

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0113554

Insp Area: 4

Thos Bros:

Sub-Type: REM

Housing (Y/N): N

Site Address: 2450 VENTURE OAKS WY SAC

Parcel No: 274-0320-020

STE 200

CONTRACTOR

SUNSET CONSTRUCTION, INC.

27071 CABOT RD STE 109

LAGUNA HILLS, CA 92653

OWNER

GATEWAY CENTER ASSOC

1451 RIVER PARK DR #110

SACRAMENTO, CA 95815

ARCHITECT

Nature of Work: INT OFFICE REMODEL (6 OFFICES)

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 0 License Number 283701 Date 10-22-01 Contractor Signature Sunset 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

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 10-22-01 Applicant/Agent Signature Sunset 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 STATEFUND

Policy Number 638036-2001

Exp Date 01/01/2002

(This section need not be completed if the permit is for \$100,000 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 10-22-01 Applicant Signature Sunset 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.

PAYED CITY OF SACRAMENTO OCT 23 2001 PERMITS AND DEVELOPMENT

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 # 01-11-3554 Insp. Area 40

ADDRESS 2450 VENTURA OAKS, SACRAMENTO 95833 Suite 200
 PARCEL # 274-0320-040-0000

Applicant MUST complete ALL Unshaded areas

| | |
|---|---|
| <p style="text-align: center;">CONTACT</p> <p>Name <u>Jill FREDRICKSON - Rubio</u> Street Address <u>2868 PROSPECT PARK DR #120</u> City/State/Zip <u>RANCHO CORDOVA, CA 95670</u> Phone <u>(916) 852-6096</u> FAX <u>(916) 852-6097</u> E-mail: <u>jill.fredrickson@AM.joneslanglasalle.com</u></p> | <p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>283701</u></p> <p>Name <u>SUNSET CONSTRUCTION, INC.</u> Address <u>27071 CABOT ROAD STE. 109</u> City/State/Zip <u>LAGUNA HILLS, CA 92653</u> Phone <u>(949) 348-2622</u> FAX <u>(949) 348-2655</u> E-mail: <u>ES@SUNSETCONSTRUCTION.COM</u></p> |
| <p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>MWM Architects</u> Address <u>2333 HARRISON ST</u> City/State/Zip <u>OAKLAND, CA 94613</u> Phone <u>(510) 832-5242</u> FAX <u>(510) 832-5243</u> E-mail: _____</p> | <p style="text-align: center;">OWNER</p> <p>Name <u>A & B PROPERTIES INC</u> Address <u>2868 PROSPECT PARK DR #120</u> City/State/Zip <u>RANCHO CORDOVA, CA 95670</u> Phone <u>(916) 852-6096</u> FAX <u>(916) 852-6097</u> E-mail: _____</p> |

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: STATE COMP. INS. FUND *entire*
 → WORKER'S COMPENSATION POLICY # 0638036 EXPIRATION DATE: 01-01-02

NATURE OF WORK IN DETAIL: Build out of six (6) 150 sq. feet of office space within existing occupied tenant improvement.
TNT OFFICE REMODEL (6 offices)

OCCUPANT/TENANT: STATE COMP. INS. FUND VALUATION: \$ 72,006

| | | | | | | | | | | | |
|------------------------|---------------------------------------|--|--|---------------------------------------|--|--|--|-----------|--------|-----|--|
| FLOOD STATUS: | | S.C.A.T. | | | | | | | | | |
| JOB DESCRIPTION | | BLDG | SHELL | APT | TI() | REM(<input checked="" type="checkbox"/>) | SW | FIRE | ADD | OTH | |
| INSPECTION DISCIPLINES | | <input checked="" type="checkbox"/> BLDG | <input checked="" type="checkbox"/> MECH | <input type="checkbox"/> PLUMB | <input checked="" type="checkbox"/> ELEC | <input type="checkbox"/> SITE | <input checked="" type="checkbox"/> FIRE | | | | |
| # Stories | 1st flr Area | Total Area | Use Zone | Occp Group | Const type | Fire Req. Y/N | Fed Code | Vio. File | | | |
| 5 | | 900 (scm) | | B | | SPR ALARM | 15 | [H] | [Quad] | | |
| B | <input checked="" type="checkbox"/> L | P | <input checked="" type="checkbox"/> M | <input checked="" type="checkbox"/> E | <input checked="" type="checkbox"/> F | S | <input checked="" type="checkbox"/> | PW | UTIL | | |
| | NO | | SC | 137.4M | | | | | | | |

COMMENTS:
Corrections

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

**STATE
COMPENSATION
INSURANCE
FUND**

P.O. BOX 807 SAN FRANCISCO, CA 94101-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ISSUE DATE: 01-01-01

POLICY NUMBER: 0038038 - 01
CERTIFICATE EXPIRES: 01-01-02

CITY OF SACRAMENTO
BUILDING & SAFETY DEPARTMENT
927 TENTH STREET
SACRAMENTO
CALIFORNIA 95814

JOB: ALL OPERATIONS

This is to certify that we have issued a valid Workers' Compensation Insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon 30 days' advance written notice to the employer.

We will also give you 30 days' advance notice should the policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

Kenneth C. Bolter
PRESIDENT

EMPLOYER'S LIABILITY LIMIT INCLUDING DEFENSE COSTS: \$1,000,000.00 PER OCCURRENCE

ENDORSEMENT #2069 ENTITLED CERTIFICATE HOLDERS' NOTICE EFFECTIVE 01/01/01 IS ATTACHED TO AND FORMS A PART OF THIS POLICY.

EMPLOYER

LEGAL NAME

SUNSET CONSTRUCTION INC.
27071 CABOT RD #109
LAGUNA HILLS CA 92653

SUNSET CONSTRUCTION INC.

PRINTED: 12-16-00 P0405

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 2450 VENTURE OAKS WAY #200 Permit No. 0113554

Building Use: STATE CONTRACT SERVICES OFFICE Occupancy: B

Building Owner: STATE CONTRACT SERVICES Construction Type: 1FR

Owner Address: 1451 RIVER PARK DR #110 Sprinkled? [X] Yes [] No

Portion of Building Occupied: SUITE 200 Area: 900 Sq. Ft.

02/04/02

Date

WILLIE HARRIS

By:Print



Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finaled By: MW,RLB,SLG,GJ]

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 15 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