

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0013745
Insp Area: 4

Site Address: 1689 ARDEN WY SAC
Parcel No: 277-0160-071 STE 1032

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

CONTRACTOR
RETAIL CONSTRUCTION SERVICES
1342 39TH STREET N
LAKE ELMO 55042-9586

OWNER
ARDEN FAIR ASSOCIATES
1689 ARDEN WAY #1167
SACRAMENTO CA 95815

ARCHITECT

Nature of Work: INTERIOR REMODEL OF EXISTING RETAIL SPACE

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. 3997, 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 54-1810 Date 3-01-01 Contractor Signature Mark Jenkins

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 & P for this reason: _____

Date _____ Owner Signature _____

NEIGHBORHOODS, PLANNING
DEVELOPMENT SERVICES

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 3-01-01 Applicant Agent Signature Mark Jenkins

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.

OR 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 CNA INSURANCE Policy Number WCC131303950 Exp Date 12/31/2001

(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 3-01-01 Applicant Signature Mark Jenkins

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

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

1231 I Street, Rm 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7045

ACTIVITY **0013745** Insp. Area **Ac**

Applicant **MUST** complete **ALL Unshaded areas**

ADDRESS 1601 Broadway Suite 1032
 PARCEL # 277-0140-071

CONTACT Name <u>Kent Fahey</u> 71450 Address <u>3019 Hollister Dr., Katy TX</u> Phone <u>800-556-8641</u> FAX <u>281-579-2227</u> E-mail <u>rtlpermits@aol.com</u>		LICENSED CONTRACTOR Lic No. # _____ Name _____ Address _____ Phone _____ FAX _____ E-mail _____	
ARCHITECT/ENGINEER Name <u>Michael Kane</u> 08107 Address <u>421 Saffell Ave, Colliingswood TX</u> Phone <u>201-840-9060</u> FAX <u>201-240-9881</u> E-mail _____		OWNER Name <u>Claire's Stores</u> FL 33027 Address <u>3 SW 129th Ave, Pembroke Pines</u> Phone <u>954-433-3435</u> FAX <u>954-433-1480</u> 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: Remodel to existing retail lease space
AFTERTHOUGHTS (LADIES ACCESSORY STORE) AT ARDEN FAIR MALL
TENANT IMPROVEMENT

OCCUPANT/TENANT: Afterthoughts VALUATION: \$ 450,000


FLOOD STATUS:		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI (X)	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE		FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. (Y/N)		Fed Code	Vio. File	
1	1150	1150	M		11-N	SPR	ALARM	18	[H]	[Quad]
(B)	(L)	(P)	(M)	(E)	(F)	S		D	PW	UTIL

COMMENTS: PLUMBING SHOWN ON M-1

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

dssw/forms/commercialapp. (rev. 04/26/99)
 Contact Applicant:
 Kent Fahey
 800-556-8641
 Fax 281-579-2227



CARSON MECHANICAL, INC.
 Lic. #49834

2081-A Rene Avenue
 Sacramento, CA 95838
 PH (916) 920-3733
 FAX (916) 920-5214

JOB NO. 5571

TECHNICIAN Corey

DATE 4/12/01

OUTLET TEST DATA

LOCATION: Afterthoughts-Icing

SYSTEM: VAV-1

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
Sales	1	24x24	10"			320		300		310		
Sales	2	24x24	10"			315		330		315		
Sales	3	24x24	10"			315		340		315		
Storage	1	24x24	8"			150		140		140		
TOTALS						1100		1110		1080		
								101%		98%		

Bath Fan	1	10x10	6"			150		140		140		
TOTALS						150		140		140		
								93%		93%		

CITY OF SACRAMENTO

30 DAY TEMPORARY
Certificate of Occupancy

For Information Contact (916) 264-5716

Building Address: 1689 ARDEN WY #1032 Permit No. 0013745

Building Use: RETAIL DBA: AFTER THOUGHTS Occupancy: M

Building Owner: ARDEN ASSOC. Construction Type: II-N

Owner Address: 1689 ARDEN WY #1167 SACRAMENTO Sprinkled? Yes No

Portion of Building Occupied: SUITE 1032 Area: 1150 Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

4/12/01 Muhala u Buehler DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[TCO approvals:RY,TNG,JXE,CP]

BC 109.4 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

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 1689 Arden Way #1032 Permit No. 00-13745

Building Use: Retail Occupancy: M

Building Owner: Arden Associates Construction Type: II-N

Owner Address: 1689 Arden Way #1167 Sprinkled? Yes No

Portion of Building Occupied: #1032 Area: 1,150 Sq. Ft.

4/17/01 DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By: MW, JE, SG, CP]

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 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