

CITY OF SACRAMENTO

Permit No: 9715350

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Site Address: 5200 FRANKLIN BL SAC
Parcel No: 0190191016

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

CONTRACTOR

P AND P BLDG WRECKING INC
8589 FLORIN RD
SACRAMENTO CA 95828
Phone: 916-383-6198

OWNER

FONG TAI GAW/SUE Y
5210 FRANKLIN BL
SACRAMENTO CA 95820
Phone:

ARCHITECT

Phone:

Nature of Work: COMBINATION SEWER DISCONNECT & WRECKING W0167

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 C21 License Number 271787 Date 11-17-97 Contractor Signature James Z Pao

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 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 or 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 or 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.

Date 11-17-97 Applicant/Agent Signature James Z Pao

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 Larch Policy Number 299-18244

____ (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 11-17-97 Applicant Signature James Z Pao

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 WRECKING PERMIT**

LOCATION:

ADDRESS: 5200 Franklin Blvd "Rear"
 LOT _____ TRACT _____
 LOT DEPTH 300 300 LOT WIDTH 150 CORNER LOT _____ INTERIOR LOT X
 OWNER Jong Tai Shaw and Sue
 ADDRESS 5051 Hillard St Sacramento Ca 95822

BUILDING DATA:

LENGTH 170 WIDTH 23 FIRST FLOOR AREA 3910 (SQ. F.T.) NO. OF STORIES _____
 USE OF BUILDING Shed TYPE OF CONSTRUCTION Frame HEIGHT _____
 NO. OF UNITS 1 REAR YARD 50 SIDE YARD 20 SETBACK 100
 CITY SEWER NA WATER NA SEPTIC NA WELL NA

CONTRACTOR:

NAME Panel P Bldg Wrecking Inc
 ADDRESS 8589 Horton Rd
 PHONE 383-6198 STATE LICENSE NO. C21-271787
 LIABILITY INSURANCE P.L. _____ P.D. _____ POLICY ON FILE X

CODE REQUIREMENTS:

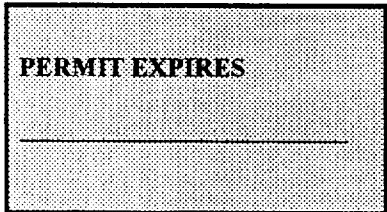
NOTIFICATION OF ADJACENT PROPERTY OWNERS yes DATE 11-14-95
 COPY OF NOTIFICATION ON FILE yes USE OF PROPERTY REQUIRED _____
 PEDESTRIAN PROTECTION REQUIRED no TYPE: _____
 APPROVAL BY OTHER DEPARTMENTS yes REQUIREMENTS ATTACHED _____
 BASEMENTS OR OTHER EXCAVATIONS ON LOT no TO BE FILLED _____ FENCED _____

PREPARE PLOT PLAN SHOWING LOCATION OF BUILDING ON LOT AND TYPE AND LOCATION OF BUILDING BARRICADE.

SPECIAL CONDITIONS:

I HAVE READ THE ABOVE APPLICATION AND KNOW THE CONTENTS THEREOF; THE SAME IS TRUE AND CORRECT. I FURTHER STATE THAT I AM FAMILIAR WITH THE LAWS GOVERNING THE DEMOLITION OF BUILDINGS WITHIN THE CITY OF SACRAMENTO AND THE STATE OF CALIFORNIA AND THAT THE ABOVE STRUCTURE WILL BE RAZED IN CONFORMITY THEREWITH. I FURTHER STATE THAT I UNDERSTAND THAT THIS PERMIT MAY BE REVOKED FOR ANY VIOLATION OF THE PROVISIONS OF THE CODE OF THE CITY OF SACRAMENTO PERTAINING TO OR AFFECTED BY THE DEMOLITION PROCEDURE TO BE USED ON THE ABOVE BUILDING.

NO. W. W-0167 APPLICANT Panel P Bldg Wrecking Inc
 DATE 11/14/97
 FEE \$ 84 TITLE James A Piro - President
 (APPLICANT/OWNER)



NOTE: THIS IS A REVOCABLE PERMIT

ADDRESS: 5200 Franklin Blvd Rear
 OWNER: Tong Tai How and Sue

Approval by the following City Departments must be obtained prior to the issuance of a wrecking permit by the Building Inspections Division. Design Review approval required on all wrecking permits in Central City/Alhambra Blvd. corridor prior to sewer disconnect permit being issued.

DESIGN REVIEW 1231 I Street, Room 200 264-5604	NOT IN DR AREA. O.K. H. Pong 11/17/97
PLUMBING DIVISION 1231 I Street, Room 200 264-5716 (or) Housing 264-5404	DPM
WATER DEPARTMENT 1391 35th Avenue 264-5371	DPM
FIRE DEPARTMENT 1231 I Street, Room 401 264-5416	Joseph Lardner
TRAFFIC ENGINEER 1000 I Street 264-5307	n/a DPM
ARBORIST/TREE SERVICE (Downtown and Commercial Buildings) 5730 24th Street 433-6345	n/a DPM

019-0191-010

Sacramento Metropolitan Air Quality Management District

ASBESTOS SURVEY AND DEMOLITION NOTIFICATION FORM

NOTE: Please read instructions on the back of this form.

1	Contractor <u>Panc P Bldg Wrecking Inc</u> Owner <u>Fong Tai Hau and Sue Y</u> Address <u>8589 Florin Rd</u> Address <u>5051 Holland St</u> City <u>Sacto Ca</u> City <u>Sacto</u> State/Zip <u>Ca. 95828</u> State/Zip <u>Ca. 95822</u> Telephone <u>383-6198</u> Telephone <u>457-0060</u>
2	Structure Name <u>N/A</u> Use <u>Shed</u> Address <u>5200 (Rear) Franklin Blvd.</u> City/Zip <u>Sacramento, CA 95820</u>
3	Structure Age <u>30+</u> (years) Number of floors: <u>1</u> Size: <u>3910</u> sq. ft.
4	Has RACM reported by the consultant been removed? (circle) YES NO N/A Asbestos contractor who removed or will remove RACM _____
5	DEMOLITION Start Date <u>11/17/97</u> Completion Date <u>11/19/97</u>
6	Preference for return of form: <input type="checkbox"/> Mail <input type="checkbox"/> Pick-Up (after 2 working days)
7	Applicant Name (Print) <u>James F Pino</u> <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Contractor Applicant's Signature <u>James F Pino</u> Date <u>11/14/97</u>
I have read and understand the directions. The information on this form is true and accurate.	
8	To be completed by CAL-OSHA Consultant. (See SMAQMD list or OSHA list) Company Name: <u>Anderson Environmental</u> Telephone: <u>(916) 482-2800</u> Surveyor's Name: <u>William W. Anderson</u> Survey Date: <u>11/14/97</u> OSHA # <u>92-0736</u> Company Address: <u>3550 Watt Ave, #140</u> City/State/Zip: <u>Sacramento, CA 95821</u> Amount of RACM: <u>NONE</u> linear feet <u>NONE</u> square feet <u>NONE</u> cubic feet Amount of Category I: <u>NONE</u> Amount of Category II: <u>NONE</u> Analytical Procedure: <u>Visual -- All materials identified as wood or sheet metal</u> Consultant's Signature: <u>William W. Anderson</u> Date: <u>11/14/97</u>
9	REVISION #: 1 2 3 4 5 6 7 8 9 (circle) Old: Start Date ___/___/___ Completion Date ___/___/___ New: Start Date ___/___/___ Completion Date ___/___/___

DEMOLITION PERMIT SHALL NOT BE ISSUED PRIOR TO

SACRAMENTO
METROPOLITAN

NOV 14 1997

SMAQMD USE ONLY: PROJ. # _____ RECEIVED DATE/POSTMARK ___/___/___ NESHAPS: _____
 CK# _____ REC'T # _____ AMT. PAID _____ STAFF DJ DATE APPROVED 11/17/97