

CITY OF SACRAMENTO

Permit No: 9803395

1231 I Street, Sacramento, CA 95814

Insp Area: 2

Site Address: 7595 FRANKLIN BL SAC

Sub-Type: AOTHR

Parcel No: 0500020021

Housing (Y/N): N

CONTRACTOR  
TRIANGLE INC  
PO BOX 231067  
SAC CA 95818

OWNER  
GULF OIL CORP OF CALIF  
LOS ANGELES CA 90054

ARCHITECT

Nature of Work: EPA UPGRADE AND MONITOR INSTALLATION

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 183550 Date 6-3-98 Contractor Signature Kathy Danze

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 6/3/98 Applicant/Agent Signature Kathy Danze

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 ecoldan eagle Policy Number NWC 416/650

(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 6/3/98 Applicant Signature Kathy Danze

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.

CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION

# EXPRESS PLAN REVIEW

6015X  
7395 FRANKLIN BLVD  
P/L

DATES					
REVIEW		RECHECK		CHECK	
IN	OUT	IN	OUT	IN	OUT
4/12/17	1/1	1/1	1/1	1/1	1/1

PLAN CHECK NO. 6015X	OWNER	RES.
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CONTACT PERSON: KRISTIN DAVES | PHONE: 916 496 4003

PROJECT ADDRESS: 7395 FRANKLIN BLVD | PAR: 916 496 4179

PROJECT DESCRIPTION: TURBINE CONTAINMENT, SENSORS, TANK GALVEE, DISCHARGE CONTAINMENT

DISCIPLINE	1ST REVIEW			RECHECK		
	EPR	DC	APPR	EPR	DC	APPR
STRUCTURAL						
MATERIALS						
Mechanical/Electrical						
PLUMBING						
MECHANICAL/ELECTRICAL						
MECHANICAL/ELECTRICAL						

T.M.  
4/24/17  
82  
4/27/17

Legend:  
EPR = OK for Express Plan Review  
DC = OK for Over the Counter Recheck  
APPR = Approved

**CITY OF SACRAMENTO**  
**APPLICATION FOR BUILDING PERMIT**  
**DEPARTMENT OF PLANNING AND DEVELOPMENT**  
**BUILDING INSPECTION DIVISION**  
 1231 I Street, Room 200  
 Sacramento, CA 95814  
 (916) 264-7619 FAX 264-7046

**RECEIVED**

P.C. # 6015X  
 SUITE # \_\_\_\_\_  
 AREA # \_\_\_\_\_

ADDRESS 7595 FRANKLIN BLVD SACRAMENTO 95823  
 PARCEL # \_\_\_\_\_

**Building Inspection Division CONTACT**

NAME KRISTIN DARVES  
 ADDRESS 450 HOWE AVE SUITE 504  
SACRAMENTO ZIP 95825  
 PHONE 416 4003 FAX: 1 416 4679

LICENSED CONTRACTOR Lic. # 183530  
 NAME TRIANGLE INC  
 ADDRESS P.O. BOX 231067  
SACRAMENTO ZIP 95818  
 PHONE 916 421 1990 FAX: ( )

ARCH./ENG.

OWNER

NAME RHL DESIGN GROUP  
 ADDRESS 650 HOWE AVE SUITE 504  
Sacramento ZIP 95825  
 PHONE 416 4003

NAME Tosco Marketing Co  
 ADDRESS 76 Broadway  
Sacramento ZIP 95818  
 PHONE (916) 353 762 FAX (916) 416 2450

WILL THE PERMITEE HAVE ANY EMPLOYEE'S ON THE JOBSITE?  YES  NO

NATURE OF WORK IN DETAIL: TURBINE containment sumps, sensors tank augury, annular space probe. TIS-350 tank monitoring system. Bravo dispenser containment sumps and card readers in existing dispensers.

D.B.A. CIRCLE B  VALUATION \$ 21,316.00

BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS \_\_\_\_\_  S.C.A.T. \_\_\_\_\_

JOB DESCR. BLDG SHEL APT TI( ) REM( ) SW FIRE ADD OTH

INSP. DISCIPLINES  BLDG  MECH  PLUMB  ELEC  SITE  FIRE

# OF STORIES	AREA 1ST FL.	TOTAL AREA	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FIRE ALARM	FED CODE	VIO. FILE
			<u>B</u>	<u>CS</u>	<u>Y/N</u>	<u>Y/N</u>	<u>18</u>	<u>NO</u>
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>R</u>

COMMENTS: \_\_\_\_\_  
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 \_\_\_\_\_

Worker's Comp Policy #  
Company

Date 4/28/98

# REVISIONS

THIS SHEET IS TO BE USED WHEN PLANS ARE SUBMITTED WITH PLAN CHECK CORRECTIONS OR REVISIONS ON A PLAN WHICH IS STILL IN THE PLAN CHECK PROCESS.

ORIGINAL ROUTE	B	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	S	D	R
Status (opt)			13 DD	13 DD	13 Bm	13 STK			
Revision to be routed to (order)	B	<u>L</u>	P	M	E	<del>F</del>	S	D	R
		GYL							

# of sets submitted 2 BY (NAME) Stafford Spence  
 PHONE # 652-3400

Plan Address 1760 Creekside Oaks Ln

Plan Check # 5994 X

Submitted to WT

Comments ~~1~~ 1<sup>st</sup> recheck

KEEP TRACK OF HOURS? Yes No