

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9908306
Insp Area: 2

Site Address: 2750 FLORIN RD SAC
Parcel No: 049-0021-042

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

CONTRACTOR
CARI STEIN
POB490
CARMIC AEL CA 95609

OWNER
SILVA JAMES&KAREN
989 PIEDMONT DR
SAC CA 95822

ARCHITECT

**Nature of Work: ROUGH GRADING& FOUNDATION INCL UFER GRND&UNDER FLOOR
PLUMBING.NO UNDERGROUND UTILITIES.**

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 312442 Date 1/23/99 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 _____ 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 _____ Policy Number _____ Exp Date _____

(This section 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 _____ 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.

CITY OF SACRAMENTO FEASIBILITY of

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 # 9908306 Insp. Area _____

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2750 ... Suite _____
 PARCEL # 049-0021-042

| | |
|--|---|
| <p style="text-align: center;">CONTACT</p> <p>Name <u>ANNE STEIN</u> Address <u>8250 BELVEDERE AVE #B</u> Phone <u>451-1110</u> FAX <u>451-0464</u> E-mail _____</p> | <p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>392942</u></p> <p>Name <u>GAIL B. STEIN COMPANY</u> Address <u>8250 BELVEDERE AVE #B</u> Phone <u>451-1110</u> FAX <u>451-0464</u> E-mail _____</p> |
| <p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>WENTON ...</u> Address <u>...</u> Phone <u>...</u> FAX <u>...</u> E-mail _____</p> | <p><u>Jane + Karen F. SUTERA REVOCABLE TRUST</u> Name <u>CSF AUTO INC</u> Address <u>MADISON AVE ...</u> Phone <u>536-5784</u> FAX _____ E-mail <u>989 PIEDMONT DR SAC CA 95822</u></p> |

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

NATURE OF WORK IN DETAIL:
GRADING/FND UNDERGROUND UTILITIES
incl upper & UNDERGROUND UTILITIES
NO UTILITIES

OCCUPANT/TENANT: KRAGEN AUTO PARTS VALUATION: \$ 15000

FLOOD STATUS: AR-BFE(N) S.C.A.T. X2

| | | | | | | | | | | |
|------------------------|--------------|-------------|----------|------------|------------|-----------------|-------------|----------|-----------|------------|
| JOB DESCRIPTION | | BLDG | SHELL | APT | TI() | REM() | SW | FIRE | ADD | OTH |
| INSPECTION DISCIPLINES | | <u>BLDG</u> | | | | <u>PLUMB</u> | <u>ELEC</u> | | | |
| # Stories | 1st flrArea. | Total Area | Use Zone | Occp Group | Const type | Fire Req. Y / N | | Fed Code | Vio. File | |
| | | | | | | SPR | ALARM | | [H] | [Quad] |
| <u>B</u> | <u>L</u> | <u>P</u> | <u>M</u> | <u>E</u> | <u>...</u> | | | <u>D</u> | <u>PW</u> | <u>...</u> |

COMMENTS: Electrical conduit under slab
...
...
...

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed



JOB REPORT

PROJECT NAME: KRAGEN @ 2750 Flomery Rd PAGE: _____
 INSPECTOR: MARK W. CONWAY FILE NO. _____
 PERSONS CONTACTED: JEFF W. CARL B. STEIN DATE: 10-19-99
 REFERENCE DOCUMENTS: SPECS PERMIT #: 990-2183
 WEATHER: _____
 SERVICE PROVIDED: CONCRETE (INSP / SAMPLE ONLY / PU) MASONRY WELDING (SHOP / FIELD) SOILS
 OTHER TORQUE TEST WEDGE AIS

ALL THE SHELVES ANCHOR BOLTS WERE TORQUE TESTED AT A RATE OF 2590 OR HIGHER WITH NO FAILURES WITH THE EXCEPTION OF THE SHELVES ON THE WEST AND SOUTH WALLS WHICH WERE STILL IN PROCESS.

WILL CHECK TOMORROW A.M.

NO FAILURES WERE NOTED

25 lb torque

COMPLIANCE OF WORK: NO EXCEPTIONS -

ATTACHMENTS: _____

EQUIPMENT/SUPPLIES USED: _____

NEXT VISIT: _____

START TIME: _____ ARRIVED JOB: _____ LEFT JOB: _____ OFFICE USE ONLY:

REGULAR TIME: _____ OT: _____ MILES: _____ BILLABLE RT: _____

REMARKS: _____ BILLABLE O/T: _____

REVIEWED BY: _____ BILLABLE MILES: _____



CAPITOL ENGINEERING LABORATORIES, INC.

631 Commerce Drive, Suite #200, Roseville, California 95678 • (916) 786-2488

JOB REPORT

PAGE: _____

PROJECT NAME: KRAGEN @ 2750 Florin Rd FILE NO. _____

INSPECTOR: MARK W. CONWAY DATE: 10-20-99

PERSONS CONTACTED: JEFF w/ CARL B. STEIN PERMIT #: 990-2183

REFERENCE DOCUMENTS: SPICS WEATHER: _____

SERVICE PROVIDED: CONCRETE (INSP/SAMPLE ONLY/PU) MASONRY WELDING (SHOP/FIELD) SOILS

OTHER TORQUE TEST 3/8 WEDGE A.B.

AT THE WEST WALL SHELVES AND SOUTH WALL SHELVES THE 3/8 A.B. WEDGE WIRE TORQUE TESTED AT A RATE OF 2590 OR HIGHER WITH NO FAILURES.

25 LB TORQUE

COMPLIANCE OF WORK: NO EXCEPTIONS NOTED

ATTACHMENTS: _____

EQUIPMENT/SUPPLIES USED: _____

NEXT VISIT: _____

START TIME: _____ ARRIVED JOB: _____ LEFT JOB: _____ OFFICE USE ONLY:

REGULAR TIME: _____ OT: _____ MILES: _____ BILLABLE R/T: _____

REMARKS: _____ BILLABLE O/T: _____

REVIEWED BY: _____ BILLABLE MILES: _____

Chris Oliveira and Assoc.

3269 1/2 Folsom
Upper East
Sacramento, CA 95816
(916) 452-4886
(916) 455-9099 (fax)

rce33407-CA
22119-AZ
07595-NV
2202-UT
35908-WA

Oct. 6, 1999

City of Sacramento
Building Inspection Division

Subject: Kragen at Florin Rd.

Dear Sir:

This letter is to clarify the nailing on the front wall. The plywood shear panel terminates at the ledger line. This nailing is acceptable because the edge nailing is at the member that forms the boundary of the roof diaphragm. It is not necessary to run the shear ply above the ledger on to the parapet.

If any questions arise, please feel free to call.

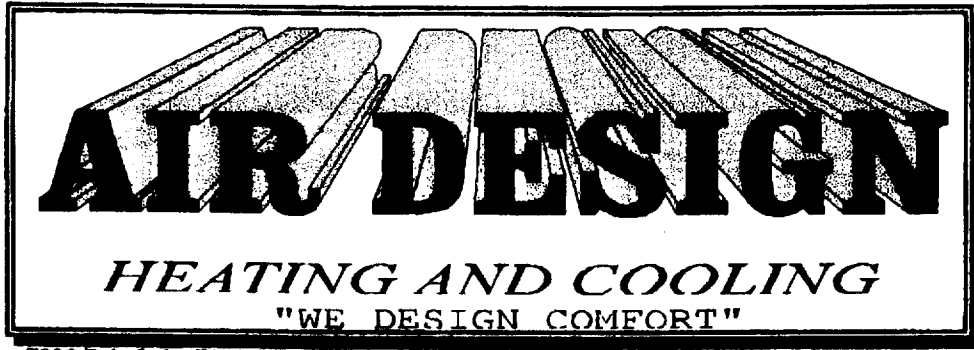
Sincerely,



Chris Oliveira



RECEIVED



7836 Fair Oaks Blvd. * Carmichael, Ca. 95608 * 944-2484 * Fax-944-3307 * Lic #332748

October 26, 1999

FRESH AIR INLET CERTIFICATION

Job: Kragen Auto Store
Florin Road - Sacramento

The 5 Trane Packaged Heat Pumps were examined by me and Fresh air dampers were set to 300 CFM. In the minimum closed position. These Dampers close when unit is OFF. These air flows were measured with the use of an Air Balancing Hood and measured as follows:

| | |
|---------|---------|
| Unit #1 | 305 CFM |
| Unit #2 | 300 CFM |
| Unit #3 | 305 CFM |
| Unit #4 | 310 CFM |
| Unit #5 | 300 CFM |

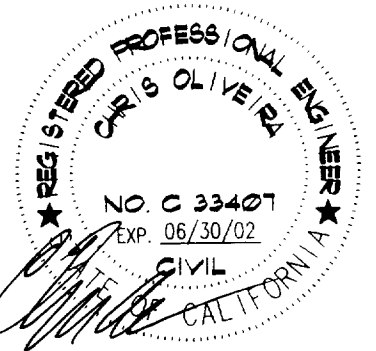
This air flow of fresh air allows proper ventilation to the area as required by Title 24 and the Uniform Mechanical Codes.

Sincerely:

DENNIS MOFFETT, OWNER

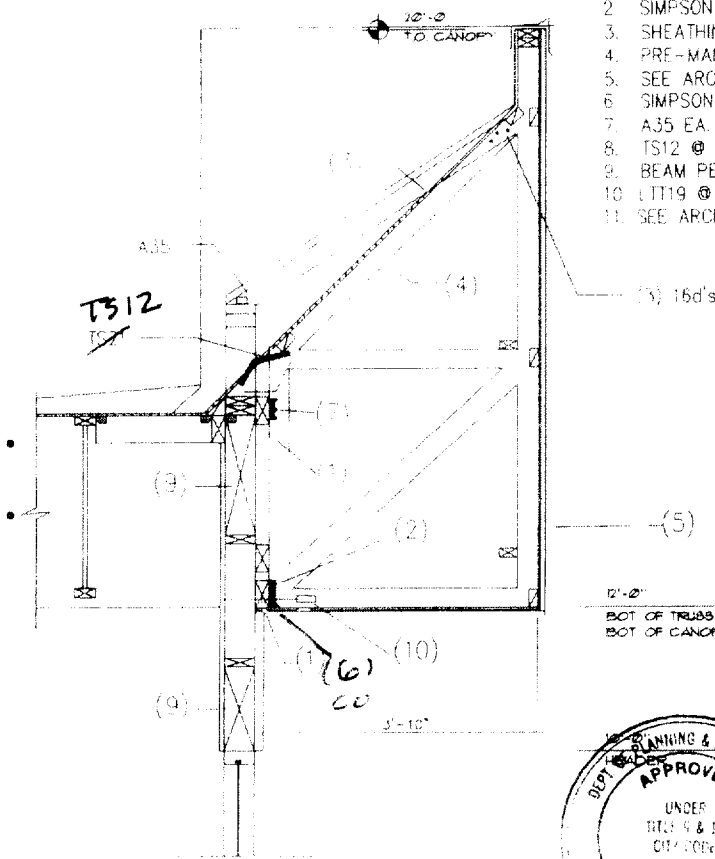


"In Business Over 20 Years In Carmichael"



NOTES:

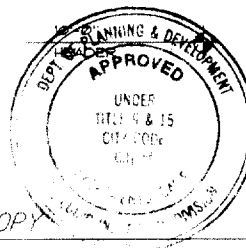
1. 2x6 LEDGER W/ (3) 16d EA. STUD
2. SIMPSON HUS26 EA. TRUSS
3. SHEATHING & ROOFING PER PLAN
4. PRE-MANUF ROOF TRUSS
5. SEE ARCH'L FOR FINISH
6. SIMPSON HU26 HANGER W/ (4) 16d's TO LEDGER
7. A35 EA. TRUSS
8. TS12 @ 24"oc
9. BEAM PER PLAN
10. LTT19 @ 24"oc
11. SEE ARCH'L FOR ADDITIONAL INFO



ISSUED

SEP 23 1999

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIV



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

212

ROOF FRAMING AT FRONT CANOPY

SEP 23 1999

REVISED CANOPY SUPPORT

Scale

Date

C.O.

Page No.

3 TYP.
A-II

2 AT 1-HR. WALL
A-II IF OCCURS SEE PLANS

SHEET METAL CAP FLASHING
W/ HEMMED EDGES, PAINTED

ISSUED

SEP 23 1999

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIV.

RUN ROOFING VERTICALLY
UP THE PARAPET FACE AND OVER
CAP PER MANUFACTURERS SPECS.

1/2" PLYWD SHEAR
5/8" TYPE X' GYP. BD SHEATHING

4" CONTINUOUS CANT STRIP
@ ROOF PERIMETER

CRICKET WHERE OCCURS

ROOF SYSTEM
OVER 3/4" PLYWD OR
OSB SUBSTRATE

2X6 WOOD STUDS @ 16" O.C.
PER STRUCTURAL

2Xx LEDGER RIPPED TIGHT TO
ROOF BELOW AND CRICKET ABOVE

2X10" LEDGER TIGHT TO SHEATHING
4X6" BLKG. BETWEEN STUDS

5/8" TYPE X' GYP. BD COMPLETELY
COVER LEDGER
FIRE TAPE ALL JOINTS & PENETRATIONS

WOOD TRUSSES PAINTED

FIRE BLOCKING @ 10' AFF

5/8" TYPE X' GYP. BD
PAINTED



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written consent from the Building Inspector. The approval of the State Architect is required for any violation of any code.



1-HR. EXTERIOR WALL DTL.

KRAGEN AUTO PARTS
2750 FLORIN ROAD
SACRAMENTO, CA

PLG DATE: 09/23/99
FILE REFERENCE:
WALLSECTION33.DWG
SHEET TITLE:
1HR EXT. WALL DTL.

JOB NO: 98081
PROJECT MGR: JC
DRAWN BY: DD
CHECKED BY: JC