

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9808060

Insp Area: 4

Site Address: 1795 ARDEN WY SAC

Parcel No: 2770160041

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

DEMHAM CONTRACTING INC
4665 DUARTE AV
OAKLEY CA 94561

OWNER

F M PARTNERSHIP
7750 COLLEGE TOWN DR #3
SACRAMENTO CA 95826

ARCHITECT

Nature of Work: REMODEL RETAIL SPACE - KINKO'S

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 B License Number 695702 Date 10-15-98 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 10-15-98 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 FUND Policy Number 1383754-98

_____, (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 10-16-98 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
CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address _____ Permit No. _____

Building Use _____ Occupancy _____

Building Owner _____ Construction Type _____

Owner Address _____ Sprinkled () Yes () No

Portion of Building Occupied _____ Area _____ Sq. Ft. _____

Date Issued By: Print Sign City Building Official

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

CITY OF SACRAMENTO
APPLICATION FOR BUILDING PERMIT

98080600

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES DIVISION

1231 I Street, Rm. 200
Sacramento, CA 95814

(916) 264-7619 FAX 264-0049

RECEIVED
AUG 04 9 1998

→ Applicant must complete ALL Unshaded areas ←

PERM # 0337 AREA # 4C

ADDRESS 1790 Arden Way Suite _____
PARCEL # 277-0160-041

CONTACT Name <u>Building</u> Address _____ Phone _____ FAX _____		LICENCED CONTRACTOR Lic No. # Name <u>Danham Contracting, Inc</u> Address <u>46655 Duarte Ave</u> <u>Oakley CA</u> Zip <u>94561</u> Phone <u>925-679-0575</u> FAX _____	
ARCHITECT/ENGINEER <u>852-1560</u> Name <u>Associates</u> Address <u>Grant Ave Suite 500</u> Zip <u>94102</u> Phone <u>415-625-5357</u> FAX <u>415-362-5044</u>		OWNER/PROPERTY <u>KRM Partners</u> Name <u>Kinko's</u> Address <u>255 West Stanley Ave</u> <u>P.O. Box 3010 Ventura, CA</u> Zip <u>93002</u> Phone <u>805-652-4758</u> FAX _____	

→ 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: Interior alteration, removal of interior wall replaced with new wall with associated electrical, mechanical, and plumbing.
Kinko's RENOVATE

DBA: Kinko's VALUATION: 50,000.00

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		
	6160	6160		M	III	Y	18	OK		
B	L	P	M	E	F	S	D	R		

COMMENTS: New 1000 Amp service?
xpress
Clarify single line diagrams

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

CITY OF SACRAMENTO
 BUILDING INSPECTION DIVISION
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: KENNEDY CORP Phone: 1700-800-8899
 Site Address: 1745 ADDEN WAY - Suite: N/A
(Street) (Zip)
 Business Owner/Representative: JEFF DEBUCK Phone: 209 273-5147
 Nature of Business: _____
 Property Owner: FM PARTNERSHIP Phone: _____
 Address: 7750 COLLEGE TOWN PL. Suite: #3
(Street)
SACRAMENTO CA
(City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes ___ No X Is this permit for a shell building? Yes ___ No X

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes ___ No X

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No X

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No X

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No ___

7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No ___

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No ___

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: JEFF DEBUCK
(Print)
Jeff DeBuck 10-15-98
(Signature) (Date)

BID Use Only: Plan Ck# <u>6337</u> Permit # <u>98-08060</u>
OK to issue prmt? <u>Yes</u> <u>10-15-98</u> F.D. Appr Req'd? Yes <u>(No)</u> <small>init date</small>
Hold on Certificate of Occupancy? Yes <u>(No)</u>
Fire Dept. Use Only:
OK to issue permit? ini' ___ date ___
OK to issue Certificate of Occupancy? init ___ date ___

REVISION ON ACTIVE PERMIT

NEW PLAN CHECK NO: _____
OLD PC # _____

DATE: _____

- This sheet is to be used only when a permit has been issued, is still active, and the applicant wishes to make changes to the existing approved plans.
- All revisions clouded? Yes _____ No _____

JOB ADDRESS _____ SUITE: _____ PERMIT NO. _____

AREA: _____ DBA: _____

DESCRIPTION OF REVISIONS electrical new

Please file in Electrical folder

DISCIPLINE	B	L	P	M	E	F	S	R	D
CHECKED BY					(OW)				
ROUTE TO									
CODE					13				
HOURS SPENT									

CONTACT: _____

ADDRESS: _____

PHONE: _____

OF PLANS SUBMITTED: 1 SUBMITTED TO: _____

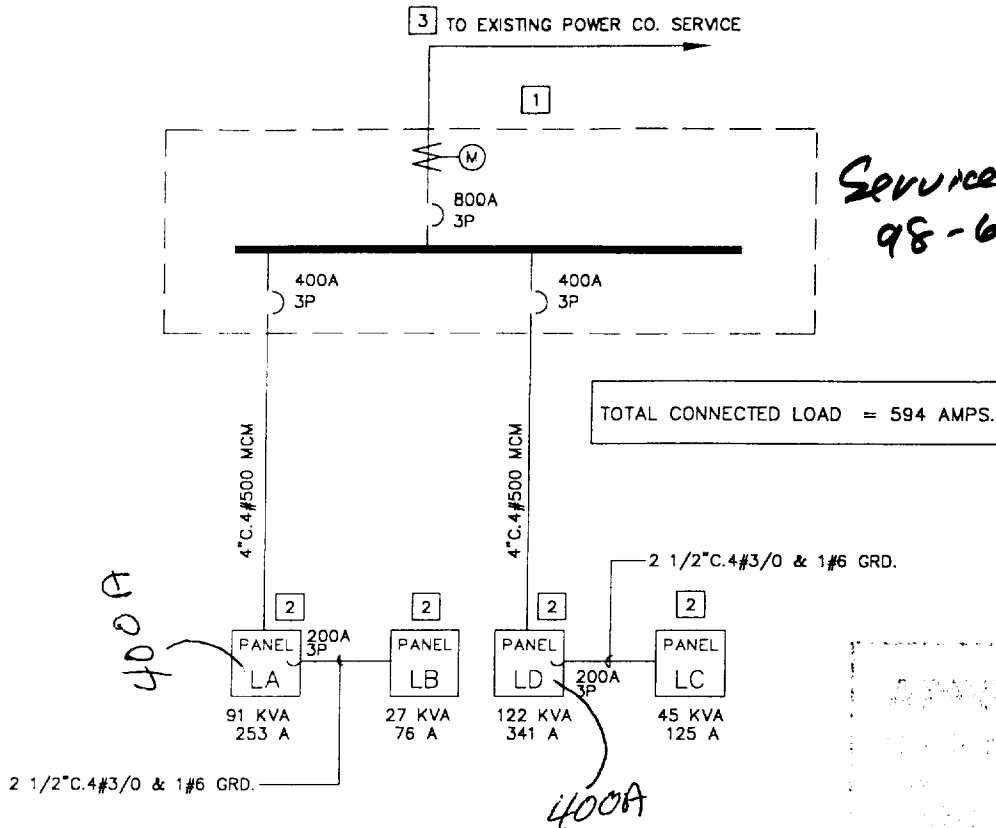
I understand that I am responsible for all plan check fees that I incur during the course of this additional plan check and that any approved plans not claimed and paid for within 3 months of notification will be disposed of and an invoice procedure for the amount due will be initiated. I further understand that an unclaimed revision may result in delay of final approval for the subject project.

 Applicant Signature Date 4

DATE NOTIFIED	PLAN BIN

APPLIC. FEE	PD.

AGENCY	TOT. HRS.	TOTAL FEES
BID		
PW		
PLEASE PAY THIS AMOUNT <input type="checkbox"/>		



Service on 98-6532c

1993

12-7-98 *dm*

Revision to 98-8000

SINGLE LINE DIAGRAM

REFERENCE NOTES:

- 1 NEW 800A, 120/208V, 3 PHASE, 4W WITH METER/MAIN SECTION (WP) MAIN SWITCHBOARD 'MS'. LOCATE AT EXISTING SERVICE LOCATION
- 2 PANEL SHALL BE SERIES RATED WITH SQUARE "D" TYPE, KC MAIN AND TYPE QO BRANCH BREAKER OR EQUAL.
- 3 CONTRACTOR SHALL COORDINATE WITH POWER COMPANY FOR LOCATION AND REQUIREMENTS FOR NEW SERVICE AS REQUIRED.

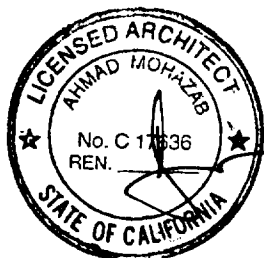
GENERAL NOTES:

- 1. ALL BREAKERS SHALL BE U.L LISTED, SERIES RATE AND WITHSTAND MORE THAN THE AVAILABLE FAULT CURRENT ON EACH SYSTEM.
- 2. ALL CIRCUIT BREAKERS SHALL BE 100 PERCENT RATED.

KINKO'S
1795 ARDEN WAY
SACRAMENTO, CALIFORNIA

MARS
CONSULTING ENGINEERS
ELECTRICAL • MECHANICAL

13743 VENTURA BLVD. #270
SHERMAN OAKS, CA 91423-3091
PH: (818) 461-0398
FAX: (818) 461-0390



PANEL LA		120/208 VOLTS	3 PHASE	11/30/98
		400A		
1	XEROX 5690	2	LANIER	
3	XEROX 5690	4	LANIER	
5	XEROX 5690	6	LANIER	
7	XEROX 5690	8	LANIER	
9	XEROX 5065	10	XEROX EMPRESS	
11	XEROX 5800	12	XEROX MAJESTIK	
13	XEROX 5800	14	OCE 9400	
15	XEROX 5800	16	OCE 9400	
17	XEROX 5600	18	XEROX 5365	
19	XEROX 5600	20	SPARE 5365	
21	DOCUCOLOR	22	XEROX 5365	
23	DOCUCOLOR	24	SPARE 5365	
25	CANON 800	26	XEROX 5365	
27	XEROX REGAL	28	SPARE 5365	
29	LANIER	30	XEROX 5365	
31	LANIER	32	SPARE 5365	
33	LANIER	34	RECEPTION. SPARE	
35	SPARE	36	SPARE DETECTOR ATM	
37	SPARE	38	EXHAUST FAN	
39	SPARE Sealer	40	SPARE	
41	SPARE Sealer	42	SPARE	
CUSTOM ELECTRICAL CONTRACTORS (916) 638-4110				

CIRCUIT DIRECTORY

PANEL LC		120/208 VOLTS	3 PHASE	11/30/98
		200A		
1	GENERAL LIGHTING	2	REFRIGERATOR	
3	GENERAL LIGHTING	4	GARBAGE DISPOSAL	
5	GENERAL LIGHTING	6	COFFEE MAKER	
7	GENERAL LIGHTING	8	MICROWAVE	
9	GENERAL LIGHTING	10	GBC	
11	GENERAL LIGHTING	12	VELOBIND	
13	GENERAL LIGHTING	14	FASTBACK	
15	SPARE	16	RENZ BINDER	
17	COLLATOR	18	COMP	
19	PADDER	20	DRILL	
21	BOOKLET MAKER	22	DRILL	
23	STITCHER	24	LAMINATOR	
25	FOLDER	26	LAMINATOR	
27	POUCH LAMINATOR	28	CUTTER	
29	CARD READER	30	CUTTER	
31	CARD READER	32	ROLL CUTTER	
33	CARD READER	34	FOAM CUTTER	
35	CARD READER	36	CARD READER	
37	CARD READER	38	CARD READER	
39	GENERAL LIGHTING	40	CARD READER	
41	GENERAL LIGHTING	42	DOCKING	
CUSTOM ELECTRICAL CONTRACTORS (916) 638-4110				

CIRCUIT DIRECTORY

PANEL LD	120/208 VOLTS	3 PHASE	11/30/98
<i>LB</i>	200A		
1	COMPUTERS	2	TEL. EQUIPMENT
3	COMPUTERS	4	TEL. EQUIPMENT
5	COMPUTERS	6	TEL. EQUIPMENT
7	COMPUTERS	8	PRINTERS
9	RECEPT.	10	PRINTERS
11	COMPUTERS	12	PRINTERS
13	COMPUTERS	14	PRINTERS
15	FAN	16	FAX MACHINE
17	COMPUTERS	18	PRINTERS
19	COMPUTERS	20	SHOWCASE
21	COMPUTERS	22	POS REGISTER
23	COMPUTERS	24	POS / FAX
25	COMPUTERS	26	PRINTERS
27	COMPUTERS	28	CARD READER
29	COMPUTERS	30	PASSPORT PHOTO
31	COMPUTERS	32	FIERY
33	GEN. RECEPT. / FANS	34	COMPUTERS
35	DRINKING FOUNTAIN	36	HP 2500
37	OFFICE	38	PANEL TVSS
39	SHRINK WRAP	40	TVSS
41	SHRINK WRAP	42	TVSS
CUSTOM ELECTRICAL CONTRACTORS (916) 638-4110			
CIRCUIT DIRECTORY			

PANEL LD	120/208 VOLTS	3 PHASE	11/30/98
	400A		
1	AC-1	2	AC-3
3	" "	4	" "
5	" "	6	" "
7	AC-2	8	AC-4
9	" "	10	" "
11	" "	12	" "
13	SHOW WINDOW	14	SPARE
15	SHOW WINDOW	16	WATER HEATER
17	SHOW WINDOW	18	WATER HEATER
19	SHOW WINDOW	20	SPARE
21	SHOW WINDOW	22	DAMPERS
23	SHOW WINDOW	24	SPARE
25	SHOW WINDOW	26	SPARE
27	SHOW WINDOW	28	SPARE
29	SHOW WINDOW	30	SPARE
31	ROOF RECEPT.	32	SPARE
33	ROOF RECEPT.	34	SPARE
35	SOFTPT LIGHTS	36	SPARE
37	SIGN	38	SPARE
39	SIGN	40	SPARE
41	SIGN	42	SPARE
CUSTOM ELECTRICAL CONTRACTORS (916) 638-4110			
CIRCUIT DIRECTORY			

200A for LC

MEMORANDUM

Sacramento Fire Department

To: BUILDING DEPARTMENT

Date: 11-30-98

From: Gordon Duncan,
Fire Marshal

Subject: **FIRE SYSTEM INSPECTION**

A final inspection of the newly installed fire system at:

1795 Arizona Way

has been conducted by Inspector C. Patel

on 11-25-98.

98-08060C
Permit Number

6160 sq ft
Square Footage

Remodel
Type Inspection

The system is acceptable by this department.

R. Woodman
By: Ross L. Woodman,
Fire Prevention Officer II

7I-205
F. D. Reference Number

REVISION ON ACTIVE PERMIT

NEW PLAN CHECK NO: _____
 OLD PC # _____

DATE: _____

- This sheet is to be used only when a permit has been issued, is still active, and the applicant wishes to make changes to the existing approved plans.
- All revisions clouded? Yes _____ No _____

JOB ADDRESS 1795 ARDEN WAY SUITE: _____ PERMIT NO. 98-08060

AREA: _____ DBA: _____

DESCRIPTION OF REVISIONS electrical rev.

Please file w/ Electrical folder
 BS

DISCIPLINE	B	L	P	M	E	F	S	R	D
CHECKED BY					(OWN)				
ROUTE TO									
CODE					13				
HOURS SPENT									

CONTACT: _____

ADDRESS: _____

PHONE: _____

OF PLANS SUBMITTED: 1 SUBMITTED TO: _____

I understand that I am responsible for all plan check fees that I incur during the course of this additional plan check and that any approved plans not claimed and paid for within 3 months of notification will be disposed of and an invoice procedure for the amount due will be initiated. I further understand that an unclaimed revision may result in delay of final approval for the subject project.

 Applicant Signature Date 12/7/98

DATE NOTIFIED	PLAN BIN

APPLIC. FEE	PD.

AGENCY	TOT. HRS.	TOTAL FEES
BID		
PW		
PLEASE PAY THIS AMOUNT		44.20

Pd
 9-7-98



Western Division ■ Regional Office
1111 Riley Street
Folsom, California 95630
TEL (916) 983.3655
FAX (916) 983-3929

City of Sacramento
1231 I Street, Room 200
Development Services Division
Sacramento, CA 95814

December 1, 1998

Attention Chief Building Official for Temporary Certificate of Occupancy:

Kinko's is requesting Temporary Certificate of Occupancy for:

Kinko's Inc.

Kinko's - 1795 Arden Way, Sacramento, CA 95825, Branch #0557

Building Permit# 4803060

Number of Days requested: 30

To complete items listed by City Inspector. Areas of building to include all areas.

List of items to be completed: see attached.

If the conditions of the agreement are not met prior to expiration of The Temporary C of O, applicant will terminate the occupancy and vacate the premises.

The City water meter is installed and operational.

Sincerely,

Steve Padberg
Regional Operations Manager
Kinko's Inc.

PAID
CITY OF SACRAMENTO
DEC 02 1998
NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO
30 DAY TEMPORARY CERTIFICATE OF OCCUPANCY
For Information Contact (916) 264-7619

Building Address 1795 ARDEN WAY Permit No. 98-08060
Building Use Retail (remodel) DBA: KINKO'S Occupancy M
Building Owner Kinko's Construction Type III
Owner Address 255 West Stanley Av, Ventura, CA 93002
Portion of Building Occupied 100% (all disciplines final Sprinkled) Yes () No
EXCEPT ELECTRICAL) Area 6,160 Sq. Ft.

12 / 03 / 98 01 / 03 / 99 RON PECCI Bradford J. Boehm, P.E.
Date Issued Expiration Date Sign
Henry/Green/Melavic/Pack City Building Official
CBC109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE