

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9909857
Insp Area: 1

Site Address: 3720 J ST SAC
Parcel No: 008-0132-027

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

CONTRACTOR

OWNER

ARCHITECT

ARIS N KUFASIMES FAMILY TRUST
511 35TH ST
SACRAMENTO CA 95816

Nature of Work: REMODEL FOR ICE CREAM PARLOR

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 a 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).

_____ 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 the same 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.)

→ nh _____ 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: _____

X Date 9/28/99 Owner Signature Nutah [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 above-mentioned property for inspection purposes.

X Date 9/28/99 Applicant/Agent Signature Nutah [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 _____

→ nh 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.

X Date 9/28/99 Applicant Signature Nutah [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
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
First Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
/ /	/ /	/ /	/ /	9/15/99	/ /

PLAN CHECK # 9909857
 ADDRESS: 3720 J St
 Commercial Residential

 ACCEPTED by (Staff):

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY						9/15/99			
STRUCTURAL									
MECHANICAL/PLUMBING						9-15-99			
ELECTRICAL (13) 9-28-99	3	Dm	9/3/99			9-15-99	3	Dm	9/24/99
FIRE									
PLANNING									

STAFF COMMENTS: _____

Date of Request: 9/1/99
By: DP

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: 3720 J St
Assessor's Parcel Number: 008-0132-027
Previous Use: Delic / Retail
Description of Request/Proposed Use: Ice cream - 12 seats

Is This a Change of Use? _____

Prior Applications for Project Site(P#, Z#, DRPB#): _____ Zoning Designation: ~~CE~~ C1
787-~~191~~

Comments: Interior improvements only - Va on.
Pkg for 12 spaces; Pkg credit of 4 spaces from
previous use - Change req. 4 spaces 1/3 seats.
No planning entitlement requirements.

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: D Decker 9/1/99

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

MICROFILM AFTER FINAL



3720 J Street
SALTO. CA. 95816

9809857

EXHIBIT 1

I have read and am familiar with the contents of City's standard Owner-Builder Notification and Owner-Builder Verification, as required by California Health and Safety Code Section 19830 and 19831. I authorize my agent(s) NICK KUFASIMES to sign the Owner-Builder Verification on my behalf.

Signature

George Koufasis

Print Name

GEORGE KOUFASIMIS

Address

511 35th Street

SACRAMENTO, CA 95816

Telephone

(916) 453-1776

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 # **9909857**

Insp. Area **1-C**

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3720 J St SACRAMENTO, CA 95816 Suite _____
 PARCEL # 008-0132-027

CONTACT		LICENSED CONTRACTOR	
Name <u>NICHOLAS KUFASIMIS</u>		Name _____	
Address <u>530 SANTA YACOB WAY</u>		Address _____	
Phone <u>(916) 501-4750</u> FAX <u>(916) 452-4755</u>		Phone _____ FAX _____	
E-mail _____		E-mail _____	
ARCHITECT/ENGINEER		OWNER	
Name <u>Jim Bob Kaufmann</u>		Name <u>GEORGE KOUFASIMIS</u>	
Address <u>1808 Q STREET</u>		Address <u>511 35th Street Sac. CA. 95</u>	
Phone _____ FAX _____		Phone <u>453-1776</u> FAX _____	
E-mail _____		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: WAS A DELI, CHANGING TO AN ICE CREAM ESTABLISHMENT

OCCUPANT/TENANT: Nick Koufasis VALUATION: \$ 10,000 -

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(X)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC	SITE		FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y (N)		Fed Code	Vio. File	
				A B	V-N	SPR	ALARM	18	[H]	[Quad]
(B)	(L)	(P)	M	(E)	F	S		D	PW	UTIL

COMMENTS: _____

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

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 TBD 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 TBD 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
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Signed _____

Job Address 3720 J St SACTO., CA. 95816

Permit No: 9909857