

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9914280
Insp Area: 1

Site Address: 1422 C ST SAC
Parcel No: 002-0086-009

Sub-Type: AOTHR
Housing (Y/N): N

CONTRACTOR

OWNER
FRANCIS HOUSE
1422 C ST
SACRAMENTO CA 95814

ARCHITECT

Nature of Work: ADDED OFFICES TO WAREHOUSE W/O PERMIT, TO OVER 25% OFFICE(PLANNING APPRVD,MAY NOT BE USED FOR SOCIAL SERVISSES

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 _____ 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.)

JMB 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 2/16/00 Owner Signature *JMB*

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.

X Date 2/16/00 Applicant/Agent Signature *JMB*

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

g 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.

g 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 _____ Exp Date _____

100 (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.

2 Date 2/16/00 Applicant Signature *JMB*

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
APPLICATION FOR COMMERCIAL BUILDING PERMIT**

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

ACTIVITY # 9914280 Insp. Area _____

Applicant MUST complete ALL Unshaded areas

ADDRESS 1422 C STREET Suite _____

PARCEL # _____ *What's going to do work.*

CONTACT Name <u>Jon Westfall</u> Address <u>5249 EL CAMINO AVENUE</u> Phone <u>493-9019</u> FAX <u>493-9530</u> E-mail <u>Jonwarch@jps.net</u>		LICENSED CONTRACTOR Lic No. # _____ Name <u>(None)</u> Address _____ Phone _____ FAX _____ E-mail _____	
ARCHITECT/ENGINEER Name <u>SAME AS ABOVE</u> ↑ Address _____ Phone _____ FAX _____ E-mail _____		OWNER Name <u>Francis House</u> Address <u>1422 C STREET</u> Phone <u>493-2646</u> FAX _____ E-mail _____	

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

NATURE OF WORK IN DETAIL: **"RETRO-ACTIVE" PERMITS ON (E) CONSTRUCTION AS ADD NEW OFFICES (ME) WAREHL. REQUESTED BY SANDRA YOPE IN PLANNING & DISCUSSED W/ JOHN TANG IN BUILDING. CODE COMPLIANCE ADD office space 5000**

OCCUPANT/TENANT: FRANCIS HOUSE VALUATION: \$2,500

FLOOD STATUS: <u>NR</u>		S.C.A.T. <input checked="" type="checkbox"/>								
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>	<u>SITE</u>	<u>FIRE</u>			
# Stories	1st flr Area	Total Area <u>500</u>	Use Zone	Occp Group <u>B/</u>	Const type <u>VN</u>	Fire Req. Y / N	Fed Code <u>15</u>	Viol / File		
						SPR <u>NO</u> ALARM		<u>NO</u> (file)		
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	PW	UTIL	
<u>J. Tang</u>	<u>J. Tang</u>	<u>3</u>	<u>3</u>		<u>NONE</u>					

COMMENTS: PER BTF (BX)

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 1422 C ST.

Assessor's Parcel Number: 002-0086-009

Previous Use: Warehouse/Ofc.

Description of Request/Proposed Use: _____

Add add'l. office w/in
exstg. bldg.

Is This a Change of Use? _____

Prior Applications for Project Site(P#, Z#, DRPB#): 299-115 / IR 99-125
Zoning Designation: M-1

Comments: Ok per I+R 99-125
This permit is to ok.
IT is a follow-up of previous
converted office space

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: W. J. BOYER 2/14/00

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

MICROFILM AFTER FINAL

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
First Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
12/17/99	/ /	/ /	/ /	/ /	/ /

PLAN CHECK # 1422 C St
 ADDRESS: 9914280 C
 Commercial Residential

ACCEPTED by (Staff):

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY	3	JT	12/17/99	13	JT	1/28/00			
STRUCTURAL	13	JT	"	13	NONE				
MECHANICAL/PLUMBING	3/3	KAW	12-17	13	JMT	2/1/00			
ELECTRICAL	3	J.M.	12/17/99	3	JM	1/28/00			
FIRE	NONE		BST						
PLANNING ?									

STAFF COMMENTS:
 2/11/00 where's pink slip
 +