

OFFICE COPY THIS IS A 2 PART FORM WRITE ON A FIRM SURFACE

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).

Lenders Name _____
Lenders 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 C-45 Lic. Number 745555
Date 6/23/04 Contractor Alan Ford
(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 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 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 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 Sec. _____ B. & P.C 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 of this city to enter upon the abovementioned property for inspection purposes.

6/23/04 Alan Ford
Date Signature of Applicant or Agent

USE BLACK INK BALL POINT PEN - PRESS FIRMLY SIGN PERMIT APPLICATION

SITE ADDRESS 1420 65th St. SUITE B-7 INSP. AREA 1

ASSESSOR PARCEL NO. 008-0010-003 PERMIT NO. 0410879

LICENSED CONTRACTOR Visible Graphics ADDRESS 14732 Colwell St Van Nuys, CA ZIP CODE 91411 PHONE NO. (825) 890-6446
BUSINESS OWNER Jamba Juice 1420 65th St. Sacramento, CA

SIGN INFORMATION
 ATTACHED INTERIOR / ELECT. SINGLE FACED BILLBOARD / SUBDIVISION
 ILLUMINATED NON-ILLUMINATED PAINTED ON BUILDING LOGO
 INDIVIDUAL LETTERS POLE DOUBLE FACED
 METAL MONUMENT VINYL/CATOR FOAM
 WOODEN PROJECTING RE-FACE
SIGN COPY _____
Jamba Juice
23434
East Elex.

OFFICE USE ONLY
ENGINEERING REQUIRED? YES NO APPROVED BY _____
DESIGN REVIEW REQUIRED? YES NO APPROVED BY 03-077
SPECIAL PERMIT REQUIRED? YES NO # 03-043
VARIANCE REQUIRED? YES NO # _____
LOCATED IN PUD? YES NO WHICH PUD? _____

SIGN VALUATION
A. TYPE OF SIGN Hand Pencil SQ. FT. = 5
B. \$ _____ PER SQ. FT. X _____ DATE 7/2/04
APPROVED BY MA DENIED BY _____

CARRIER STARD
POLICY NUMBER CITY OF SACRAMENTO
DATE JUL 07 2004

FEES: RECEIVED AMOUNT
SIGN APPLICATION FEE 25
SIGN PERMIT FEE _____
ELECTRICAL SIGN FEE _____
CITY BUSINESS LICENSE _____
OTHER _____

TOTAL \$ _____
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.

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Lenders Address _____

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License Class C-45 Lic. Number 745555

Date 6/23/04 Contractor Alan Ford
(Signature)

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I am exempt under Sec. _____ B & P C for this reason _____

Date _____ Owner _____

(Signature)

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6/23/04 Alan Ford
Date Signature of Applicant or Agent

USE BLACK INK BALL POINT PEN — PRESS FIRMLY
SIGN PERMIT APPLICATION

SITE ADDRESS 1420 65th St. SUITE B-7 INSP. AREA 7

ASSESSOR PARCEL NO. 008-0010-003 PERMIT NO. 040097

LICENSED CONTRACTOR Visible Graphics ADDRESS 14732 Colburn St. Van Nuys CA ZIP CODE 91411 PHONE NO. (825) 890-6446

BUSINESS OWNER Jamba Juice ADDRESS 1420 65th St. Sacramento CA PHONE NO. 916-428-1000

SIGN INFORMATION

ATTACHED ILLUMINATED INTERIOR / ELECT. SINGLE FACED BILLBOARD / SUBDIVISION LOGO PAINTED ON BUILDING DOUBLE FACED METAL POLE VINYL/GATOR FOAM PLASTIC MONUMENT RE-FACE WOODEN PROJECTING

SIGN COPY 11 Jamba Juice

S-23433 Westview
CITY OF SACRAMENTO PERMIT SERVICES
BUILDING INSPECTION DIVISION 264-7619

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain workers' compensation insurance to self-insure for workers' compensation pursuant to Section 3700 of the Labor Code, for the period 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. The workers' compensation insurance carrier and policy number are:
WILLIAMS STATE CENTER
State Fund

Carrier

Policy Number 1613937-03

(A) HEIGHT 2' (B) LENGTH 14'
(A X B) SIGN AREA 28 sq ft
POLE SIZE N/A FOOTING SIZE _____
STREET FRONTAGE (FT) _____
OCCUPANCY FRONTAGE (FT) 21'

OFFICE USE ONLY

ENGINEERING REQUIRED? YES NO APPROVED BY _____
DESIGN REVIEW REQUIRED? YES NO APPROVED BY 07-087
SPECIAL PERMIT REQUIRED? YES NO PW DJ-043
VARIANCE REQUIRED? YES NO PW _____
LOCATED IN PUD? YES NO WHICH PUD? _____

SIGN VALUATION

A. TYPE OF SIGN chalk SQ. FT. = \$ _____
B. \$ _____ PER SQ. FT. X _____ SQ. FT. = \$ _____
APPROVED BY m g DATE 7/7/04
DENIED BY _____ DATE _____

FINAL INSPECTIONS

BUILDING INSPECTOR _____ DATE _____
ELECTRICAL INSPECTOR _____ DATE _____

SIGN INSPECTOR _____ DATE _____

FEES:

RECEIVED _____ AMOUNT _____

SIGN APPLICATION FEE 6/23/04 75

SIGN PERMIT FEE _____

ELECTRICAL SIGN FEE _____

CITY BUSINESS LICENSE _____

OTHER _____

TOTAL FEES \$ _____

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.