

CITY OF SACRAMENTO

Permit No: 9804601

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Site Address: 8531 THYS CT SAC

Sub-Type: NOTHR

Parcel No: 0620070005

Housing (Y/N): N

CONTRACTOR

R&D Lamb Elect.
7831 Dry Creek Rd.
Sacramento Co. 95838

OWNER

DO, TIM
20 LIGHT SKY CT
SAC CA 95827-6043

ARCHITECT

Nature of Work: RACKING, FREEZERS, AND A SINK. INSTALL NEW 400 AMP SERVICE AND 400 AMP SUBPANEL

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 Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class C-10 License Number 240608 Date 10-28-98 Contractor Signature David T Lamb

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 10-28-98 Applicant/Agent Signature David T Lamb

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 Farm Policy Number 1488067-98 Exp Date 02-01-99

(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 10-28-98 Applicant Signature David T Lamb

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.

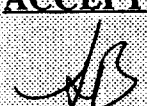
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
First Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
10/23/98	/ /	/ /	/ /	/ /	/ /

PLAN CHECK # 6119X
 ADDRESS: 8531 TIM'S CT
 Commercial Residential

ACCEPTED by (Staff):


DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY				13					
STRUCTURAL				13					
MECHANICAL/PLUMBING				3			13	AM	10/29
ELECTRICAL				3			13	AM	10/28/98
FIRE				13					
PLANNING									

STAFF COMMENTS: THER IS NO LOWER IN PLAN CHECK BUT ENTERED INTO EXPRESS FOR FINAL PLAN CHECK - 3RD CYCLE



SACRAMENTO MUNICIPAL UTILITY DISTRICT P. O. Box 15830, Sacramento CA 95852-1830, (916) 452-3211
 AN ELECTRIC SYSTEM SERVING THE HEART OF CALIFORNIA

October 21, 1998

CATERING FOOD SUPPLY
 ATTENTION: DAVE LAMB
 8531 THYS COURT
 SACRAMENTO CA 95824

W.A. #62538

SMUD COMMITMENT LETTER

Thank you for submitting your plans for **8531 Thys Court** for an electric service commitment. Your cooperation enables us to give you the best service possible, as well as provide for your future requirements.

We are returning one copy of your plans indicating the service location and other requirements checked below. Our commitment is subject to changing conditions and, as a result, may not be valid after twelve months.

Please contact the Estimator if additional information is desired.

Estimator: Tim Kennedy

Telephone (916) 732-5796

Service will be: Overhead Underground

Volts: 120/208 Phase: 3 Wire: 4 Type: STAR

(Street light service voltage will be the same as above.)

Transformer pad required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	SMUD Dwg. _____
Conduit required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	(see sketch)
Right-of-way required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Transformer protection required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	see sketch and SMUD Dwg. _____
Primary pull box required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Number: SMUD Dwg. _____
Service box required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Number: SMUD Dwg. _____
Switchgear pad required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Number: SMUD Dwg. _____
Street light service box required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	(see sketch)
Other requirements:	See enclosed	Booklet <input type="checkbox"/>	Prints <input type="checkbox"/>

*A maximum fault current of 20,800 amps symmetrical is based on the largest transformer that could be needed to serve the Single Combined main sizes of 400 amps.

Metering will be outside, if possible. If in a meter room, door must be keyed for SMUD key. Contact the Estimator for details.

*If future load growth necessitates increasing the main switch size, the available fault current should be recalculated.

NOTE: This commitment letter may be required by local inspection authority as part of its plan check requirements.

**CITY OF SACRAMENTO
APPLICATION FOR BUILDING PERMIT**

9804601

**DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES DIVISION**

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

→ Applicant must complete ALL Unshaded areas ←

PC# <u>6119</u>	AREA #
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ADDRESS 8531 Ttys Ct Sacto, CA 95828 Suite _____
 PARCEL # 062-0070-005

CONTACT Name <u>TIM DO</u> Address <u>8531 Ttys Ct Sacto, CA</u> Phone <u>387-6497</u> FAX <u>387-6490</u>		LICENCED CONTRACTOR Lic No. # _____ Name _____ Address _____ Phone _____ FAX _____	
ARCHITECT/ENGINEER Name _____ Address _____ Phone _____ FAX _____		OWNER/TENANT Name <u>TIM DO</u> Address <u>90 LAHTSKY W SACTO, CA</u> Phone <u>387-6497</u> FAX _____	

→ Will the permittee have any employees on the jobsite? Yes No
 → If yes, WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____
 NAME OF INSURANCE COMPANY: _____

NATURE OF WORK IN DETAIL: 10' High. Installed pallet racks, Replaced freezer installed walk-in freezer, installed tile floor, Replaced carpet window, changed two compartment sink to three compartment sink required by Health Dept. Electrical for freezers converting building to food prep bldg. (N) Alarm security.

DBA: _____ VALUATION: 10000.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI()	REM()	SW	FIRE	ADD	<u>OTH</u>
INSP. DISCIPLINES		<u>BLDG</u>				<u>PLUMB</u>	<u>ELEC</u>	<u>SITE</u>	<u>FIRE</u>	
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. <u>Y/N</u>	Fed Code	Vio. File		
						Spr	Alarm <u>Y/N</u>	<u>10</u>	<u>OK</u>	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>R</u>		
<u>IT</u>	<u>IT</u>	<u>BO</u>		<u>plum</u>	<u>etc</u>	<u>GRS</u>	<u>Bill</u>			

COMMENTS: Provide engineering for racks. need HEALTH DEPT plan + OK Planning note also

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

PC Paid

MEMORANDUM

Sacramento Fire Department

To: BUILDING DEPARTMENT

Date: 12-24-58

From: Gordon Duncan,
Fire Marshal

Subject: **FIRE SYSTEM INSPECTION**

A final inspection of the newly installed fire system at:

8531 THYS COURT

has been conducted by Inspector H. Cooke

on 12-23-58.

48-046-01-C

Permit Number

Square Footage

Permit

Type Inspection

The system is acceptable by this department.

R. Woodman

By: Ross L. Woodman,
Fire Prevention Officer II

TI-206

F. D. Reference Number

CITY OF SACRAMENTO
CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address 8531 Thys Ct

Permit No. 93-04601

Building Use Catering

Occupancy B

Building Owner Tim Do

Construction Type III M

Owner Address 20 Light Sky Ct, Sacramento, Ca

Sprinkled () Yes () No

Portion of Building Occupied _____

Area _____ Sq. Ft.

12/29/98
Date Issued

Ron Pecci
By: Print

Ron Pecci
Sign

Chief Building Inspector
City Building Official

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code as adopted per Title 9 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE