

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0013033
Insp Area: 4

Site Address: 2227 RIVER PLAZA DR SAC
Parcel No: 274-0360-008

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

CONTRACTOR
AMERICAN PREFABRICATED STRUCTURES
PO BOX 879
SHERMAN, TX 75091

OWNER
706 WEBSTER ST
PALO ALTO, CA 94301

ARCHITECT
DEMMON FAMILY TRUST

Nature of Work: ADDING 6 NEW CAR PORTS 18X36 (648SQFT EACH)=TOTAL 3888 SF

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 1/4/00 Contractor Signature P. Jmdries

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 1/4/00 Applicant/Agent Signature P. Jmdries

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 1367081-00 Exp Date 9-23-01

(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 1/4/00 Applicant Signature P. Jmdries

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 # 00-13033

ADDRESS: 2227 RIVER PLAZA DR

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 \$ 1714.66 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) X12; X1.25
- Special Inspections XI (1 copy each folder, 1 to Val Brown) Carolin
- Flood Elevation Certificate (1 copy B. Nakashima, 1 in folder)
- Other _____

Please make copy

Um W/ Patricia
Date Notified 12/21 Plans in Bin// 33
Initials By AR Processed By: B.L.

12/20/00

Microfilm @ Final

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 #	Insp. Area
00-13033	<i>[Signature]</i>

[Signature] Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2227 River Plaza Dr, Sacramento CA 95833 Suite HARBOR OAKS APT.
 PARCEL # 274-0360-007

CONTACT Name <u>Patricia Lindner / Harbor Oaks</u> Street Address <u>2227 River Plaza Drive</u> City/State/Zip <u>Sacramento CA 95833</u> Phone <u>(916) 647-7999</u> FAX <u>(916) 921-0981</u> E-mail: _____		LICENSED CONTRACTOR Lic No. # _____ Name <u>Baka Construction</u> Address <u>223 Foster ST</u> City/State/Zip <u>Martinez, CA 94553</u> Phone <u>800-366-9600</u> FAX <u>925-229-0161</u> E-mail: <u>OVER</u>	
ARCHITECT/ENGINEER Name <u>American Pre-Fabricated Structures</u> Address <u>400 E. Mulberry</u> City/State/Zip <u>Sherman TX 75090</u> Phone <u>(903) 892-1911</u> FAX <u>(903) 893-7797</u> E-mail: _____		OWNER Name <u>Demmon Family Trust</u> Address <u>706 Webster St.</u> City/State/Zip <u>Palo Alto CA 94301</u> Phone <u>(650) 330-8130</u> FAX <u>(650) 330-8127</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:
ADDITIONAL 6 CARPORTS THAT WEREN'T ON 1st Permit
ROOF AREA = SF X 6

OCCUPANT/TENANT: Harbor OAKS APT VALUATION: \$ 54,820.80

FLOOD STATUS: <u>NR</u>		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHELL	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	MECH	PLUMB	<u>ELEC</u>	SITE	<u>FIRE</u>		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File
				<u>R1</u>		SPR	ALARM	<u>04</u>	[H] [Quad]
<u>B</u>	<u>I</u>	P	M	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	PW	UTIL

COMMENTS: 276 sq EACH X 6 = 1656
18 X 76 = 1368 X 6 = 8208

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

714.6

Date of Request: _____
By: _____

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

Project Address: 2227 River Plaza Dr

Assessor's Parcel Number: 274-0360-007

Previous Use: Open parking spaces

Description of Request/Proposed Use: to carports.

Is This a Change of Use? No

Zoning Designation: RIA PUD

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] 10-17-00

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

MICROFILM AFTER FINAL