

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0012964
Insp Area: 3

Site Address: 8130 14TH AV SAC
Parcel No 061-0031-015 BLDG. A

Sub-Type: NOTHR
Housing (Y/N): N

CONTRACTOR

OWNER
GRIMES TERRY
3925 POWER INN ROAD
SAC TO, CA 95826

ARCHITECT

Nature of Work: INSTALL AIR COLLECTION AND BALING SYSTEM FOR RECOVERY OF SCRAP PAPER FOR RECYCLING CO.

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 _____ 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 12-28-00 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.

Date 12-28-00 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.

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's policy number are:

Carrier Policy Number _____ Exp Date _____

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 12-20-00 Applicant 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 #

001296A

Insp. Area

31

Applicant **MUST** complete **ALL Unshaded areas**

ADDRESS 3925 POWER INN RD Suite A

PARCEL # 061-0031-015 Lane M25

<p style="text-align: center;">CONTACT</p> <p>Name <u>TERRY GRIMES / FRANK BUENO</u></p> <p>Street Address <u>3925 POWER INN RD</u></p> <p>City/State/Zip <u>SACRAMENTO, CA 95826</u></p> <p>Phone <u>(916) 453-1332</u> FAX <u>(916) 454-1134</u></p> <p>E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name <u>OWNER / BUILDER</u></p> <p>Address _____</p> <p>City/State/Zip <u>SAME</u></p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>A. J. MILLER & ASSOC.</u></p> <p>Address <u>5588 FREMONT ST.</u></p> <p>City/State/Zip <u>OAKLAND, CA 94608</u></p> <p>Phone <u>510-655-8401</u> FAX <u>510-655-8425</u></p> <p>E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>TERRY GRIMES</u></p> <p>Address <u>3925 POWER INN RD</u></p> <p>City/State/Zip <u>SACRAMENTO, CA 95826</u></p> <p>Phone <u>(916) 453-1332</u> FAX <u>(916) 454-1134</u></p> <p>E-mail: _____</p>

Will permittee have any employees on the job site? No Yes → INSURANCE CO. ICW

→ WORKER'S COMPENSATION POLICY # 1699064 EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: INSTALL AIR COLLECTION AND BALEING SYSTEM FOR RECOVERY OF SCRAP PAPER FOR RECYCLING CO.

OCCUPANT/TENANT: TERRY GRIMES GRAPHIC CENTER VALUATION: \$ 200,000.00

FLOOD STATUS:		S.C.A.T. <u>X-1 See County Spec map</u>								
JOB DESCRIPTION		BLDG	SHELL	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occ Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
				<u>F-1?</u>	<u>I?</u>	SPR	ALARM	<u>10</u>	[H]	[Quad]
B	L	P	M	E	F	S		D	PW	UTIL
								<u>10</u>		

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

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 #

0012964

Insp. Area

36

Applicant MUST complete ALL Unshaded areas

ADDRESS 3925 POWER INN RD Suite A

PARCEL # 061-0031-015 Lane 125

<p style="text-align: center;">CONTACT</p> <p>Name <u>TERRY GRIMES / FRANK BUENS</u> Street Address <u>3925 POWER INN RD</u> City/State/Zip <u>SACRAMENTO, CA 95826</u> Phone <u>(916) 453-1332</u> FAX <u>(916) 454-1134</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name <u>OWNER / BUILDER</u> Address _____ City/State/Zip <u>SAME</u> Phone _____ FAX _____ E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>A. J. MILLER & ASSOC.</u> Address <u>5588 FREMONT ST.</u> City/State/Zip <u>OAKLAND, CA 94608</u> Phone <u>510-655-8401</u> FAX <u>510-655-8425</u> E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>TERRY GRIMES</u> Address <u>3925 POWER INN RD</u> City/State/Zip <u>SACRAMENTO, CA 95826</u> Phone <u>(916) 453-1332</u> FAX <u>(916) 454-1134</u> E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: ICW
 → WORKER'S COMPENSATION POLICY # 1699064 EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: INSTALL AIR COLLECTION AND BALEING SYSTEM FOR RECOVERY OF SCRAP PAPER FOR RECYCLING CO.

OCCUPANT/TENANT: TERRY GRIMES GRAPHIC CENTER VALUATION: \$ 200,000 ∞

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 flr Area	Total Area	Use Zone	Occ Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
				<u>E-2 II</u>		SPR	ALARM	<u>10</u>	[H]	[Quad]
B	L	P	M	E	F	S		D	PW	UTIL
								<u>10</u>		

COMMENTS: _____

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

Date of Request: _____

By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

X Project Address: 3925 Power Inn Rd

Assessor's Parcel Number: 061-0031-015

Previous Use: Printing Company

X Description of Request/Proposed Use: _____

Is This a Change of Use? _____

Zoning Designation: M2S

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: Recycling paper needs special permit

Are There Any Planning Issues?: (circle one) YES NO

* Staff Site Plan Check Required? (Circle one) YES NO

* Field Inspection Required? (Circle one) YES NO

* Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: [Signature]

OK
D. Smith
10-27-00

10-11-00

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

264-
E2T 8289

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: GRAPHIC CENTER Phone: 916-453-1332
 Site Address: 8130 14TH AVE., SACRAMENTO, 95826 Suite: _____
(Street) (Zip)
 Business Owner/Representative: FRANK BUENO Phone: (916) 453-1332 X118
 Nature of Business: COMMERCIAL PRINTER
 Property Owner: TERRY GRIMES Phone: (916) 453-1332
 Address: 3925 POWER INN RD. Suite: _____
SACRAMENTO, CA 95826
(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. Is/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. Is/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: FRANK BUENO
(Print)
Frank Bueno 12-28-00
(Signature) (Date)

BID Use Only: Plan Ck # <u>001216A</u> Permit # <u>001216A</u>
OK to issue prmt? <input checked="" type="checkbox"/> <u>12/28/00</u> F.D. Appr Req'd? <input checked="" type="checkbox"/> Yes No
Hold on Certificate of Occupancy? <input checked="" type="checkbox"/> 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

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 not) HAVE 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:

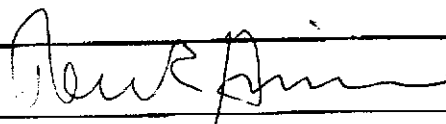
Name WESCO- INDUSTRIES Address 910 23RD AVE
 City OAKLAND Telephone 510-534-3320
 Contractors License No. 246673

- 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 SAME AS ABOVE 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
<u>CARSON ELECT.</u>	<u>SACRAMENTO</u>	<u>916-391-7791</u>	<u>ELECTRICAL</u>
<u>KLENNER EXCAV.</u>	<u>SACRAMENTO</u>	<u>916-991-3787</u>	<u>CONCRETE</u>

Signed 

Job Address 8130

Permit No: 0012964

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
Review		Mid Review		Final Review	
IN	OUT	IN	OUT	IN	OUT
/ /	/ /	/ /	/ /	/ /	/ /

PLAN CHECKER: _____
 ADDRESS: _____
 Commercial Residential



ACCEPTED BY: SM

DISCIPLINE	RECEIVED			NOTED			REPLACES		
	DATE	BY	DESC	DATE	BY	DESC	DATE	BY	DESC
LISS SAFETY	13	JT	11/1/00						
LISS UTILITIES	3	JT	11/1/00						
LISS MECHANICAL/DUMBING									
LISS ELECTRICAL	13	T.L.M.	11/1/00						
LISS PLUMBING	NOT AN EXPRESS PROJECT						11-1-00	BSF	
LISS PAVING									

STAFF COMMENTS:
