

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0508224

Insp Area: 1

Thos Bros: 297D4

Site Address: 1303 J ST SAC

Parcel No: 006-0054-024

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

MATHEW L MC CARTY
417 RIVER MEADOWS DRIVE
WOODBRIDGE, CA 95258

OWNER

1303 J ST LLC
1121 L ST
SACRAMENTO, CA 95814

ARCHITECT

Nature of Work: INTERIOR REMODEL - COMBINE SUITES TO CHANGE USE INTO A BANK

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 B License Number 340694 Date 8/31/05 Contractor Signature Mathew L. McCarty

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 8/31/05 Applicant/Agent Signature Mathew L. McCarty
NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES

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 STATE FUND Policy Number 229-0015436 Exp Date 01/01/2006

(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 8/31/05 Applicant Signature Mathew L. McCarty

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.



**TURLEY
& ASSOCIATES**

**MECHANICAL
ENGINEERING
GROUP, INC.**

1914 S Street
Sacramento CA 95814
916-325-1065

Microfilm

Fax

To: Alan Horn

From: Lev Kaganovich

Firm: CH&D

Date: 2-2-06

Fax: 446-0457

Pages: 1

Project: F+M Bank

Job No: 05215

CC: Bill Farmer, Mat McCarty co. Fax # 916. 551-1580

Urgent

For Review

Please Comment

Please Reply

Alan,

Attached is the review of the air final balancing report faxed to us on Friday, January 27, 2006.

Please note that during our field visit on 1/26/06, a substantial air leakage was discovered and fixed by the contractor and ductwork was rebalanced per our request.

While the building system is still short on the total air delivery as was indicated by the pre-construction balancing report, the system is close to the minimum design values in all areas with the exception of the West offices.

Please note that I reviewed and approved it conditionally on the Client using the blinds to maintain designed temperature control level (75 deg.F) on the West elevation – for three offices.

Please remind the Client and the building Owner that the original design was modified from the dedicated heat pump system for the west elevation to the utilization of the system capacity available at that time before the demolition. It was done against the design team advice.

Please also note that the actual as-built layout and the building system connection to the remodeled area VAV units is not reflective of the design/bid documents.

Please convey this information to the client and to the building management to avoid any misunderstanding in the future.

916-325-1075 Fax

NO EXCEPTION TAKEN
 REJECTED

MAKE CORRECTIONS
 REVISE AND RESUBMIT
 SUBMIT SPECIFIED ITEM

CHECKING IS ONLY FOR CONFORMANCE WITH THE DESIGN CONCEPT OF THE PROJECT AND GENERAL COMPLIANCE WITH THE INFORMATION GIVEN IN THE CONTRACT DOCUMENTS. ANY ACTION SHOULD BE SUBJECT TO THE REQUIREMENTS OF THE PLANS AND SPECIFICATIONS. CONTRACTOR IS RESPONSIBLE FOR DIMENSIONS WHICH SHALL BE CONFIRMED AND CORRELATED AT THE JOB SITE. COORDINATION OF PROFILES AND TOLERANCES OF CONSTRUCTION COORDINATION OF ALL OTHER TRADES AND THE SATISFACTORY PERFORMANCE OF HIS WORK.

TURLEY AND ASSOC.
1914 S STREET
SACRAMENTO, CA 95814-8818

DATE 2/2/06 BY LL

LLK / Lev Kaganovich

AIR BALANCE REPORT

JOB NAME: ALL AIR JOB NO.: 515034
1303 J Street, DATE: 1-16-05
Sacramento Ca. UNIT: FAC#1 VAV#1-2-3

LOCATION	DESIGN		FIRST READING		BALANCED TO		OUTLET SIZES	AREA SQ. FT.
	CFM	FPM	CFM	FPM	CFM	FPM		
FAC#1								
1	350		358		379		10	
2	350		472		381		10	
3	350		320		398		10	
4	350		340		363		10	
5	350		335		355		10	
6	N/A	R/A	1235		1442		16	
7	N/A	F/A	247		413		10	
VAV#1								
1	500		442		451		12	
2	500		442		470		12	
3	500		357		456		12	
VAV#2								
1	160		111		145		12	
2	230		188		210		10	
3	60		72		54		6	
4	40		35		38		6	
5	180		168		163		6	
6	70		65		63		6	
VAV#3								
1	150		180		135		8	
2	500		410		424		12	
3	600		404		428		12	
4	500		408		426		12	

AIR BALANCE TAKEN
 RE-TESTED
 TAKE CORRECTIONS NOTED
 RE-TESTED
 TURLEY AND ASSOC.
 1914 Street
 SACRAMENTO, CA 95814-0818
 1/29/06 by LK

Mike Hale Cal-Air 916-416-8853
 NOTE: SEE FAX DATED 1/29/06 FOR
 ADDITIONAL INFORMATION.



4714 Winfield Road, Houston, Texas, 77039
Tel: 281-590-1172 Fax: 281-590-9086 www.nailor.com

"Complete Air Control and Distribution Solutions"

Monday, December 19, 2005

Air Cold Supply

Dear Sir,

3
This letter is in reply to a question raised on the installation of some Nailor Industries Inc. Fire/Smoke dampers. The sketch you sent shows an installation utilizing a one sided retaining angle. Nailor has an approved supplementary instruction FDSSRAINST showing this.

The installation shown on the sketch meets these criteria with the following exceptions.

- 1) Fasteners are shown installed from inside the sleeve and into the framing although this is not required when using a one sided angle I do not feel it will have any adverse effect on the damper as the retaining angle is fastened to both the damper and the partition.
- 2) The damper stated is a 1271C, which may be labeled for horizontal installation. These dampers are of identical construction to our standard fire/smoke dampers and are now dual listed for use in 1-hour corridor ceilings and 1-1/2 hour walls and floors.

I have enclosed the information sheets for the one sided angle and the new 1271C combination damper.

I trust that this is in order but if you have any questions or comments please feel free to contact me.

1 - 01
Yours Sincerely,

John Young
Damper Product Manager
Nailor Industries Inc.

NAILE
MOD

DUPLICATE

DATE: 06/08/2005 041 DBP
DATE: 06/08/2005 3:05PM 88884721
PERMIT #: 0508224 SHT COM BLDG PT
1205PLAN CK-COMM'L \$610.00

FOR COMMERCIAL BUILDING PERMIT

CHANGE

\$610.00
\$0.00

ACTIVITY #	Isnp. Area
0508224	1C

PERMIT SERVICES SECTION
1231 I Street, Suite 200
Sacramento, CA 95814 (916) 264-7619 FAX (196) 264-7046

Applicant MUST complete ALL Unshaded areas

ADDRESS 1303 J STREET Suite FIRST FLOOR
PARCEL # 006-0054-024-0000

CONTACT		LICENSED CONTRACTOR	
Name	<u>ALAN HOM</u>	Name	
Street Address	<u>2120 20TH STREET, SUITE 1</u>	Address	<u>T. B. D.</u>
City/State/Zip	<u>SACRAMENTO, CA 95818</u>	City/State/Zip	
Phone	<u>916.446.7741</u> FAX <u>916.446.0457</u>	Phone	
E-mail:	<u>ALAN@CHDARCHITECTS.COM</u>	E-mail:	
ARCHITECT/ENGINEER		OWNER	
Name		Name	<u>JONES LANGE LASALLE/LISA LAMBETH</u>
Address	<u>SEE ABOVE</u>	Address	<u>1121 L ST. #105</u>
City/State/Zip		City/State/Zip	<u>SACRAMENTO, CA 95814</u>
Phone		Phone	<u>916.446.2594</u> FAX <u>916.446.3767</u>
E-mail:		E-mail:	<u>LISA.LAMBETH@AM.JONESLANGE LASALLE.COM</u>

Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____

WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: NON-RESIDENTIAL / COMMERCIAL TENANT IMPROVEMENT PROJECT AREA 2,857 SF CHANGE OF USE

OCCUPANT/TENANT: FARMERS + MERCHANTS BANK VALUATION: \$ 57,140

FLOOD STATUS				S.C.A.T.					
JOB DESCRIPTION									
BLDG	SHELL	APT	TI	REM	SW	FIRE	ADD	OTHER	
INSPECTION DISCIPLINES									
BLDG		MECH		PLUMB		ELEC		SITE	
FIRE									
# Stories	1 st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File
						SPR	ALARM		
<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>PW</u> <u>UTIL</u>

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Yes No N/A

City of Sacramento
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 1303 J STREET	APN: 006-0054-024
DRPB AREA / PUD / SPD: CENTRAL BUSINESS DR	ZONING: C-3-SPD
EXISTING LAND USE: COMMERCIAL BUILDING	
PROPOSED USE: Combines the interior tenant spaces to be a Bank.	
<p><u>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</u></p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be approved <i>before</i> project can be submitted for plan check</p> <p><input type="checkbox"/> Application(s) IN PROGRESS: File Number: Application must be approved before project can be submitted for plan check.</p> <p><input checked="" type="checkbox"/> Application(s) COMPLETED: File Number & approval date: DR05-206 Approved 06-02-2005 Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.</p> <p><input checked="" type="checkbox"/> Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.</p> <p><input type="checkbox"/> Meets setback & lot coverage requirements as shown on site plan provided.</p> <p><input type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input checked="" type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Route to SITE for inspection only, plan check not required.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>CONDITIONS AND COMMENTS:</p> <p>Proposed use as Bank is allowed in C-3-SPD. Design Review has approved for the exterior rehab. Signage has to comply with sign codes.</p>	
DATE: June 8, 2005	BY: Elise Gumm

DUPLICATE
 PD: 06/08/2005 041 DBP
 DATE: 06/08/2005 3:05PM 88884721
 INT#: 0508224 SHT COM BLDG PT
 0205PLAN CK-COMM'L
 \$610.00

FOR COMMERCIAL BUILDING PERMIT

PC CHANGE

\$610.00
 \$0.00

ACTIVITY #	Isnp. Area
0508224	1C

PERMIT SERVICES SECTION
 1231 I Street, Suite 200
 Sacramento, CA 95814 (916) 264-7619 FAX (196) 264-7046

Applicant MUST complete ALL Unshaded areas

ADDRESS 1303 J STREET Suite FIRST FLOOR
 PARCEL # 006-0054-024-0000

CONTACT Name <u>ALAN HOM</u> Street Address <u>2120 20TH STREET, SUITE 1</u> City/State/Zip <u>SACRAMENTO, CA 95818</u> Phone <u>916.446.7741</u> FAX <u>916.446.0457</u> E-mail: <u>ALAN@CNDARCHITECTS.COM</u>		LICENSED CONTRACTOR Lic No. # _____ Name _____ Address <u>T.B.D.</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
ARCHITECT/ENGINEER Name _____ Address <u>SEE ABOVE</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____		OWNER Name <u>JONES LANGE LASALLE/LISA LAMBETH</u> Address <u>1121 L ST. #105</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone <u>916.446.2594</u> FAX <u>916.446.3767</u> E-mail: <u>LISA.LAMBETH@AM.JONESLANGE LASALLE.COM</u>	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____

→ WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: NON-RESIDENTIAL / COMMERCIAL TENANT IMPROVEMENT. PROJECT AREA 2,257 SF CHANGE OF USE

OCCUPANT/TENANT: FARMERS + MERCHANTS BANK VALUATION: \$ 57,140

FLOOD STATUS						S.C.A.T.				
JOB DESCRIPTION		BLDG <input type="checkbox"/>	SHELL <input type="checkbox"/>	APT <input type="checkbox"/>	TI () <input type="checkbox"/>	REM () <input type="checkbox"/>	SW <input type="checkbox"/>	FIRE <input type="checkbox"/>	ADD <input type="checkbox"/>	OTHER <input type="checkbox"/>
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1" fir Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
						SPR	ALARM			
<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>PW</u>	<u>UTIL</u>

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Yes No N/A

City of Sacramento
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 1303 J STREET	APN: 006-0054-024
DRPB AREA / PUD / SPD: CENTRAL BUSINESS DR	ZONING: C-3-SPD
EXISTING LAND USE: COMMERCIAL BUILDING	
PROPOSED USE: Combines the interior tenant spaces to be a Bank.	
<p>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s): PC ZA IR ER DR PB</p> <p style="padding-left: 20px;">Required Planning application must be approved <i>before</i> project can be submitted for plan check</p> <p><input type="checkbox"/> Application(s) IN PROGRESS: File Number:</p> <p style="padding-left: 20px;">Application must be approved before project can be submitted for plan check.</p> <p><input checked="" type="checkbox"/> Application(s) COMPLETED: File Number & approval date: DR05-206 Approved 06-02-2005</p> <p style="padding-left: 20px;">Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.</p> <p><input checked="" type="checkbox"/> Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.</p> <p><input type="checkbox"/> Meets setback & lot coverage requirements as shown on site plan provided.</p> <p><input type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input checked="" type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Route to SITE for inspection only, plan check not required.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>CONDITIONS AND COMMENTS:</p> <p>Proposed use as Bank is allowed in C-3-SPD. Design Review has approved for the exterior rehab. Signage has to comply with sign codes.</p>	
DATE: June 8, 2005	BY: Elise Gumm

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address: 1303 J ST Permit No.: 0508224
Building Use: BANK Occupancy: B
Building Owner: 1303 J ST LLC Construction Type: II-FR
Owner Address: 1121 L ST Sprinkled? [] Yes [X] No
Portion of Building Occupied: 1ST FLOOR Area: 2857 Sq. Ft.
02/03/06 ROBERT T. STETSON *Robert Stetson* for RON BEEHLER
Date By: (Print) Sign CHIEF BUILDING OFFICIAL

[Finaled By:PWC; TLM; RH; JS]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

DUPLICATE
 PD: 06/08/2005 041 DBP
 DATE: 06/08/2005 3:05PM 00004721
 INT#: 0508224 SHT COM BLDG PT
 2205PLAN CK-COMM'L \$610.00

FOR COMMERCIAL BUILDING PERMIT

CHANGE \$610.00
 \$0.00

ACTIVITY #	Isnp. Area
0508224	1C

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Applicant MUST complete ALL Unshaded areas

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Phone <u>916.446.7741</u> FAX <u>916.446.0457</u>	Phone	Phone <u>916.446.2594</u> FAX <u>916.446.3767</u>	
E-mail: <u>ALAN@CHDARCHITECTS.COM</u>	E-mail:	E-mail: <u>LISA.LAMBETH@AM.JONESLANGE</u>	
ARCHITECT/ENGINEER		OWNER	
Name	Name	Name <u>JONES LANGE LASALLE/LISA LAMBETH</u>	
Address <u>SEE ABOVE</u>	Address	Address <u>1121 L ST. #105</u>	
City/State/Zip	City/State/Zip	City/State/Zip <u>SACRAMENTO, CA 95814</u>	
Phone	Phone	Phone <u>916.446.2594</u> FAX <u>916.446.3767</u>	
E-mail:	E-mail:	E-mail: <u>LISA.LAMBETH@AM.JONESLANGE</u>	

LASALLE.COM

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

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INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1 st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
						SPR	ALARM			
<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>PW</u>	<u>UTIL</u>

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Yes No N/A

City of Sacramento
Development Services Department
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