

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0008536
Insp Area: 2

Site Address: 6670 VALLEY HI DR SAC
Parcel No: 117-0330-005

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

CONTRACTOR

OWNER

ARCHITECT

M M D D SACRAMENTO PROJECTS(B/A VAN RUIT
6640 VALLEY HI DR
SACRAMENTO CA 95823

ERIC BLOOM
4437 KENNITH AVE
FAIR OAKS, CA. 95638

Nature of Work: REMODEL EXISTING RESTAURANT (BURGER KING INTO CHURCHES CHICKEN)

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 _____

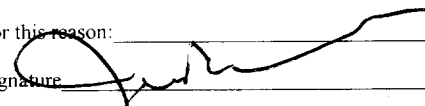
LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

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).

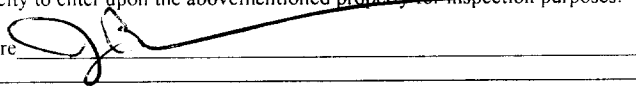
I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, 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 11/16/00 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 11/16/00 Applicant/Agent Signature 

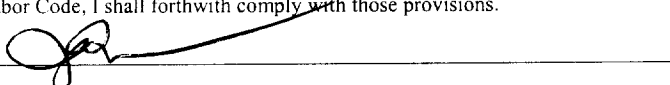
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

____ 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 and 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 11/16/00 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.

CITY OF SACRAMENTO
BUILDING INSPECTIONS DIVISION
PERMIT SERVICES

PERMIT # 00-08536

ADDRESS: 6670 Valley Hi

This application will need one or more of the following items
before it can be issued:

- Owner/Builder Form (legal document)
- Current Certificate of Workers' Comp.
- Hazardous Materials Form (hazmat)
(Orig. in folder, golden-applicant, 2 to fire)
- Letter of Authorization Required to sign by Contractor or Owner
- School Impact Fee (copy of paid receipt)
- HCD Forms (state 445-4782) for Modular/Coaches
- County Regional Sanitation Fee (copy of receipt)
(Deloras Ross @ 827-7th street, Rm 105, window, 10-ph:875-6679)
- Habitat Conservation Plan Fee (Bob Robinson or Farmarz Ansari)
- PERMIT FEES \$ 940.02 Duc

Driveway Permit \$ _____
(public works)

Encroachment Permit \$ _____

Special Conditions (enter computer, mark margin of permit at final, attach instructions to permit, and 1 copy in each folder)

Special Inspections XI (1 copy each folder, 1 to Val Brown)

Flood Elevation Certificate (1 copy B. Nakashima, 1 in folder)

Other _____

Notified James Bonner

Date Notified 11/16

Plans in Bin# 36

Initials By AR

Processed By: _____

* CUSTOMER TO PROVIDE APPROVED HEALTH-DEPT.
PLANS FOR REVIEW BEFORE ISSUING PERMIT PER
JMT.

Microfilm @ Final

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) _____
2. I (have/have not) _____ 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 _____ Address _____

City _____ Telephone _____

Contractors License No. _____

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 _____ 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

Signed [Signature]

Job Address 6670 Valley Hi Dr

Permit No: 0008536



REQUEST FOR SEWER FEE QUOTE

00-08536

DATE	7-26-00			NUMBER OF PAGES	
FROM	City of	REQUESTOR		FAX	PHONE
TO	SRCSO Customer Service	RESPONDER		FAX 875-6253	PHONE

URGENT -- Applicant is in office or ready to pay permit

IWK FINE If urgent, call 875-6820 to notify an Engineering employee that you faxed a request. Press zero to speak to the operator.

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME		PHONE	
	James Bonner		730 8251	
Property	ASSESSOR'S PARCEL NUMBER(S)		PROPERTY ADDRESS	
	117-0330-005		6670 VALLEY HI DR	
Project	PLAN CHECK # BUILDING PERMIT NO	(mark all that apply)		
	0008536	New construction	Remodel <input checked="" type="checkbox"/>	Change in use
	USE	CURRENT // PREVIOUS	PLANNED	
		Burger King	— CHURCHES CHICKEN RESTAURANT REMODEL	
	SQUARE FOOTAGE	CURRENT // PREVIOUS	PLANNED	
		3306	3306 NO FEES DUE PER DELORS ROSS	

11-15-00



RECEIPT
ENVIRONMENTAL MANAGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

RECEIVED FROM: James Bonner / Sonia Marie Naveda DATE: 7/26/00
ADDRESS: 7230 So. Land Park Dr., Sac. CA 95831
AMOUNT RECEIVED: \$ 733.00 CHECK NO.: 1564 CASH
FACILITY NAME: Church's Chicken
FAC. ADDRESS: 0670 Valley Hi

REVENUE DESCRIPTION: (KEY 33)

- PLAN CHECK - FOOD
- PLAN CHECK - POOLS
- PUBLIC POOL FEE (CONSTRUCTION INSPECTIONS)
- PLAN CHECK - NOISE
- PLAN CHECK - TENTATIVE PLOT APPROVAL

COST CTR.	REVENUE	ORDER #	AMOUNT
6206202304	96964301	E32142	\$ 733.00
6206202304	96964302	E32142	\$
6206202304	92929018	E32131	\$
6206202304	96964403	E32143	\$
6206202304	96964402	E32142	\$

SIGNATURE: Colleen Mantorza

12/3/98

W:\DATA\FORMS\EHD\EHPLANCK.DOC White - Cashier Yellow - Customer Pink - Environmental Management Department

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 # 00-08536 Insp. Area 2C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 6670 Valley Hi Suite _____
 PARCEL # 117-0330-005

<p align="center">CONTACT</p> Name <u>DAMES BONNER</u> Street Address <u>7230 S. Land Pk Dr #115</u> City/State/Zip <u>Sac, Ca 95831</u> Phone <u>730-8251</u> FAX <u>428-2795</u> E-mail: _____	<p align="center">LICENSED CONTRACTOR Lic No. # _____</p> Name <u>OWNER Builder</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
<p align="center">ARCHITECT/ENGINEER <u>7311</u></p> Name <u>ERIC Bloom</u> Address <u>4937 Kenneth Ave</u> City/State/Zip <u>FAIR OAK, Ca 95628</u> Phone <u>961-1553</u> FAX <u>967-3011</u> E-mail: _____	<p align="center">OWNER</p> Name <u>Central Valley OSR</u> Address <u>7230 S. Land Pk Dr #115</u> City/State/Zip <u>Sac, Ca 95831</u> Phone <u>392-3000</u> FAX <u>428-2795</u> E-mail: _____

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

NATURE OF WORK IN DETAIL: Remodel Existing Burger King to Cherches (Hucker - New Equipment & Seating, + Ban Ceiling Dining Area.

OCCUPANT/TENANT: _____ VALUATION: \$ 55,000 ⁰⁰/₁₀₀

FLOOD STATUS:			S.C.A.T.								
JOB DESCRIPTION			BLDG	SHELL	APT	TI()	REM(<input checked="" type="checkbox"/>)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" type="checkbox"/> SITE	<input checked="" type="checkbox"/> FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/ <input checked="" type="checkbox"/> N		Fed Code	Vio. File		
		<u>3306</u>		<u>A3</u>	<u>VN</u>	SPR	ALARM	<u>18</u>	[H]	[Quad]	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> D	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	S		D	PW	UTIL	

COMMENTS: CUSTOMER REQUEST THAT HOOD + FIRE SYSTEM TO BE DEFERRED

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

Project Address: 6620 Valley Hi

Assessor's Parcel Number: _____

Previous Use: Barbering

Description of Request/Proposed Use: Church's checka
remodel

Is This a Change of Use? No

Zoning Designation: R2

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

Comments: _____

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] 10-12-00

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

MICROFILM AFTER FINAL