

**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).

Lenders Name NA  
Lenders 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 B Lic. Number 589 881  
Date 7/11/97 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 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 Professions 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 or 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 or 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 & P C 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 of this city to enter upon the abovementioned property for inspection purposes.

Date 7/11/97 Signature of Applicant or Agent [Signature]

BUILDING SITE ADDRESS

SUITE

INSP. AREA

**107 Scripps Drive**

**#110**

**1-C**

ASSESSOR  
PARCEL NO.

**295-0370-012-0000**

COMMUNITY  
PLAN NO.

PLAN CHECK NO.

**5199CL**

NAME OF APPLICANT	ADDRESS	ZIP CODE	PHONE NO.
LICENSED CONTRACTOR			
<b>Gorman Construction</b>	<b>8440 Belvedere Avenue</b>	<b>95826</b>	<b>916-386-4270</b>
PROPERTY OWNER			
<b>107 Scripps Ct. Ltd.</b>	<b>185 Cadillac Drive</b>	<b>95826</b>	<b>916-929-8100</b>
ARCH. ENGR.			
LICENSE NO.			

NO. OF STORIES	NO. OF ROOMS	ROOF COVERING	AREA 1ST FLOOR	TOTAL AREA	GARAGE AREA	PATIO AREA	USE ZONE	STREET WIDTH
				<b>1,886</b>			<b>OB</b>	

THIS PERMIT IS FOR:  BUILDING  MECHANICAL  PLUMBING  ELECTRICAL  SITE  FIRE

OCCUP. GROUP

NATURE OF WORK IN DETAIL

**Remodel Dental Office - Portable Medical Gas**

**B**  
CONSTR. TYPE

DBA: **Dr. Delmare**

FLOOD STATUS ( **Exempt (Cost)** ) SPECIAL CONDITIONS ATTACHMENTS:

**V-N**  
FIRE SP.

**CITY OF SACRAMENTO PERMIT SERVICES**  
**BUILDING INSPECTION DIVISION 264-7619**

VALUATION \$ **15,500.00**

**WORKER'S COMPENSATION DECLARATION**

ISSUED BY: [Signature]

I hereby affirm under penalty of perjury one of the following declarations:

DATE ISSUED 7/11/97

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.

BUILDING PERMIT FEE \$ **373.00**

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:

PLAN CHECK/PROC. FEE \$ **Paid 17.00**

Carrier State Fund

S.M.I. FEE \$ **3.25**

Policy Number 229-97

CONST. EXCISE TAX \$

CITY BUS LICENSE \$ **6.20**

TECH. FEE \$ **27.13**

(This section need not be completed if the permit is for one hundred dollars (\$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.

WATER DEV. FEE \$

CITY SEWER DEV. FEE \$

REG. SEWER FEE \$

RESIDENTIAL CONST. TAX \$

Date: 7/11/97 Applicant: [Signature]  
(Signature)

WARNING: FAILURE TO SECURE WORKERS' 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 FEES.

TOTAL FEES \$ **426.58**

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.

**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

WORKERS COMP POLICY # 229-97 UNIT 001406  
COMPANY STATE FUND EXP. DATE 11/19/98

ADDRESS 107 Scripps P.C. # 5199  
 PARCEL # 295-0370-012 SUITE # 110  
 AREA # 1C

CONTACT  LICENSED CONTRACTOR  
 NAME John Gorman NAME Gorman Const.  
 ADDRESS 8440 Belvedere Ave #51 ADDRESS \_\_\_\_\_  
Sacto ZIP 95826 ZIP \_\_\_\_\_  
 PHONE 3864270 FAX: 13864273 PHONE \_\_\_\_\_

ARCH./ENG.  OWNER/~~OWNER~~  
 NAME \_\_\_\_\_ NAME 107 Scripps Ct. Ltd.  
 ADDRESS \_\_\_\_\_ ADDRESS 185 Cadillac Dr  
 \_\_\_\_\_ Sacto Ca ZIP 95826  
 PHONE \_\_\_\_\_ PHONE 9298100

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

NATURE OF WORK IN DETAIL: Add 2 sinks, plugs,  
15' new wall

MED OFFICES - Remodel dental office

D.B.A. De Delmore  VALUATION 15,500  
BELOW THIS LINE FOR BLDG. DEPT. USE ONLY

FLOOD STATUS cost  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	USE ZONE	OCCUP. GROUP	CONST. TYPE	FIRE SPRINK.	FED. CODE	VIO. FILE
		<u>1886</u>	<u>OB</u>	<u>B</u>	<u>VN</u>	<u>NO</u>	<u>15</u>	<u>V/H</u>
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>EC</u>	<u>S</u>	<u>D</u>	<u>R</u>
	<u>13</u>	<u>BD</u>	<u>BD</u>	<u>13</u>	<u>E.C</u>		<u>10.20.</u>	

COMMENTS: 6/26  
12/4/26  
1/10/98

**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: De Delmore Phone: 9298100  
 Site Address: 107 Scripps #110 95826 Suite: 110  
(Street) (Zip)  
 Business Owner/Representative: De Delmore Phone: \_\_\_\_\_  
 Nature of Business: Oral Surgeon  
 Property Owner: Gorman-Whitney Dow. Phone: 9298100  
 Address: 185 Cadillac Dr Suite: \_\_\_\_\_  
Sacto Ca 95826  
(City) (State) (Zip)

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 disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: [Signature]  
John Gorman 7/11/97  
(Print) (Date)  
[Signature]  
(Signature)

BID Use Only: Plan Ck# <u>5199</u> Permit # _____
OK to issue prmt? <u>7/11/97</u> F.D. Appr Req'd? Yes <input checked="" type="checkbox"/> No ___ <small>init date</small>
Hold on Certificate of Occupancy? Yes <input checked="" type="checkbox"/> No ___
Fire Dept. Use Only: OK to issue permit? init _____ date _____ OK to issue Certificate of Occupancy? init _____ date _____