

THIS IS A 2 PART FORM
WRITE ON A FIRM SURFACE

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.).

Lenders Name _____
Lenders 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 C-45 Lic. Number 738628
Date 5/6/03 Contractor Alan Fwd
(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 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 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 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 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 & P C 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 of this city to enter upon the abovementioned property for inspection purposes.

Date 5/6/03 Signature of Applicant or Agent Alan Fwd

USE BLACK INK BALL POINT PEN - PRESS FIRMLY
SIGN PERMIT APPLICATION

SITE ADDRESS 2220 Del Paso Rd SUITE Pad 1 INSP. AREA 4

ASSESSOR PARCEL NO. 225-0040-074 PERMIT NO. 0328330

LICENSED CONTRACTOR NAME OF APPLICANT Fluoresco Design + Signs ADDRESS 1041 Trilanga Ct. W. Sac. ZIP CODE 95661 PHONE NO. (925) 890-6446

BUSINESS OWNER Shall ADDRESS 2220 Del Paso Rd Sac

SIGN INFORMATION
 ATTACHED INTERIOR / ELECT. SINGLE FACED
 ILLUMINATED NON-ILLUMINATED BILLBOARD / SUBDIVISION
 INDIVIDUAL LETTERS PAINTED ON BUILDING LOGO
 METAL POLE DOUBLE FACED
 PLASTIC MONUMENT VINYL/GATOR FOAM
 WOODEN PROJECTING RE-FACE
SIGN COPY _____

(A) HEIGHT 1'-8" (B) LENGTH 6'-8"
(A X B) SIGN AREA 92 sq ft
POLE SIZE N/A FOOTING SIZE N/A
STREET FRONTAGE (FT) N/A
OCCUPANCY FRONTAGE (FT) 40'

OFFICE USE ONLY
ENGINEERING REQUIRED? YES NO APPROVED BY _____
DESIGN REVIEW REQUIRED? YES NO APPROVED BY _____
SPECIAL PERMIT REQUIRED? YES NO # _____
VARIANCE REQUIRED? YES NO # _____
LOCATED IN PUD? YES NO WHICH PUD? Park Pl

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION PERMIT SERVICES 284-7619
WORKERS 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: State Fwd

Carrier State Fwd
Policy Number 1622330-2003
PAID
I certify that in the performance of my duties as an inspector, I shall not become subject to the provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.
Date: 5/6/03 Applicant: Alan Fwd (Signature)
NORTH PERMIT

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 AND ATTORNEY'S FEES.
SIGN INSPECTOR _____ DATE _____
ELECTRICAL INSPECTOR _____ DATE _____
SIGN APPLICATION FEE EMD 5/6 25- DATE RECEIVED _____
SIGN PERMIT FEE _____
ELECTRICAL SIGN FEE _____
CITY BUSINESS LICENSE _____
OTHER _____

TOTAL \$ _____
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.

THIS IS A 2 PART FORM WRITE ON A FIRM SURFACE

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.).

Lenders Name _____
Lenders 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 C-45 Lic. Number 738628

Date 5/6/03 Contractor Olan Ford
(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 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 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 & P C 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 not authorize any illegal location 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 of this city to enter upon the abovementioned property for inspection purposes.

Date 5/6/03 Signature of Applicant or Agent Olan Ford

USE BLACK INK BALL POINT PEN — PRESS FIRMLY SIGN PERMIT APPLICATION

SITE ADDRESS 2220 Del Paso Rd

SUITE Pad 1

INSP. AREA 4

ASSESSOR PARCEL NO. 025-0042-074

PERMIT NO. 0308329

LICENSED CONTRACTOR NAME OF APPLICANT Fluoroco Lighting + Sign

ADDRESS 1041 Triunfo Ct. W. Sacramento, CA 95691 PHONE NO. (925) 790-6446

BUSINESS OWNER Shull 2220 Del Paso Rd Sacramento CA

ATTACHED INTERIOR / ELECT. SINGLE FACED

ILLUMINATED NON-ILLUMINATED BILLBOARD / SUBDIVISION

INDIVIDUAL LETTERS PAINTED ON BUILDING LOGO

METAL POLE DOUBLE FACED

PLASTIC MONUMENT VINYL/LATOR FOAM

WOODEN PROJECTING RE-FACE

SIGN COPY Food Mart - Shull logo

S-22625

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION PERMIT SERVICES WORKERS 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 1622330-2003

(This section need not be completed if the permit is for one hundred dollars (\$100) or less) I certify that the permit is for one hundred dollars (\$100) or less. I certify that I am not providing any person in any manner so as to become subject to the workers' compensation law of California and agree that if I should become subject to the workers' compensation law of California and those provisions of Section 3700 of the Labor Code, shall forthwith comply with those provisions.

Date: 5/6/03 Applicant: Fluoroco (Signature) Olan Ford

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 FEES.

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

(A) HEIGHT 4' (B) LENGTH 6'

(A X B) SIGN AREA 24 sq ft

POLE SIZE 5' high FOOTING SIZE 2' X 4'

STREET FRONTAGE (FT) 200'

OCCUPANCY FRONTAGE (FT) _____

ENGINEERING REQUIRED? YES NO APPROVED BY _____

DESIGN REVIEW REQUIRED? YES NO APPROVED BY _____

SPECIAL PERMIT REQUIRED? YES NO # _____

VARIANCE REQUIRED? YES NO # _____

LOCATED IN PUD? YES NO WHICH PUD? Del Paso

A. TYPE OF SIGN Monument SIGN VALUATION _____

B. \$ _____ PER SQ. FT. X SQ. FT. = \$ _____

APPROVED BY MJ DATE 5/6/03

DENIED BY _____ DATE _____

BUILDING INSPECTOR _____ DATE _____

ELECTRICAL INSPECTOR _____ DATE _____

SIGN INSPECTOR _____ DATE _____

FEES: SIGN APPLICATION FEE \$75 DATE 5/6 AMOUNT
SIGN PERMIT FEE _____
ELECTRICAL SIGN FEE _____
CITY BUSINESS LICENSE _____
OTHER _____
TOTAL FEES \$ _____

THIS IS A 2 PART FORM
WRITE ON A FIRM SURFACE

CONSTRUCTION LENDING AGENCY

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Lenders Name _____
Lenders Address _____

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License Class C-45 Lic. Number 738628

Date 5/6/03 Contractor Alan Ford
(Signature)

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I am exempt under Sec. _____ B & P C for this reason _____

Date _____ Owner _____
(Signature)

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Date 5/6/03 Signature of Applicant or Agent Alan Ford

USE BLACK INK BALL POINT PEN - PRESS FIRMLY
SIGN PERMIT APPLICATION

SITE ADDRESS 2220 Del Paso Rd SUITE Pad 1 INSP. AREA 4

ASSESSOR PARCEL NO. 225-0240-074 PERMIT NO. 0308328

LICENSED CONTRACTOR NAME OF APPLICANT Fluoresced Lighting + Signs ADDRESS 1041 Triunfo Ct W. Sacramento CA ZIP CODE 95691 PHONE NO. (925) 990-6446

BUSINESS OWNER Shelle ADDRESS 2220 Del Paso Rd Sacramento, CA

- SIGN INFORMATION
- ATTACHED
 - ILLUMINATED
 - INDIVIDUAL LETTERS
 - METAL
 - PLASTIC
 - WOODEN
 - SIGN COPY
- INTERIOR / ELECT. NON-ILLUMINATED PAINTED ON BUILDING POLE DOUBLE FACED MONUMENT PROJECTING RE-FACE

Can Wash

CITY OF SACRAMENTO
BUILDING INSPECTION DIVISION
PERMIT SERVICES
264-7619

WORKERS COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:
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 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: State Fund CITY OF SACRAMENTO

Carrier State Fund CITY OF SACRAMENTO
Policy Number 1622330-2003 NORFOLK PERMITOR

Date: 5/6/03 Applicant: Alan Ford
(Signature)

(This section need not be completed if the permit is for one hundred dollars (\$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.

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 AND ATTORNEY'S FEES.

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

SIGN VALUATION

A. TYPE OF SIGN	PER SQ. FT. X	SQ. FT. = \$
PAID BY	<u>MS</u>	<u>4/10/03</u>
APPROVED BY	<u>MS</u>	<u>4/10/03</u>
VARIANCE REQUIRED?	YES NO	# <u>PAUL PL</u>
LOCATED IN PUD?	YES NO	WHICH PUD? <u>PAUL PL</u>
ENGINEERING REQUIRED?	YES NO	APPROVED BY _____
DESIGN REVIEW REQUIRED?	YES NO	SPECIAL PERMIT REQUIRED? YES NO # _____
OFFICE USE ONLY		

PERMIT FEES

SIGN PERMIT FEE	RECEIVED
ELECTRICAL SIGN FEE	DATE
CITY BUSINESS LICENSE	DATE
OTHER	AMOUNT
TOTAL FEES	<u>75.-</u>

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Lenders Name _____
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License Class C-45 Lic. Number 738628
Date 5/6/03 Contractor Dean Ford
(Signature) _____

OWNER - BUILDER DECLARATION

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I am exempt under Sec. _____ B & P C for this reason _____

Date _____ Owner _____
(Signature)

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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 of this city to enter upon the abovementioned property for inspection purposes.

Date 5/6/03
Signature of Applicant or Agent Dean Ford

USE BLACK INK BALL POINT PEN - PRESS FIRMLY
SIGN PERMIT APPLICATION

SITE ADDRESS

2220 Del Paso Rd

SUITE

Pal 1

INSP. AREA

4

ASSESSOR PARCEL NO.

225-2040-074

PERMIT NO. 0308331

NAME OF APPLICANT

Fluoresco Lighting & Sign

ADDRESS

1041 Triangle Ct.
W. Sec.
2220 Del Paso Rd
Sac.

ZIP CODE

95691

PHONE NO.

(925) 990-6446

LICENSED CONTRACTOR

Shell

SIGN INFORMATION

- ATTACHED
- ILLUMINATED
- INDIVIDUAL LETTERS
- METAL
- PLASTIC
- WOODEN
- INTERIOR / ELECT.
- NON-ILLUMINATED
- PAINTED ON BUILDING
- POLE
- MOVEMENT
- PROJECTING
- SINGLE FACED
- BILLBOARD / SUBDIVISION
- LOGO
- DOUBLE FACED
- VINYL/GATOR FOAM
- RE-FACE

(A) HEIGHT 1'-8" (B) LENGTH 7'-5"
 (A X B) SIGN AREA 124
 POLE SIZE N/A FOOTING SIZE N/A
 STREET FRONTAGE (FT) N/A
 OCCUPANCY FRONTAGE (FT) 75'

S-22687

CITY OF SACRAMENTO
BUILDING INSPECTION DIVISION
PERMIT SERVICES
264-7619

WORKERS COMPENSATION DECLARATION

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 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 1622330-2003

(This section need not be completed if the permit is PAID dollars (\$100) or less) I certify that in the performance of the work which this permit is issued, I shall not employ any person who does not agree that if I should become subject to the workers' compensation laws of California and provisions of Section 3700 of the Labor Code, I shall for the purpose of those provisions.

Date: 5/6/03 Applicant: Dean Ford
(Signature)
CITY OF SACRAMENTO
PERMIT CENTER

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 AND ATTORNEY'S FEES.

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

OFFICE USE ONLY

ENGINEERING REQUIRED? YES NO APPROVED BY _____
DESIGN REVIEW REQUIRED? YES NO APPROVED BY _____
SPECIAL PERMIT REQUIRED? YES NO # _____
VARIANCE REQUIRED? YES NO # _____
LOCATED IN PUD? YES NO WHICH PUD? Pal 1

SIGN VALUATION
A. TYPE OF SIGN Shell
B. \$ _____ PER SQ. FT. X _____ SQ. FT. = \$ _____
APPROVED BY mg DATE 5/6/03
DENIED BY _____ DATE _____

FINAL INSPECTORS
BUILDING INSPECTOR _____ DATE _____
ELECTRICAL INSPECTOR _____ DATE _____
SIGN INSPECTOR _____ DATE _____

RECEIVED
DATE AMOUNT
5/6/03 35.-

TOTAL FEES \$ _____