

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0108672
Insp Area: 4

Site Address: 1425 RIVER PARK DR SAC
Parcel No: 277-0286-027 STE 500

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

CONTRACTOR
VALLEY COMMERCIAL CONTRACTORS LP
2556 CONNARD ST # 700
WOODHILL AND HILLS, CA 95767

OWNER
1425 RIVER PARK DR #530
SACRAMENTO, CA 95815

ARCHITECT
POINT WEST ASSOCIATES

Nature of Work: INTERIOR REMODEL, ADD TWO OFFICES & 1.5 TON SPLIT SYSTEM A/C

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, City Code)

Lender's Name: 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 8 of the Business and Professions Code and my license is in full force and effect.

License Class: B License Number: 739378 Date: _____ Contractor Signature: [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. 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 an 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: 7/2/02 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: STAFF-BUND Policy Number: 046-01 UNIT 0004854 Exp Date: 01/01/2002

This section need not be completed if the permit is for \$100 or less. I certify under penalty of perjury 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: 7/2/02 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 #	0-08672	Insp. Area	4L
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1425 River Park Drive Suite 520
 PARCEL # 277-0286-027

<p align="center">CONTACT</p> Name <u>Tom Feldner</u> Street Address <u>1512 Eureka Rd Ste 220</u> City/State/Zip <u>Roseville, CA 95661</u> Phone <u>781-8116</u> FAX <u>781-8127</u> E-mail:		<p align="center">LICENSED CONTRACTOR Lic No. # <u>739378</u></p> Name <u>Valley Commercial Contractors</u> Address <u>1512 Eureka Rd #220</u> City/State/Zip <u>Roseville, CA 95661</u> Phone <u>781-8116</u> FAX <u>781-8127</u> E-mail:	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>Tracy W. Aguilera Design</u> Address <u>133 N. San Gabriel Blvd #207</u> City/State/Zip <u>Pasadena, CA 91107</u> Phone <u>626-356-0965</u> FAX E-mail:		<p align="center">OWNER</p> Name <u>Salem Communications</u> Address <u>1425 River Park Dr #520</u> City/State/Zip <u>Sacramento CA</u> Phone <u>942-0710</u> FAX E-mail:	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # 046-01-0004854 EXPIRATION DATE: 01-01-02

NATURE OF WORK IN DETAIL: Add two offices and 1.5 ton split system air conditioning

OCCUPANT/TENANT: KFIA Radio VALUATION: \$ 41,000

FLOOD STATUS: <u>NA</u>		S.C.A.T. _____								
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(✓)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>			SITE	FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
<u>5</u>	<u>810</u>			<u>B</u>	<u>011-</u>	SPR	ALARM	<u>15</u>	[H]	[Quad]
<u>B</u>	<u>L</u>	P	<u>M</u>	<u>E</u>	<u>F</u>	S	D	PW	UTIL	
<u>13 ft</u>	<u>13 ft</u>		<u>13 RAW</u>	<u>13 T.L.M.</u>	<u>13 100.</u>					

COMMENTS: NEED T-2A, NEED CONST. TYPE; VERIFY VOLTAGE TO A/C UNIT ON E AND M SHEETS

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

PERMIT SUMMARY DOCUMENT

Bldg Commercial
APPLIED

Address: **1425 RIVER PARK DR SAC** Date Issued:

Permit #: **0108672**

Thomas Bros: 297J1

Area: 4

Location:

APN: 277-0286-027

Owner: POINT WEST ASSOCIATES
1425 RIVER PARK DR #530
SACRAMENTO CA
95815

Contractor: VALLEY COMMERCIAL CONTRACTORS L.P.
21550 OXNARD ST # 760
WOODLAND HILLS, CA
91367

Phone:

Phone: 916-781-8116

JOB DESCRIPTION: INTERIOR REMODEL; ADD TWO OFFICES & 1.5 TON SPLIT SYSTEM A/C

DBA:

Occupancy:

Change of Use: N
Sub-Type: REM

Zoning: ??

Const Type:

Activity Code: I2

DR:

Fire Spk/1hr sub?: /

Cert Req'd: Y

Fed Code: 15

Flood Zone: AR

Balance: \$1,236.11

VALUATION: \$41,000.00 Sq. Ft: 0 Reg San: \$0.00

School Fees Req'd: Y or N

BLDG Y MECH Y PLBG Y ELEC Y SITE N FIRE Y

BLDG L/S MECH PLBG ELEC SITE FIRE UTIL PW

Cycle 1

Cycle 2

Cycle 3

Cycle 4

CONDITIONS: Cond: 207

FRI - Fire Extinguishers