

CITY OF SACRAMENTO

Permit No: 9807700

1231 I Street, Sacramento, CA 95814

Insp Area: 2

**Site Address: 7501 FRANKLIN BL SAC
NCOM**

Sub-Type:

Parcel No: 0500020023

Housing (Y/N): N

CONTRACTOR

SHRA - OWNER/BUILDER

OWNER

N CALIF BAPTIST CONVEN
7501 FRANKLIN BL
SACRAMENTO CA

95823

ARCHITECT

SHRA

**Nature of Work: SHRA HEAD START PRESCHOOL SITE WORK(INCL BLDG PAD,PLAY
GROUND STRUCTURES,DECKS)FIRE ALARM DEFERRED SUBMMITTAL**

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 NA Lender's Address NA

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 _____

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 2/12/99 Owner Signature Dennis C. Odell

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 2/12/99 Applicant/Agent Signature Dennis C. Odell

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 2/12/99 Applicant Signature Dennis C. Odell

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.

CITY OF SACRAMENTO
BUILDING INSPECTIONS DIVISION
PERMIT SERVICES SECTION

PC# 9802700

Address: 2501 Franklin Bl

This application will need one or more of the following items before it can be issued.

Owner/Builder form

Current Certificate of Worker's Comp. (City of Sacramento listed as Certificate Holder.)

Letter of Authorization for employees to sign (Contractor).

School Impact Fee Form

Driveway Permit - 1231 I Street, #200, 264-7995

County Regional Sanitation Permit (Howard Richmond)
827 - 7th Street, Rm. 105, Window 10 - Ph: 875-6679

Special Inspection Forms

PERMIT FEES \$ 3,605.24

A-99 Flood Waiver Form

Hazardous Materials Form

SCAT

Other X3 X26, X11, X12, X13

Date Notified 2/11/89

Plans in Bin # 00

Initials: b

"D" By: [Signature]

s:\wpf_s\st\forms\notify\pat

CITY OF SACRAMENTO
BUILDING INSPECTION DIVISION
COMMERCIAL PLAN CHECK FEE RECEIPT
(916) 264-7619

9807700
YOUR PLAN CHECK # IS: 6343

PROJ. VAL. \$ 175,000 DATE 8-24, 19 98
PLAN CHECK FEE \$ 1,282.48
 PARTIAL FEE (BALANCE OF P.C. FEE DUE \$ _____)

PROJECT ADDRESS: _____
JOB DESCRIPTION: _____

BLDG SHELL APT T.I. REM SITE FIRE ADD OTHER
RECEIVED OF SHRA PAID
CITY OF SACRAMENTO IN ACCORDANCE WITH SECTION 9.51
OF THE SACRAMENTO CITY BUILDING CODE FOR SERVICES TO BE RENDERED IN CHECKING THE PLANS SUBMITTED
PLANS ARE SCHEDULED FOR THE FOLLOWING REVIEW: AUG 24 1998

BLDG L/S PLUMB MECH ELECT FIRE SITE DEV. FEES, PLANNING, ROUTE
RECEIVED BY: JM NEIGHBORHOODS, AND DEVELOPMENT SERVICES
COMRCPT.WK1
12/14/98

CITY OF SACRAMENTO
APPLICATION FOR ~~XXXXXXXXXX~~ BUILDING PERMIT

9807700

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

PLAN CHECK # 6343 Insp. Area _____

Applicant MUST complete ALL Unshaded areas this page only

ADDRESS 7501 FRANKLIN BLVD. SAC 95823 Suite _____
PARCEL # 050-0020-023

CONTACT Name <u>LEWIS SPRINGER</u> Address <u>1013 7th ST 566-1220</u> <u>SACRAMENTO CA</u> Zip <u>95814</u> Phone <u>(916) 999-2015</u> FAX <u>(916) 447-7750</u>		LICENSED CONTRACTOR Lic No. # _____ Name _____ Address _____ _____ Zip _____ Phone _____ FAX _____	
ARCHITECT/ENGINEER Name <u>SAME AS CONTACT</u> Address _____ _____ Zip _____ Phone _____ FAX _____		OWNER/ XXXXXXXXXX Name <u>N. CALIFORNIA BAPTIST CONVENTION</u> Address <u>7501 FRANKLIN BLVD</u> <u>SAC, CA</u> Zip <u>95823</u> Phone _____ FAX _____	

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

→ If yes, WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NAME OF INSURANCE COMPANY: _____

NATURE OF WORK IN DETAIL: SITENOTE INCLUDING GRADING, UNDERGROUND UTILITIES, LANDSCAPING + IRRIGATION, DECKS, CONCRETE WALKS, PLAYGROUND EQUIPMENT & SHADE STRUCTURES. (Note: Modular bldg. & its concrete foundation to be built under separate permit.)
PRESCHOOL 7-5AM 40-60 Students 3-5yr olds
 DBA: HEAD START VALUATION: 175,000 224,000 11/3/98

FLOOD STATUS: <u>AT ADVN</u> S.A.T. <u>X10, X11, X12, X99</u>									
JOB DESCRIPTION <u>BLDG</u> SHEL APT TI() REM() SW FIRE ADD OTH									
INSPE. DISCIPLINES <u>BLDG</u> MECH <u>PLUMB</u> <u>ELEC</u> <u>SITE</u> <u>FIRE</u>									
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vis. File	
<u>1</u>	<u>1000</u>	<u>1000</u>	<u>P</u>	<u>E1</u>	<u>VN?</u>	Spr <u>N</u> Alarm <u>Y</u>	<u>175</u>	<u>?</u>	
<u>B</u>	<u>A</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>R</u>	

COMMENTS: COACH FEES SEE PC 10426
RELATION
was never sent to BLDG LIFE/S
Adm. info + Public works.
Structure shed etc.

ONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 (REV 05/98) WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS Yes No

City of Sacramento Development Services Division Planning and Zoning Information Request

Project Address: 7501 FRANKLIN BLVD.

Assessor's Parcel Number: 050-0020-023

Current Land Use: Church property

Description of Request/Proposed Use: _____

(N) Modular BLDG. 2880 SF FOR DAY CARE ETC.

Zoning Designation: R-3

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

Comments: Requires zoning
Admin. Major Modification
to Spec. Permit

Are There Any Planning Issues?: (Circle One) YES NO

Site Plan Check Required? (Circle One) YES NO

Design Review/ Preservation Required?: (Circle One) YES NO

Planning Review by/Date: W. Johnson 9/30/98

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

**CITY OF SACRAMENTO
APPLICATION FOR BUILDING PERMIT**

**DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES DIVISION**

1231 I Street, Rm. 200
Sacramento, CA 95814

(916) 264-7619 FAX 264-7046

→ Applicant must complete ALL Unshaded areas ←

PC# 9901294 AREA# ZC
9807700 SITE WORK

ADDRESS 7501 Franklin Bl., Sacramento, CA 95823 Suite _____
PARCEL # 050-0020-023-0000

CONTACT		LICENCED CONTRACTOR Lic No. # <u>C7-10 701582</u>	
Name <u>Chris Wilson</u>	Name <u>Protection Service Industries, L.P.</u>		
Address <u>4237 So. Market Ct., Suite D</u>	Address <u>4237 So. Market Ct., Suite D</u>		
<u>Sacramento, CA</u> Zip <u>95834</u>	<u>Sacramento, CA</u> Zip <u>95834</u>		
Phone <u>(916) 922-7544</u> FAX <u>(916) 922-7643</u>	Phone <u>(916) 922-7544</u> FAX <u>(916) 922-7643</u>		
ARCHITECT/ENGINEER		OWNER/TENANT	
Name _____	Name _____		
Address _____	Address _____		
Zip _____	Zip _____		
Phone _____ FAX _____	Phone _____ FAX _____		

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

→ If yes, WORKER'S COMPENSATION POLICY # WC96847039 EXPIRATION DATE: 3/1/'99

NAME OF INSURANCE COMPANY: American Zurich

NATURE OF WORK IN DETAIL: Automatic Fire Alarm
Installation of the following equipment: 1 control/communicator panel and keypad, 2 manual pull stations, 12 smoke detectors, 10 heat detectors, 2 weatherproof horns, 3 mini horns, 3 strobes

DBA: SHRA - HEAD START

VALUATION: \$4,438.00

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. Y/N	Fed Code	Vio. File		
				<u>EL</u>	<u>VN</u>	Spr <u>Alarm</u>	<u>17</u>	<u>N</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>		
				<u>None</u>	<u>1-3 3/14/11</u>		<u>SIS</u>	<u>10</u>		

COMMENTS: START 1ST CYCLE

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No