

**CITY OF SACRAMENTO**

**Permit No: 9901748**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 1**

**Site Address: 79 SCRIPPS DR SAC**

**Sub-Type: REM**

**Parcel No: 295-0370-003 SUITE 204**

**Housing (Y/N): N**

**CONTRACTOR**

GRFENSTONE BUILDERS  
4302 BOLES RD  
PLACERVILLE, CA 95667

**OWNER**

79 SCRIPPS DRIVE LIMITED LIABILITY CO  
2710 GATEWAY OAKS DR 20  
SACRAMENTO CA 95833

**ARCHITECT**

**Nature of Work: INTERIOR REMODEL: ELIMINATE & CONSTRUCT NEW WALLS, REMODEL BATHROOM TO HANDICAP**

**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 28348 Date 2-23-28 Contractor Signature [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 \_\_\_\_\_ 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 \_\_\_\_\_ 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 M/A 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 \_\_\_\_\_ Applicant Signature [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 [REDACTED] BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION  
 PERMIT SERVICES SECTION  
 1231 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # 9901748 Insp. Area 1

Applicant **MUST** complete ALL Unshaded areas this page only

ADDRESS 79 SCRIPPS DR Suite 204  
 PARCEL # 295-0370-003

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>JERRY FISCHER</u>                  Address <u>4302 BOLUS RD</u>  <u>PLACERVILLE CA</u> Zip <u>95667</u>                  Phone <u>(916) 761-6667</u> FAX <u>(530) 295-1642</u></p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. <u>#378348</u></p> <p>Name <u>GREENSTONE BUILDERS</u>                  Address <u>4302 BOLUS RD</u>  <u>PLACERVILLE CA</u> Zip <u>95667</u>                  Phone <u>(916) 985-6915</u> FAX <u>(530) 295-1642</u></p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>GREENSTONE BUILDERS</u>                  Address <u>SAME</u> Zip _____                  Phone _____ FAX _____</p>	<p style="text-align: center;"><b>OWNER</b></p> <p>Name <u>RICHARD A. + ELAINE Y. SHON</u>  <u>MIKE PAVIN</u>                  Address <u>3306 DOUGLAS SUITE 250</u>  <u>ROSEVILLE, CA</u> Zip <u>95661</u>                  Phone <u>(916) 773-1798</u> FAX <u>(916) 773-2845</u></p>

Will the permittee have any employees on the jobsite?  Yes  No

If yes, WORKER'S COMPENSATION POLICY # N/A EXPIRATION DATE: N/A

NAME OF INSURANCE COMPANY: N/A

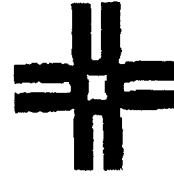
NATURE OF WORK IN DETAIL: T.I. REMOVE + REPLACE WALLS  
REPLACE - CEILING TILES, FLOORING, FIX WALL,  
PAINT  
INTERIOR REMODEL ~~FOR~~ MED OFFICE

DBA: UNIVERSAL CARE VALUATION: \$8600<sup>00</sup>

FLOOD STATUS:				S.C.A.T.:						
JOB DESCRIPTION		BLDG	SHEL	APT	TI	REM	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		BLDG	MECH	PLUMB	ELECT		SITE	FIRE		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
<u>2</u>		<u>3150A</u>		<u>B</u>	<u>V-N</u>	Spr <u>N</u> Alarm <u>N</u>		<u>15</u>		
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>MECH</u>	<u>PLUMB</u>	<u>S</u>		<u>D</u>	<u>R</u>	
	<u>134L</u>	<u>13JMT</u>						<u>SD</u>		

COMMENTS:  
 MEDICAL GAS LETTER Yes or No. of gas type gas quantities + location or piped.

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No



**UNIVERSAL CARE**

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Corporate Offices:  
1600 East Hill Street  
Signal Hill, CA 90806-3682

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562-981-5816  
(Fax) 562 -981-5074

February 25, 1999

To Whom It May Concern:

This letter is to certify that Universal Care will not be using medical gases at:

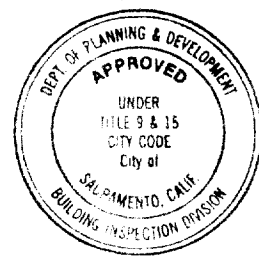
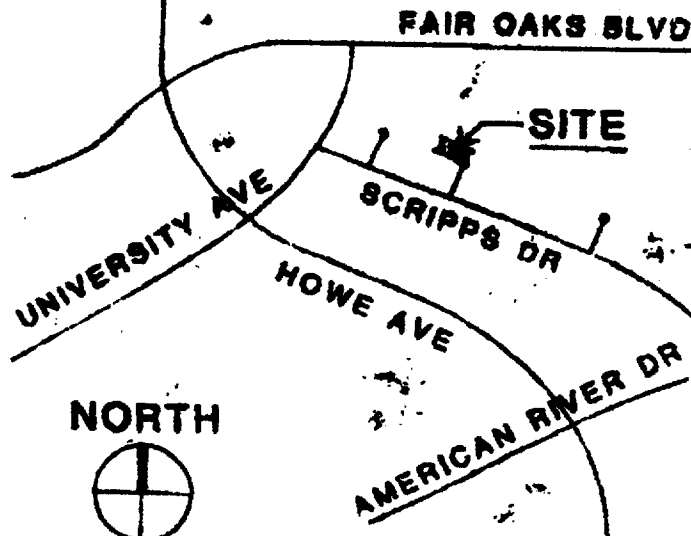
79 Scripps, Suite 204  
Sacramento, CA

Please contact me if you need further information.

Sincerely,

Stuart Gray  
Vice President

# VICINITY MAP



This set of plans and specifications must be kept on the job at all times and it is to make any changes or alterations to same without written permission of the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law



Corporate Offices:  
1600 East Hill Street  
Signal Hill, CA 90806-3682

562 424-6200  
800 635-6666

February 17, 1999

City of Sacramento  
915 "J" Street Rm. 205  
Sacramento, CA 95814

Re: 79 Scripps Suite #204  
Sacramento, CA 95825

To Whom It May Concern:

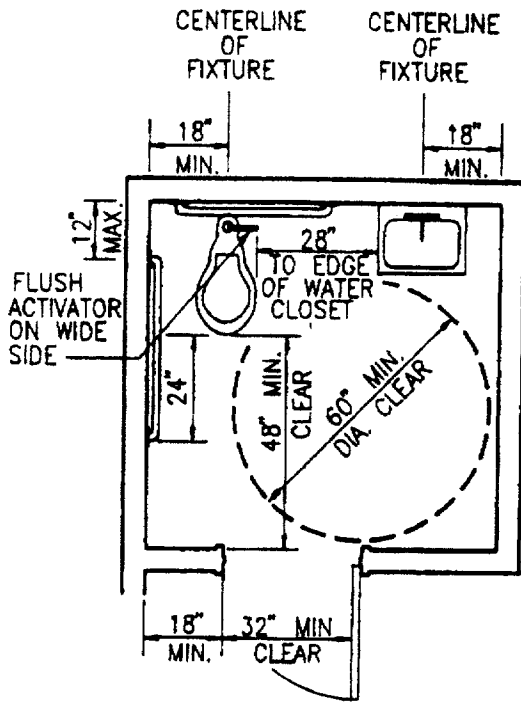
This is to verify that no more than twenty-nine people at any one time will occupy suite 204 at 79 Scripps, Sacramento, California.

If I can assist you further, please do not hesitate to contact me.

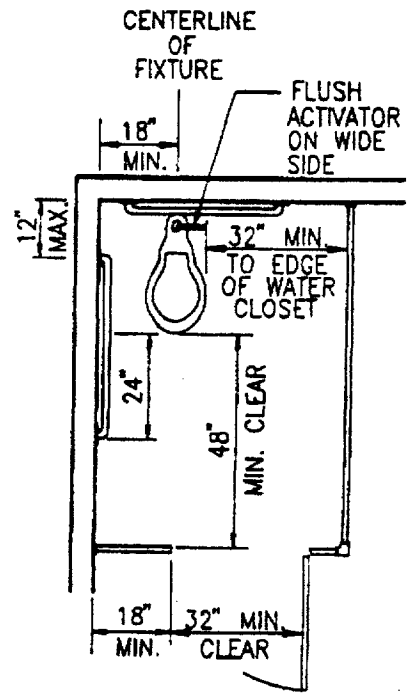
Sincerely,

  
Stuart Gray  
Vice President of Dental Operation  
Universal Care

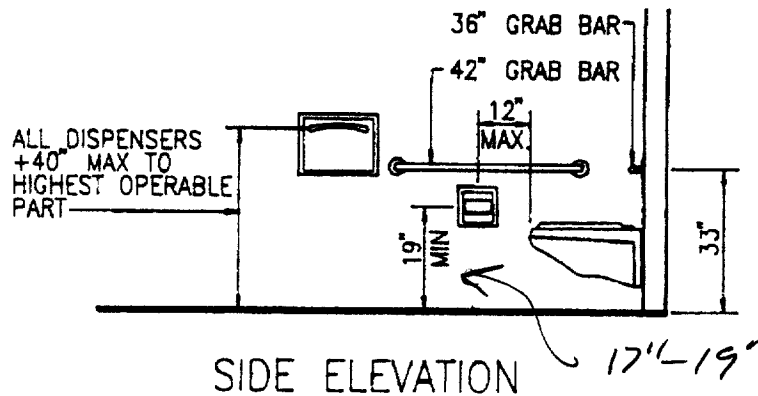
dmr



SINGLE OCCUPANCY TOILET



MULTIPLE TOILET STALL



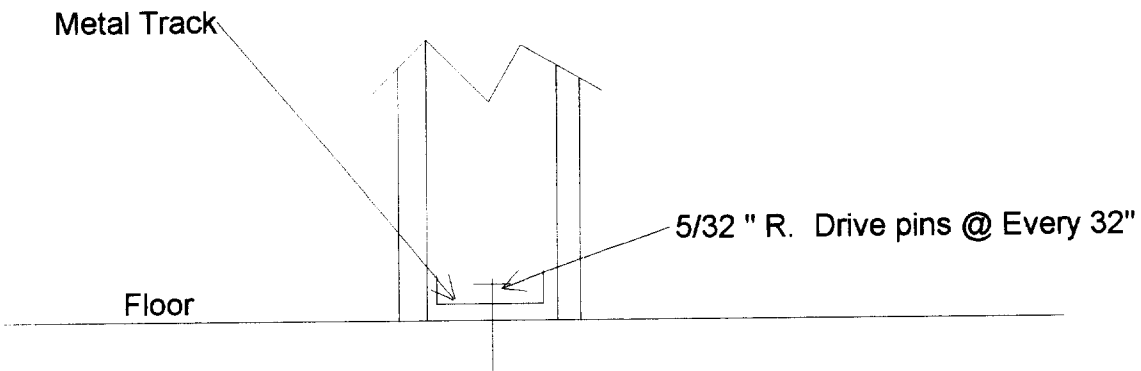
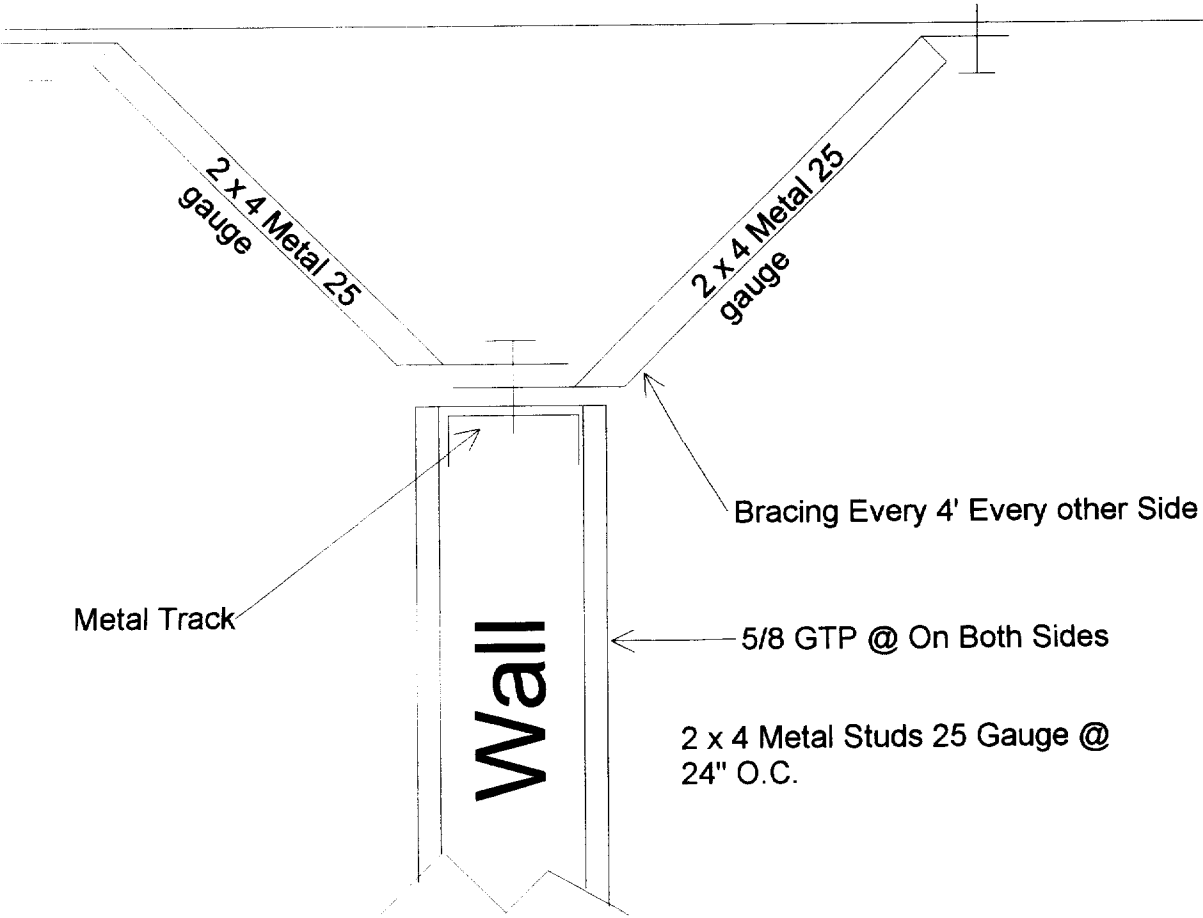
SIDE ELEVATION

**FIGURE NO. 31-1A**

THIS DIAGRAM ILLUSTRATES THE SPECIFIC REQUIREMENTS OF THESE REGULATIONS AND IS INTENDED ONLY AS AN AID FOR BUILDING DESIGN AND CONSTRUCTION

# Bracing Detail

Roof or Rafter

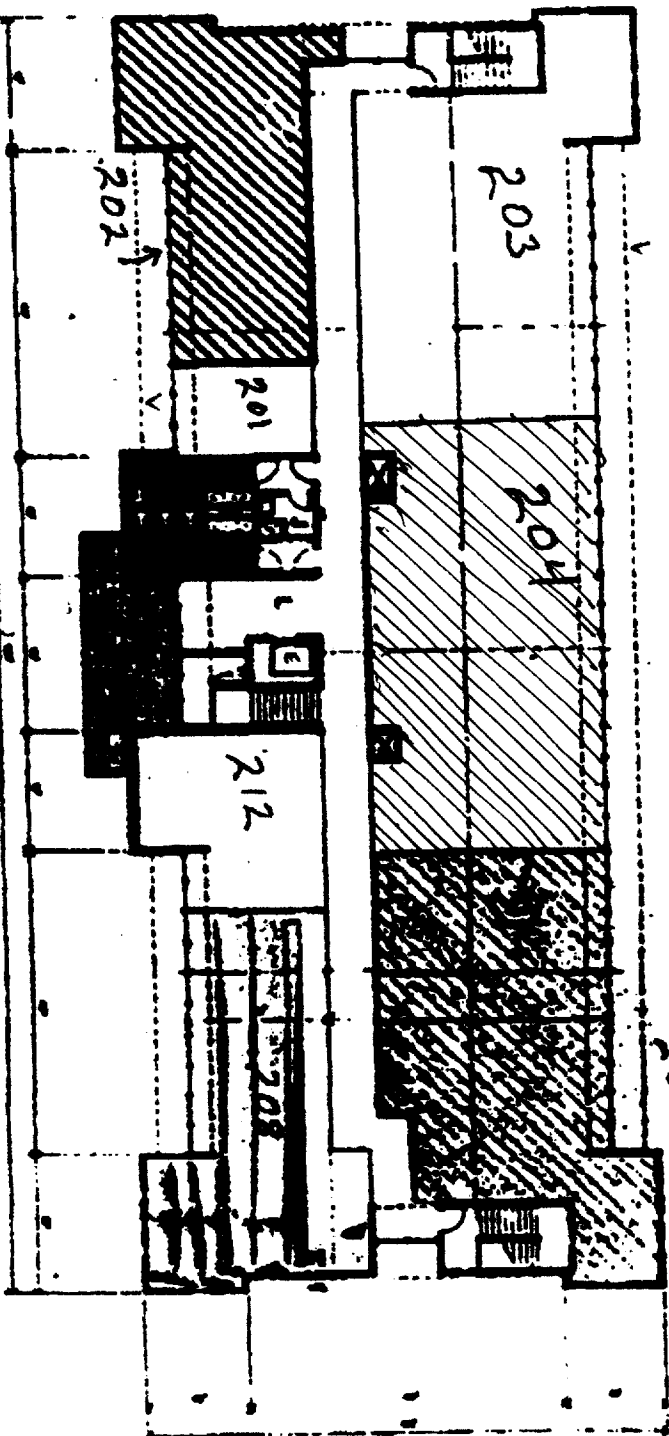


TYPICAL SECTION A

103

FEB 1995

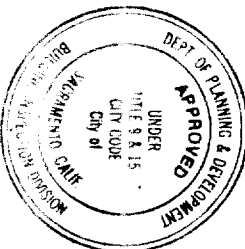
PROPOSED  
REMODEL AREA



Second Floor Plan



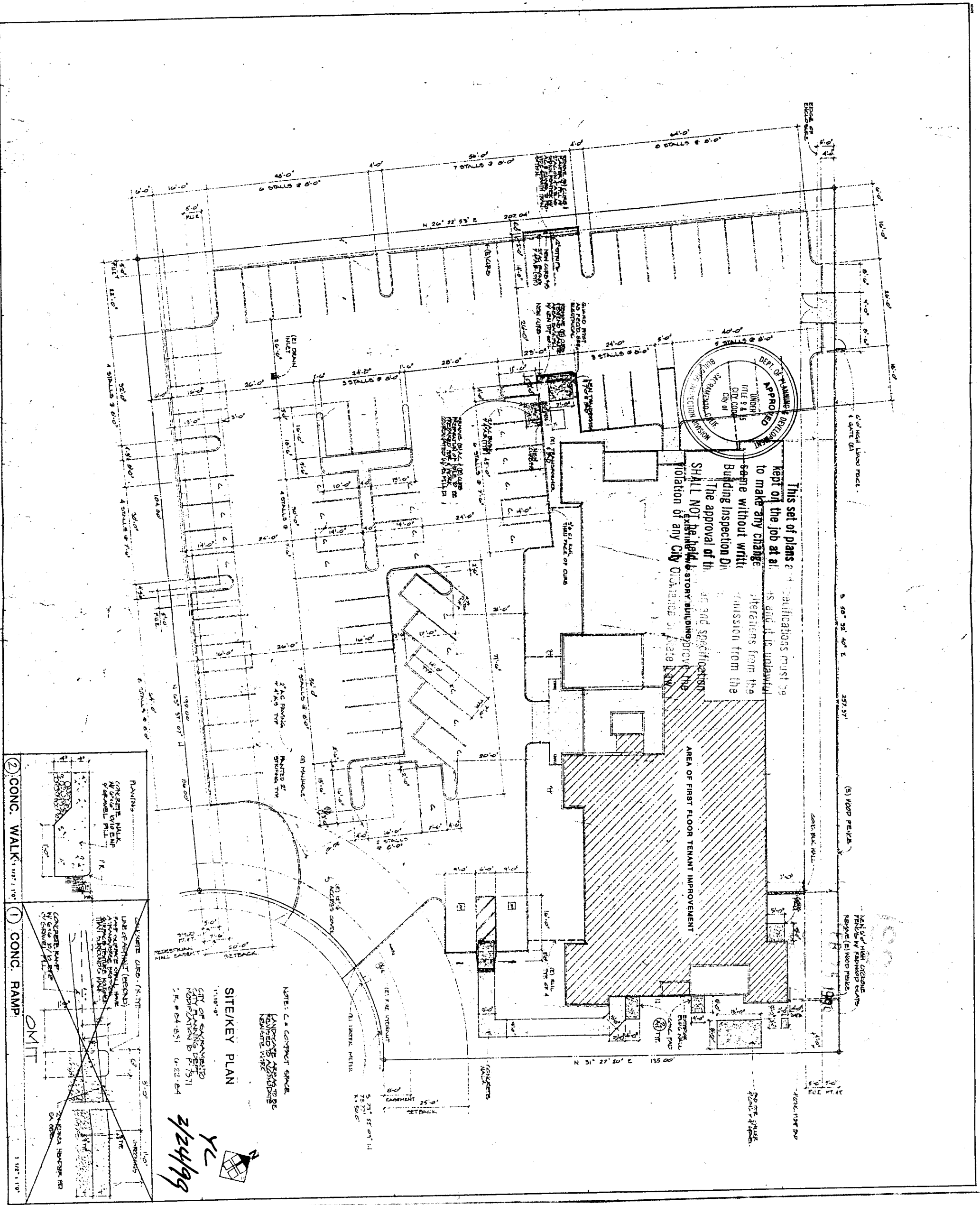
79 scripps drive



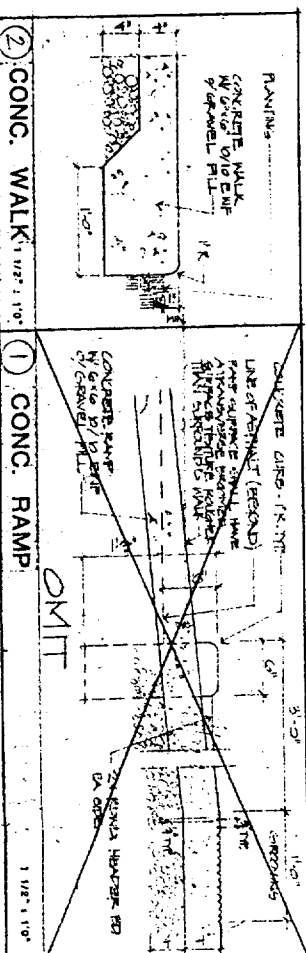
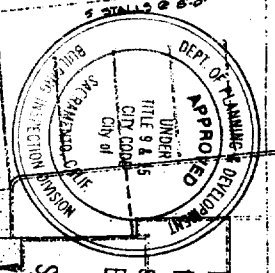
This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from same without written permission from Building Inspector Division.

The approval of this plan is specific. It SHALL NOT be held to permit a new violation of any City Ordinance or State





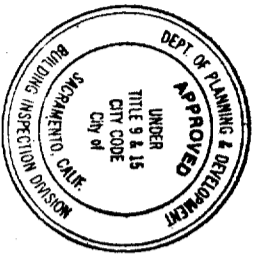
This set of plans and specifications must be kept of the job at all times and it is unlawful to make any change hereafter without written permission from the Building Inspection Division. The approval of this set and specification SHALL NOT be held as a condition of the violation of any City Ordinance or State Law.



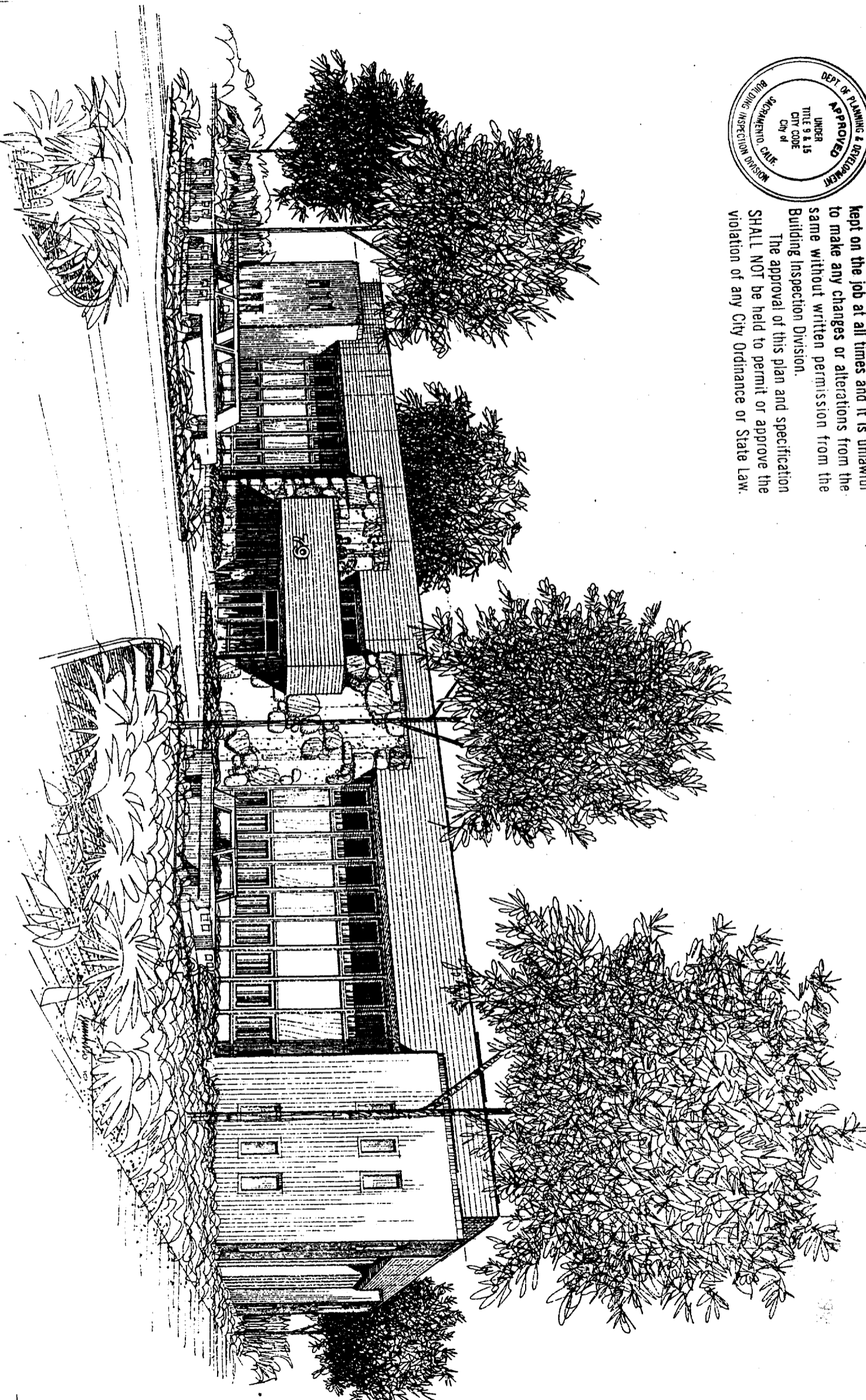
NOTE: C = CONCRETE SPACE  
 HATCHED AREA TO BE REMOVED WORK

SITE/KEY PLAN  
 1/110'-0"  
 CITY OF INDIANAPOLIS  
 CITY PLANNING DEPT.  
 MODIFICATION NO. P-15711  
 1/8" = 1'-0" 11/22/84

YLC  
 2/24/89



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The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



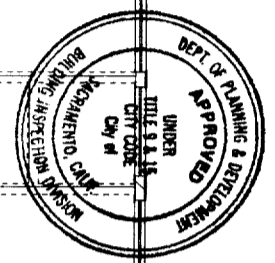
79 scripps drive  
Alan Oshima, Architect

**JOB SITE**  
 79 Scripps Dr. Suite 204  
 Sacramento, Ca.

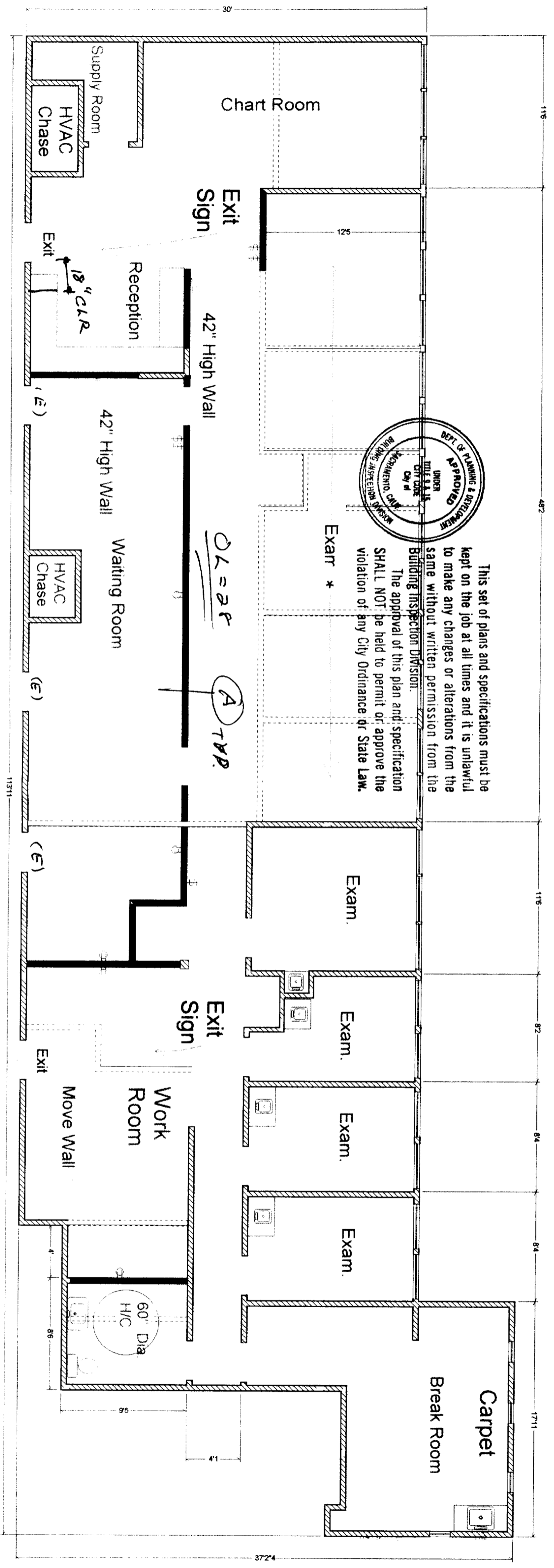
*Replacings exist.  
 outlets as noted 3150 SQ. FT.  
 3-10 99 Jhy*

**ISSUES**  
 4-18-95  
 1995

**GreenStone Builders**  
 (916) 985-6915  
 (916) 761-6667 Cell  
 Ph.  
 (530) 295-1642 Fax



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 The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



- Schedule**
- Existing Walls
  - New Walls
  - Walls to Remove
  - (E) Existing

- Suspended Ceiling Grid**
- No Change
  - HVAC - No Change
  - Lighting - No Change

- (E) Handicap Restroom in Main Hall**

- (E) Handicap Parking**

- Move plumbing for sink  
 (E) Toilet plumbing  
 All Doors to Hall are 3' X 9' X  
 1 3/4" Solid Core  
 With Closer (E)

*The approval of all  
 plumbing and electrical work  
 is subject to field inspection  
 JMT 4/24/99*