

CITY OF SACRAMENTO

Permit No: 9811064

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 1900 14TH ST SAC

Sub-Type: COM

Parcel No: 0090084014

Housing (Y/N): N

CONTRACTOR

FOOTHILL FIRE PROTECTION
PO BOX 667
NEWCASTLE CA 95658

OWNER

CARROLL EARL W/BETTY JO
1681 PARKRIDGE RD
SACRAMENTO CA 95822

ARCHITECT

Nature of Work: FIRE SPRINKLERS

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-16 License Number 684037 Date 12-9-98 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

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 12-9-98 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 Fremont Compensation Policy Number W098-680419-03 Exp Date 10-1-99

(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 12-9-98 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 SACRO BUILDING PERMIT 981109

PLAN CHECK # _____ Insp. Area _____

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

Applicant MUST complete ALL Unshaded areas
 this page only

ADDRESS 1906 14TH STREET
 PARCEL # 009-084-19

LICENSED CONTRACTOR Lic No. # 684037
 Name FOOTHILL Fire Protection
 Address P.O. 667 Newcastle, CA 95658
 Phone 916 663-3582 FAX (916) 663-3583

CONTACT
 Name Richard Inverse
 Address P.O. 667 Newcastle Zip 95658
 Phone (916) 663-3582 FAX 663-3583

OWNER
 Name James DeAngelas
 Address 1927 13TH ST Zip 95614
 Phone (916) 444-3262 FAX _____

ARCHITECT/ENGINEER
 Name FOOTHILL Fire
 Address P.O. 667 Newcastle Zip 95658
 Phone (916) 663-3582 FAX (916) 663-3583

Will the permittee have any employees on the jobsite? Yes No

If yes, WORKER'S COMPENSATION POLICY # WN 98-680419-03 EXPIRATION DATE: 10-1-9

NAME OF INSURANCE COMPANY: Fremont

NATURE OF WORK IN DETAIL: FootHill Fire will install New Fire Sprinkler System on existing building

VALUATION: 31,000

DBA:		S.C.A.T.		REM() SW		FIRE ADD	
FLOOD STATUS:		BLDG	SHEL	APT	TI()	ELEC	SITE
JOB DESCRIPTION		BLDG	MECH	PLUMB	Fire Reg. <u>YN</u>	Fed Code	
INSP. DISCIPLINES		Use Zone	Occp Group	Const type	Spr	Alarm	15
# Stories	1st flr Area	Total Area					
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>P</u>	<u>S</u>	<u>D</u>

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

FLOW TEST FOR NEW BUDGS OR ADDITIONS

APPLICATION FOR [REDACTED] BUILDING PERMIT

9811064

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

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

PLAN CHECK # _____

Insp. Area _____

Applicant **MUST** complete **ALL Unshaded areas** this page only

ADDRESS 1900 14th Street Sacramento, Ca. Suite _____
PARCEL # 009-089-19

<p align="center">CONTACT</p> <p>Name <u>Richard Inverese</u> Address <u>PO 667 New Castle</u> <u>Calif</u> Zip <u>95658</u> Phone <u>(916) 663-3582</u> FAX <u>663-3583</u></p>	<p align="center">LICENSED CONTRACTOR Lic No. # <u>684037</u></p> <p>Name <u>FootHill Fire Protection</u> Address <u>P.O. 667 Newcastle, Calif</u> Zip <u>95658</u> Phone <u>663-3582</u> FAX <u>(916) 663-3583</u></p>
<p align="center">ARCHITECT/ENGINEER</p> <p>Name <u>FootHill Fire</u> Address <u>PO 667 Newcastle</u> <u>Calif</u> Zip <u>95658</u> Phone <u>(916) 663-3582</u> FAX <u>(916) 663-3583</u></p>	<p align="center">OWNER</p> <p>Name <u>James De Angelas</u> Address <u>1927 13th St</u> <u>Sacramento, Ca</u> Zip <u>95814</u> Phone <u>(916) 444-3262</u> FAX _____</p>

→ Will the permittee have any employees on the jobsite? Yes No

→ If yes, WORKER'S COMPENSATION POLICY # WN 98-680419-03 EXPIRATION DATE: 10-1-99

NAME OF INSURANCE COMPANY: Fremont

NATURE OF WORK IN DETAIL: FootHill Fire will install New Fire Sprinkler System on existing building.

DBA: _____ VALUATION: 31,000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <u>YN</u>	Fed Code	15	Viol. File	
				<u>B</u>		<u>Spr</u> <u>Alarm</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: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

BLDG FORM (REV 05/98) WATER FEE EST FOR NEW BLDGS OR ADDITIONS Yes No