


CITY OF SACRAMENTO

**CERTIFICATE OF OCCUPANCY**

For Information Contact (916) 264-5716

Building Address: 2121 NATOMAS CROSSING DR #600 Permit No.: 0313561  
Building Use: T.I. TANNING SALON Occupancy: M  
Building Owner: NATOMAS CROSSING FUND Construction Type: VN  
Owner Address: ROSEVILLE, CA Sprinkled?  Yes  No  
Portion of Building Occupied: SUITE 600 Area: 1200 Sq. Ft.  
Date 1/16/04 By: (Print)  Sign DENNIS RICHARDSON  
CHIEF BUILDING OFFICIAL

[ Finaled By: DPB,DJP,AAC,AW ]

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

**POST IN A CONSPICUOUS PLACE**

APPLICATION FOR COMMERCIAL BUILDING PERMIT

**CITY OF SACRAMENTO**  
**PLANNING & BUILDING DEPARTMENT**  
 231 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 #** 0313561 **Insp. Area**

Applicant to complete all areas down to valuation

**ADDRESS** 221 NATOMAS CROSSING DRIVE Suite 600  
**PARCEL #** \_\_\_\_\_

<b>CONTACT</b> Name <u>MATT VICKERY - CDO</u> Street Address <u>120 N. LASALLE - STE. 3300</u> City/State/Zip <u>CHICAGO, IL 60602</u> Phone <u>312.456.7293</u> FAX <u>312.456.0708</u> E-mail: <u>MATT@CDOGROUP.COM (lowercase)</u>		<b>LICENSED CONTRACTOR</b> Lic No. # _____ Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
<b>ARCHITECT/ENGINEER</b> Name <u>IN-LINE DESIGN</u> Address <u>17803 GLEN PARK DRIVE</u> City/State/Zip <u>BAYON ROUGE, LA 70617</u> Phone <u>225.751.8356</u> FAX <u>225.979.0388</u> E-mail: _____		<b>APPLICANT OWNER CONTACT</b> Name <u>WILLIAM J. HUGHES, JR.</u> Address <u>50 FULLERTON CT. SUITE 107</u> City/State/Zip <u>SACRAMENTO, CA 95825</u> Phone <u>923-3630</u> FAX <u>923-3601</u> 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:** TENANT IMPROVEMENT OF 1200 SQ. FT. SPACE. MINOR BUILD-OUT OF INTERIOR PARTITIONS, INSTALLATION OF OWNER SUPPLIED MATERIAL E.G.: LIGHTS, FLOORING, TANNING BEDS.

**OCCUPANT/TENANT:** PLANET BEACH **VALUATION:** \$ 50,000.00

<b>FLOOD STATUS</b>										<b>S.C.A.T.</b>											
JOB DESCRIPTION BLDG <input type="checkbox"/> SHELL <input type="checkbox"/> APT <input type="checkbox"/> TR <input checked="" 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 <sup>st</sup> flr Area	Total Area	Use Zone	Occp Group	Comt type	Fire Req. Y / N		Fed Code		Vio. File		SPR		ALARM		D		PW		UTIL	
B	L	P	M	E	F	S		D		PW		UTIL									

**COMMENTS:** 03/27 (sprinkler plans)

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