

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0101936
Insp Area: 1

Site Address: 300 CAPITOL ML SAC
Parcel No: 006-0142-038 1600

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

CONTRACTOR
ANTHONY & SONS
2906 TERMINAL ST
W SAC CA

OWNER
CAPITOL COMMERCE PARTNERS
180 N LA SALLE ST #3600
CHICAGO IL 95814

ARCHITECT

Nature of Work: OFFICE REMODEL

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 32117 Date 3/15/10 Contractor Signature Angelique Simon

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 March 6, 2001 Applicant Agent Signature Angelique Simon

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 713-00 UNIT 0000126 Exp Date 10/01/2001

(This section need not be completed if the permit is for \$100 or less.) I certify that 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 comply with those provisions.

Date March 6, 2001 Applicant Signature Angelique Simon

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.



~~ROSA~~

Insp. Area 1

AUTHORIZATION TO START WORK

CITY OF SACRAMENTO, BUILDING INSPECTIONS DIVISION
1231 I ST., ROOM 200, SACRAMENTO, CA 95814

Company: ASI - ANTHONY & SONS, INC. PC # 0101936C
Address: 1790 TERMINAL ST, W. SAC, CA 95691 BID App. BS
Job Phone: (916) 373-0707 Office Ph. (916) 373-0707 Fee _____

SUBJECT: Project Address: 300 CAPITOL MAN Suite # 1600

I request permission to start the following work INTERIOR DEMOLITION,
ROUGH HVAC & ELECTRICAL, rough framing
(non-structural/bearing only)
Yong Lim

I realize that all work will be at the owner's and contractor's risk without assurance that the permit for the project will be granted. Any code conflicts will be corrected. I agree not to cover or conceal any work or portion thereof. I realize that inspections will not be made on this project until a building permit is issued. All changes required to conform to the approved plans will be completed without dispute. Work affecting the structural integrity of the existing building is not permitted.

I will expedite necessary revisions, corrections and clarifications as required to obtain the building permit.

If it should be determined subsequently by the City that changes in the design of the building are necessary after commencement of the work authorized, I assume full responsibility and all risk of loss which may result by reason of such changes. I agree that the building shall conform to the approved final plans as amended, without regard to the stage of completion.

This authorization is valid for 30 days while the plans are being processed for permit. These state required declarations must be properly executed before this authorization is valid. This authorization is valid when initialed by authorized Building Department personnel and stamped approved. Keep posted on job site at all times.

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 N/A.

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 the Business and Professions Code and my license is in full force and effect.

Lic. Class: B Lic. Number: 360117 ASI - ANTHONY & SONS
SIGNATURE [Signature] COMPANY NAME _____
DATE 2/13/2001

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Section 703.1, Business and Professions Code: Any city or county which requires a permit to construct, alter, 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 improvement 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 Code for this reason _____

SIGNATURE

DATE

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 the work for which this 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 exp. 10/1/2001

Policy No.: 713-126-00

I certify under penalty of perjury 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.

Alfred Genety 2/13/2001
SIGNATURE DATE

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 FEES.

In issuing this 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 the 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 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, understand and agree to the above conditions. I certify under penalty of perjury that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

Alfred Genety 2/13/2001
SIGNATURE OF APPLICANT OR AGENT DATE

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

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

ACTIVITY # 0101936 Insp. Area 1

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 300 CAPITOL MALL Suite 1600
 PARCEL # 006-0142-038

<p style="text-align: center;">CONTACT</p> <p>Name <u>MERRIN GERETY (AS1)</u> Address <u>1790 TERMINAL ST. W.SAC 95691</u> Phone <u>(916) 373-0707 FAX (916) 373-1523</u> E-mail <u>MGerety@AS1-GC.COM</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>360117</u></p> <p>Name <u>AS1 - ANTHONY & SONS</u> Address <u>1790 TERMINAL ST, W.SAC</u> Phone <u>(916) 373-0707 FAX (916) 373-1523</u> E-mail <u>MGerety@as1gc.com</u></p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>CHMD ARCHITECTS</u> Address <u>2150 CAPITOL AVE, #200 SAC 95816</u> Phone <u>(916) 446-7741 FAX (916) 446-0457</u> E-mail</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>60 JONES LANG LASALLE AMERICA</u> Address <u>300 CAPITOL MALL #275, SAC 95814</u> Phone <u>(916) 447-6300 FAX (916) 443,4758</u> E-mail</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: STATE FUND
 → WORKER'S COMPENSATION POLICY # 713-126-00 EXPIRATION DATE: 10/1/2001

NATURE OF WORK IN DETAIL: INTERIOR TENANT IMPROVEMENT TO EXISTING SPACE.

OCCUPANT/TENANT: DEPT. OF INSURANCE VALUATION: \$ 57,000.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TIC ()	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	PLUMB	<input checked="" type="checkbox"/> ELEC	SITE	FIRE		
# Stories	1st fir Area	Total Area	Use Zone	Occp Group	Const type	Fire Req <input checked="" type="checkbox"/> N	Fed Code	Vio. File		
		<u>6785</u>		<u>B</u>	<u>IFR</u>	<input checked="" type="checkbox"/> ALARM	<u>15</u>	[H]	[Quad]	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> S	<input type="checkbox"/> D	<input type="checkbox"/> PW	<input type="checkbox"/> UTIL	
<u>BT 13</u>	<u>BT 13</u>	<u>AMT 13</u>	<u>AMT 13</u>	<u>MCB 13</u>	<u>EH 13</u>		<u>15</u>			

COMMENTS: state occupied space / sprinklers by State Fire Marshal

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

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: 157 MANHATTAN STREET L.L.C. (TRADING CO) Phone: 916-438-5701
 Site Address: 300 Capitol Mall Suite: 1600
(Street) (Zip)
 Business Owner/Representative: _____ Phone: _____
 Nature of Business: STATE
 Property Owner: _____ Phone: _____
 Address: _____ Suite: _____
(Street) (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: Michelle Swanson
(Print)
Michelle Swanson 3/4/01
(Signature) (Date)

BID Use Only: Plan Ck# _____ Permit # _____ OK to issue prmt? Y _____ F.D. Appr Req'd? Yes No <small>init date</small>	
Hold on Certificate of Occupancy? Yes No	
Fire Dept. Use Only:	
OK to issue permit? ini _____ date _____ OK to issue Certificate of Occupancy? init _____ date _____	

CIRCO System Balance, Inc.

SB JOB# _____
 SECTION _____ PAGE _____
 DATE 4-2-01

TEST SHEET

AREA SERVED 16th floor UNIT (F) VAV

ROOM	OPENING			FACTOR	DESIGN		TEST #1		TEST #2		TEST #3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
						VAV 16-17						
	11	CD	8x8	1.0		115	160	120				
	12	↓	↓	↓		240	310	235				
	13	↓	↓	↓		240	340	240				
	14	↓	↓	↓		180	230	175				
						775		770				225
						VAV 16-27						
1666	15	CD	12x12	1.0		300	110	315				120
						VAV 16-7						
1633	16	CD	12x12	1.0		450	450	445				
1631	17	CD	12x12	1.0		450	120	430				
						900	570	875				295
						VAV 16-18						
	18	CD	10x10	1.0		270	280	275				
	19	↓	↓	↓		270	120	275				
	20	↓	↓	↓		270	335	290				
	21	↓	↓	↓		270	550	290				
						1080		1110				410
						Cont.						

REMARKS: _____



CHARTER MEMBER OF ASSOCIATED AIR BALANCE COUNCIL

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: March 30, 2001

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

300 Capital Mall #1600

Has been conducted by Inspector

Craig Pack

On 03/29/01

194
01-01936-199
Permit Number

6,785
Square Footage

TI
Type of Inspection

The system is acceptable by this department

By: 
Sacramento City Fire Prevention Division

TI-930
F.D. Reference Number