

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0100764

Insp Area: 4

Site Address: 1425 RIVER PARK DR SAC

Parcel No: 277-0286-027

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

MARKET ONE BUILDERS INC
1419 N MARKET BL #1
SACRAMENTO CA 95834

OWNER

POINT WEST ASSOCIATES
1425 RIVER PARK DR #530
SACRAMENTO CA 95815

ARCHITECT

Nature of Work: 2435 SQ FT REMODEL ON THE 3RD FLOOR

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.

X License Class B License Number 737094 Date 1-23-01 Contractor Signature John Russell

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.

X Date 1-23-01 Applicant/Agent Signature John Russell

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 692-99 0002229 Exp Date 10/01/2001

_____, (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.

X Date 1-23-01 Applicant Signature John Russell

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

1311 Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <u>C100764</u>	Insp. Area <u>4C</u>
------------------------------	-------------------------

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1425 River Park Dr. Suite 3rd Floor
 PARCEL # 72-340-84

<p align="center">CONTACT</p> Name <u>John Russell</u> Street Address <u>1419 N Market Blvd. Ste 1</u> City/State/Zip <u>Sacramento, Ca. 95834</u> Phone <u>928-7473</u> FAX <u>928 7475</u> E-mail: _____		<p align="center">LICENSED CONTRACTOR Lic No. # <u>737694</u></p> Name <u>Market One Builders</u> Address <u>same as contact</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>Techspace</u> Address <u>1765 Challenge Way suit 130</u> City/State/Zip <u>Sacramento, Ca 95825</u> Phone <u>565-0888</u> FAX <u>565-0480</u> E-mail: _____		<p align="center">OWNER</p> Name <u>Low</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Fund
 → WORKER'S COMPENSATION POLICY # 692-00 unit 000229 EXPIRATION DATE: 10-1-01

NATURE OF WORK IN DETAIL: Minor office renovations. Work includes Demo partition walls, new partition walls, and rework + upgrade HVAC + lighting.

OCCUPANT/TENANT: Diversified Personnel VALUATION: \$ 33,010

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC		SITE	FIRE	
# Stories	1st flrArea.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
<u>13</u>				<u>B</u>	<u>2-1HR</u>	SPR	ALARM		[H]	[Quad]
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>PW</u>	<u>UTIL</u>
		<u>13 RW</u>	<u>13 RW</u>	<u>NO RM</u>	<u>13</u>					

COMMENTS: provide circuits for 1WH-1 & upgrade panel schedule

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



AIRCO
MECHANICAL, INC.
 CONTRACTORS AND ENGINEERS
 5720 Alder Avenue
 Sacramento, California 95828
 (916) 381-4523 Lic. 311454

AIR OUTLET
TEST REPORT

PROJECT NAME DIVERSIFIED JOB NUMBER 0102030003
 OUTLET MANUFACTURER TITUS TEST APPARATUS FLOD Hood
 SYSTEM VAV

AREA SERVED	OUTLET				DESIGN		PRELIMINARY		FINAL		REMARKS
	NO.	TYPE	SIZE	AK	CFM	VEL	VEL OR CFM	VEL OR CFM	VEL	CFM	
VAV 3-3	1	SI	8"		290					290	
OFFICE OL	2	SI	8"		290					290	HIGH .55
					580					580	
VAV 3-2	1	SI	10"		120	125				125	
	2	SI	10"		140	140				140	
	3	SI	10"		140	135				135	
	4	SI	10"		150	150				150	
	5	SI	10"		80	90				90	
	6	SI	10"		150	150				150	
	7	SI	10"		140	160				160	
	8	SI	10"		140	120				120	
					1060	1070				1070	
VAV 3-1	1	SI	14		300	120	230	290		290	
	2	SI	14		260	140	290	250		250	
	3	SI	14		260	165	330	230		230	
	4	SI	14		300	150	295	290		290	
					1120	575	1055	1080		1080	

REMARKS

TEST DATE 2-13-01 READINGS BY [Signature]

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 1425 RIVER PARK DR Permit No. 0100764

Building Use: OFFICE Occupancy: B

Building Owner: POINT WEST ASSOCIATES Construction Type: _____

Owner Address: 1425 RIVER PARK DR #530 SAC Sprinkled? [] Yes [X] No

Portion of Building Occupied: 3RD FL Area: 2435 Sq. Ft.

4/23/02  DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By: MW,DLV,TNG,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 City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE