

CITY OF SACRAMENTO

Permit No: 0112713

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Site Address: 8491 FRUITRIDGE RD SAC

Thos Bros:

Parcel No: 061-0173-009

Sub-Type: NOTHR

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

BLT ENTERPRISES
8491 FRUITRIDGE RD
SAC CA 95826

Nature of Work: INSTALL (2) NEW WASTE OIL STORAGE TANKS & CONSTRUCT OPEN CANOPY OVER TANKS

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 11/6/01 Owner Signature [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 11/6/01 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 11/6/01 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.



MatriScope, Inc.[®]
Engineering Laboratories & Consultants

January 28, 2002

File No. 1218

Page 1 of 2

City of Sacramento
Development Services Division
1231 I Street, Room 200
Sacramento, CA 95814
Attn: John Tang, Plan Check Engineer

Re: Final Report Affidavit for Special Inspection and Testing Services

Project: Sacramento Recycling and Transfer Station
8491 Fruitridge Road
Sacramento, California 95826
Permit #0112713 (600)

Dear Mr. Tang:

THIS IS TO CERTIFY that the following on-call inspections and materials testing (UBC, Chapter 17) were performed by certified inspectors/technicians performing such services under the direct supervision of the undersigned.

- 1.) Field Welding Inspection by Certified ICBO inspector of 3/16" beam to column, Tank Canopy.
- 2.) Anchor Bolt Pull Testing by Certified Structural Steel ICBO Inspector.

The work performed, which required special inspection and/or testing, was to our best knowledge, in conformance with the approved plans, specifications, approved changes and the applicable workmanship provisions of the Uniform Building Code (UBC), 1997.

O.K. *ST*
1/31/02

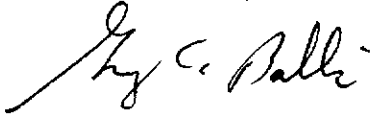
January 28, 2002

File No. 1218

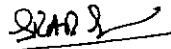
Page 2 of 2

Respectfully submitted,

MATRISCOPE, INC.



Gary C. Balbi, CET
Vice President



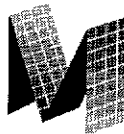
Raja Rodrigo, C.E.



cc: Mr. Sam Iverson / Sacramento Recycling and Transfer Station

(1) 6735.1 **Certification defined**

The use of the word "certify" or "certification" by a registered professional engineer in the practice of professional engineering or land surveying constitutes an expression of professional opinion regarding those facts or findings which are the subject of the certification, and does not constitute a warranty or guarantee, either expressed or implied. [Added, Chapter 229, Statutes of 1986] (*Excerpt from Professional Engineers Act, 1/1/90 Business and Professions Code, State of California.*)



MatriScope, Inc.

Engineering Laboratories & Consultants

3102 Industrial Boulevard • West Sacramento • CA 95691 • 916.375.6700 • Fax 916 375.6702 • info@matriscope.com

January 28, 2002

MS Job No.: 1218

Sam Iverson

Sacramento Recycling and Transfer Station

8491 Fruitridge Road

Sacramento, CA 95826

Project: **Sacramento Recycling and Transfer Station**
Sacramento, CA

REPORT SUMMARY

From: 01/12/02 To: 01/25/02

As directed by **Sacramento Recycling and Transfer Station**, MatriScope, Inc. was present at the above project on the dates shown to provide inspections of the work in progress as follows:

01/28/02 – Monday

Field Welding / Anchor Bolt Pull Testing

Report #5153

I arrived at the project site to observe field welding procedures for 3/16" welds of beams to 6" columns of tank canopy. They were found to be in accordance with plans, specifications for field welds condition X1.17 and AWS D1.1, complete. Also conducted pull test of 3/4" anchor bolts 6" embedment for tank plates. A total of eight bolts, 10% were tested, total of 2, with no failures. Bolts were pulled to 3500psi actual load 9570 pounds. Test results are in accordance with ICBO requirements utilizing pump #10024, Ram# 10274 and gauge 20042, 15 KIP.

Inspector: Robert Becker

Unless noted otherwise, the above work was performed in accordance with the project plans and specifications.

Respectfully submitted,

MatriScope, Inc.

Gary C. Balbi

Vice-President, Operations

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 # 0112713	Insp. Area 3
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 8491 Fruitridge Rd Suite _____
 PARCEL # 061-0173-009

<p style="text-align: center;">CONTACT</p> <p>Name <u>Sam Turson</u> Street Address <u>8491 Fruitridge Road</u> City/State/Zip <u>Sacramento, Ca. 95826</u> Phone <u>1-916-399-0500</u> FAX <u>1-916-399-0501</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name <u>Fuller excavating Luyong Dr</u> Address <u>3283 Luyong Drive</u> City/State/Zip <u>Rancho Cordova, Ca 95742</u> Phone <u>1-916-858-8300</u> FAX <u>1-916-858-8301</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>BAT Enterprises of Sacramento Inc.</u> Address <u>8491 Fruitridge Road</u> City/State/Zip <u>Sacramento, Ca. 95826</u> Phone <u>1-916-399-0500</u> FAX <u>1-916-399-0501</u> E-mail: _____</p>

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

NATURE OF WORK IN DETAIL: Move 2 ea. 1,000 gal Tanks from outside facility and install Tanks at 8491 Fruitridge Road. place Tanks inside Begoned Area

OCCUPANT/TENANT: _____ VALUATION: \$ _____

FLOOD STATUS:				S.C.A.T.								
JOB DESCRIPTION				BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES				BLDG	MECH	PLUMB	ELEC		SITE	FIRE		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File			
					11	SPR	ALARM	19	[H]	[Quad]		
B	L	P	M	E	F	S		D	PW	UTIL		
SUB												

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

REQUEST FOR PLANNING STAFF REVIEW

..... to be filled out by Building staff

CUSTOMER NAME:	<u>SAM IVERSON</u>
PROJECT ADDRESS:	<u>8491 FRUITRIDGE RD</u>
PROJECT DESCRIPTION:	<u>CONSTRUCT OPEN CANOPY FOR</u> <u>(2) NEW WASTE OIL STORAGE TANKS</u>

DOES THE PROJECT INCLUDE ANY OF THE FOLLOWING TYPES OF WORK ?

New Buildings OR Exterior Work to Existing Buildings	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Site Work (changes to Parking, outdoor Equipment, etc)	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Change in Use OR- Expansion of Existing Use	<input type="radio"/> YES	<input checked="" type="radio"/> NO

If customer answers "YES" to any of the above questions, application requires Planning review. Planning staff to fill out reverse side of this form.

If customer answers "NO" to ALL of the above questions, do not send application to Planning.

Confirmed by Building staff: _____ DATE: 10-3-01 BY: [Signature]

If, in reviewing the project plans for Building Permit application, there are any issues identified by Building staff that appear to require Planning staff review, please indicate those issues below and send the customer to Planning.

BUILDING STAFF COMMENTS: _____

DATE: _____ BY: _____



DEPARTMENT OF
NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO
CALIFORNIA

1231 I STREET
ROOM 200
SACRAMENTO, CA
95814-2904


DEVELOPMENT SERVICES
DIVISION

916-264-7619
FAX 916-264-7046

EXHIBIT 1

I have read and am familiar with the contents of the City's Standard
Owner-Builder Notification and Owner-Builder Verification, as required by
California Health and Safety Code Section 19830 and 19831. I authorize my
agent(s) Samuel E. Johnson

to sign the Owner-Builder Verification on my behalf.

* Signature 
* Print Name SHAWN LAUTERENSEN
Address 8491 Francisco Blvd.
Sacramento, CA 95826
Telephone 1-(916)-317-0500

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) 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 _____ 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 _____ 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
Fuller Construction	3283 Laguna Drive	(916) 832 8310	Truck Install

Various construction

* Signed 

Job Address 8191 Fruitridge Rd Sacramento Ca. 95826

Permit No: 98-10239

