

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0008392**

**Insp Area: 1**

**Site Address: 2019 Q ST SAC**  
Parcel No: 007-0315-018

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

**CONTRACTOR**

**OWNER**  
MARK STEVENS  
10857  
OLGEN DR 95670

**ARCHITECT**

**Nature of Work: REMODEL INTERIOR OF EXISTING RESTAURANT**

**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 8/11/00 Owner Signature [Signature]

**IN ISSUING THIS BUILDING PERMIT,** the applicant represents, and the city relies on the representation of the applicant, that the improvements 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.

Date 8/11/00 Applicant/Agent Signature [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 8/11/00 Applicant Signature [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.**

**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 # <b>00-08392</b>	Insp. Area <b>1C</b>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2019 Q St Sacramento CA Suite \_\_\_\_\_  
 PARCEL # 007.0315-018

**CONTACT**

Name Jim & Judy HARNISH  
 Street Address 915 L 1st Suite C-418  
 City/State/Zip Sacto CA 95814  
 Phone 719-2409 FAX 446 7520  
 E-mail: JHARNISH2@aol.com

**LICENSED CONTRACTOR** Lic No. # \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**ARCHITECT/ENGINEER**

Name CAROL OSFELD  
 Address 4848 9th Ave  
 City/State/Zip Sacto CA  
 Phone 451-2589 FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**OWNER**

Name MARK STEVENSON  
 Address 10857 OLGEN DR  
 City/State/Zip Rancho Cordova, CA 95670  
 Phone 631-0840 FAX 631-9381  
 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: Modify interior of existing restaurant  
SPECIAL Condition # 305 FRI. WET CHEM. System

OCCUPANT/TENANT: Fog Hornettes Candy VALUATION: \$ 10,740<sup>00</sup>

<b>FLOOD STATUS:</b>				<b>S.C.A.T.</b>						
<b>JOB DESCRIPTION</b>		<b>BLDG</b>	<b>SHELL</b>	<b>APT</b>	<b>TI</b> <input checked="" type="checkbox"/>	<b>REM</b> <input type="checkbox"/>	<b>SW</b>	<b>FIRE</b>	<b>ADD</b>	<b>OTH</b>
<b>INSPECTION DISCIPLINES</b>			<b>BLDG</b>	<b>MECH</b>	<b>PLUMB</b>	<b>ELEC</b>		<b>SITE</b>	<b>FIRE</b>	
<b># Stories</b>	<b>1st flr Area.</b>	<b>Total Area</b>	<b>Use Zone</b>	<b>Occp Group</b>	<b>Const type</b>	<b>Fire Req. Y/N</b>		<b>Fed Code</b>	<b>Vio. File</b>	
<u>1</u>	<u>1074</u>	<u>10744</u>	<u>C-2</u>	<u>E</u>	<u>III N</u>	<u>Y/N</u>		<u>18</u>	<u>[H] [Quad]</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>PW</u>	<u>UTIL</u>

COMMENTS: 1000 Health Dept. Receipt 6679 Rob Armstrong

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



REQUEST FOR SEWER FEE QUOTE

PC # 000839Z

DATE	7-24-00			NUMBER OF PAGES	
FROM	City of	REQUESTOR		FAX	PHONE
TO	SRCSB Customer Service	RESPONDER		FAX	875-6253

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

*1WK 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	
	JIM HARWISH		719-2409	
Property	ASSESSOR'S PARCEL NUMBER(S)		PROPERTY ADDRESS	
	007.0315.018		2019 Q ST	
Project	PLAN CHECK # BUILDING PERMIT NO	(mark all that apply)		
	00.0839Z	New construction	Remodel	Change in use
	USE	CURRENT // PREVIOUS	PLANNED	
		RESTAURANT	/ CANDY PRODUCE	
	SQUARE FOOTAGE	CURRENT // PREVIOUS	PLANNED	
		1074 sq ft	1074 sq ft	

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) yes

2. I (have/have not) yes have 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 n/a 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 N/A 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
<u>n/a</u>			

Signed [Signature]

Job Address 2019 Q ST.

Permit No: 0008392C