

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0513492
Insp Area: 1
Thos Bros: 297B3

Site Address: 114 J ST SAC
Parcel No: 006-0071-033

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

CONTRACTOR
CLIFF BRACKETT
8667 KIWI CR
ELK GROVE CA 95624

OWNER
STIVERS LIVING TRUST
634 COLLEGE AV
MENLO PARK, CA 94025

ARCHITECT
DAVID A. EDWARDS
532 39TH STREET
SACRAMENTO CA. 95816

Nature of Work: ADD SMALL AREA OF FLOOR & OPENING IN DEMISING WALL AND CLOSING OFF STAIRS.

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 700986 Date 9/22/05 Contractor Signature *Cliff Brackett Const.*

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 _____

PAYED
CITY OF SACRAMENTO
SEP 21 2005

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 9/22/05 Applicant/Agent Signature *Cliff Brackett Const.*

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 STATE FUND Policy Number 1536286-00 Exp Date 01/01/2007

(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 9/22/05 Applicant Signature *Cliff Brackett Const.*

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
PLANNING & BUILDING DEPARTMENT
PERMIT SERVICES SECTION
 1231 I Street, Suite 200
 Sacramento, CA 95814 (916) 264-7619 FAX (916) 264-7046

ACTIVITY # 051349Z	Isnp. Area 1
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 114 J STREET Suite _____
PARCEL # 006-0071-033-0000

CONTACT Name <u>DAVE EDWARDS</u> Street Address <u>532 39TH ST.</u> City/State/Zip <u>SACRAMENTO</u> Phone <u>736-3621</u> FAX <u>736-3621</u> E-mail: <u>dave@p2bell.net</u> ARCHITECT/ENGINEER	LICENSED CONTRACTOR Lic No. # <u>700986</u> Name <u>clibb</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
Name _____ Address <u>come 2k share</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	OWNER Name <u>DISCOVER CA</u> Address <u>114 J ST.</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone _____ FAX _____ E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → **INSURANCE CO:** _____ **EXPIRATION DATE:** _____

→ **WORKER'S COMPENSATION POLICY #** _____

NATURE OF WORK IN DETAIL: Add small area of floor, add opening in exist. wall

OCCUPANT/TENANT: DISCOVER CA **VALUATION: \$** \$3000.00

FLOOD STATUS										S.C.A.T.			
JOB DESCRIPTION		<input type="checkbox"/> BLDG	<input type="checkbox"/> SHELL	<input type="checkbox"/> APT	<input type="checkbox"/> TI	<input type="checkbox"/> REM	<input checked="" type="checkbox"/> SW	<input type="checkbox"/> FIRE	<input type="checkbox"/> ADD	<input type="checkbox"/> OTHER	FIRE		
INSPECTION DISCIPLINES		BLDG	MECH	PEUMB	ELEC	SITE	Fire Req. Y/N		Fed Code	Vio. File			
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	SPR	ALARM	D	PW	UTIL			
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>							
<u>JST</u>				<u>ELE</u>	<u>FIR</u>								

COMMENTS:

REGIONAL SANITATION FEES? Yes No **HEALTH DEPARTMENT?** Yes No
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Yes No

City of Sacramento
Development Services Department

PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 112 J St		APN: 006-0071-033
DRPB AREA / PUD / SPD: Central Business District DRD		ZONING: C-3
EXISTING LAND USE: Retail Gift Shop		
PROPOSED USE: Interior TI remodel with small expansion of interior space		
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:		
<input type="checkbox"/>	Planning review is NOT required.	
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.	
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB	
<input type="checkbox"/>	Required Planning application must be approved before project can be submitted for plan check	
<input type="checkbox"/>	Application(s) IN PROGRESS: File Number:	
<input type="checkbox"/>	Application must be approved before project can be submitted for plan check.	
<input type="checkbox"/>	Application(s) COMPLETED: File Number & approval date:	
<input type="checkbox"/>	Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.	
<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 prior to issuance of building permit.	
<input type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.	
<input type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.	
<input type="checkbox"/>	Route to SITE for plan check and inspection.	
<input type="checkbox"/>	Route to SITE for inspection only, plan check not required.	
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.	
CONDITIONS AND COMMENTS:		
No exterior work. No parking issues for retail within the C-3 zone. Small expansion of retail in former bar space.		
DATE: 4-27-05		BY: Sally Shore