

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9908592
Insp Area: 1

Site Address: 2828 J ST SAC
Parcel No. 007-0113-004

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

CONTRACTOR
SECTOR
9912 BUSINESS DR. STE#100
SACRAMENTO CA 95827

OWNER
ATLANTIC RICHFIELD COMPANY
4 CENTERPOINTE DR
LA PALMA CA 90623

ARCHITECT

Nature of Work: SOIL GROUNDWATER REMEDIATION 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 A/HAR License Number 722253 Date 9-24-99 Contractor Signature Ray D. Bull

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).

_____ 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.)

_____ 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: NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES
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 an 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 9-24-99 Applicant/Agent Signature Ray D. Bull

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 WAUSAU UNDERWRITER INS. CO. Policy Number 231900059116 Exp Date 11/02/1999

_____ (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 9-24-99 Applicant Signature Ray D. Bull

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 **[REDACTED]** BUILDING PERMIT

NO. 220 P001/001

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

9908592

PLAN CHECK Insp Area

Applicant **MUST** complete **ALL Unshaded areas** this page only

ADDRESS 2838 J Street, Sacramento, CA Suite _____

PARCEL # 007-0113-004

<p style="text-align: center;">CONTACT</p> <p>Name <u>Rusty Benkosky</u></p> <p>Address <u>9912 Business Park Drive, Suite 100</u> <u>Sacramento, CA</u> Zip <u>95827</u></p> <p>Phone <u>916-364-1880 ext 229</u> FAX <u>916-364-1889</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>722253</u></p> <p>Name <u>Cornerstone Environmental Contractors</u></p> <p>Address <u>3527 Mt. Diablo Blvd. ST 290</u> <u>Lafayette, CA</u> Zip <u>94549</u></p> <p>Phone <u>925-299-9225</u> FAX <u>925-299-</u></p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Rusty Benkosky</u></p> <p>Address <u>9912 Business Park Drive, Ste 100</u> <u>Sacramento, CA</u> Zip <u>95827</u></p> <p>Phone <u>916364-1880 ext 229</u> FAX <u>916 364 1889</u></p>	<p style="text-align: center;">OWNER <u>[REDACTED]</u></p> <p>Name <u>ARCO Products Company</u></p> <p>Address <u>12520 NE 160th Place</u> <u>Woodinville, WA</u> Zip <u>98072</u></p> <p>Phone _____ FAX _____</p>

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

→ If yes, WORKER'S COMPENSATION POLICY # 231900059116 EXPIRATION DATE: Nov 1999

NAME OF INSURANCE COMPANY: Wausau Underwriters Insurance Co.

NATURE OF WORK IN DETAIL: Installation of a soil and groundwater remediation system.

DBA: _____ VALUATION: 36,999

FLOOD STATUS				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	Lt. Dr Area	Total Area	Use Zone	Occp Group	Const type	Flre Req. Y/N	Fed. Code	Vio. File		
				<u>LI</u>	<u>III</u>	Sp	Alarm	<u>E</u>	<u>NO</u>	
<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>R</u>		

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 2838 J Street

Assessor's Parcel Number: 007-0113-004

Previous Use: Gas Station w/mini mart

Description of Request/Proposed Use: Gas

Install soil & groundwater remediation system

Is This a Change of Use? _____

Zoning Designation: C-2

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: Temporary use
approx 2-5 yrs

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: W. J. Cour 8/3/99

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

APPLICATION FOR **[REDACTED]** BUILDING PERMIT

NO. 226 P001/001

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

9908592
 PLAN CHECK # [REDACTED] Insp. Area [REDACTED]

Applicant **MUST** complete **ALL Unshaded areas** this page only

ADDRESS 2838 J Street, Sacramento, CA Suite _____

PARCEL # 007-0113-004

CONTACT Name <u>Rusty Benkosky</u> Address <u>9912 Business Park Drive, Suite 100</u> <u>Sacramento, CA</u> Zip <u>95827</u> Phone <u>916-364-1880 ext 229</u> FAX <u>916-364-1889</u>		LICENSED CONTRACTOR Lic No. <u>722253</u> Name <u>Cornerstone Environmental Contractors</u> Address <u>3527 Mt. Diablo Blvd. ST 290</u> <u>Lafayette, CA</u> Zip <u>94549</u> Phone <u>925-299-9225</u> FAX <u>925-299-</u>	
ARCHITECT/ENGINEER Name <u>Rusty Benkosky</u> Address <u>9912 Business Park Drive, Ste 100</u> <u>Sacramento, CA</u> Zip <u>95827</u> Phone <u>916364-1880 ext 229</u> FAX <u>916 364 1889</u>		OWNER <u>[REDACTED]</u> Name <u>ARCO Products Company</u> Address <u>12520 NE 160th Place</u> <u>Woodinville, WA</u> Zip <u>98072</u> Phone _____ FAX _____	

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

→ If yes, WORKER'S COMPENSATION POLICY # 231900059116 EXPIRATION DATE: Nov 1999

NAME OF INSURANCE COMPANY: Wausau Underwriters Insurance Co.

NATURE OF WORK IN DETAIL: Installation of a soil and groundwater remediation system.

DBA: _____ VALUATION: 36,999

FLOOD STATUS: _____		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 Fl Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vio. File	
				<u>W1</u>	<u>III</u>	Sp. Alarm	<u>16</u>	<u>NO</u>	
<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>R</u>	

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 2838 J Street

Assessor's Parcel Number: 007-0113-004

Previous Use: Gas Station w/mini mart

Description of Request/Proposed Use: Gas

Install soil & groundwater remediation system.

Is This a Change of Use? _____

Zoning Designation: C-2

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: Temporary use
approx 2-5 yrs

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: W. J. Cour 8/3/99

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL