

CITY OF SACRAMENTO

Permit No: 9801110

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 2450 VENTURE OAKS WY SAC

Sub-Type: REM

Parcel No: 2740320020
N

BREAK ROOM/OFFICE 4TH FLOOR

Housing (Y/N):

CONTRACTOR

STERLING CONTRACTORS
2810 REDDING AV #D
SACRAMENTO CA 95820
Phone: 916-457-3535

OWNER

THE EVERGREEN CO
1029 J ST
SACRAMENTO CA 95814
Phone: 916-447-9600

ARCHITECT

Phone:

Nature of Work: INT OFFICE 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 _____ 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 5921698 Date 3-5-98 Contractor Signature Lama Kass

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 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 or 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 or 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.

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.

X 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 1194010 97

____ (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 3-5-98 Applicant Signature Lama Kass

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
 APPLICATION FOR BUILDING PERMIT
 DEPARTMENT OF PLANNING AND DEVELOPMENT
 BUILDING INSPECTION DIVISION
 1231 I Street, Room 200
 Sacramento, CA 95814
 (916) 264-7619 FAX 264-7046

9801100 X

ADDRESS 2450 Venture Oaks way. P.C. # 5739x
 PARCEL # 274-220-11020 SUITE #
 AREA # 4c

CONTACT 220
 NAME Laura Kass
 ADDRESS 2414 26th St
 Sae ZIP 95818
 PHONE 451-6494 FAX: 1451-6497

LICENSED CONTRACTOR Lic # 592698
 NAME Sterling Contractors
 ADDRESS 2810 Redding Ave Suite D.
 Sae ZIP 95820
 PHONE 1457-3535 FAX: -

ARCH./ENG.
 NAME Howard Perkins
 ADDRESS 2304 N. Street
 Sae ZIP 95816
 PHONE 441-2603 441-2445 fax

OWNER
 NAME The Evergreen Co.
 ADDRESS 1029 J. Street
 Sae ZIP 95814
 PHONE 1447-9600 FAX: -

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE? YES NO

NATURE OF WORK IN DETAIL: int office remodel
add dining wall near vending area.
add water fountain
new window + new door.

D.B.A. Site Comp Inc Co. VALUATION 25,000
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS cost x S.C.A.T.

JOB DESCR. BLDG SHEL APT TIC() REM(X) SW FIRE ADD OTH

INSP. DISCIPLINES BLDG MECH PLUMB ELEC SITE FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FIRE ALARM	FED CODE	VIO. FILE
<u>5</u>			<u>B</u>	<u>IFR</u>	<u>(Y)/N</u>	<u>(Y)/N</u>		
<u>B</u>	<u>(L)</u>	<u>(P)</u>	<u>M</u>	<u>(E)</u>	<u>(E)</u>	<u>S</u>	<u>(D)</u>	<u>R</u>
		<u>BDP</u>		<u>NO M</u>	<u>2/12/88</u>			

COMMENTS:
Provide SPK PLAN PER CITY OF SACRAMENTO GUIDANCE

(REGIONAL SAN FEES? Y/N) (HEALTH DEPT? Y/N) APPL. REVISED 12/1

Worker's Comp Policy #
Company

Exp. Date

CITY OF SACRAMENTO
BUILDING INSPECTION DIVISION
APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: State Compensation Insurance Fund Phone: _____
 Site Address: 2450 Venture Oaks Way Suite: 4th Floor.
 Business Owner/Representative: The Trademark Co. (Street) (Zip) Phone: 457-6494
 Nature of Business: office
 Property Owner: The Evergreen Co. Phone: 447-9600
 Address: 1029 J Street Suite: 301 95814
 (City) (Street) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes ___ No ___ Is this permit for a shell building? Yes ___ No X
 Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes ___ No X
 4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No X

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No X
 6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No X
 7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No X

If you answered "yes" to questions #6 and/or #7, complete the RMPP Informational sheet.
 8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No X

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials:

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Laura Kass
 (Print) Laura Kass (Signature) 3/5/98 (Date)

BID Use Only: Plan Ck# <u>99-0110</u> Permit # <u>5739C</u> OK to issue prmt? Y <u>X</u> <u>3/4/98</u> F.D. Appr Req'd? Yes No init / date	
Hold on Certificate of Occupancy? Yes <u>No</u>	
Fire Dept. Use Only: OK to issue permit? ini' _____ date _____ OK to issue Certificate of Occupancy? ini' _____ date _____	



Insp. Area _____

AUTHORIZATION TO START WORK

CITY OF SACRAMENTO, BUILDING INSPECTIONS DIVISION
1231 I ST., ROOM 200, SACRAMENTO, CA 95814

Company: State Compensation Ins. Fund. PC # 5739x
 Address: 2450 Venture Oaks Wy. BID App. _____
 Job Phone: 451-6494 Office Ph. _____ Fee 128⁰⁰
 SUBJECT: Project Address: 2450 Venture Oaks Wy. Suite # _____

I request permission to start the following work demo walls, ~~put~~ construct walls
remove replace electrical receptacles.

I realize that all work will be at the owner's and contractor's risk without assurance that the permit for the project will be granted. Any code conflicts will be corrected. I agree not to cover or conceal any work or portion thereof. I realize that inspections will not be made on this project until a building permit is issued. All changes required to conform to the approved plans will be completed without dispute. Work affecting the structural integrity of the existing building is not permitted.

I will expedite necessary revisions, corrections and clarifications as required to obtain the building permit.

If it should be determined subsequently by the City that changes in the design of the building are necessary after commencement of the work authorized, I assume full responsibility and all risk of loss which may result by reason of such changes. I agree that the building shall conform to the approved final plans as amended, without regard to the stage of completion.

This authorization is valid for 30 days while the plans are being processed for permit. These state required declarations must be properly executed before this authorization is valid. This authorization is valid when initialed by authorized Building Department personnel and stamped approved. Keep posted on job site at all times.

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 the Business and Professions Code and my license is in full force and effect.

Lic. Class: B Lic. Number: 592698 Sterling Contractors
 SIGNATURE DATE

PLEASE COMPLETE BACK OF THIS FORM

COPIES

SUPERVISOR CUSTOMER CHIEF BUILDING INSPECTOR ORIGINAL & RECEIPT INFOLD