

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0207634

Insp Area: 2

Thos Bros:

Sub-Type: NOTHR

Housing (Y/N): N

Site Address: 3801 FLORIN RD SAC

Parcel No: 041-0120-007

SENATOR FORD

CONTRACTOR

SAN JOSE CONSTRUCTION CO., INC
3017 DOUGLAS BL
SUITE 300 95661-3850

OWNER

FORD LEASING DEV CO
SACRAMENTO CA
95823

ARCHITECT

Nature of Work: INSTALL 4 TEMPORARY COACHES

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 420837

Date 7-15-02

Contractor Signature _____

Kimberly Graves

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 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 _____

PAID
CITY OF SACRAMENTO
JUL 15 2002
CENTER

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 7-15-02

Applicant/Agent Signature _____

Kimberly Graves

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

REPUBLIC INDEMNITY CO. OF CA.

Policy Number 3200908

Exp Date

04/01/2003

(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 7-15-02

Applicant Signature _____

Kimberly Graves

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 # 0207634 Insp. Area

ADDRESS 3801 FLORIN ROAD
 PARCEL # 041.0112.016

Applicant **MUST** complete ALL Unshaded areas
SENATOR Suite _____
FORD

CONTACT
 Name GEORGINE DREES
 Street Address 3017 Douglas Blvd. #300
 City/State/Zip ROSEVILLE CA
 Phone 787-0200 FAX 787-0246
 E-mail: gdrees@sjconstruction.com

LICENSED CONTRACTOR Lic No. # A20837
 Name San Jose Construction
 Address (see contact)
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

ARCHITECT/ENGINEER
 Name Avanessian Associates
 Address _____
 City/State/Zip _____
 Phone (650) 583-7344 FAX 583-0976
 E-mail: _____

OWNER
 Name 3801-Ford Leasing Dev. Co.
 Address _____
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

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

NATURE OF WORK IN DETAIL: temporary coach installation - 6 months time
4 COACHES

OCCUPANT/TENANT: _____ VALUATION: \$ 15,293.00

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

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

PLANNING AND ZONING REVIEW

..... to be filled out by Planning staff

ADDRESS: ~~3801~~ 3801 Florin RD

APN: 041 0112 0116 & 021 ZONING: C-2

DESIGN REVIEW AREA: also 041-0120-013 (actual location of new offices)
none

PREVIOUS FILES RELATED TO SITE: none shown

EXISTING LAND USE: exist. Auto dealer (Senator Ford)

PROPOSED USE: "temporary" offices while remodel is in progress

COMMENTS: must comply with all appropriate development standards for permanent office

DATE: BY:

DOES IT APPEAR THAT THE PROJECT WILL REQUIRE A PLANNING APPLICATION?

YES NO (If yes, circle applications needed below)

.....Staff.....ZA.....Planning Commission.....Design Review.....Preservation Review.....

CONCLUSION: → ROUTE TO SITE PLAN CHECK
(see comments above)

DATE: 6/10/02 BY: PHIL FEED