

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.).

Lenders Name \_\_\_\_\_  
Lenders 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 C-45 Lic. Number 268001  
Date 1/25/01 Contractor Sign Designs  
(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 3 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 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 Professions 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 or 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 or 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 & P C 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 of this city to enter upon the abovementioned property for inspection purposes.

Date 1/25/01 Signature of Applicant or Agent \_\_\_\_\_

SITE ADDRESS

1601 DEL PASO BLVD

SUITE

4

ASSESSOR PARCEL NO.

215-0088-012

PERMIT NO.

0105948

NAME OF APPLICANT

Sign Designs

ADDRESS

209 Campus

ZIP CODE

93351

PHONE NO.

209-524-9484

BUSINESS OWNER

KEC

8334 Gerber Road

91689-2190

SIGN INFORMATION

- ATTRACHED  SINGLE FACED
- ILLUMINATED  NON-ILLUMINATED
- INDIVIDUAL LETTERS  PAINTED ON BUILDING
- METAL  POLE
- PLASTIC  MONUMENT
- WOODEN  PROJECTING
- VINYL/GATOR FOAM
- RE-FACE

SIGN COPY

KEC

SIGN (A)

S-21590  
CITY OF SACRAMENTO PERMIT SERVICES  
BUILDING INSPECTION DIVISION 264-7619

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 Comp  
Policy Number DOVIA0743C  
10-1-01

(This section need not be completed if the permit is for one hundred dollars (\$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: \_\_\_\_\_ Applicant: \_\_\_\_\_ (Signature)

WARNING: FAILURE TO SECURE WORKERS' 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 FEES.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.

INSP. AREA

4

(A) HEIGHT 71 (B) LENGTH 51

(A X B) SIGN AREA 3585

POLE SIZE \_\_\_\_\_ FOOTING SIZE \_\_\_\_\_

STREET FRONTAGE (FT) \_\_\_\_\_

OCCUPANCY FRONTAGE (FT) \_\_\_\_\_

OFFICE USE ONLY

ENGINEERING REQUIRED? YES NO APPROVED BY ES

DESIGN REVIEW REQUIRED? YES NO APPROVED BY ES

SPECIAL PERMIT REQUIRED? YES NO # \_\_\_\_\_

VARIANCE REQUIRED? YES NO # \_\_\_\_\_

LOCATED IN PUD? YES NO WHICH PUD? DL SPD

SIGN VALUATION

A. TYPE OF SIGN Sign

B. \$ \_\_\_\_\_ PER SQ. FT. X \_\_\_\_\_ SQ. FT. = \$ \_\_\_\_\_

APPROVED BY Michael DATE 3-10-01

DENIED BY \_\_\_\_\_ DATE \_\_\_\_\_

MAY 14 2001  
CIVIL ENGINEER

BUILDING INSPECTOR PLANNING

ELECTRICIAN OPERATING SERVICES

SIGN INSPECTOR \_\_\_\_\_ DATE \_\_\_\_\_

FEES: RECEIVED

SIGN APPLICATION FEE 20 DATE 1/25/01

SIGN PERMIT FEE \_\_\_\_\_

ELECTRICAL SIGN FEE \_\_\_\_\_

CITY BUSINESS LICENSE \_\_\_\_\_

OTHER \_\_\_\_\_

TOTAL FEES \$ \_\_\_\_\_

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Lenders Name \_\_\_\_\_  
Lenders Address \_\_\_\_\_

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License Class C-15 Lic. Number 268021  
Date 1/25/01 Contractor Sign Design S  
(Signature)

OWNER - BUILDER DECLARATION

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Date 1/25/01 Signature of Applicant or Agent \_\_\_\_\_

SITE ADDRESS 1601 Del Paso Blvd SUITE \_\_\_\_\_ INSP. AREA 4

ASSESSOR PARCEL NO. 27500580012 PERMIT NO. 0105952

LICENSED CONTRACTOR NAME OF APPLICANT Sign Design ADDRESS 204 Campus, Modesto ZIP CODE 95351 PHONE NO. 209.524.4484

BUSINESS OWNER KRC 8334 Gerber Road SIGN INFORMATION

- ATTACHED  INTERIOR / ELECT.  SINGLE FACED
- ILLUMINATED  NON-ILLUMINATED  BILLBOARD / SUBDIVISION
- INDIVIDUAL LETTERS  PAINTED ON BUILDING  LOGO
- METAL  POLE  DOUBLE FACED
- PLASTIC  MONUMENT  VINYL/GATOR FOAM
- WOODEN  PROJECTING  RE-FACE

SIGN COPY KRC APPROVED

CITY OF SACRAMENTO PERMIT SERVICES  
BUILDING INSPECTION DIVISION 264-7619

WORKER'S COMPENSATION DECLARATION

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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 Comp  
Policy Number 00V1A0743C

(This section need not be completed if the permit is for one hundred dollars (\$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: 1/25/01 Applicant: \_\_\_\_\_ (Signature)

WARNING: FAIL TO SECURE WORKERS' 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 FEES.

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TYPE OF SIGN	PER SQ. FT.	SQ. FT. = \$	DATE
A. _____	_____	_____	_____
B. \$ _____	PER SQ. FT. X _____	SQ. FT. = \$ _____	DATE _____
APPROVED BY <u>MS</u>	DATE <u>5-10-01</u>		
DENIED BY _____	DATE _____		
BUILDING INSPECTOR	FINAL INSPECTIONS	DATE	
<u>Michael Thomas</u>	<u>May 14 2001</u>		
SIGN INSPECTOR	DATE		
<u>Michael Thomas</u>	<u>5/10/01</u>		
FEES:	RECEIVED	DATE	AMOUNT
SIGN APPLICATION FEE	<u>100</u>	<u>5/10/01</u>	<u>100</u>
SIGN PERMIT FEE			
ELECTRICAL SIGN FEE			
CITY BUSINESS LICENSE			
OTHER			
TOTAL FEES	\$		



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Lenders Address \_\_\_\_\_

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License Class C-45 Lic. Number 265001  
Date 1/21/01 Contractor Sign Design  
(Signature)

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Date 1/21/01 Signature of Applicant or Agent \_\_\_\_\_

SITE ADDRESS 1661 Del Paso Blvd SUITE \_\_\_\_\_ INSP. AREA 4

ASSESSOR PARCEL NO. 27500886012 PERMIT NO. 0105952

LICENSED CONTRACTOR NAME OF APPLICANT Sign Design ADDRESS 204 Campus Way Modesto ZIP CODE 97351 PHONE NO. \_\_\_\_\_  
BUSINESS OWNER KFC 8334 Gehlke Rd, Sac 916.659.2192

SIGN INFORMATION  
 ATTACHED  INTERIOR / ELECT.  SINGLE FACED  
 ILLUMINATED  NON-ILLUMINATED  BILLBOARD / SUBDIVISION  
 INDIVIDUAL LETTERS  PAINTED ON BUILDING  LOGO  
 METAL  POLE  DOUBLE FACED  
 PLASTIC  MONUMENT  VINYL/GATOR FOAM  
 WOODEN  PROJECTING  RE-FACE

SIGN COPY ALL Attached  
ALL Anderson Food  
C-21553  
CITY OF SACRAMENTO PERMIT SERVICES  
BUILDING INSPECTION DIVISION 264-7619

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 Policy Number DDV1A0743C

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SIGN VALUATION		RECEIVED	
A. TYPE OF SIGN	PER SQ. FT. X	DATE	AMOUNT
B. \$ _____	_____	DATE	_____
APPROVED BY <u>MAJ</u>	DATE <u>5-10-01</u>	DATE <u>5/14/05</u>	
DENIED BY _____	DATE _____	DATE _____	
MAY 15 2001 FINAL INSPECTIONS		DATE _____	
BUILDING INSPECTION SERVICE		DATE _____	
ELECTRICAL INSPECTION SERVICE		DATE _____	
SIGN INSPECTOR _____		DATE _____	
FEES:		RECEIVED	
SIGN APPLICATION FEE _____		DATE _____	
SIGN PERMIT FEE _____		DATE _____	
ELECTRICAL SIGN FEE _____		DATE _____	
CITY BUSINESS LICENSE _____		DATE _____	
OTHER <u>Permit App 1. 5/10/01</u>		DATE <u>25</u>	
TOTAL \$ _____		DATE _____	