

CITY OF SACRAMENTO

Permit No: 9801505

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 2700 GATEWAY OAKS DR SAC #150
Parcel No: 2250230076

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

CONTRACTOR
VALLEY COMMERCIAL CONTRACTOR

OWNER

ARCHITECT
PACIFIC GAS AND ELECTRIC COMPANY

3841 N FREEWAY BL SACRAMENTO, CA 95826
SACRAMENTO CA 95834 Phone: 916-641-8116

Phone:

Nature of Work: INTERIOR REMODEL- LUNCH ROOM. 2081 SF

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 B License Number 739378 Date 3-16-98 Contractor Signature By: [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 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 & 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.

Date _____ 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 and policy number are:

Carrier State Fund Policy Number 046-97 4854
1-1-99

(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 3-16-98 Applicant Signature By: [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.

CITY OF SACRAMENTO
APPLICATION FOR BUILDING PERMIT
DEPARTMENT OF PLANNING AND DEVELOPMENT
BUILDING INSPECTION DIVISION

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

9801505

ADDRESS 2700 Gateway Oaks DR P.C. # 5831 X
 PARCEL # 225-0230-079 SUITE # 150
 AREA # 6-C

CONTACT LICENSED CONTRACTOR Lic# _____
 NAME Richard Neal NAME Valley Commercial Cent. LP
 ADDRESS 3841 N Freeway Blvd 160 ADDRESS 3841 N. Freeway #160
Sac CA ZIP 95834 Sac CA ZIP 95834
 PHONE 916-816-8116 FAX: 1 641 0983 PHONE 916 641 8116 FAX 916 641 0983

ARCH./ENG. OWNER
 NAME DES ARCHITECT NAME LIGHT STREET PARTNERS
 ADDRESS 399 BRUNFELD ST ADDRESS 2710-5 GATEWAY COK #125
RENOVATION CITY CA ZIP 94063 Sac CA ZIP 95833
 PHONE 415-364-1453 PHONE 925-816-9125 FAX 916 915-

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE? YES NO
 NATURE OF WORK IN DETAIL: INTERIOR OFFICE REMODEL - LUNCHROOM

208.1 SF

D.B.A. Provision Financial VALUATION 30,000
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS COST X S.C.A.T.

JOB DESCR. BLDG SHEL APT TI() REM(X) SW FIRE ADD OTH

INSP. DISCIPLINES BLDG MECH PLUMB ELEC SITE FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FIRE ALARM	FED CODE	VIO. FILE
			B	II-1H	Y/N	Y/N	15	
B	D	P	M	E	F	S	D	R

COMMENTS: _____

Worker's Comp Policy # 045-97 0004857
 Company STATE FUND
 Exp. Date 11-99

5831X

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

DATE REVIEW		DATE RECHECK		DATE CHECK	
IN	OUT	IN	OUT	IN	OUT
2/27/98	1/1	3/19/98	1/1	1/1	1/1

PLAN CHECK NO. 5831X	COMM.	RES.
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CONTACT PERSON: Richard Neal PHONE: 916-8116

PROJECT ADDRESS: 2700 Gateway Oaks Dr. FAX:

DESCRIPTION OF WORK: Interior finish remodeling of room
BOB SE

LINE	DATE REVIEW			DATE RECHECK		
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Legend: EPR = OK for Express Plan Review
OC = OK for Over the Counter Rework
APPR = Approved as submitted



INSPECTION CONSULTANTS, LP

Project Name <i>2100 GATEWAY OAKS</i>	Client or Owner <i>ICCN</i>	Job No. <i>981-043</i>
General Location of Work <i>SACTO</i>	Owner or Clients Representative <i>ICCN</i>	Date-Day of Week <i>4-3-98 (Fri)</i>
General Contractor <i>VALLEY COMMERCIAL CONST.</i>	Subcontractor	Project Engineer
Type of Work <i>EPOXY DOWELS INSTALLATION REPAIR</i>	Subcontractor's Superintendent or Foreman	Permit No.
Assignment Cancelled By: <i>N/A</i>	Page <i>1 OF 1</i>	Weather <i>RAINY</i>
		Technician <i>SS</i>

Daily Field Report *OBSERVED INSTALLATION OF 3/8" ALL THREAD EPOXY DOWELS @ NORTHWEST SIDE OF BUILDING. CHECKED DEPTH & CLEARNESS OF HOLES. DEPTH OF HOLES WERE 4" AND HOLES WERE CLEANED & BRUSH OUT A TOTAL OF 12EA. 3/8" ALL THREADS WERE INSTALLED WITH BASE STD W/ 1/2" PLATE. USE FOR STABILIZER FOR WALL. EPOXY USED WAS CIA-GEL 7000 ICCB #4846. INSTALLATION WAS DONE BY TODD OF VALLEY COMMERCIAL CONST.*

Conformance

Non-compliance conditions noted were brought to the attention of _____ for corrective action. Work observed was to the best of my knowledge, in conformance with the (approved) project plans specification, and applicable standards of workmanship; with the exception of items noted above.

Comments Attached

Inspector *Steve Stanley*