

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0009390
Insp Area: 1

Site Address: 2030 23RD ST SAC
Parcel No: 010-0103-025

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

CONTRACTOR

OWNER

ARCHITECT

V DUCA
1099 STEWART RD
SACRAMENTO CA 95818

Nature of Work: UPDATE SM DETECTORS/FIRE ALARM/PULL STN

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 _____ Date _____ Contractor 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 Aug 11, 2000 Owner Signature *V Duca*

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 Aug 11, 2000 Applicant/Agent Signature *V Duca*

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 *Exempt* Policy Number _____ Exp Date _____

(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 *Aug 11, 2000* Applicant Signature *V Duca*

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
 DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <u>0009390</u>	Insp. Area <u>IC</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2030 23rd Street, Sacramento Suite _____
 PARCEL # _____

CONTACT Name <u>VIORREL DUCA</u> Street Address <u>1099 Stewart Rd.</u> City/State/Zip <u>Sacramento, CA 95864</u> Phone <u>916-482-4301</u> FAX <u>482-2257</u> E-mail: _____		LICENSED CONTRACTOR Lic No. # _____ Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
ARCHITECT/ENGINEER Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____		OWNER Name <u>VIORREL DUCA</u> Address <u>1099 Stewart Rd.</u> City/State/Zip <u>Sacramento, CA 95864</u> Phone <u>916-482-4301</u> FAX <u>482-2257</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: up date Smoke Detectors and Firealarm / Pull Station

OCCUPANT/TENANT: Owner VALUATION: \$ 500-700

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			<u>BLDG</u>	MECH	PLUMB	<u>ELEC</u>	SITE	<u>FIRE</u>		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req <u>Y</u> <u>N</u>	Fed Code	Vio. File		
				<u>RZ.1</u>	<u>UN</u>	<u>SPR</u> <u>ALARM</u>	<u>04</u>	[H]	[Quad]	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>PW</u>	<u>UTIL</u>	
<u>13 7/21/10</u>										

COMMENTS: _____

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

dssu/forms/commercialapp. [rev. 03/28/00]



SACRAMENTO CITY FIRE DEPARTMENT
FIRE PREVENTION BUREAU



FIRE SAFETY CORRECTION NOTIFICATION

BUSINESS IVY REACH RETIREMENT HOME OCCP # _____
 ADDRESS 2030 23rd Street PERMIT # _____
Sacto, Ca. 95818 R 2.1 Change of
Owned Duca Prelim ownership
(916) 482-4301

The Sacramento City Fire Code, State Fire Marshal's regulations and Uniform Building Code require the following fire safety deficiencies be corrected immediately:

- 1) Provide 5 year TEST on FIRE Sprinkler System
- * 2) Install Pull Stations, Horn & Strobe lights to update Fire Alarm System Pull stations shall be installed at all Exits.
- * 3) Install Smoke Detectors (Single Station) in all Sleeping Rooms.
- * 4) Install Smoke Detectors in all Hallways and at the Top of all Stairways
- * 5) FIRE POND shall be accessible for Annunciation.
- 6) Remove Extension Cord in Basement
- 7) Remove HVAC Ducting attached to Sprinkler Pipes in Basement
- 8) Refer to #1 = Many Sprinkler Pipe Hangers not installed properly shall be corrected w/ 5 year TEST
- 9) Install FIRE Extinguishers Throughout Facility Maintaining Tripod not to exceed 75 feet
- 10) Install Exit Signs Throughout
- 11) Install 1-40 BC FIRE Extinguisher in kitchen

A reinspection will be made within 5 days at which time it is expected that you will have complied with this notice. If you have any questions, contact the Fire Prevention Bureau at 264-5480 between the hours of 8:00 A.M. and 5:00 P.M., Monday through Friday. (FAX: 264-8130)

ISSUED BY: <u>James Cook</u>	RECEIVED BY: <u>[Signature]</u>	DATE: <u>5/23/00</u>
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SACRAMENTO CITY FIRE DEPARTMENT
FIRE PREVENTION BUREAU



FIRE SAFETY CORRECTION NOTIFICATION

BUSINESS Ivy Reach Retirement Home OCCP # _____
 ADDRESS 2030 23rd Street PERMIT # _____

The Sacramento City Fire Code, State Fire Marshal's regulations and Uniform Building Code require the following fire safety deficiencies be corrected immediately:

12) Client Room Exits shall not have curtains or other hangings over sliding door

13) All exits in Client Rooms shall be accessible and not blocked by furniture in rooms

14) Sprinklers under stairs are impeded by shelving. Remove all shelving.

* Lisa BENDER
1231 I Street
Second Floor

* Plans shall be submitted for items # 2, 3, 4, 5.
To Bldg Dept

264-5914

A reinspection will be made within 2 days at which time it is expected that you will have complied with this notice. If you have any questions, contact the Fire Prevention Bureau at 264-5480 between the hours of 8:00 A.M. and 5:00 P.M., Monday through Friday. (FAX: 264-8130)

ISSUED BY <u>Howard Cooke</u>	RECEIVED BY <u>[Signature]</u>	DATE <u>5/21/00</u>
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DEPARTMENT OF
PLANNING AND DEVELOPMENT

CITY OF SACRAMENTO
CALIFORNIA

1231 I STREET
ROOM 200
SACRAMENTO, CA
95814-2998

Permit Services
916-264-7619
FAX 916-264-7046

TILE ROOF WORKSHEET

This worksheet must be filled out whenever any type of tile roof is applied for.

If the answer to question #5 is yes, a written engineering report from a registered engineer must be provided with each application.

1. BRAND AND MODEL OF TILE Hardislate Tile
2. TILE WEIGHT PER SQUARE 400 lbs
3. WEIGHT OF ROOF SYSTEM PER SQUARE 50 lbs
4. TOTAL WEIGHT OF ROOF SYSTEM 450 lbs
5. DOES TOTAL WEIGHT OF ROOF SYSTEM EXCEED 750# PER SQUARE? YES NO
6. ROOF SLOPE 7-12

PLEASE PROVIDE A SEPARATE WORKSHEET FOR EACH APPLICATION INVOLVING A TILE ROOF.

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no) yes

2. I have (have not) signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work
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Signed Michael Lepore

Job Address 2401 17th Street Date May 27, 1998

Permit No.: _____

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) yes
2. I (have/have not) have signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work

X Signed [Signature]

X Job Address 2030 23rd St. Sac X Date _____

Permit No: _____

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 10-2-00

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2030 23rd ST

has been conducted by Inspector R Robles


on 10-2-00

00-09390-100
Permit Number

Square Footage

FIRE ALARM
Type of Inspection

The system is acceptable by this department.


By: Ross L. Woodman,
Fire Prevention Officer II

00-309
F. D. Reference Number

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MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 10.5.00

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2030 23RD

has been conducted by Inspector R. ROBLES

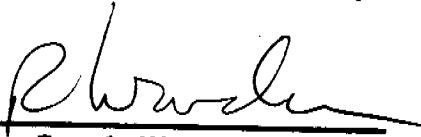
on 10.5.00

00-09390¹⁰⁰₁₉₄
Permit Number

Square Footage

FIRE ALARM
Type of Inspection

The system is acceptable by this department.


By: Ross L. Woodman,
Fire Prevention Officer II

00-268
F. D. Reference Number