

CITY OF SACRAMENTO

Permit No: 9808089

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 1803 TRIBUTE RD SAC Suite 100
Parcel No: 2770283004 UNIT #A

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

CONTRACTOR

OWNER

ARCHITECT

MANCINI-MILLS INC
876 S MILPITAS BL/P O
MILPITAS CA 95036-1930

Nature of Work: Interior Remodel

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 N/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 3 of the Business and Professions Code and my license is in full force and effect

License Class B License Number 631960 Date 9 29 98 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. 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 9-29-98 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 STATE FARM Policy Number 98 011502

(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 9-29-98 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.

CITY OF SACRAMENTO  
APPLICATION FOR ██████████ BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES SECTION  
1231 I Street, Rm. 200  
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # \_\_\_\_\_ Insp. Area 40

Applicant **MUST** complete ALL Unshaded areas this page only

ADDRESS 1500 TRIBUTE ROAD Suite 1020  
PARCEL # 277-0283-004

<p align="center"><b>CONTACT</b></p> <p>Name <u>ZACK AZBLOS</u> Address <u>1914 11TH ST</u> <u>SACRAMENTO</u> CA Zip _____ Phone <u>916 492 2196</u> FAX <u>916 492 2147</u></p>	<p align="center"><b>LICENSED CONTRACTOR</b> Lic No. # <u>631960</u></p> <p>Name <u>ZACK AZBLOS</u> Address <u>1914 11TH ST</u> <u>SACRAMENTO</u> CA Zip _____ Phone <u>916 492 2196</u> FAX _____ <u>2147</u></p>
<p align="center"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>ZACK AZBLOS</u> Address <u>1914 11TH ST</u> <u>SACRAMENTO</u> CA Zip <u>95814</u> Phone <u>916 492 2196</u> FAX <u>916 492 2147</u></p>	<p align="center"><b>MANAG. OWNER</b></p> <p>Name <u>FRANK PIZZONTO</u> Address <u>870 SOUTH MURKINS BLVD</u> <u>MURKINS</u> CA Zip <u>95036</u> Phone <u>916 492 2196</u> FAX <u>916 492 2147</u></p>

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

NAME OF INSURANCE COMPANY: \_\_\_\_\_

NATURE OF WORK IN DETAIL: ALTERATION & EXISTING TENANT SPACES

DBA: UNITED CEREBRAL PALSY ASSOC. VALUATION: 100000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI( )	REM(X)	SW	FIRE	ADD	OTH
INSP. 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	
				B	III-N	Spr N Alarm		B	H	
B	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	S		<u>D</u>	R	
	<u>13</u>	<u>13,117</u>	<u>13 JUT</u>	<u>13 JUT</u>	<u>13</u>	<u>INDUST</u>		<u>BE</u>		

COMMENTS: \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

BLDGFRM. (REV 05/98)  WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS  Yes  No

P 98 062

### City of Sacramento Development Services Division Planning and Zoning Information Request

Project Address: 1803 TRIBUTE ROAD

Assessor's Parcel Number: 277-0283-004

Current Land Use: Office

Description of Request/Proposed Use: Toy Landing for

recreation

9/23/98

25% OFFICE (w/ Warehouse?)

Zoning Designation: M1SR

Prior Applications for Project Site(P#,Z#,DRPB#): P98-062

Comments: Existing building + use - toy landing  
would be consistent with the use.

Are There Any Planning Issues?: (Circle One) YES  NO

Site Plan Check Required? (Circle One) YES  NO

Design Review/ Preservation Required?: (Circle One) YES  NO

Planning Review by/Date: [Signature] 9/22/98

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

P98-062- United Cerebral Palsy

REQUEST: A. **Environmental Determination: Exempt (Section 15301 (a))**  
California Environmental Quality Act

B. **Special Permit** to locate a non residential social service facility for 24 disabled clients and nine staff in an existing facility containing approximately 5,000 square feet on 2.90 developed acres in the Light Industrial (M-1SR) zone.

LOCATION: 1803 Tribute Road, next to eastbound onramp to Capitol Freeway  
APN: 277-0283-004  
Point West area  
Sacramento Unified School District  
Council District 3

APPLICANT:	United Cerebral Palsy Association of Greater Sacramento Contact: Ms. Jo Gates, Executive Director, (916) 565-7700 191 Lathrop Way, Suite N, Sacramento, CA 95815
OWNER:	Mancini Properties/ Brooks Mancini 876 South Milpitas Blvd., Milpitas, CA 95036
APPLICATION FILED:	May 29, 1998
STAFF CONTACT:	Doug Holmen, 264-8267

SUMMARY:

The applicant proposes to use 5,000± square feet of area in an existing warehouse/ office building for a non residential care program providing life support instruction to 24 adults with severe physical disabilities. There are no basic issues associated with the project.

RECOMMENDATION:

**Staff recommends approval of the Special Permit subject to conditions set forth herein.** The Cerebral Palsy Association of Greater Sacramento, Inc. (The Association) has been providing non-residential care in two different locations. One in the Central City at 2730 C Street, and the other at 191 Lathrop Way in North Sacramento. The facilities have been well managed and The Association has always been a "Good

Neighbor" at its two locations, and intends to apply "Good Neighbor" policies at its proposed location on Tribute Road.

PROJECT INFORMATION:

General Plan Designation:	Industrial/ Employee Intensive
Community Plan Designation:	n/a
Existing Land Use of Site:	Warehouse/ office
Existing Zoning of Site:	M-1SR

Surrounding Land Use and Zoning:

North: Warehousing, Industrial; M-1  
 South: Office; M-1SR  
 East: Office; M-1SR  
 West: Railroad ROW; M-1

Property Dimensions:	Irregular
Property Area:	2.90± gross acres
Square Footage of Building:	11,745 square feet
Square Footage to be used:	5,000± square feet
Height of Building:	14 feet, one story
Exterior Building Materials:	Concrete tilt-up
Roof Material:	Rolled Asphalt
Parking Provided:	18 spaces
Parking Required:	18 spaces
Topography:	Flat
Street Improvements:	Existing
Utilities:	Existing

OTHER APPROVALS REQUIRED: In addition to the entitlements requested, the applicant will also need to obtain the following permits or approvals, including, but not limited to:

<u>Permit</u>	<u>Agency</u>
Building Permit	Building Division
Sign Permit	Building Division

BACKGROUND INFORMATION:

On December 5, 1985, the City Planning Commission approved a special permit (P85-449) for the United Cerebral Palsy Association of Greater Sacramento to operate a non-residential day-care facility with offices for 30 developmentally disabled adults in

the C-2 zone located at 3001 E Street. The McKinley Elvas Neighborhood Alliance (in whose geographic area the previous facility that moved to 191 Lathrop was located) stated in a letter to the City that the "United Cerebral Palsy Association has been a 'good neighbor' business for the many years it has been located at 3001 E Street." The Alliance further stated in its letter: " We have not on any occasion received any complaints from our members or the general public about the way they conduct their business." The Association was given a Special Permit in 1997 to move this particular facility located at 3001 E Street to a business park at 191 Lathrop Way. The Association has been fulfilling its "Good Neighbor" obligations as requested by the Planning Division by holding "open house" meetings with the neighboring businesses every four months. The "open house" events have been successful and there have been no complaints by the neighboring businesses.

The proposed relocation of this particular program from its location at 2730 C Street to 1803 Tribute Road would relieve the midtown of one social service program comprising of 25 clients and eight staff. However, the C Street location would continue to provide Cerebral Palsy services for 30 clients with a staff of six.

STAFF EVALUATION: Staff has the following comments:

A. Policy Considerations

The relocation of the Cerebral Palsy Association programs would be consistent with several newly adopted policies for the siting of social service facilities. Those policies are:

- Promote decentralization of social services as a means to improve accessibility and to reduce impacts.

The proposed project would promote decentralization of social services by its moving out of the Central City area.

- Pursue equitable distribution for those services that do not need to be close to where clients reside.

This type of facility serves the region and therefore does not need to be near other types of facilities.

- Promote the use of the "Good Neighbor Guidelines and Process" early in the planning process for new facilities and also consideration by existing facilities.

The management of the United Cerebral Palsy Association is committed

to working with the surrounding neighbors to correct any problems and address any issues that may arise from the facility location. The Association has had a flawless track record with the surrounding neighborhood on E Street in the Central City where it runs some of its programs, and at the Lathrop location in the Point West area.

B. Site Plan Design/Zoning Requirements

The proposed facility would be located in an existing office/ warehouse suite containing approximately 5,000 square feet in a building containing approximately 11,745 square feet. The proposed facility would be required to provide 18 parking spaces. Eighteen parking spaces have been provided. There will be eight staff members for the 24 clients. The clients will be arriving and departing via five small vans.

C. Signage

The proposed sign would be in character with the signage of the other suites within the complex. It will be a non-illuminated painted sign with blue lettering on a white background. It would measure 36 inches long and 19 inches in height. The sign is in conformance with the zoning ordinance.

D. Building Design

The building in which the proposed facility would be located is constructed of concrete tilt up. It measures 14 feet in height. No exterior changes are requested with this application.

PROJECT REVIEW PROCESS:

A. Environmental Determination

The proposed project is exempt from environmental review pursuant to State EIR Guidelines (CEQA Section 15301 (a)).

B. Public/Neighborhood/Business Association Comments

The proposed project application was sent to the North Sacramento Chamber of Commerce, The North Sacramento PAC, and the Woodlake Improvement Club. None of these organizations had any issues regarding the proposed project. Although the proposed project is not in the North Sacramento Target area, the North Sacramento Economic Development subcommittee of the North Sacramento Planning Area Committee reviewed the project and did not have any

issues. No other community groups have concerns regarding the proposed facility location.

C. Summary of Agency Comments

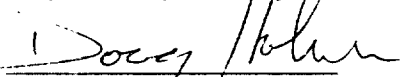
The project has been reviewed by several City Departments and other agencies. None of the City Departments or other agencies submitted comments or concerns regarding the facility and its proposed location.

PROJECT APPROVAL PROCESS: Of the entitlements below, Planning Commission has the authority to approve or deny the Special Permit. The Planning Commission action may be appealed to the City Council. The appeal must occur within 10 days of the Planning Commission action.

RECOMMENDATION: Staff recommends the Planning Commission take the following actions:

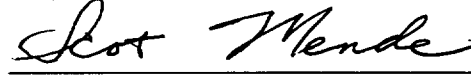
- A. Adopt the attached Notice of Decision and Findings of Fact which finds that the project is Exempt pursuant to CEQA Section 15301 (a);
- B. Adopt the attached Notice of Decision and Findings of Fact **approving the Special Permit** to locate a non residential social service facility for 24 disabled clients and nine staff in an existing facility containing approximately 5,000 square feet on 2.90 developed acres in the Light Industrial (M-1SR) zone.

Report Prepared By,



Doug Holmen, Associate Planner

Report Reviewed By,



Scot Mende, Senior Planner

Attachments

Attachment 1  
Exhibit 1A  
Exhibit 1B  
Attachment 2  
Attachment 3

Notice of Decision & Findings of Fact  
Site Plan  
Floor Plan  
Vicinity Map  
Land Use & Zoning Map



## Attachment 1:

**NOTICE OF DECISION AND FINDINGS OF FACT FOR  
United Cerebral Palsy Association of Greater Sacramento  
@ 1803 Tribute Road**

**Sacramento, California in the  
Light Industrial (M-1SR) Zone  
APN: 277-0283-004  
(P98-062)**

---

At the regular meeting of August 27, 1998, the City Planning Commission heard and considered evidence in the above entitled matter. Based on verbal and documentary evidence at said hearing, the Planning Commission took the following actions for the location listed above:

- A. Environmental Determination (Exemption)
- B. Approved the Special Permit to locate a non residential social service facility for 24 disabled clients and nine staff in an existing facility containing approximately 5,000 square feet on 2.90 developed acres in the Light Industrial (M-1SR) zone.

These actions were made based upon the following findings of fact and subject to the following conditions:

---

**FINDINGS OF FACT**

- A. Categorical Exemption: The City Planning Commission finds and determines that the proposed project is **Exempt** from environmental review pursuant to Section 15301 (a) of the California Environmental Quality Act Guidelines.
- B. Special Permit: The Special Permit to locate a non residential social service facility for 24 disabled clients and nine staff in an existing facility containing approximately 5,000 square feet on 2.90 developed acres in the Light Industrial (M-1SR) zone is **approved** subject to the following findings of fact:
  - 1. The Special Permit, as conditioned, is granted upon sound principals of land use in that:
    - a. Non-Residential Day Care Facilities are permitted uses in the M-1SR zone subject to the granting of a Special Permit by the City

Planning Commission;

- b. Sufficient parking is available for employees, and visitors; and
2. The Special Permit, as conditioned, will not be detrimental to the public health, safety or welfare, or result in the creation of a nuisance in that:
    - a. The facility is regulated by the State of California;
    - b. The clients who are mentally and physically challenged will have a helping staff at a ratio of one staff for every three clients which will allow for individual attention;
    - c. A "Good Neighbor Policy" will be implemented.
  3. The Special Permit, as conditioned, is consistent with the General Plan in that:
    - a. The project meets the policies of the Commerce and Industry Land Use Element;
    - b. The project will provide the learning of living skills for a special need group; and
    - c. The facility will be compatible with the surrounding operations.

#### **CONDITIONS OF APPROVAL**

- B. The Special Permit to allow a non-residential day-care facility and offices for 24 developmentally disabled adults with a staff of nine in an existing 5,000± square foot suite within an existing 11,745 square foot building in the M-1SR zone is hereby approved subject to the following conditions:
  - B1. The size and appearance of the project shall conform to the attached Exhibits 1A, and 1B.
  - B2. Any/all modification(s) to the facility shall meet applicable City building and zoning regulations, including acceptable solid waste management practices.
  - B3. Prepare a "Good Neighbor Policy" which will include the following:
    - a. The following business practices shall be adhered to:

- All service occurs inside the building.
  - Adequate waiting space is provided inside.
  - Adequate and accessible bathrooms are provided inside.
  - Trash receptacles are readily available in and outside.
  - Service activities do not rely on using the public right of ways.
  - Building and site are regularly cleaned and maintained.
  - Site is adequately lighted.
- b. Within 1 month of project approval, or by no later than October 31, 1998, the facility operator shall conduct a "get acquainted" meeting with the occupants of the "office park" within which the facility would be located. The meeting shall occur at the subject site to introduce the facility operations to the neighbors and to provide emergency phone number(s) of contact person(s).
- c. For the next 16 months following project approval, the facility operator shall hold community meetings once every four months. (The facility operator may cooperate with an existing neighborhood organization to arrange and notice these meetings.) The meetings shall be conducted to receive community comments and concerns and to implement solutions. The facility operator shall notify the Planning Director of the meeting date, time, and place, at least two weeks prior to the meeting date. An attendee list and meeting minutes shall be submitted to the Planning Director or designee within one week following the quarterly meeting.
- d. After the 16 month period, the facility operator shall meet with community organizations, neighborhood representatives, and/or individual property owners/occupants, as requested, on a case-by-case basis.

---

CHAIRPERSON

ATTEST:

---

SECRETARY TO CITY PLANNING COMMISSION

---

August 27, 1998 (P98-062)

Attachments

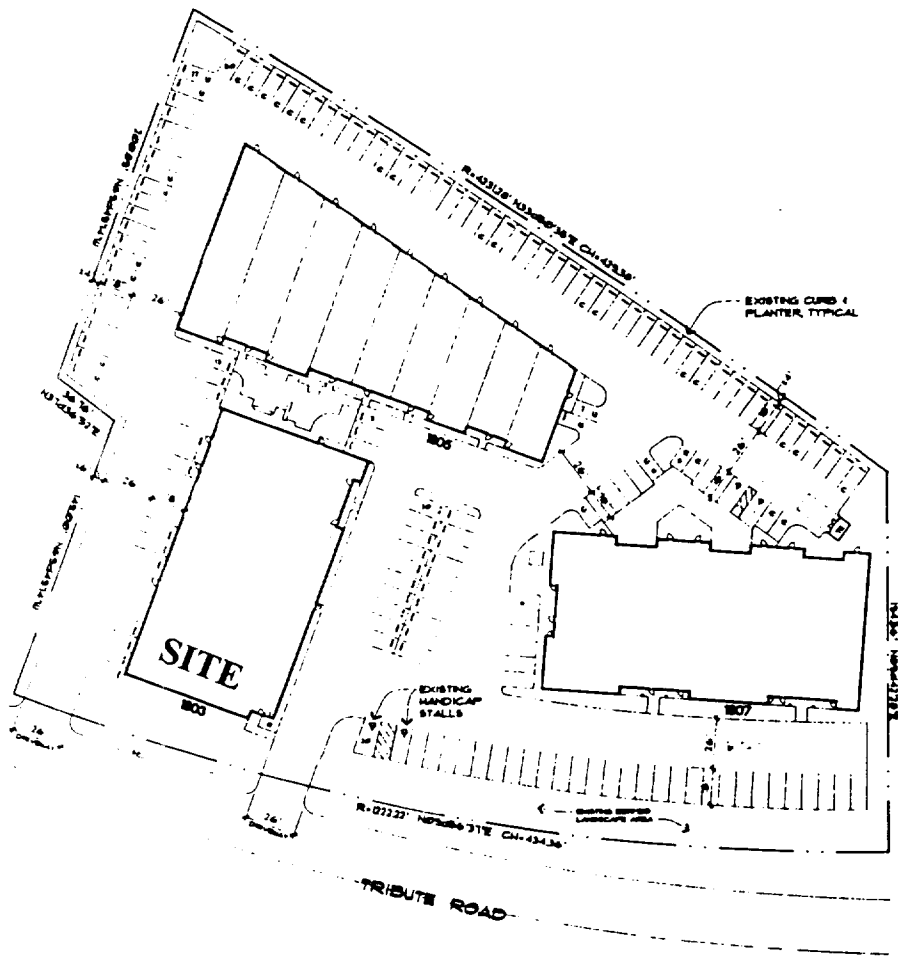
Exhibit 1A

Site Plan

Exhibit 1B

Floor Plan

Exhibit 1A  
Site Plan



**BUILDING SUMMARY:**

803 TRIBUTE ROAD	14,200 SF
806 TRIBUTE ROAD	11,400 SF
807 TRIBUTE ROAD	10,200 SF
<b>TOTAL</b>	<b>35,800 SF</b>

**PARKING SUMMARY:**  
 140 STALLS • 1 STALL PER 262 SF

SITE PLAN

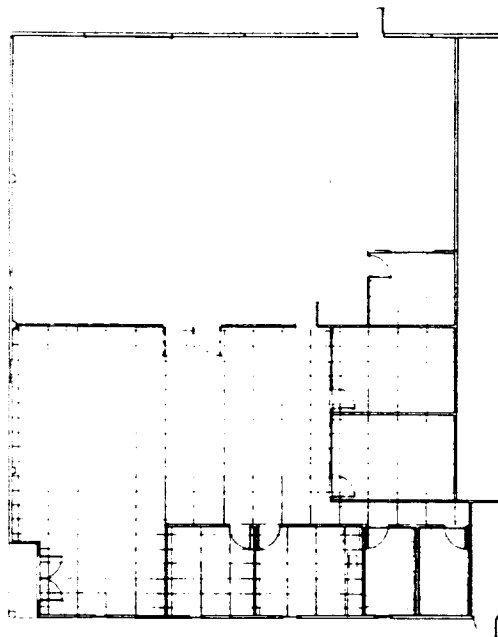
SCALE: 1" = 30'

OCTOBER 1, 1993

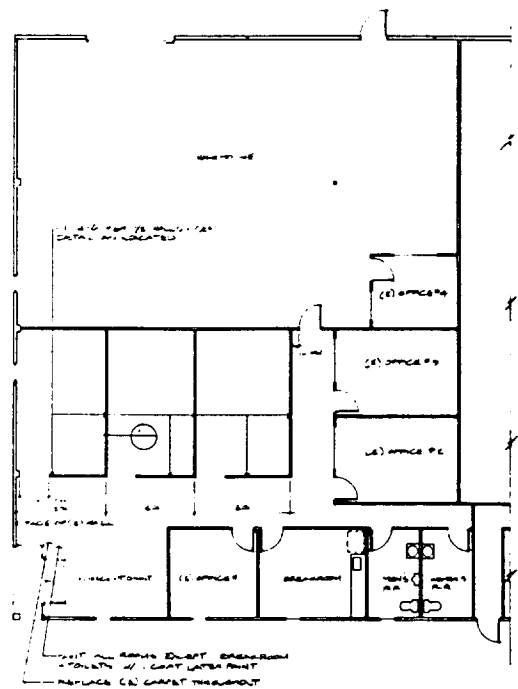
A Development of  
**Jackson Properties, Inc.**

5665 Power Inn Road, Suite 140  
 Sacramento, CA 95824  
 Phone (916)381-8113  
 Fax (916)381-3153

Exhibit 1B  
Floor Plan



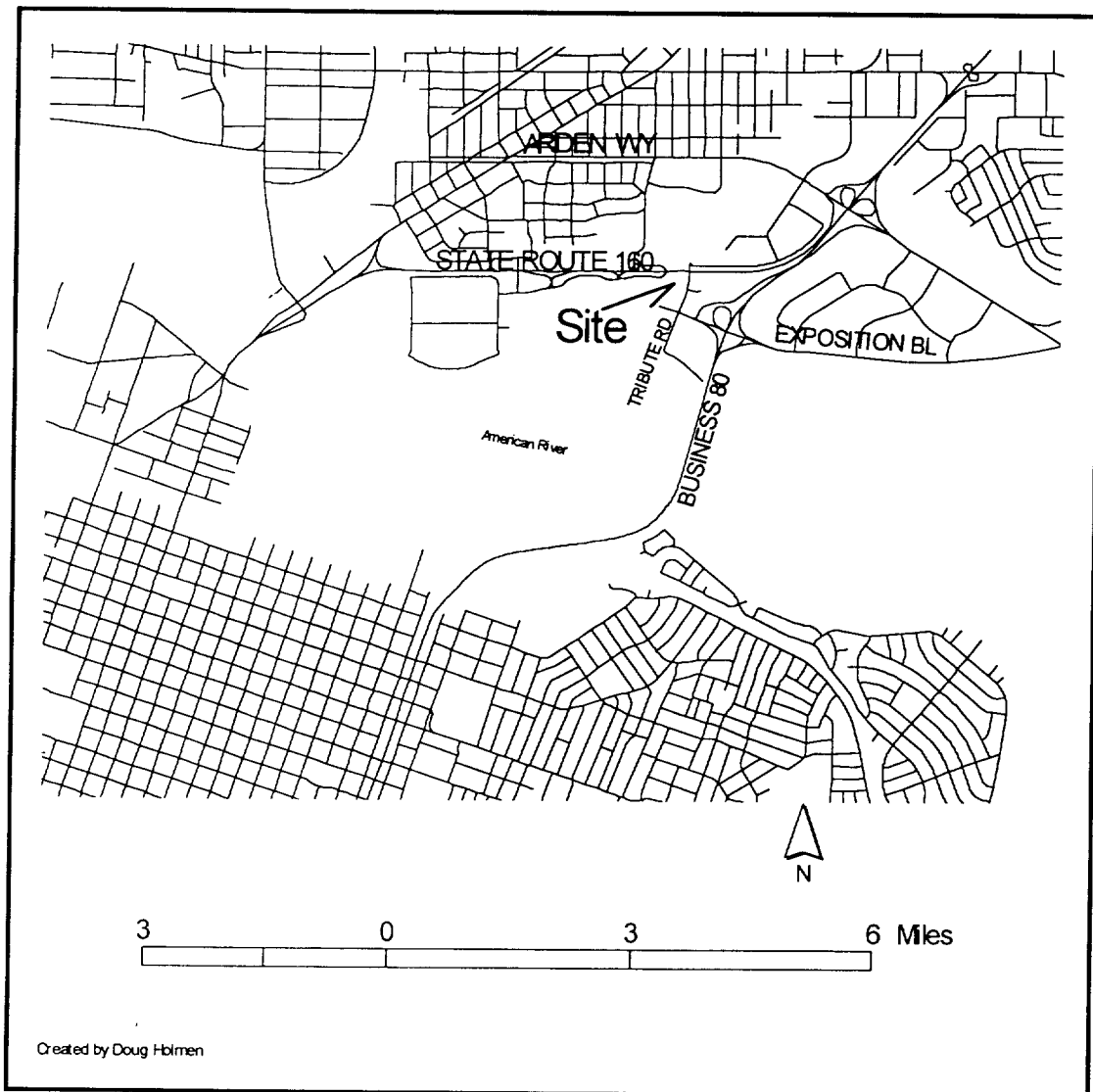
F5 REFLECTED CEILING PLAN



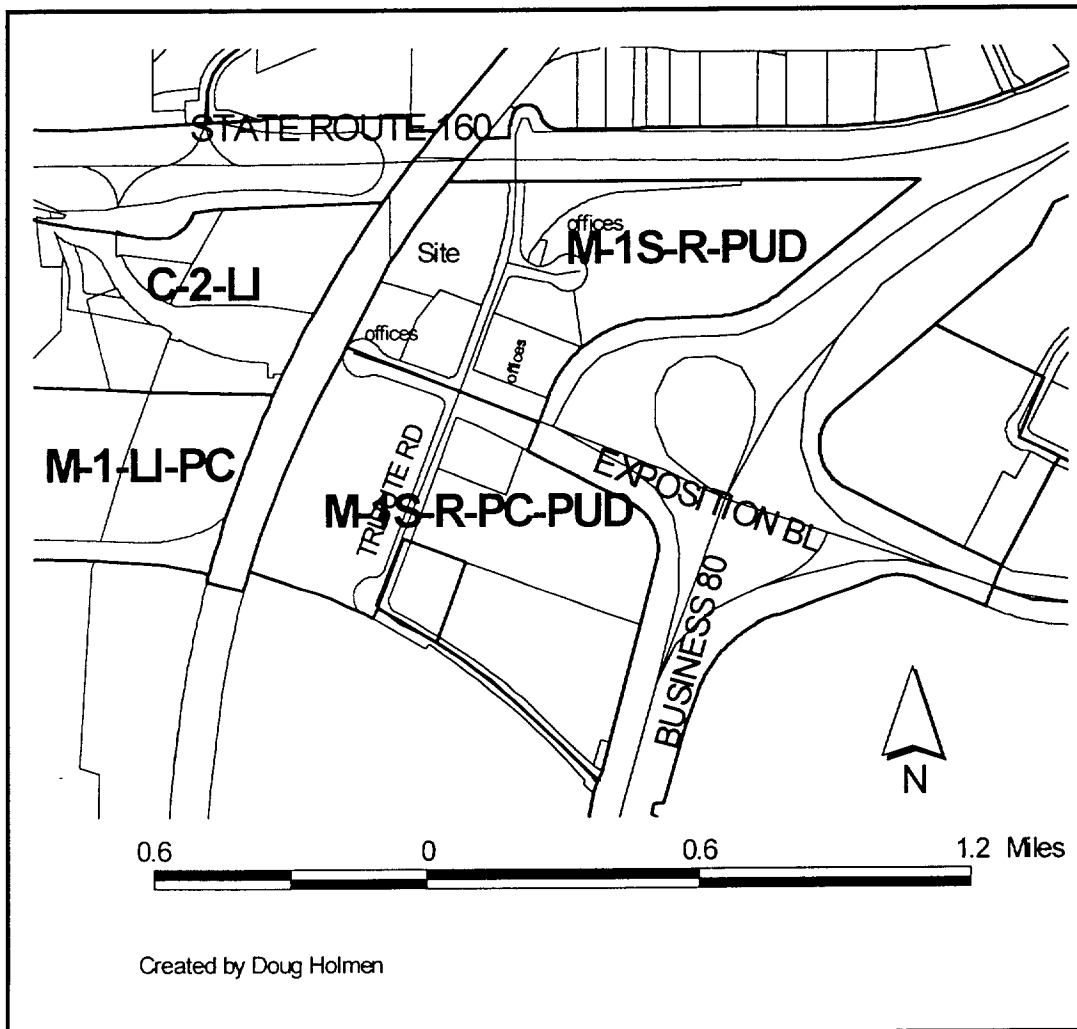
D5 FLOOR PLAN



**Attachment 2  
Vicinity Map**



**Attachment 3**  
**Land use and Zoning Map**





CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address

1803 TRIBUTE RD. Suite 100

Permit No. 98-08089

Building Use

Office (remodel) DBA United Cerebral Palsy Assn

Occupancy B

Building Owner

Maneetal Properties

Construction Type

III-N

Owner Address

876 S. MILPITAS Blvd. Milpitas, CA 95036

Sprinkled ( ) Yes (X) No

Portion of Building Occupied

Suite 100

Area

Sq. Ft.

01/23/99

RON PECCI

Date Issued By: Print

Sign

CHIEF BUILDING INSPECTOR  
City Building Official

Henry/Verga/Green

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code as adopted per Title 9 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE

P 98 062

City of Sacramento Development Services Division  
Planning and Zoning Information Request

Project Address: 1803 - TRIBUTE ROAD

Assessor's Parcel Number: 277-0283-004

Current Land Use: Office

Description of Request/Proposed Use: Toy lending for

9/23/98

25% OFFICE (w/ Warehouse?)

Zoning Designation: M1SR

Prior Applications for Project Site(P#,Z#,DRPB#): P98-062

Comments: Existing building & use toy lending  
would be consistant with the use

Are There Any Planning Issues?: (Circle One) YES  NO

Site Plan Check Required? (Circle One) YES  NO

Design Review/ Preservation Required?: (Circle One) YES  NO

Planning Review by/Date: [Signature] 9/22/98

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