

CITY OF SACRAMENTO

Permit No: 9805659

1231 I Street, Sacramento, CA 95814

Insp Area: 2

Site Address: 4400 FREEPORT BL SAC

Sub-Type: COM

Parcel No: 0170094024

BLOCKBUSTER VIDEO

Housing (Y/N): N

CONTRACTOR

ADT SECURITIES
4128 NORTH FREEWAY BL
SACRAMENTO CA 95834

OWNER

PATTERSON FAMILY TRUST
500 W CAPITOL AV
BRODERICK CA 95822

ARCHITECT

Nature of Work: FIRE ALARM SYSTEM

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 C-16 License Number 737498 Date 7-1-98 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 Applicant/Agent 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 NATIONAL UNION FIRE INS CO Policy Number RMWC 1134955

(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 Applicant 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  
BUILDING INSPECTIONS DIVISION  
PERMIT SERVICES SECTION

PC # 6196 X 9805659

Address: 4400 Freepart Bl.

This application will need one or more of the following items before it can be issued.

- Owner/Builder form
- Current Certificate of Worker's Comp. (City of Sacramento listed as Certificate Holder.)
- Letter of Authorization for employees to sign (Contractor).
- School Impact Fee Form
- Driveway Permit - 1231 I Street, #200, 264-7995
- County Regional Sanitation Permit (Howard Richmond)  
827 - 7th Street, Rm. 105, Window 10 - Ph: 875-6679
- Special Inspection Forms
- PERMIT FEES \$ 95.88
- A-99 Flood Waiver Form
- Hazardous Materials Form
- SCAT
- Other: \_\_\_\_\_

Date Notified

10/30

Plans in Bin #

59

Initials:

CA

"D" By:

Bill

CITY OF SACRAMENTO  
BUILDING INSPECTION DIVISION  
COMMERCIAL PLAN CHECK FEE RECEIPT  
(916) 264-7619

9805659  
YOUR PLAN CHECK # IS: 6196X

PROJ. VAL. \$ 1,000 DATE 6/23, 1998  
PLAN CHECK FEE \$ 7300

PARTIAL FEE (BALANCE OF P.C. FEE DUE \$ \_\_\_\_\_) PAID  
CITY OF SACRAMENTO

PROJECT ADDRESS: 4400 Freeport Bl JUN 23 1998  
JOB DESCRIPTION:

BLDG SHELL APT T.I. REM SITE (FIRE) ~~ADD~~ NEIGHBORHOODS, PLANNING  
AND DEVELOPMENT SERVICES

RECEIVED OF \_\_\_\_\_ IN ACCORDANCE WITH SECTION 9.51  
OF THE SACRAMENTO CITY BUILDING CODE FOR SERVICES TO BE RENDERED IN CHECKING THE PLANS SUBMITTED  
PLANS ARE SCHEDULED FOR THE FOLLOWING REVIEW:

BLDG L/S PLUMB MECH (ELECT) (FIRE) SITE DEV. FEES P.W. ROUTE

RECEIVED BY: BDO

**CITY OF SACRAMENTO**  
APPLICATION FOR BUILDING PERMIT

9805659

→ Applicant must complete ALL Unshaded areas ←

**DEVELOPMENT SERVICES DIVISION**  
**PERMIT SERVICES DIVISION**  
1231 I Street, Rm. 200  
Sacramento, CA 95814

PC# 6196X AREA# 2C

(916) 264-7619 FAX 264-7046

ADDRESS Sutterville Rd and Freeport Blvd. Suite \_\_\_\_\_

PARCEL # 017-0094-024

<p align="center"><b>CONTACT</b></p> <p>Name <u>Joe Green</u></p> <p>Address <u>4128 N. FREEWAY BLVD.</u></p> <p><u>SACRAMENTO</u> Zip <u>95834</u></p> <p>Phone <u>916-565-2074</u> FAX <u>916-565-2016</u></p>	<p align="center"><b>LICENCED CONTRACTOR</b> Lic No. # <u>707408</u></p> <p>Name <u>ADT SECURITY</u></p> <p>Address <u>4128 N. FREEWAY BLVD.</u></p> <p><u>SACRAMENTO</u> Zip <u>95834</u></p> <p>Phone <u>916-649-8090</u> FAX <u>916-565-2016</u></p>
<p align="center"><b>ARCHITECT/ENGINEER</b></p> <p>Name _____</p> <p>Address _____</p> <p>Phone _____ FAX _____</p>	<p align="center"><b>OWNER/TENANT</b></p> <p>Name _____</p> <p>Address _____</p> <p>Phone _____ FAX _____</p>

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # RMWC134956 EXPIRATION DATE: 07/01/98

NAME OF INSURANCE COMPANY: NATIONAL UNION

NATURE OF WORK IN DETAIL: INSTALLATION OF FIRE ALARM SYSTEM (SMOKE Detectors, Heat Detectors, MPA, H/S)

DBA: Blockbuster Video VALUATION: \$ 1,000

FLOOD STATUS: <u>COST X</u>		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHEL	APT	TI ( )	REM ( )	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		BLDG	MECH	PLUMB	ELEC		SITE	FIRE		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vio. File		
						Spr. Alarm	18	OK		
B	L	P	M	(E)	(F)	S	D	R		
				ME	HC		Bill			

COMMENTS:

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No