

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0013038

Insp Area: 1

Site Address: 425 NORTH 7TH ST SAC
Parcel No: 001-0020-018

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

CONTRACTOR
CARL YOUNG CONSTRUCTION
852 NORTHPORT DR STE 11
WEST SAC CA 95611

OWNER
1220 CALIFORNIA PARTNERS
555 S FLOWER #4200
LOS ANGELES CA 90071

ARCHITECT

Nature of Work: NEW H.C. RAMP, STAIRS, AND NEW VESTABULE

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 3A2436 Date 10-31-2000 Contractor Signature Carl Young

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 NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES

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 10-31-2000 Applicant/Agent Signature Carl Young

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 EXCESS 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 10-31-2000 Applicant Signature Carl Young

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.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <u>00.13038</u>	Insp. Area <u>1C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 45 N 1st St @ 801 Richards Blvd Suite _____
 PARCEL # 001-0020 018

<p style="text-align: center;">CONTACT</p> Name _____ Street Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>343938</u></p> Name <u>Carl Young</u> Address <u>11359 Monarch Ct.</u> City/State/Zip <u>Avondale, CA 95602</u> Phone <u>530-268-2164</u> FAX <u>530-268-2249</u> E-mail: _____
<p style="text-align: center;">ARCHITECT/ENGINEER</p> Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;">OWNER</p> Name <u>DAVID A. DRUMMOND</u> Address <u>2050 W. 190TH ST. STE 101</u> City/State/Zip <u>TOMBALL, CA 90504</u> Phone <u>310-287-1000</u> FAX _____ E-mail: _____

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

NATURE OF WORK IN DETAIL: H.C. Ramp VESTIBULE

OCCUPANT/TENANT: ECONOMY RESTAURANT Features VALUATION: \$ 5000.

FLOOD STATUS: <u>NA</u>				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(<input checked="" type="checkbox"/>)	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 <input checked="" type="checkbox"/> N <input type="checkbox"/>	Fed Code	Vio. File		
				<u>SR</u>	<u>II</u>	SPR	ALARM	<u>10</u>	[H]	[Quad]
<u>B</u>	<u>L</u>	P	M	E	<u>14</u>	S	D	PW	UTIL	

COMMENTS: _____

REGIONAL SANITATION FEES? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HEALTH DEPARTMENT? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? <input type="checkbox"/> Provided <input type="checkbox"/> Faxed	

Date of Request: _____

By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: 4100 24th St. 95817-3011 Richards Plb

Assessor's Parcel Number: 001 0000 0012

Previous Use: Office

Description of Request/Proposed Use: Handicap Accessible ramp
to be installed to maintain supply
of water to the building + create a utility
room

Is This a Change of Use? _____

Zoning Designation: CB-PUD-CFD

Prior Applications for Project Site(P#, Z#, DRPB#): Richards Plb 5/12/00

Comments: DR 00-074
See attached DR for details
Handicap Accessible ramp

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: [Signature] 10/25/00

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

MICROFILM AFTER FINAL



CITY OF SACRAMENTO
CALIFORNIA

DEPARTMENT OF
NEIGHBORHOODS,
PLANNING AND DEVELOPMENT

1231 I STREET
ROOM 200
SACRAMENTO, CA
95814-2998

Investigation & Report

Applicant:	<u>Economy Restaurant Fixtures</u>	Date:	<u>9-8-00</u>
Mailing Address:	<u>1200 7th Street, San Francisco, CA</u>	Phone:	<u>(415) 626-5611</u>
	<u>94107</u>	Fax:	<u>(415) 626-6332</u>
Assessor's Parcel #:	<u>001-0020-018</u>	Existing Zoning:	<u>OB-PUD-SPD</u>
Property Address:	<u>425 N 7th St, or 801 Richards Bl</u>	Land Use:	<u>Warehouse</u>

Information Desired: See attached letter. Would like to locate a wholesale restaurant supply business into an existing warehouse in the Richards Bl. Area.

Findings and Comments: Staff has determined that the use may be located into the existing warehouse. The existing property is zoned OB-PUD-SPD. A 100,000 square foot warehouse is located on the site. The applicant proposes to locate a 32,000 sq. ft. wholesale distribution for restaurant supplies into the warehouse. The use will have a 9,652 square foot retail/showroom area. This retail/showroom area is less than 10% of the entire building. Since the predominate use of the building remains warehouse, this use would be permitted to locate into this building without applying for a change from one non-conforming use to another.

Investigated By: Jeanne Corcoran **Date:** Sept. 7, 2000

Reviewed By: Joy Patterson **Date:** Sept. 7, 2000

I&R# 00-074



DEPARTMENT OF
NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO
CALIFORNIA

1231 I STREET
ROOM 200
SACRAMENTO, CA
95814-2904

DEVELOPMENT SERVICES
DIVISION

916-264-7619
FAX 916-264-7046

EXHIBIT 1

I have read and am familiar with the contents of the City's Standard
Owner-Builder Notification and Owner-Builder Verification, as required by
California Health and Safety Code Section 19830 and 19831. I authorize my
agent(s) CARL YOUNG Construction
to sign the Owner-Builder Verification on my behalf.

Signature *David A. Drummond*
Print Name DAVID A. DRUMMOND, PARTNER
Address 1220 CALIF PARTNERS
2050 W 190TH ST STE 101
TORRANCE CA 90504
Telephone 310-787-1000

- Approval only For:
1. HANDICAP RAMP & STAIR
 2. STOREFRONT - set of Double Doors 8' inside bldg.
 3. STRIPE lot for 60 CARS, including 2 HANDICAP CAR + 1 HANDICAP VAN
 4. NAME ON BLDG. PER CODE
 5. REPAIR ASPHALT in Lot

DAD