

CITY OF SACRAMENTO

Permit No: 9802916

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 1500 21ST ST SAC

Sub-Type: ACOM

Parcel No: 0070246003

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

KRAMBS MICHAEL/OLGA RAMIREZ
2115 J ST #210
SACRAMENTO CA 95816

LEX COFFROTH & ASSOC INC
3633 SEAPORT BL
WEST SACRAMENTO CA

95691

Nature of Work: REMODEL 2ND FLOOR OFFICE & TI FOR 3RD FLOOR OFFICE ADD EXIT STAIR & 2 SHOWERS

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 7/11/98 Owner Signature [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 abovementioned property for inspection purposes.

Date 7/11/98 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 _____ Policy Number _____

(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 7/11/98 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

98-02916

ADDRESS 1500 2ND STREET P.C. # 5966
 PARCEL # 001-0240-003 SUITE # _____
 AREA # 1C

CONTACT LICENSED CONTRACTOR Lic# _____

NAME STEVE ORLUM
 ADDRESS 3633 SCARLET BLVD
SACRAMENTO, CA ZIP 95831
 PHONE 373-9700 FAX: (13116200)

NAME O/B
 ADDRESS _____
 ZIP _____
 PHONE () - FAX() -

ARCH./ENG. OWNER

NAME LEY CONTRACTING & ASSOC INC
 ADDRESS 3633 SCARLET BLVD
SACRAMENTO, CA ZIP 95831
 PHONE 373-9700

NAME MICHAEL KRAMBS
 ADDRESS 2115 J STREET # 210
SACRAMENTO, CA ZIP 95816
 PHONE () 444-0599 FAX () 444-0570

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

NATURE OF WORK IN DETAIL: TENANT IMPROVEMENT FOR 2ND & 3RD FLOORS
ADD EXTERIOR EXIT STAIR. ADD 2' SITOWER - Office Remodel

Interior Remodel?

D.B.A. CARES VALUATION \$50,000
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS A99 S.C.A.T. X-1

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

INSP. DISCIPLINES BLDG MECH PLUMB ELEC SITE FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FIRE ALARM	FED. CODE	VIO. FILE
			<u>B</u>	<u>3M</u>	<u>Y/</u>	<u>Y/</u>	<u>15</u>	<u>Dlx</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>
<u>11</u>	<u>11</u>	<u>BD</u>	<u>BD</u>	<u>GMU</u>	<u>& H.C.</u>	<u>GDS</u>	<u>Reg</u>	

COMMENTS: _____

Worker's Comp Policy #
Company

CITY OF SACRAMENTO
BUILDING INSPECTION * DEPARTMENT OF PLANNING AND DEVELOPMENT
1231 I STREET * SACRAMENTO, CA 95814 * PHONE (916)264-7619

STRUCTURAL TESTS AND INSPECTIONS SCHEDULE

PRIOR TO OBTAINING THE PERMIT, THE PROJECT OWNER SHALL COMPLETE, SIGN AND SUBMIT THIS FORM FOR THE BUILDING INSPECTION DIVISION FOR APPROVAL.

PROJECT NAME: _____
PROJECT ADDRESS: 1500 21st St.

PLAN REVIEW # 5966
PERMIT NUMBER 98029160

TESTING/INSPECTION AGENCY/IES: CAPITAL ENG.
631 COMMENCE DR. ROSEVILLE 95678

OWNER'S NAME: TED JOHN'S SIGNATURE: [Signature]
(Please Print)

hereby certifies that the Testing/Inspection agency named above has been engaged to perform structural tests and inspections during construction, as noted below, to satisfy all applicable portions of the Uniform Building Code.

INSPECTIONS REQUIRED

Jr

In accordance with Sections 302 and 306 of the Uniform Building code, special inspections shall be performed on the following items (circled):

<u>Item</u>	<u>Description</u>	<u>Ref. Dwg.*</u>
1.	CONCRETE _____	_____
2.	REINFORCING/PRESTRESS STEEL _____	_____
<u>3.</u>	WELDING <u>Field welding</u>	SA <u>SI</u>
4.	HIGH STRENGTH BOLTING _____	_____
5.	STRUCTURAL MASONRY _____	_____
6.	PILING, DRILLED PIERS, CAISSONS _____	_____
7.	SPRAY APPLIED PROOFING _____	_____
<u>8.</u>	OTHER <u>HILTI Bolts</u>	SA <u>SI</u>

* Referenced drawings listed represent a sample of the item requiring special inspection and are not intended to document all drawings or specifications containing information pertaining to that item.

BID APPROVAL [Signature]

Date 7/10/98

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: CARES Phone: 443-3299
 Site Address: 1500 21ST STREET Suite: _____
(Street) (Zip)
 Business Owner/Representative: TERRY WILSON Phone: 443-3299
Ext 1010
 Nature of Business: MEDICAL
 Property Owner: MICHAEL KILAMBS Phone: 444-0599
 Address: 2115 J. ST. STE 210 Suite: _____
(Street)
SACRAMENTO CA 95816
(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: TED JOHNS
(Print)
[Signature] 7/10/98
(Signature) (Date)

BID Use Only: Plan Ck# <u>5960</u> Permit # <u>9802916C</u> OK to issue prmt? <input checked="" type="checkbox"/> <u>7/10/98</u> F.D. Appr Req'd? Yes <input checked="" type="checkbox"/> <small>init date</small>	
Hold on Certificate of Occupancy? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Fire Dept. Use Only: OK to issue permit? init _____ date _____ OK to issue Certificate of Occupancy? init _____ date _____	

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) NO

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 MARCO COLUCCI Address 1540 53RD ST
City SACRAMENTO Telephone 456-5509
Contractors License No. B284245

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

Signed [Signature]
Job Address 1500 21ST ST Date 7/10/98
Permit No.: _____

ADDRESS 1500 21st St. # _____

P.C.# 5966 PREPARED BY Bill DATE 4-10-98

Owner/builder forms are required to be signed by the owner or tenant if the permit will be pulled by the owner or tenant.

Current Certificate of Worker's Compensation must be on file with Building Dept. (Certificate holder's name and address must read City of Sacramento, Dept. of Planning & Development, Building Inspection Division, 1231 I St. Room 200, Sacto. CA 95814) This form is required for contractors who are not exempt from workers' compensation requirements and for owners who will be using their own employees to perform work.

Letter of authorization from contractor on company letterhead for employees of contractor to sign for permit. Exhibit 1 must be signed by owner if employees or agents will be signing for permit.

School Impact Fee form must be taken to applicable School District and fees paid. Receipt must be returned to Building Department.

A Driveway permit must be obtained from Department of Public Works. Contact Danny Lee at 264-7915.

A Regional Sanitation Permit must be obtained from the County. The receipt must be returned to the Building Department. Contact Howard Richmond at 855-8079.

Special Inspection forms must be completed and signed by owner.

Hazardous Materials form must be completed and signed by owner.

This project is in an A-99 flood zone. A flood waiver form for _____ substantial improvements _____ new construction is required to be signed and returned to the Building Department prior to permit issuance.

This project is in an AO, AE, or AH flood zone. An elevation certificate signed by a California licensed Civil Engineer is required prior to permit issuance. The engineer will also be required to certify the building pad elevation.

This project is in the Natomas flood moratorium area. Commercial projects will be required to meet the requirements of City Ordinance. Residential projects may not be built without a waiver.

Sewer connection waiver form req'd. to be signed by owner.

Other _____

	REQUIRED			NOT REQUIRED	UNKNOWN AT THIS TIME
	APPROVED/RECEIVED	ATTACHED	PREVIOUSLY ATTACHED		
Owner/builder forms are required to be signed by the owner or tenant if the permit will be pulled by the owner or tenant.		<input checked="" type="checkbox"/>			
Current Certificate of Worker's Compensation must be on file with Building Dept. (Certificate holder's name and address must read City of Sacramento, Dept. of Planning & Development, Building Inspection Division, 1231 I St. Room 200, Sacto. CA 95814) This form is required for contractors who are not exempt from workers' compensation requirements and for owners who will be using their own employees to perform work.				<input checked="" type="checkbox"/>	
Letter of authorization from contractor on company letterhead for employees of contractor to sign for permit. Exhibit 1 must be signed by owner if employees or agents will be signing for permit.				<input checked="" type="checkbox"/>	
School Impact Fee form must be taken to applicable School District and fees paid. Receipt must be returned to Building Department.				<input checked="" type="checkbox"/>	
A Driveway permit must be obtained from Department of Public Works. Contact Danny Lee at 264-7915.				<input checked="" type="checkbox"/>	
A Regional Sanitation Permit must be obtained from the County. The receipt must be returned to the Building Department. Contact Howard Richmond at 855-8079.				<input checked="" type="checkbox"/>	
Special Inspection forms must be completed and signed by owner.				<input checked="" type="checkbox"/>	
Hazardous Materials form must be completed and signed by owner.		<input checked="" type="checkbox"/>			
This project is in an A-99 flood zone. A flood waiver form for _____ substantial improvements _____ new construction is required to be signed and returned to the Building Department prior to permit issuance.		<input checked="" type="checkbox"/>			
This project is in an AO, AE, or AH flood zone. An elevation certificate signed by a California licensed Civil Engineer is required prior to permit issuance. The engineer will also be required to certify the building pad elevation.				<input checked="" type="checkbox"/>	
This project is in the Natomas flood moratorium area. Commercial projects will be required to meet the requirements of City Ordinance. Residential projects may not be built without a waiver.				<input checked="" type="checkbox"/>	
Sewer connection waiver form req'd. to be signed by owner.				<input checked="" type="checkbox"/>	
Other _____					

work form

Planning Division COMMERCIAL PRELIMINARY Information Request

BUILDING CHECK ONE:

Over the counter review and issue permit _____
Will be taken in and reviewed for site conditions _____
Will be taken in but not reviewed for site conditions _____
Information only, pre-submittal information _____

Customer Name: Steve Callow Phone Number: _____

Project address: 1500 21st
APN: 96-0246-003 Current site use: Office Bldg.

Need to verify AN Proposed Site use: Office Bldg.

Describe what is being requested: APPROVAL & COMMENTS
Remodel 2nd floor office +
T.I for 3rd floor (1536 S.F.)

Requested by: WT Date: 4/10/98

Zone C-2 Overlay / SPD / PUD / R-review _____
Planning staff Review required _____
Planning Hearing required _____
Design Review required _____
No Planning Issues _____
Counter ok review by site cond. _____

Prior Applications on site P# 96-077 Z# _____

DR# 96-273 PB# _____ IR# _____

Comments: Provide verification
of total office sq. ftg.
and total parking incl.
waiver of 29 spaces
per (P96-077)

Planning review by: WT/AR Date: 4/10/98

- MUST BE REVIEWED BY PLANNING
- | | | |
|-----------------|----------------------|---------------|
| Care Facilities | Anything Residential | Restaurants |
| Churches | Day care | Sidewalk Cafe |
| Drive-through | Lot Line adjustments | |
| Medical Offices | Bars | |

Security codes
CELLULAR COMMUNICATION FACILITIES



EXHIBIT 1

I have read and am familiar with the contents of City's standard Owner-Builder Notification and Owner-Builder Verification, as required by California Health and Safety Code Section 19830 and 19831.

I authorize my agent(s) TED JONES
to sign the Owner-Builder Verification on my behalf.

Signature Michael Kramps
Print Name MICHAEL KRAMPS
Address 2115 J ST, Ste 210
SACRAMENTO 95816
Telephone 444-0599

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address 1500 21st STREET Permit No. 98-02916

Building Use Office TI DBA: G.A.R.E.S. Occupancy B

Building Owner Michael Krumb Construction Type III N

Owner Address 2115 I Street #210, Sacramento, CA Sprinkled Yes () No

Portion of Building Occupied 100% Area Sq. Ft.

Date Issued 02/04/99 By RON BEGG Sign CHIEF BUILDING INSPECTOR

City/Building Official

Frietas/McDonald/Krtnke/Delolko/Spross/SP1

This Certificate, issued pursuant to the requirements of Section 109 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 presuming 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

PISOR INDUSTRIES, INC

8210 FAIR OAKS BLVD * CARMICHAEL, CA. 95608 * Telephone 916-944-2851 * Fax 916-944-1022
California Contractors License 385444 Web Site: Pisor.Com 1-800-426-6661

Architectural Metals, Structural Steel, Spiral Stairs, ADA Railings, Rolling & Bending

November 23, 1998


City of Sacramento
Planning and Development Dept.
1231 I Street
Sacramento, Ca. 95814

Re: Cares Building

To Whom It May Concern:

Pisor Industries is currently installing the third floor exit stairs at 1500 21st Street.
The estimate time of completion is 12/4/98. However in no event would completion
extend beyond 30 days from now.

Sincerely



Skip Pisor
President

CITY OF SACRAMENTO
 BUILDING INSPECTION * DEPARTMENT OF PLANNING AND DEVELOPMENT
 1231 I STREET * SACRAMENTO, CA 95814 * PHONE (916)264-7619

STRUCTURAL TESTS AND INSPECTIONS SCHEDULE

PRIOR TO OBTAINING THE PERMIT, THE PROJECT OWNER SHALL COMPLETE, SIGN AND SUBMIT THIS FORM FOR THE BUILDING INSPECTION DIVISION FOR APPROVAL.

PROJECT NAME: _____ PLAN REVIEW # 5966
 PROJECT ADDRESS: 1500 21st St. PERMIT NUMBER 98029160

TESTING/INSPECTION AGENCY/IES: CAPITAL ENG.
631 COMMERCIAL DR ROSEVILLE 95678

OWNER'S NAME: TE.D JOHN'S SIGNATURE: Ted John
 (Please Print)

hereby certifies that the Testing/Inspection agency named above has been engaged to perform structural tests and inspections during construction, as noted below, to satisfy all applicable portions of the Uniform Building Code.

INSPECTIONS REQUIRED

IT

In accordance with Sections 302 and 306 of the Uniform Building code, special inspections shall be performed on the following items (circled):

THIRD FLOOR EXTERIOR STAIRS

Item	Description	Ref. Dwg.*
1	CONCRETE	
2	REINFORCING/PRESTRESS STEEL	
<u>3</u>	<u>Field welding</u>	<u>SA 51 SA 51</u>
4	HIGH STRENGTH BOLTING	
5	STRUCTURAL MASONRY	
6	PILING, DRILLED PIERS, CAISSONS	
7	SPRAY APPLIED PROOFING	
<u>8</u>	<u>HILTI Bolts</u>	<u>SA 51 SA 51</u>

* Referenced drawings listed represent a sample of the item requiring special inspection and are not intended to document all drawings or specifications containing information pertaining to that item.

BID APPROVAL [Signature] Date 7/10/98 BID # 382(02/95)

CITY OF SACRAMENTO
30 DAY TEMPORARY CERTIFICATE OF OCCUPANCY
For Information Contact (916) 264-7619

Building Address 1500 21st Street Permit No. 98-02916

Building Use Office TI DBA: CARIS Occupancy B

Building Owner Michael Kramps Construction Type IIIN

Owner Address 2115 J Street, #210, Sacramento, CA Sprinkled Yes () No

Portion of Building Occupied 2nd Floor Space Storage ONLY Area 0 Sq. Ft.

11/24/98 12/24/98 RON PECCI Baym M/Kramps, Inc

Date Issued Krinke/MacDonald/Krantz Expiration Date Bradford J. Boehm, P.E.
City Building Official

CBC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

statement

**MARCO COLUCCI
GENERAL CONTRACTOR**

1540 53rd Street
SACRAMENTO, CALIFORNIA 95819

Phone 451-5509

11/23/98

CITY OF SACRAMENTO
PLANNING AND DEVELOPEMENT DEPT.
1231 I STREET
SACRAMENTO CA. 95814

RE: CARES BUILDING
1500 21st STREET

WE ARE REQUESTING A TEMPORARY OCCUPANCY FOR THE SECOND FLOOR ONLY.
FINAL BUILDING AND FIRE INSPECTIONS WILL BE MADE AFTER EXTERIOR STAIRS ARE
SET TO THE THIRD FLOOR. ACCORDING BY OWNER AND STAIR SUB-CONTRACTOR,
COMPLETION WILL NOT EXCEED 30 DAYS.

Marco Colucci
CL # 284245