

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0607107
Insp Area: 3
Thos Bros:
Sub-Type: FREESTD

Site Address: 3671 BUSINESS DR SAC
Parcel No: 015-0311-051

UC DAVIS HEALTH SYSTEM

CONTRACTOR
ELLIS & ELLIS SIGN CO.
1111 JOELLIS WAY
SAC 95815

OWNER
VALLADAO GENEVIEVE/JEROME A
771 JOHNSON ST
HALF MOON BAY, CA 94019

PAID
CITY OF SACRAMENTO

MAY 17 2006

Nature of Work: 1 SET- D/F NON- ILLUMINATED POLE SIGN

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

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 C4C License Number 545167 Date 5-17-06 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 _____ 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 5-17-06 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 COMP. Policy Number 000478 127-2006 Exp Date 04/01/2007

(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 5-17-06 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.

301736

Sign Permit Application

2101 Arena Blvd. Ste.200 Sacramento CA 95834

1231 I St. Ste.200 Sacramento CA 95814

(916) 808-5656

* Required Information



Inspection Line

(916) 808-7622 or 808-5716

CITY COPY

Sign Permit # 0607107 Area 3

*Sign Address

3671 BUSINESS DR.

APN # <u>015-0311-054</u>	Zone: <u>M1</u>	DR-PB / PUD / SC:	P / ZA File:
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*Sign Applicant

Property Owner / License Contractor: Full & Full Stone

Address: 1111 JOEY WAY

Phone: 916-924-1936

Contractor License # 545767

Class 045

*Sign Information	Attached	Detached
Bldg. Tenant Frontage	lineal. foot	Parcel Street Frontage <u>232</u> lineal. foot

Sign I.D. Tag	*Ht. x Wth.	= Sign Area	Sign Copy
<u>S 060270</u>	<u>5'8" x 5'6"</u>	<u>20.16</u>	<u>CARE CENTER</u>
<u>S</u>			<u>TRAINING DIVISION</u>
<u>S</u>			<u>UC DAVIS HEALTH SYSTEMS</u>
<u>S</u>			

Required Plan Review Approvals	<input checked="" type="checkbox"/> Structural	<input checked="" type="checkbox"/> Electrical	<input checked="" type="checkbox"/> Design Review
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Code	Final Sign Inspection	Approved	Date
<u>99</u>	<u>FOOTING</u>	<u>D. Pearson</u>	<u>6/6/06</u>
<u>99</u>	<u>BUILDING</u>	<u>RB</u>	<u>6-8-06</u>
<u>98</u>	<u>ELECTRICAL</u>		
<u>n/a</u>	<u>SPECIAL INSPECTION</u>		

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

Fees		\$100.00 per application.	
Total Sign Permit Fees : see Development Fee Schedule			
Cashier	Description	Date	Amount
	Sign Application Fee		
	Other		
	Balance		
Total	Sign Permit Fee		<u>162.07</u>

PAID
CITY OF SACRAMENTO

MAY 17 2006

NEIGHBORHOODS
AND DEVELOPMENT SERVICES

[Handwritten signature]

5/17/06

Approved Sign Permit