

CITY OF SACRAMENTO

Permit No: 9807342

1231 I Street, Sacramento, CA 95814

Insp Area: 2

Site Address: 6600 BRUCEVILLE RD SAC

Sub-Type: ACOM

Parcel No: 1170170074

MOB#3 STEJ&K

Housing (Y/N): N

CONTRACTOR

CONSRCTION SERVICES
1780 2ND ST
BERKELEY CA 94710

OWNER

KAISER FOUNDATION HOSPITALS
6600 BRUCEVILLE RD
SACRAMENTO CA 95823

ARCHITECT

Nature of Work: INT 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 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 187350 Date 9-10-98 Contractor Signature [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 herby authorize representative(s) of this city to enter upon the above mentioned property for inspection purposes.

Date 9-10-98 Applicant/Agent Signature [Signature]

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 SELF INSURANCE Policy Number 1053

(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 9-10-98 Applicant Signature [Signature]

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 BUILDING PERMIT**  
**DEPARTMENT OF PLANNING AND DEVELOPMENT**  
**BUILDING INSPECTION DIVISION**  
 1231 I Street, Room 200  
 Sacramento, CA 95814  
 (916) 264-7619 FAX 264-7046

980 7342C

ADDRESS 6600 Bruceville Road ste J+k P.C. # 6307X  
 PARCEL # 117.0170.074 & 075 SUITE # MOB 3  
 AREA # SC

**CONTACT**

NAME Mike Canevari  
 ADDRESS 3540 Folsom Blvd.  
Sacramento ZIP 95816  
 PHONE 916-453-1234 fax: 916-453-1236

**LICENSED CONTRACTOR**

NAME Construction Services  
 ADDRESS 1780 Second Street  
Berkeley, CA ZIP 94710  
 PHONE 510-559-5112

**ARCH./ENG.**

NAME Dreyfuss & Blackford  
 ADDRESS 3540 Folsom Blvd.  
Sacramento ZIP 95816  
 PHONE 916-453-1234

**OWNER/TENANT**

NAME Kaiser Foundation  
 ADDRESS 1950 Franklin  
Oakland, CA ZIP 94612  
 PHONE 916-688-6441

LIC 187350

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE?  YES  NO

NATURE OF WORK IN DETAIL: The project consists of interior alterations to  
Medicine Units J & K in Medical Office Building 3. Included are installation of  
new cabinets, alterations to existing cabinets and minor electrical additions.

TYPE INT. REMODEL

D.B.A. Kaiser  VALUATION \$15,000.00

BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS NA  S.C.A.T.

JOB DESCR. BLDG SHEL APT TI( ) REM( ) SW FIRE ADD OTH

INSP. DISCIPLINES  BLDG  MECH  PLUMB  ELEC  SITE  WIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	USE ZONE	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FED CODE	VIO. FILE
						<u>Yes</u>	<u>14</u>	<u>OK</u>
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>NO</u>	<u>D</u>	<u>R</u>

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

Go! EXPRESS

Worker's Comp Policy #1054  
 Company: Self Insured  
 Exp. Date: N/A

CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION

# EXPRESS PLAN REVIEW

SUBMITTAL DATES					
First Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
7/31/98	/ /	9/1/98	/ /	/ /	/ /

PLAN CHECK # 6307 X  
 ADDRESS: 6600 Bruceville Rd.  
 Commercial     Residential



ACCEPTED by (Staff):  
BT.

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
<u>LIFE SAFETY</u>	3	BT	8/5/98	13	BT	9/2/98			
STRUCTURAL									
<u>MECHANICAL/PLUMBING</u>		A.P.	8/4/98						
<u>ELECTRICAL</u>	13	BT	8/5/98						
<u>FIRE</u>	7	BT	8/5/98	13	BT	9/2/98			
PLANNING									

STAFF COMMENTS: \_\_\_\_\_  
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CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION

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9/1/98	/ /	9/1/98	/ /	/ /	/ /

PLAN CHECK # 6307  
 ADDRESS: 6600 Bruceville Rd.  
 Commercial     Residential



ACCEPTED by (Staff):  
BT

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
<u>LIFE SAFETY</u>	3	BT	8/2/98	13	BT	9/2/98			
STRUCTURAL									
<u>MECHANICAL/PLUMBING</u>									
<u>ELECTRICAL</u>	13	AM	8/5/98						
<u>FIRE</u>	none	AS	8/6/98			9/2/98			
PLANNING									

STAFF COMMENTS:

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