

Permit No: 0106922

Insp Area: 1

Sub-Type: REM

Housing (Y/N): N

ARCHITECT

OWNER

3200 FOLSOM INVESTORS

2633 7TH AVE

SACRAMENTO CA 95818

CONTRACTOR

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Site Address: 3200 FOLSOM BL SAC

Parcel No: 007-0291-020

Nature of Work: INSTALL NEW EQUIPMENT AND CHANGE OUT MOP SINK

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 3 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 Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves or 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.)

US 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: June 1, 2001  
Owner Signature: *Walter Smith (Terman)*

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verifies 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 above-mentioned property for inspection purposes.

Date: June 1, 2001  
Applicant/Agent Signature: *Walter Smith (Terman)*

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

I have and will maintain workers' compensation insurance carrier and policy number are \_\_\_\_\_ 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 \$100,000 or less 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 a contractor as defined in the performance of the work for which this permit is issued, subject to the workers' compensation provisions of Section 3700 of the Labor Code, shall forthwith comply with those provisions.

Date: June 1, 2001  
Applicant Signature: *Walter Smith (Terman)*

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 FEE.

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

Date of Request: \_\_\_\_\_

By: \_\_\_\_\_

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION  
PLANNING AND ZONING INFORMATION REQUEST

Project Address: \_\_\_\_\_

Assessor's Parcel Number: \_\_\_\_\_

Previous Use: \_\_\_\_\_

Description of Request/Proposed Use: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is This a Change of Use? \_\_\_\_\_

Zoning Designation: \_\_\_\_\_

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

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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: \_\_\_\_\_ 5/23/01

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

MICROFILM AFTER FINAL

# APPLICATION FOR COMMERCIAL BUILDING PERMIT

**CITY OF SACRAMENTO**  
 DEVELOPMENT SERVICES DIVISION  
 PERMIT SERVICES SECTION

1311 Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0106922 Insp. Area 1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3200 Folsom Blvd., Suite A SACRAMENTO CA 95816 Suite A  
 PARCEL # 007-0291-020

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>Warren Smith</u>                  Street Address <u>3200 Folsom Blvd #A</u>                  City/State/Zip <u>SACRAMENTO, CA</u>                  Phone <u>916.731-4000</u> FAX <u>916.736.1676</u>                  E-mail: <u>wsmith@rivercats.com</u></p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>Peabody Engineering</u>                  Address <u>1700 Alameda Blvd #102</u>                  City/State/Zip <u>SACRAMENTO, CA 95816</u>                  Phone <u>731-8088</u> FAX <u>731-8087</u>                  E-mail: _____</p>	<p style="text-align: center;"><b>OWNER TENNANT</b></p> <p>Name <u>SACRAMENTO Valley Entertainment Group</u>                  Address <u>3200 Folsom Blvd. Suite A</u>                  City/State/Zip <u>SACRAMENTO, CA 95816</u>                  Phone <u>731-4000</u> FAX <u>736-1676</u>                  E-mail: <u>wsmith@rivercats.com</u></p>

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

NATURE OF WORK IN DETAIL: (1) Connect existing thumper machines to existing camp (3) above connections (2) Install prep sink (3) Install mop sink in storage area

OCCUPANT/TENANT: Restaurant Del. Type uses VALUATION: \$ 3000<sup>00</sup>

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM( )	SW	FIRE	ADD	OTH
INSPECTION 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	
						SPR	ALARM		[H]	[Quad]
B	L	P	M	E	F	S	D	PW	UTIL	

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) (no)

2. I (have) signed an application for A building permit for the proposed work

3. I have contracted with the following person (firm) to provide the proposed construction:

Name TBD Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No. \_\_\_\_\_

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No. \_\_\_\_\_

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work
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Signed Danen Smith (Tennant)

Job Address 3200 FOLSOM BLVD

Permit No: C106922