

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0512475

Insp Area: 2

Thos Bros: 316J4

Site Address: 950 SEAMAS AV SAC

Parcel No: 024-0091-001

PARK

Sub-Type: NOTHR

Housing (Y/N): N

CONTRACTOR
CUSTOM PUMP & POWER
4 WATER REEF CT
SAC CA. 95831

OWNER
CITY OF SACRAMENTO
915 I ST #301
SACRAMENTO CA 95814

ARCHITECT

Nature of Work: INSTALL NEW SERVICE PANEL & RUN NEW POWER TO IRRIGATION PUMP.

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 C-10 License Number 798492 Date 8-17-05 Contractor Signature [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 _____ Owner Signature _____

PAID
CITY OF SACRAMENTO
AUG 17 2005

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 8-17-05 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 NO EMPLOYEES Policy Number _____ Exp Date _____

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 8-17-05 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

ACCOMMODATION # 0512475	INSP. AREA
-----------------------------------	------------

Applicant **MUST** complete ALL Unshaded Areas

ADDRESS: 950 SEAMAS AVE, SACRAMENTO 95822 Suite: _____

PARCEL #: 024-0091-001

<p style="text-align: center;">CONTACT</p> <p>Name: <u>Ron GIBBENS</u> Street Address: <u>448 SEXTANT WAY</u> City/State/Zip: <u>SACRAMENTO, CA, 95828</u> Phone: <u>(916) 825-8798</u> E-Mail: <u>sacrgib@aol.com</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>778492</u></p> <p>Name: <u>CUSTOM PUMP & POWER, INC.</u> Street Address: <u>4 WATER REEF CT</u> City/State/Zip: <u>SACRAMENTO CA, 95831</u> Phone: <u>916 429-9729 Fax 427-3965</u> E-Mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name: _____ Street Address: _____ City/State/Zip: _____ Phone: _____ E-Mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name: <u>CITY OF SACRAMENTO</u> Street Address: <u>915 I STREET 2ND FLOOR</u> City/State/Zip: <u>SACRAMENTO, CA, 95814</u> Phone: <u>(916) 808-6397 Jim CRAIG</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: INSTALL NEW SERVICE PANEL & RUD POWER TO IRRIGATION BOOSTER PUMP

OCCUPANT/TENANT: _____ VALUATION: \$9500.00

FLOOD STATUS:			SCAT								
JOB DISCRPTION			BLDG	SHELL	API	PL	MECH	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	MECH	SHE	FIRE			
# Stories	1" Flr Area	Total Area	Use Zone	Occp Group	Canst type	Fire Reg. 1/2" S	Fire Reg. 1/2" S	Fire Code	W/O. [H]	File [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



0512475

CITY COPY

6/29/2005

RON GIBBENS
CITY OF SACRAMENTO
5730 24TH ST



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

SUBJECT: W/SEAMAS AVE, 200' N/PIEDMONT DR Notification # 30125329

SMUD's service point for the above subject address is as follows:

TRANSFORMER POLE IN PARK

A maximum fault current of 10,000 amps, symmetrical, is based on the largest transformer that could be needed to serve the Single Combined main sizes of 100 amps.

This information is based on a service configuration of a 277/480 volt, THREE phase, 4 wire, DELTA, UG service and the following assumptions:

1. The largest transformer that could be needed is 150 kVA with 2.0 % impedance,
2. A primary system impedance of zero ohms,
3. No motor contributions to the fault, and
4. Zero ohms fault impedance.

Any changes to the above information will require a new Service Commitment Letter from SMUD.

Please feel free to contact me at (916) 732-7073 if you have any questions regarding this information.

Regards,

JOHN STOCKTON
Engineering Designer, Distribution Services
Sacramento Municipal Utility District

ALL ELECTRICAL WORK
SUBJECT TO FIELD INSPECTIONS.