

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0318590

Insp Area: 3

Thos Bros: 317 F1

Site Address: 3420 6TH AV SAC

Parcel No: 013-0292-009

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

NEWSON DORTHY M  
04530 CAPRI WAY  
SACRAMENTO, CA 95822

**Nature of Work:** DRY ROT REPAIR KIT. & UPGRADE WINDOWS .DOUBLE HUNG W/ GRIDS  
FACING STREET TRIM &SILLS NO CHANGE PER DES REV

**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 \_\_\_\_\_ License Number \_\_\_\_\_ Date \_\_\_\_\_ Contractor 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 12-04 Applicant/Agent Signature Stan Lyle

**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 \_\_\_\_\_ Policy Number \_\_\_\_\_ Exp Date \_\_\_\_\_

\_\_\_\_ (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 12-04 Applicant Signature Stan Lyle

**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 #	Insp. Area
<b>0309148</b>	

ADDRESS 1801 Capitol Av Suite \_\_\_\_\_  
 ARCEL # 007-0141-020

Applicant **MUST** complete ALL Unshaded areas

**CONTACT**

Name DAVE EDWARDS / VEILAKAS ARCHT.  
 Street Address 1109 22ND ST.  
 City/State/Zip SACRAMENTO, CA 95810  
 Phone 4414685 FAX 4474685  
 E-mail: DAVE@VEILAKASARCHITECTS.COM

**LICENSED CONTRACTOR** Lic No. # \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ FAX \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**ARCHITECT/ENGINEER**

Name VEILAKAS ARCHITECTS  
 Address 1109 22ND ST.  
 City/State/Zip SACRAMENTO, CA 95810  
 Phone 4414685 FAX 4474685  
 E-mail: \_\_\_\_\_

**OWNER**

Name ERNESTO JIMENEZ  
 Address 1901 10TH ST.  
 City/State/Zip SACRAMENTO, CA 95810  
 Phone 4415850 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: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

OCCUPANT/TENANT: LOCALO RESTAURANT VALUATION: \$ 150,000

FLOOD STATUS: \_\_\_\_\_ S.C.A.T. \_\_\_\_\_

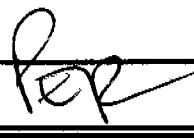
JOB DESCRIPTION		BLDG	SHELL	APT	TIC ( )	REM ( )	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1st fir Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vio. File		
1		<u>5520</u>				SPR	ALARM	18	[H]	[Quad]
<u>(B)</u>	<u>(L)</u>	<u>(P)</u>	<u>(M)</u>	<u>(E)</u>	<u>(F)</u>	<u>(S)</u>	<u>(D)</u>	<u>(V)</u>	PW	UTIL

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

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

City of Sacramento Planning Division  
**PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 1801 Capitol Ave	APN: 007-0141-020
DRPB AREA / PUD / SPD: Capitol Avenue Preservation District	ZONING: C-2-NC
EXISTING LAND USE: Commercial building	
PROPOSED USE: TI for Ernesto's Restaurant	
<p><b>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</b></p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s): PC      ZA      IR      ER      DR      PB          Required Planning application must be submitted <i>before</i> project can be submitted for plan check.</p> <p><input type="checkbox"/> Application(s) IN PROGRESS:          Applicant may submit for concurrent building permit plan check, at applicant's risk.          Building Division must check with Planning staff and/or SITE before issuing building permit.</p> <p><input checked="" type="checkbox"/> Application(s) COMPLETED: PB01-106; P01-149; Z02-158          Building permit must conform to approved plans and comply with all conditions of approval.          Do NOT issue building permit prior to end of 10 day appeal period.</p> <p><input checked="" type="checkbox"/> Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.  <input type="checkbox"/> Meets setback &amp; lot coverage requirements as shown on site plan provided.  <input type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input checked="" type="checkbox"/> Route to SITE for plan check and inspection.  <input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>COMMENTS: TI should not involve any exterior work, interior only.</p> <p>Building has been subject to previous entitlement and preservation approvals, as well as building permit activities, for the restoration/conversion of listed structure to new commercial uses. Current TI submittal must be consistent with those prior approvals.</p>	
DATE: 6/23/03	BY: Phil Reed 

# PLANNING AND ZONING REVIEW

..... filled out by Planning staff .....

ADDRESS: 1801 CAPITOL AV	
APN: 007-0141-020	ZONING: C2 NC
DESIGN REVIEW AREA: Capitol Avenue Preservation	
PREVIOUS FILES RELATED TO SITE: P01-149, PB01-106, Z02-158	
EXISTING LAND USE: Auto sales & repair	
PROPOSED USE: Change of use, remodel	
COMMENTS:	
DATE:	BY:
DOES IT APPEAR THAT THE PROJECT WILL REQUIRE A PLANNING APPLICATION? (Enter an "X" next to those that apply) YES XXX NO	
Staff: Planning Commission: X	Design Review:
ZA: X	Preservation Review: X
CONCLUSION: P01-149 approved 3/28/02. Building permit must conform to approved plans and comply with all conditions of approval. Per APS PB01-106 and Z02-158 have not been approved. Applicant may submit for concurrent bldg permit plan check, at applicants risk. Do not issue bldg permit prior to end of 10 day appeal period following approval. Bldg permit must conform to Approved Plans and comply with all Conditions of Approval.	
DATE: 8/29/02	BY: Linda Hay

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) \_\_\_\_\_
2. I (have/have not) \_\_\_\_\_ signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name ASCENT BUILDERS LLC Address 2225 19th ST #C  
City SAC Telephone 447-3500  
Contractors License No. 777618

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name \_\_\_\_\_ Address PAYD CITY OF SACRAMENTO  
City \_\_\_\_\_ Telephone DEC 8 3 2003  
Contractors License No. \_\_\_\_\_ NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work

Signed BH W

Job Address 1801 CAPITAL AVE

Permit No: 0309148



DEPARTMENT OF  
NEIGHBORHOODS, PLANNING  
AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO  
CALIFORNIA

1231 I STREET  
ROOM 200  
SACRAMENTO, CA  
95814-2904

DEVELOPMENT SERVICES  
DIVISION


916-264-7619  
FAX 916-264-7619

EXHIBIT I

I have read and am familiar with the contents of the City's Standard  
Owner-Builder Notification and Owner-Builder Verification, as required by  
California Health and Safety Code Section 19830 and 19831. I authorize my

agent(s) BEN MEYER

to sign the Owner-Builder Verification on my behalf.

Signature   
Print Name RON VRILAKAS  
Address 1109 224th ST.  
Telephone 441-4685

City of Sacramento

TOTAL P.02

County of Sacramento  
Accounting and Fiscal Services  
Cashier #: 1  
Date: 06/20/00  
Receipt #: 120030000000013952  
Check #: 1133  
Permit #: AF52003-12620  
Fee Type: Health Food Check  
Amount: \$901.00  
Total Due: \$901.00

**RECEIPT  
ENVIRONMENTAL MANAGEMENT DEPARTMENT  
ENVIRONMENTAL HEALTH**

RECEIVED FROM: Arnold Brothers Building DATE: 6/20/00  
 ADDRESS: 1109 22nd St.  
 AMOUNT RECEIVED: \$ 901.00 CHECK NO.: 1133  CASH  CREDIT CARD  
 FACILITY NAME: Zocalo  
 FACILITY ADDRESS: 1801 Capitol Avenue  
 CASE NO.: \_\_\_\_\_

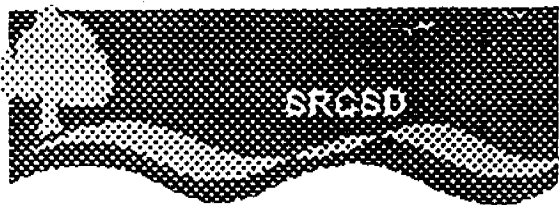
13952- Bx

IN FEE SUMMARY

REVENUE DESCRIPTION: (KEY 33)  
 PLAN REVIEW - **FOOD**  
 PLAN REVIEW - NOISE  
 PLAN REVIEW - POOLS  
 PUBLIC POOL FEE (CONSTRUCTION INSPECTIONS)  
 PLAN REVIEW - TENTATIVE PLOT APPROVAL

COST CTR.	REVENUE	ORDER #	AMOUNT
6206202304	96964301	E32142	\$ 901.00
6206202304	96964403	E32143	\$
6206202304	96964302	E32142	\$
6206202304	92929018	E32131	\$
6206202304	96964402	E32142	\$

SIGNATURE: Francis Watson



REQUEST FOR SEWER FEE QUOTE

DATE	6-23-03			NUMBER OF PAGES	1
FROM	City of	REQUESTOR	FAX	PHONE	
	SACRAMENTO				
TO	SRCSO Customer Service	RESPONDER	FAX	PHONE	
			876-6161	876-6100	

URGENT -- Applicant is in office or ready to pay permit

If urgent, call to notify an Engineering employee that you faxed a request.  
 Press zero to speak to the operator.

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME		PHONE	
	ZOCALO RESTAURANT			
Property	ASSESSOR'S PARCEL NUMBER(S)		PROPERTY ADDRESS	
	007-0141-020		1801 CAPITOL AV	
Project	PLAN CHECK # BUILDING PERMIT NO	(mark all that apply)		
	0309148	New construction	Remodel	Change in use
	USE	CURRENT // PREVIOUS	PLANNED	? YES
	SQUARE FOOTAGE	CURRENT // PREVIOUS	PLANNED	
	5520 SQ. FT			

• SACRAMENTO, CALIFORNIA • 95827-3881  
 ENGINEERING (916) • FAX (916) 876 6160