

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0009004
Insp Area: 4

Site Address: 2901 TRUXEL RD SAC
Parcel No. 225-0230-051

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

CONTRACTOR
TURNER CONSTRUCTION COMPANY
BSA ARCHITECTS
1450 HARBOR BL SUITE A
WEST SACRAMENTO CA 95691

OWNER
106 K ST
SACRAMENTO CA 95814

ARCHITECT
LINCOLN DISCOVERY PARK ASSOCIATES LTD
350 PACIFIC AV
SAN FRANCISCO CA 94111

Nature of Work: ROUGH GRADING ONLY

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 210639 Date 8-8-00 Contractor Signature [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 intend to 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.

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 8-8-00 Applicant Agent Signature [Signature]

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 LIBERTY MUTUAL Policy Number WC2-621-004321019 Exp Date 01/01/2001

(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 that would 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 8-8-00 Applicant Signature [Signature]

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.

Date of Request: _____

By: _____

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

Project Address: 2901 TRUXEL RD.

Assessor's Parcel Number: 225-0230-071, 049

Previous Use: VACANT

Description of Request/Proposed Use: ROUGH GRADING ONLY

Is This a Change of Use? YES

Prior Applications for Project Site(P#, Z#, DRPB#): P83-384 Zoning Designation: A

Comments: ROUGH GRADING ONLY ~ APPROVED BY PLANNING
KKB 8/4/2000

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] 8/4/2000

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

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

ACTIVITY # <u>0009004</u>	Insp. Area <u>4 C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2901 TRUXEL RD. SAC. CA. Suite _____
 PARCEL # 225-024-051, 225-057-051, 225-057-049

<p style="text-align: center;">CONTACT</p> <p>Name <u>JEFF BLANTON</u> Street Address <u>927 10TH ST.</u> City/State/Zip <u>SAC. CA.</u> Phone <u>264-8423</u> FAX <u>264-8337</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>21069AB</u></p> <p>Name <u>TURNER EAST.</u> Address <u>1450 HARBOR BLVD. SUITE</u> City/State/Zip <u>W. SAC. 95619</u> Phone <u>372-9500</u> FAX <u>372-9655</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>BSA MECH.</u> Address <u>350 PACIFIC AVE</u> City/State/Zip <u>SAN FRANCISCO 94111</u> Phone <u>415-781-1524</u> FAX <u>415-982-1551</u> E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>CITY OF SAC.</u> Address <u>927 10TH ST</u> City/State/Zip <u>SAC. CA.</u> Phone <u>264-8423</u> FAX <u>264-8337</u> E-mail: _____</p>

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

NATURE OF WORK IN DETAIL: GRADING PERMIT ONLY

OCCUPANT/TENANT: CITY STAFF VALUATION: \$ 350,000.

FLOOD STATUS: _____		S.C.A.T. _____							
JOB DESCRIPTION: <u>BLDG</u>		SHELL	APT	TI()	REM()	SW	FIRE	ADD	<u>OTH</u>
INSPECTION DISCIPLINES		<u>BLDG</u>	MECH	PLUMB	ELEC	<u>SITE</u>		FIRE	
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>B</u>	<u>-</u>	SPR	ALARM	<u>D</u>	<u>OK</u>
<u>13 ft</u>	<u>13 ft</u>					<u>13 GRS</u>			

COMMENTS: _____

ROUGH GRADING ONLY 5-2-00

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed