

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9908441
Insp Area: 2

Site Address: 2505 RIVERSIDE BL SAC
Parcel No: 009-0291-020

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

CONTRACTOR
SD DEACON
7745 GREENBACK LN #250
CITRUS HEIGHTS CA

OWNER
DAYTON HUDSON CORPORATION
MINNEAPOLIS MN
55440

ARCHITECT

Nature of Work: REMODEL GARDEN CENTER/FRONT ENTRY

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 B License Number 4482502517 Date 9-28-99 Contractor Signature Ray Reckell

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 9-28-99 Owner Signature Ray Reckell

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 9-28-99 Applicant/Agent Signature Ray Reckell

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 REPUBLIC INDEM OF AMER. Policy Number 00938907 Exp Date 06/01/1999

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 9-28-99 Applicant Signature Ray Reckell

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.

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 2505 Riverside Bl.

Assessor's Parcel Number: 009-0291-020

Previous Use: Target Store

Description of Request/Proposed Use: Remodel ~~front~~ entry
add garden center entry

Is This a Change of Use? _____

Prior Applications for Project Site(P#, Z#, DRPB#): _____
Zoning Designation: AC-2
DR 99-041

Comments: See conditions of
Design Review appl. DR 99-041

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. Moor 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

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT 2 SETS

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

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

ACTIVITY # 9908441 C Insp. Area 2

Applicant **MUST** complete **ALL Unshaded areas**

ADDRESS 2505 RIVERSIDE BOULEVARD, SACRAMENTO, CA 95818 Suite _____

PARCEL # _____

| | | | |
|---|--|---|--|
| CONTACT Name <u>Rob Boudetti</u> Address <u>3981 MACARTHUR BLVD # 105 NEWPORT</u> Phone <u>(949) 757-3240</u> FAX <u>(949) 757-3290</u> E-mail _____ | | LICENSED CONTRACTOR Lic No. # <u>448250103199</u> Name <u>S-D DEACON</u> Address <u>7745 BROWNBACK LANE # 250 CITRUS HEIGHTS</u> Phone <u>(916) 9640900</u> FAX <u>(916) 729-0900</u> E-mail _____ | |
| ARCHITECT/ENGINEER Name <u>MITH ARCHITECTS</u> Address <u>1115 ATLANTIC AVE ALAMEDA CA.</u> Phone <u>(510) 865-8663</u> FAX <u>(510) 865-1611</u> E-mail _____ | | OWNER Name <u>TARGET</u> Address <u>1000 NICOLLET MALL MINNEAPOLIS MINN 55401</u> Phone <u>(612) 761-1583</u> FAX <u>(612) 761-3322</u> E-mail _____ | |

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: Verify to issue

→ WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: (RETAIL STORE), GARDEN CENTER
FRONT ENTRY REMODEL
Exterior Remodel

OCCUPANT/TENANT: TARGET VALUATION: \$ 500

| | | | | | | | | | | |
|------------------------|--------------|------------|-------------|------------|------------|---|----------|-----------|------|--------|
| FLOOD STATUS: | | | | S.C.A.T. | | | | | | |
| JOB DESCRIPTION | | BLDG | SHELL | APT | TI() | REM <input checked="" type="checkbox"/> | SW | FIRE | ADD | OTH |
| INSPECTION DISCIPLINES | | | <u>BLDG</u> | MECH | PLUMB | ELEC | SITE | FIRE | | |
| # Stories | 1st flr Area | Total Area | Use Zone | Occp Group | Const type | Fire Req <u>Q/N</u> | Fed Code | Vio. File | | |
| | | | | <u>M</u> | | <u>SPR</u> | ALARM | <u>18</u> | [H] | [Quad] |
| B | L | P | M | E | F | S | D | PW | UTIL | |

COMMENTS _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed