

**NOTE: DO NOT COVER OR CONCEAL ANY BUILDING, ELECTRICAL, PLUMBING OR MECHANICAL WORK WITHOUT INSPECTOR'S SIGNATURE IN PROPER PLACE.**

BUILDING SITE ADDRESS: 1215 K STREET SUITE 1100 INSUR AREA 1C

B10 FOUNDATION FORMS INSPECTOR DATE

B11 FLOOR GROUND INSPECTOR DATE

B12 CONCRETE SLAB FORMS

P40 PLUMB UNDER FLOOR/SLAB

M30 MECH UNDER FLOOR/SLAB

E61 ELECT UNDERGROUND

E62 ELECT CONDUIT-SLAB

B13 DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED

FLOOR JOISTS OR GIRDERS

DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED

31416 INSULATION/WALL/FLOOR

P41 TOP PLUMBING

M31 TOP MECHANICAL/WALL/CEIL

E63 ROUGH ELECTRICAL/WALL/CEIL

B19 FRAME

B17 ROOF PLYWOOD NAIL COMM & APTS

B18 EXTERIOR LATH/SIDING

DO NOT COVER UNTIL INSTALL ABOVE HAS BEEN SIGNED

322 DO NOT COVER UNTIL INSTALL ABOVE HAS BEEN SIGNED

DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED

E66 DO NOT COVER UNTIL INSTALL ABOVE HAS BEEN SIGNED

P43 SEWER SERVICE

P42 WATER SERVICE

P46 SPRINKLER SYSTEM

DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED

17M33 EXTERIOR

P48 EXTERIOR

E68 EXTERIOR

667 EXTERIOR

SWIMMING POOLS ONLY

247

251

P52 COMBINATION DECK

E70 EXTERIOR W/ PRE-GROUT

E71 EXTERIOR W/ PRE-GROUT

DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED

FINAL APPROVALS

ASSESSOR PARCEL NO 006-0111-012

PROPERTY OWNER LANKFORD AND TAYLOR

ADDRESS 3100 ZINFANDEL RANCHO CORDOVA, CA 95670

VITIELLO AND ASSOC. SACRAMENTO, CA

NO OF STORIES NO OF ROOMS ROOF COVERING AREA 1ST FLOOR TOTAL AREA GARAGE AREA PATIO AREA USE ZONE STREET WIDTH

THIS PERMIT IS FOR BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL NEW T.I. OFFICE

FLOOD STATUS SPECIAL CONDITIONS ATTACHMENTS

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION 264-5191

WORKERS COMPENSATION DECLARATION

DATE ISSUED VALUATION \$ 63,675.00

BUILDING PERMIT FEE PLAN CHECK PROC FEE

TOTAL FEES \$

PLAN CHECK NO

PHONE NO. 446-0206

ZIP CODE 95670

ADDRESS #160

1931 H STREET

SACRAMENTO, CA

1100

1215 K STREET

006-0111-012

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Copy for each supervisor inspector Insp. Area 10

### AUTHORIZATION TO START WORK

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

Company LANKFORD & TAYLOR PC # 0005323  
 Address 3200 ZENWELL #760 BID App. \_\_\_\_\_  
 Job Phone: 804-734 Office Ph. 638-0242 Fee 350

SUBJECT: Project Address: 1215 K ST Suite # 1000

I request permission to start the following work FRAMING / HVAC / PLUMBING  
ELECTRICAL / FIRE SPINKLER S

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 stamped 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 \_\_\_\_\_  
THE CONTRACTOR SHALL NOT BE HELD RESPONSIBLE FOR A VIOLATION OF ANY CITY ORDINANCE OR

### 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.

Class \_\_\_\_\_ Lic. Number \_\_\_\_\_  
 SIGNATURE \_\_\_\_\_ DATE 5-17-00  
 COMPANY NAME

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Section 7031, Business and Professions Code. Any city or county which requires a permit to construct, alter, 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 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 who is exempt subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00):

I am the 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 Professions 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 or her own employees, provided that such improvement 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 Section \_\_\_\_\_ B & P Code for this reason \_\_\_\_\_

SIGNATURE

DATE

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 the work for which this 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:

Name: \_\_\_\_\_ exp. \_\_\_\_\_

Policy No. \_\_\_\_\_

I certify under penalty of perjury 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.

SIGNATURE

DATE

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 FEES.

In issuing this 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 the 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 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, understand and agree to the above conditions. I certify under penalty of perjury that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNATURE OF APPLICANT OR AGENT

DATE

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

DEVELOPMENT SERVICES DIVISION  
 PERMITTING SECTION

PHONE: (916) 241-7611 FAX: (916) 241-7046

ADDRESS: \_\_\_\_\_ Suite \_\_\_\_\_

PARCEL # 006-011-012

ACTIVITY # 00.05323 Insp. Area 10

Applicant **MUST** complete ALL Unshaded areas

<b>CONTACT</b> Name _____ Address _____ Phone _____ FAX _____ E-mail _____		<b>LICENSED CONTRACTOR</b> Lic No. # _____ Name <u>A</u> Address <u>A</u> Phone _____ FAX _____ E-mail _____	
<b>ARCHITECT/ENGINEER</b> Name <u>ANK. FORD</u> Address <u>3100 ZINFANDEL #14</u> Phone <u>58-2242</u> FAX <u>58-2242</u> E-mail _____		<b>OWNER</b> Name <u>ANK. FORD &amp; J.A. J.L. SR.</u> Address <u>3100 ZINFANDEL #14</u> Phone <u>58-2242</u> FAX <u>58-2242</u> E-mail _____	

→ Will permittee have any employees on the job site?  No  Yes → INSURANCE CO: \_\_\_\_\_  
 → WORKER'S COMPENSATION POLICY # \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

NATURE OF WORK IN DETAIL: REMODEL KITCHEN

OCCUPANT/TENANT: CAL CASA VALUATION: \$ 65,000

FLOOD STATUS: <u>NR</u>		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHELL	APT	TI(✓)	REM( )	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES	<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELE</u>	<u>SITE</u>	<u>FIRE</u>			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vio. File	
<u>22</u>	<u>4245</u>			<u>B</u>	<u>1 FR</u>	<u>Y</u>	<u>15</u>	[H] [Quad]	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>SPR</u> <u>ALARM</u>	<u>S</u>	<u>D</u>	<u>PW</u> <u>UTIL</u>
							<u>SP</u>		

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

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

**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: \_\_\_\_\_ Phone: 44-6304  
 File Address: 1215 K St Suite: 1100  
 (Street) (Zip)  
 Business Owner/Representative \_\_\_\_\_ Phone: 44-6304  
 Nature of Business \_\_\_\_\_  
 Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
 (Street) (City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes \_\_\_ No \_\_\_ Is this permit for a shell building? Yes \_\_\_ No

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

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes \_\_\_ No

**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 \_\_\_

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes \_\_\_ No \_\_\_

7. Will your business be located within 1,000 feet of a school? Yes \_\_\_ No \_\_\_

If you answered 'yes' to questions #6 and/or #7, complete the RMPP Informational sheet.

8. Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes \_\_\_ No \_\_\_

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 \_\_\_\_\_ (Print)

\_\_\_\_\_  
 (Signature) (Date)

BID Use Only: Plan Ck# _____	Permit # _____
OK to issue prmt? Y _____	F.D. Appr Req'd? Yes ___ No ___
init date _____	
Hold on Certificate of Occupancy? Yes ___ No ___	
Fire Dept. Use Only:	
OK to issue permit? init _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

If owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received

I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no): no

I have/have not) have signed an application for a building permit for the proposed work

I have contracted with the following person (firm) to provide the proposed construction:

Name T.B.A. Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No \_\_\_\_\_

I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No \_\_\_\_\_

I will provide some of the work but I have contracted (hired) the following to provide the Work indicated

Name	Address	Phone	Type of work

Signed \_\_\_\_\_

Job Address \_\_\_\_\_ Date

Permit No \_\_\_\_\_