

CITY OF SACRAMENTO

Permit No: 9802671

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 3651 TRUXEL RD SAC

Sub-Type: TI

Parcel No: 2251040004

Housing (Y/N): N

CONTRACTOR

NEW COAST CONTRACTORS
10133 PROSPECT AV
SANTEE CA 92071

OWNER

DONAHUE SCHRIBER REALTY GROUP
3501 Jamboree Rd
Newport Beach Ca 92660

ARCHITECT

Nature of Work: RETAIL INTERIOR REMODEL. D.B.A. G.N.C. LIVE WELL.

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 BB License Number 512634 Date 6-25-98 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 hereby authorize representative(s) of this city to enter upon the above-mentioned property for inspection purposes.

Date 6-25-98 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 Western Specialty Insurance Policy Number 004436R11

____ (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 6-25-98 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

9802671

ADDRESS NATOMAS MARKETPLACE P.C.# 5941
3651 TRUXELL ROAD SUITE # 2
 PARCEL # 225-1040-004 AREA # A

CONTACT

LICENSED CONTRACTOR OUT TO BID

NAME FIVE STAR PERMITS, INC NAME _____
 ADDRESS 11603 PARAMOUNT BLVD ADDRESS _____
DOWNNEY, CA ZIP 90241 _____
 PHONE 800/605-7827 PHONE _____

ARCH/ENG.

OWNER/TENANT

NAME GREGORY TODD SHUE NAME GENERAL NUTRITION CENTERS, INC
 ADDRESS 17211 EAGLE HOLLOW ADDRESS 300 SIXTH AVE.
SAN ANTONIO, TX ZIP 78248 PITTSBURGH, PA ZIP 15222
 PHONE 800/779-2115 PHONE 412/288-4602

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

NATURE OF WORK IN DETAIL: RETAIL INTERIOR T.I. INCLUDING PARTITION WALL
WATER HEATER, MOP SINK, LIGHTING, FIXTURES & FINISHES

First time TI (~~Remodel~~)

D.B.A. G.N.C. LIVE WELL VALUATION 32,800 / 68,576
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS AE S.C.A.T.

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

INSP. DISCIPLINES BLDG MECH PLUMB ELEC SITE FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	USE ZONE	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FED CODE	VIO FILE
1		1600 SF		M	Vn	NO	18	OK
(B)	(L)	(P)	(M)	(E)	(F)	S	(D)	R
GL	GL	BD	BD	GMC	EHC		Bill	

COMMENTS: _____

\$ 945.95

Bill

WORKER'S COMP 1. POLICY # 2. INS. CO.

CITY OF SACRAMENTO
 BUILDING INSPECTION DIVISION
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: New Coast Contractors Phone: (619) 449-9909
 Site Address: 3651 Troxel Rd. Suite: D-2
(Street) (Zip)
 Business Owner/Representative: Michael P. Dreier Phone: 619 449-9909
 Nature of Business: _____
 Property Owner: G.N.C. Phone: (415) 288-4102
 Address: 300 S. Hill Ave Suite: _____
Littsburg Pa. 15222
(City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes ___ No Is this permit for a shell building? Yes ___ No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes ___ No
 4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No
 6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No
 7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No

If you answered "yes" to questions #6 and/or #7, complete the RMPP Informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Michael P. Dreier
(Print)
[Signature]
(Signature) 6-25-98
(Date)

BID Use Only: Plan Ck# _____	Permit # <u>9802671</u>
OK to issue prmt? Y <u>[initials]</u>	F.D. Appr Req'd? Yes No
init date _____	
Hold on Certificate of Occupancy? Yes <u>(No)</u>	
Fire Dept. Use Only:	
OK to issue permit? ini' _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	

MEMORANDUM

Sacramento Fire Department

To: BUILDING DEPARTMENT

Date: 7-9-98

From: Gordon Duncan,
Fire Marshal

Subject: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

3651 TRUXEL Rd Bldg D

has been conducted by Inspector K. Lee

on 7-9-98.

Permit Number 98-02671-C

The system is acceptable by this Department.

OH Sprinkler Ext
Type Inspection TJ

R. Woodman
By: Ross L. Woodman,
Fire Prevention Officer II

98-126
F. D. Reference Number

CITY OF SACRAMENTO
CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address 3651 Tritel Rd. Permit No. 98-02671
Building Use Retail DAA: GNC Live Well Occupancy M
Building Owner General Nutrition Centers Construction Type VN
Owner Address 300 6th Ave., Hesseburg, Pa. 15322 Sprinkled () Yes (X) No
Portion of Building Occupied Entire Suite Area 1600 Sq. Ft.
09/18/98 RON PECCI Sten Bradford J. Boehm, P.E.
Date Issued By Print City Building Official

Henry/Green/McLay/Lee
This Certificate, issued pursuant to the requirements of Section 09 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 9 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 presumed 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