

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9907064
Insp Area: 3

Site Address: 5451 WAREHOUSE WY SAC
Parcel No: 061-0210-020

#114

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

CONTRACTOR
T & J CONSTRUCTION
767 SIERRA PINES
APPELEGATE, CA

OWNER
JPI III
5665 POWER INN RD #140
SACRAMENTO CA 95824

ARCHITECT

Nature of Work: REMODEL TO BE DELI/CATERING(INCL. PLBG, ELEC, MECH)

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 [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 am 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 [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 _____ Applicant/Agent 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 _____

(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 _____ 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.

Date of Request: 9/2/99
By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: Warehouse

Assessor's Parcel Number: _____

Previous Use: Warehouse

Description of Request/Proposed Use: _____
Warehouse

Is This a Change of Use? Yes

Zoning Designation: M2S

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: _____

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: [Signature] 9/1/99

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
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: Black Tie Catering Phone: 383-9270
 Site Address: 54511 Warehouse Way #114 Suite: 114
 (Street) (Zip)
 Business Owner/Representative: Steven R Gray Phone: 492-1848
 Nature of Business: Food Service to Gov
 Property Owner: SPI III Phone: 381-8113
 Address: 5665 Power Inn Suite: 140
 (Street) (City) (State) (Zip)
SAC CA 95824

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 restoring the hazardous materials. Additional liability and civil penalties may be assessed for knowing a violation and reasonably foreseeing the violation.

Applicant's Name: STEVEN R GRAY
 (Print)
[Signature] (Signature) 10-4-99 (Date)

BID Use Only: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
OK to issue permit? Yes ___ No ___	FD Dept. Reg'd? Yes ___ No ___
Init date _____	
Hold on Certificate of Occupancy? Yes ___ No ___	
Fire Dept. Use Only:	
OK to issue permit? Init _____ date _____	OK to issue Certificate of Occupancy? Init _____ date _____

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE ^{mt}
 PERMIT AND CALCULATION SHEET

APPLICATION NO: <u>011</u>		BLDG PERMIT NO: <u>254531</u>	
GENERAL INFORMATION <u>PERMIT IN CITY OF SAC.</u> <u>2-17-99</u>		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER <u>1/1/00</u> THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION		BUILDING USE	
INSPECTION	<u>Ø</u>	RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	<u><611></u>	COMMERCIAL USE	UNITS
SRCSD	<u><6082></u>	<u><6693></u> TO	
CONSTRUCTION		BE FINANCED	
IN-LIEU		BY CUBS	
TOTAL FEE	<u>Ø</u>		
APN: <u>061-0210-020</u>			
DESCRIPTION/SUBDIVISION <u>BLACK TIE CATERING</u>			
PROPERTY ADDRESS <u>5451 WAREHOUSE WAY</u>			
OWNER <u>JPI III, LP. A CA GENERAL PARTNERSHIP An</u>			
<u>JACKSON PROPERTIES</u>			
<u>5665 Power Inn Road Ste. 140</u>			
MAILING ADDRESS <u>5451 WAREHOUSE WAY</u>			
CITY-STATE-ZIP <u>SAC. CA. 95824</u> PHONE <u>916-251-8113</u>			
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE <u>[Signature]</u>		<u>John M. Jackson, Jr., General Partner</u> <u>JPI III, A California General Partnership</u>	
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	
INSPECTOR'S COPY			



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) Steven Gray
to sign the Owner-Builder Verification on my behalf.

Signature

Steven Gray

Print Name

Terry Gray (TJ Gray Const.)

Address

P.O. Box 466
Applegate CA 95703

Telephone

(530) 878-9059

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

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

ACTIVITY # 9907064 Insp. Area 35

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 5451 Warehouse Way Suite 114
 PARCEL # why is this omitted? 061-0210-020

<p>CONTACT <u>730-4780 WKE</u></p> <p>Name <u>Steven R Geary</u> Address <u>1209 E St. A SAC.</u> Phone <u>492-1848 HW#</u> FAX <u>SAME 393-9279</u> E-mail <u>LynHeld@aol.com</u></p>	<p>LICENSED CONTRACTOR Lic No. #</p> <p>Name <u>T.J. Geary Const.</u> Address <u>761 Sierra Pines</u> Phone <u>530-878-9059</u> FAX E-mail</p>
<p>ARCHITECT/ENGINEER</p> <p>Name <u>Phillip J. T. dus</u> Address Phone <u>786-0986</u> FAX E-mail</p>	<p>OWNER</p> <p>Name <u>JPI III</u> Address <u>5665 Power Inn #140</u> Phone <u>381-8113</u> FAX E-mail</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: REMODEL TO DELI/CATERING CO.
REMODEL, including new type II wood, plumbing, new equip, electrical

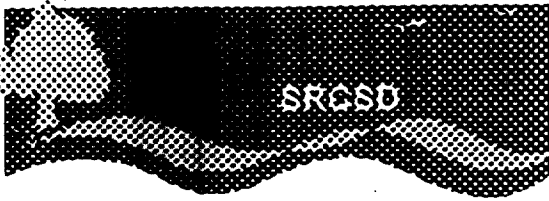
OCCUPANT/TENANT: Black Tie Catering VALUATION: \$ 11,999

FLOOD STATUS: <u>NONE</u>		S.C.A.T. <u>Maybe for more. NONE</u>	
JOB DESCRIPTION <input checked="" type="checkbox"/> BLDG <input type="checkbox"/> SHELL <input type="checkbox"/> APT <input type="checkbox"/> TI() <input checked="" type="checkbox"/> REM <input type="checkbox"/> SW <input type="checkbox"/> FIRE <input type="checkbox"/> ADD <input type="checkbox"/> OTH			
INSPECTION DISCIPLINES <input checked="" type="checkbox"/> BLDG <input checked="" type="checkbox"/> MECH <input checked="" type="checkbox"/> PLUMB <input checked="" type="checkbox"/> ELEC <input checked="" type="checkbox"/> FIRE <input checked="" type="checkbox"/> FIRE			
# Stories	1st flr Area	Total Area	Use Zone
		<u>1130</u>	<u>B</u>
Fire Req. <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vic. E. [H] [Quad]	
SPR <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	ALARM	<u>18</u>	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M
<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S	<input checked="" type="checkbox"/> D
		PW	UTIL

COMMENTS: 9/1/99 why didn't site see this or get a pink slip?
9/2/99 NO PLANNING CONCERNS FOR.

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

dssu/forms/commercialapp [rev. 04/26/99]
 → sent to REGIONAL SAN. FEE. 9/1/99 RT
 UVAI VILLAGION FILE CHECKED? OK 9/1/99 RT



Customer Service Group
 PWA Water Quality Engineering for
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

REQUEST FOR SEWER FEE QUOTE **9907064**

DATE	5451 WAREHOUSE WAY		NUMBER OF PAGES	1
FROM	City of SAC	REQUESTOR	FAX	PHONE
		BARBARA LARSEN		264-7046
TO	SRCSO Customer Service	RESPONDER	FAX	PHONE
		DOLOROSS	875-6253	

URGENT -- Applicant is in office or ready to pay permit
PLANS READY TO ISSUE
 If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.
 Press zero to speak to the operator.

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME		PHONE	
	STEVEN R. GRAY		492-1848 HM 7306780 WIS	
Property	ASSESSOR'S PARCEL NUMBER(S)		PROPERTY ADDRESS	
	061-0210-020		5451 WAREHOUSE WAY	
Project	PLAN CHECK # BUILDING PERMIT NO	(mark all that apply)		
	9907064	New construction	Remodel	Change in use <input checked="" type="checkbox"/>
	USE	CURRENT // PREVIOUS	PLANNED	
		Wholesale bakery to DELI / catering co.	adding sinks etc.	
			SOME Retail / some catering	
	SQUARE FOOTAGE	CURRENT // PREVIOUS	PLANNED	
		1130 SF	1130 SF	

9660 ECOLOGY LANE • SACRAMENTO, CALIFORNIA • 95827-3881
 ENGINEERING (916) 875-6820 • FAX (916) 875-6253

MESSAGE CONFIRMATION

09/01/99 18:21
ID=DEVELOPMENT SERVICES

NO.	MODE	BOX	GROUP
783	TX		

DATE/TIME	TIME	DISTANT STATION ID	PAGES	RESULT	ERROR PAGES	S. CODE
09/01 18:20	00'29"	916 875 6253	001/001	OK		0000



Customer Service Group
PWA Water Quality Engineering for
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

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Applicant	NAME	PHONE
	STEVEN R. GRAY	492-1848HM 7306780 WXC
Property	ASSESSOR'S PARCEL NUMBER	PROPERTY ADDRESS
	061-0210-020	5451 WAREHOUSE WAY