

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0111274

Insp Area: 4

Thos Bros:

Sub-Type: NFNDTN

Housing (Y/N): N

Site Address: 2860 GATEWAY OAKS DR SAC

Parcel No: 225-1420-002 BLDG B

CONTRACTOR

DPR  
1451 RIVER PARK DR SUITE 210  
SACTO, CA. 95815

OWNER

BTV CROWN EQUITIES

ARCHITECT

Nature of Work: FOUNDATION AND SITEWORK UTILITIES & PAVING.

**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 599846 \_\_\_\_\_ 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 11/13/01 Owner Signature *[Signature]* for BTV

**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 above-mentioned property for inspection purposes.

Date 11/13/01 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 LUMBERMENS MUTUAL CASUALTY CO. Policy Number 5ba15998800 Exp Date 02/01/2002

(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 be 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 11/13/01 *[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.**

**APPLICATION FOR COMMERCIAL BUILDING PERMIT**

**CITY OF SACRAMENTO**  
 DEVELOPMENT SERVICES DIVISION  
 PERMIT SERVICES SECTION

1231 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY #

011274

Insp. Area

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2860 Gateway Oaks Dr. Suite \_\_\_\_\_  
 PARCEL # 225-1420-002, 225-1420-002

<p align="center"><b>CONTACT</b></p> Name <u>Mike Hoss LPA Sacramento</u> Street Address <u>1215 G street</u> City/State/Zip <u>Sacramento CA 95814</u> Phone <u>443-0325</u> FAX <u>441-2823</u> E-mail: <u>mhoss@LPA.sacramento.com</u>		<p align="center"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> Name <u>DPR Construction</u> Address <u>1451 River Park Dr. #210</u> City/State/Zip <u>Sacramento, Ca 95815</u> Phone <u>568-3434</u> FAX <u>568-3442</u> E-mail: _____	
<p align="center"><b>ARCHITECT/ENGINEER</b></p> Name <u>LPA Sacramento</u> Address <u>1215 G street</u> City/State/Zip <u>Sacramento, Ca 95814</u> Phone <u>443-0325</u> FAX <u>441-2823</u> E-mail: _____		<p align="center"><b>OWNER</b></p> Name <u>BTV CROWN EQUITIES</u> Address <u>2870 Gateway Oaks Dr. #110</u> City/State/Zip <u>Sacramento, Ca 95833</u> Phone <u>569-1900 x105</u> FAX <u>569-1911</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: site Utilities and Paving, Foundation and Slab on Grade only

OCCUPANT/TENANT: OFFICE VALUATION: \$ 1,483,480

FLOOD STATUS: <input checked="" type="checkbox"/>				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI ( )	REM ( )	SW	FIRE	ADD	<input checked="" type="checkbox"/> PH
INSPECTION DISCIPLINES			<input checked="" type="checkbox"/> BLDG	<input type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" type="checkbox"/> SITE	<input checked="" type="checkbox"/> FIRE		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vio. File		
				<u>B</u>		<input checked="" type="checkbox"/> SPR <input type="checkbox"/> ALARM	<u>15</u>	[H] [Quad]		
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S	D	<input checked="" type="checkbox"/> PW	<input checked="" type="checkbox"/> UTD	

COMMENTS: grading done on #9907333C / Building on 1 parcel but site work encompasses multiple parcels

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

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An 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.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) no

2. I have (have/have not) \_\_\_\_\_ signed an application for A building permit for the proposed work.

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

Name DPR Construction Address 1451 River Park Dr.  
City Sacramento Telephone 568-3434  
Contractors License No. 599846

4. 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. \_\_\_\_\_

5. 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 [Signature] for BTV

Job Address 2860 GATEWAY OAKS

Permit No: 0111274

# REQUEST FOR PLANNING STAFF REVIEW

..... to be filled out by Building staff .....

CUSTOMER NAME: \_\_\_\_\_

PROJECT ADDRESS: 2860 Gateway Oaks D

PROJECT DESCRIPTION: site work, u'grnd util & foundation

## DOES THE PROJECT INCLUDE ANY OF THE FOLLOWING TYPES OF WORK ?

- |  |                                      |                          |
|--|--------------------------------------|--------------------------|
| New Buildings OR Exterior Work to Existing Buildings   | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| Site Work (changes to Parking, outdoor Equipment, etc) | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| Change in Use OR Expansion of Existing Use             | <input type="radio"/> YES            | <input type="radio"/> NO |

If customer answers "YES" to any of the above questions, application requires Planning review. Planning staff to fill out reverse side of this form.

If customer answers "NO" to ALL of the above questions, do not send application to Planning.


Confirmed by Building staff: \_\_\_\_\_ DATE: 8/31 BY: BS

If, in reviewing the project plans for Building Permit application, there are any issues identified by Building staff that appear to require Planning staff review, please indicate those issues below and send the customer to Planning.

BUILDING STAFF COMMENTS: \_\_\_\_\_

DATE: \_\_\_\_\_ BY: \_\_\_\_\_

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE**  
 PERMIT AND CALCULATION SHEET

APPLICATION NO: _____		BLDG PERMIT NO: <u>225-1420-002-74</u>	
GENERAL INFORMATION Bldg. B 2860 Gateway Oaks City of Sac Act # 01-1274		THIS PERMIT IS GOOD ONLY WHEN VALIDATED BY THE CASHIER THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/> MF <input type="checkbox"/>	
CSD-1		COMMERCIAL USE	UNITS
SRCSD	102,795	120,000-#	
CONSTRUCTION		office Bldg.	
IN-LIEU		on 5.34 net acres	
		Phase 3B of	
		BTV Crown Corp Center	
<b>TOTAL FEE</b>	<b>102,745</b>		
APN: <u>225-1420-002-006</u>			
DESCRIPTION/ SUBDIVISION		LOT:	
PROPERTY ADDRESS <u>2060 Gateway Oaks Dr.</u>			
OWNER <u>BTV Crown Equities</u>			
MAILING ADDRESS <u>6076 Gateway Oaks Dr.</u>			
CITY-STATE-ZIP <u>Sacramento, CA 95833</u>		PHONE <u>969-1900</u>	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE 			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

RECEIPT