

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0504338

Insp Area: 3

Thos Bros: 317F3

Site Address: 4804 FRANKLIN BL SAC

Parcel No: 019-0134-001

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR
OWNER BUILDER

OWNER
VUONG KARL
9353 CANTER DR
ELK GROVE, CA 95624

ARCHITECT

Nature of Work: INTERIOR T/I. INSTALL NEW SINK IN KITCHEN & REWIRE ELECTRICAL. REMODEL RESTROOM.

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 0 _____ 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: _____

X Date 6-9-05 Owner Signature *[Signature]*

PAID
CITY OF SACRAMENTO
JUN 09 2005
BUILDING PERMIT
CENTRAL

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 a 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.

X Date 6-9-05 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 _____ Exp Date _____

X *[Initials]* (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.

X Date 6-9-05 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.

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

Insp. Area

0504338

ADDRESS: 4804 Franklin Blvd, Sacramento, Ca. 95820 Suite: _____

PARCEL #: 019 0134 001

<p style="text-align: center;">CONTACT</p> <p>Name: <u>Kathy Wong</u> Street Address: <u>9353 Center Dr</u> City/State/Zip: <u>OK Grove, Ca. 95624</u> Phone: <u>50-290-0073</u> E-Mail: <u>kwong09@spglobal.net</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name: _____ Street Address: _____ City/State/Zip: _____ Phone: _____ E-Mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name: <u>PICKARD LP</u> Street Address: <u>845 Honeycomb Way</u> City/State/Zip: <u>SACRAMENTO, CA. 95828</u> Phone: <u>(916) 501-9039</u> E-Mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name: <u>Karl Wong</u> Street Address: <u>9353 Center Dr</u> City/State/Zip: <u>OK Grove, Ca. 95624</u> Phone: <u>916-714-4890</u> E-Mail: _____</p>

Will permittee have any employees on the jobsite? No Yes Insurance Co.: _____

WORKER'S COMPANSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: Plumbing and re-wiring electrical: Remodel restrooms and re-wiring existing electrical and add sink.

<p>FLOOD</p> <p>JOB DIS</p> <p>INSPEC</p> <p># Stories</p> <p style="text-align: center;">B</p> <p>COMMENT</p> <p>REGION</p> <p>WATER</p>	<p style="font-size: 1.5em; text-align: center;">0504338</p> <p style="font-size: 1.5em; text-align: center;">4804 Franklin Blvd.</p> <p style="font-size: 1.5em; text-align: center;">Int. T.I. new kitchen in</p> <p style="font-size: 1.5em; text-align: center;">sink, rewire, new restrooms</p> <p style="font-size: 1.5em; text-align: center;">Body JST 4/18/05 Cfg. 1 ✓</p> <p style="font-size: 1.5em; text-align: center;">L/S JST " ✓</p> <p style="font-size: 1.5em; text-align: center;">Plumb. PSB 4/14/05 Cfg. 2 ✓</p> <p style="font-size: 1.5em; text-align: center;">Mech. PSB 4/14/05 " ✓</p> <p style="font-size: 1.5em; text-align: center;">Elec. RWH 4/14/05 Cfg. 1 ✓</p> <p style="font-size: 1.5em; text-align: center;">Fire VB 4/7/05 Cfg. 1 ✓</p> <p style="font-size: 1.5em; text-align: center;">Site DIH 4/1/05 Cfg. 1 ✓</p>	<p style="text-align: center;">OTE</p> <p style="text-align: center;">File</p> <p style="text-align: center;">Quad</p> <p style="text-align: center;">UTIL</p>
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City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 4800 Franklin Blvd (4800A)	APN: 019-0134-001
DRPB AREA / PUD / SPD: None	ZONING: C-2
EXISTING LAND USE: Retail Center	
PROPOSED USE: Bakery TI	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input type="checkbox"/>	Application(s) COMPLETED: Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: Not the first TI. Existing use is Bar/night-club. Proposed use is Bakery, which is allowed in C-2. No parking issue apparent. No planning entitlement apparent.	
DATE: March 31, 2005	BY: Elise Gumm

ENVIRONMENTAL MANAGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH

DATE: 3/14/05

RECEIVED FROM: Kathy Vuong

ADDRESS: 421 International Pl. Oakland CA

AMOUNT RECEIVED: \$ 1097 CHECK NO.: 1005 CASH CREDIT CARD

FACILITY NAME: BP Food Bakery

FACILITY ADDRESS: 4804 Franklin St.

CASE NO.: _____

IN FEE SUMMARY

REVENUE DESCRIPTION: (KEY 33)

PLAN REVIEW - FOOD

PLAN REVIEW - NOISE

PLAN REVIEW - POOLS

PUBLIC POOL FEE (CONSTRUCTION INSPECTIONS)

PLAN REVIEW - TENTATIVE PLOT APPROVAL

SIGNATURE: [Signature]

COST CTR.	REVENUE	ORDER #	AMOUNT
6206202304	96964301	E32142	\$ 1,097
6206202304	96964403	E32143	\$
6206202304	96964302	E32142	\$
6206202304	92929018	E32131	\$
6206202304	96964402	E32142	\$

REVISED 10/25/00
W:\DATA\FORMS\EHDR\RECEIPT

White - Cashier

Yellow - Customer

Pink - Environmental Management Department