	Emergency Phone Number <b>( 530 ) 368 -- 1671</b>
A. Total size of construction site area: <u>1.2</u> Acres		C. Percent of site imperviousness (including rooftops):	
B. Total area to be disturbed: <u>1.2</u> Acres (% of total _____)		Before Construction: <u>0</u> %	
F. Is the construction site part of a larger common plan of development or sale? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		After Construction: <u>75</u> %	
H. Construction commencement date: <u>6 / 28 / 04</u>		D. Tract Number(s): _____	
I. % of site to be mass graded: <u>100</u>		E. Mile Post Marker: _____	
K. Type of Construction (Check all that apply): 1. <input type="checkbox"/> Residential    2. <input checked="" type="checkbox"/> Commercial    3. <input type="checkbox"/> Industrial    4. <input type="checkbox"/> Reconstruction    5. <input type="checkbox"/> Transportation 6. <input type="checkbox"/> Utility    Description: _____    7. <input type="checkbox"/> Other (Please List): _____		G. Name of plan or development: _____	
J. Projected construction dates: Complete grading: <u>7 / 2 / 04</u> Complete project: <u>11 / 28 / 04</u>			

**V. BILLING INFORMATION**

SEND BILL TO: <input checked="" type="checkbox"/> OWNER (as in II. above)	Name	Contact Person	
<input type="checkbox"/> DEVELOPER (as in III. above)	Mailing Address	Phone/Fax	
<input type="checkbox"/> OTHER (enter information at right)	City	State    Zip	



*Handwritten signature and number: 6/22/04 341-5536*

A: Has a local agency approved a required erosion/sediment control plan?  YES  NO  
 Does the erosion/sediment control plan address construction activities such as infrastructure and structures?  YES  NO  
 Name of local agency: \_\_\_\_\_ Phone: ( ) --

B. Is this project or any part thereof, subject to conditions imposed under a CWA Section 404 permit of 401 Water Quality Certification?  YES  NO  
 If yes, provide details: \_\_\_\_\_

**VII. RECEIVING WATER INFORMATION**

A. Does the storm water runoff from the construction site discharge to (Check all that apply):  
 1.  Indirectly to waters of the U.S.  
 2.  Storm drain system - Enter owner's name: City of Sacramento  
 3.  Directly to waters of U.S. (e.g., river, lake, creek, stream, bay, ocean, etc.)  
 B. Name of receiving water: (river, lake, creek, stream, bay, ocean): \_\_\_\_\_

**VIII. IMPLEMENTATION OF NPDES PERMIT REQUIREMENTS**

A. STORM WATER POLLUTION PREVENTION PLAN (SWPPP) (check one)  
 A SWPPP has been prepared for this facility and is available for review: Date Prepared: 6/21/04 Date Amended: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 A SWPPP will be prepared and ready for review by (enter date): \_\_\_\_/\_\_\_\_/\_\_\_\_  
 A tentative schedule has been included in the SWPPP for activities such as grading, street construction, home construction, etc.

B. MONITORING PROGRAM  
 A monitoring and maintenance schedule has been developed that includes inspection of the construction BMPs before anticipated storm events and after actual storm events and is available for review.  
 If checked above: A qualified person has been assigned responsibility for pre-storm and post-storm BMP inspections to identify effectiveness and necessary repairs or design changes.  YES  NO  
 Name: \_\_\_\_\_ Phone: ( ) --

C. PERMIT COMPLIANCE RESPONSIBILITY  
 A qualified person has been assigned responsibility to ensure full compliance with the Permit, and to implement all elements of the Storm Water Pollution Prevention Plan including:  
 1. Preparing an annual compliance evaluation.  YES  NO  
 Name: Jack Farley Phone: (530) 368 -- 1671  
 2. Eliminating all unauthorized discharges.  YES  NO

IX. VICINITY MAP AND FEE (must show site location in relation to nearest named streets, intersections, etc.)  
 Have you included a vicinity map with this submittal?  YES  NO  
 Have you included payment of the annual fee with this submittal?  YES  NO

X. CERTIFICATIONS  
 "I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment. In addition, I certify that the provisions of the permit, including the development and implementation of a Storm Water Pollution Prevention Plan and a Monitoring Program Plan will be complied with."  
 Printed Name: Chanday Sidhar Date: 6/21/2004  
 Signature: Chanday Sidhar  
 Title: Owner



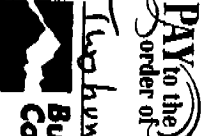
**VALLEY OAK CONSTRUCTION AND DEVELOPMENT, INC.**

3196 LA MANTIA DR.  
YUBA CITY, CA 95993  
PH: 530-671-7701

1102

Date 2-22-04

90-4202/1211  
5



**Butte Community Bank**

1600 BUTTE HOUSE ROAD • YUBA CITY, CA 95991 • (530) 896-6700

PAY TO THE ORDER OF STATE WATER RESOURCES CONTROL BOARD \$ 284<sup>00</sup>

00 Dollars



For Greenhaven

*Paul Siller*

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