

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0007761
Insp Area: 1

Site Address: 1201 K ST SAC
Parcel No: 006-0111-016

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

CONTRACTOR
HI-RISE INTERIORS
425 S ST
SACIO CA

OWNER
ROTUNDR PARTNERS
1201 K STREET #1517
SACRAMENTO CA 95814

ARCHITECT

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 None 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 44D License Number 308725 Date 10 JULY 00 Contractor Signature Scott J. Thayer

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 _____

PAID
CITY OF SACRAMENTO

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. **THE CITY OF SACRAMENTO PLANNING AND DEVELOPMENT SERVICES** 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 JULY 00 Applicant/Agent Signature Scott J. Thayer

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 1133556-00 Exp Date 07/01/2001

(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 JULY 00 Applicant Signature Scott J. Thayer

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: 1201 K ST #1200 Permit No. 00-07761

Building Use: OFFICE Occupancy: B

Building Owner: ROTUNDA PARTNERS Construction Type: _____

Owner Address: 1201 K ST #1517 SACRAMENTO Sprinkled? [] Yes [] No

Portion of Building Occupied: SUITE 1200 Area: _____ Sq. Ft.

11/22/00

Date

Willie Harris

By:Print

Sign

DENNIS RICHARDSON

CHIEF BUILDING OFFICIAL

[Finaled By:RY.RVI..JM.RR]

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 15 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 Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

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 # <u>0007761C</u>	Insp. Area <u>1C</u>
----------------------------	----------------------

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1201 K ST Suite 120A
 PARCEL # 004-0111-001

<p style="text-align: center;">CONTACT</p> <p>Name <u>SCOTT HARGUER</u> Street Address <u>425 S ST</u> City/State/Zip <u>SACTO, CA 95814</u> Phone <u>916-448-6182</u> FAX <u>448-4859</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>308725</u></p> <p>Name <u>HI-RISE INTERIORS</u> Address <u>425 S ST</u> City/State/Zip <u>SACTO, CA 95814</u> Phone <u>448-6182</u> FAX <u>448-4859</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>SCOTT HARGUER</u> Address <u>425 S. ST.</u> City/State/Zip <u>SACTO, CA 95814</u> Phone <u>448-6182</u> FAX <u>448-4859</u> E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>ROTUNDA PARTNERS</u> Address <u>1201 K ST #1517</u> City/State/Zip <u>SACTO, CA 95814</u> Phone <u>478-6166</u> FAX <u>478-6100</u> E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # 1132356 EXPIRATION DATE: 7-01-01

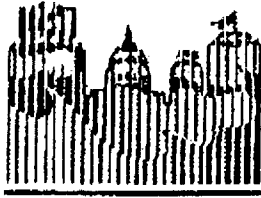
NATURE OF WORK IN DETAIL: COMMERCIAL REMODEL (OFFICE)

OCCUPANT/TENANT: LIVINGSTON & MUTTESICH VALUATION: \$ 49,300.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(X)	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 [H] [Quad]		
						SPR Y ALARM				
(B)	(L)	P	(M)	(E)	(F)	S	D	PW	UTIL	
13 ST	13 ST	0	13 KW	13 QUA	13 BJT					

COMMENTS: _____

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



Indoor Environmental Services

AIR BALANCE REPORT

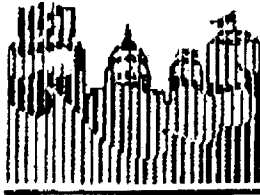
JOB NAME: LIVINGSTON & MATTESICH JOB #: 1201 RST STS 1200 DATE: 10/13/00

TECH: Brad / Jorge SECTION _____ PAGE 1 of 1

UNIT #:

Unit	Outlet	OPENING		FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
		NO.	TYPE SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
OFF 1		1	14		500				510			
OFF 2		2	14		550				660			575
OFF 5		1	8		170				180			
SEC		1	10		350				380			
WK RM		1	10		250				260			
FILE RM		1	10		275				270			
FILE RM		2	10		275				265			
OFF 17		1	12		275				280			
WK RM (W)		1	10		350				370			
OFF 18		1	10		380				380			
OFF 19		1	10		380				370			
OFF 20		1	10		380				370			
HALL 1		1	12		450				410			435
HALL 2		2	10		375				370			
HALL 3		3	8		200				260			210
REST RM		1	6		90				115			95
REST RM		2	6		90				97			97

REMARKS: COPY OF FIELD Report
HARD COPY TYPED FORM FOR Bld ENGINEER
To Follow



Indoor Environmental Services

AIR BALANCE REPORT

JOB NAME: LIVINGSTON & MATTHEW JOB #: 1201 K ST STS 1200 DATE: 10/13/00

TECH: Brad / Jorge SECTION _____ PAGE 1 of 1

UNIT #:

Unit	Outlet	OPENING		FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
		NO.	TYPE SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
OFF 1		1	14		500				510			
OFF 2		2	14		550				660			575
OFF 5		1	8		170				180			
SEC		1	10		350				380			
WK RM		1	10		250				260			
FILE RM		1	10		275				270			
FILE RM		2	10		275				265			
OFF 17		1	12		275				280			
WK RM (2)		1	10		350				370			
OFF 18		1	10		380				380			
OFF 19		1	10		380				370			
OFF 20		1	10		380				370			
HALL 1		1	12		450				410			435
HALL 2		2	10		375				370			
HALL 3		3	8		200				260			210
REST RM		1	6		90				115			95
REST RM		2	6		90				97			97

REMARKS: COPY OF FIELD Report
HARD COPY TYPED FORM FOR Bld ENGINEER
TO FOLLOW.