

CITY OF SACRAMENTO

Permit No: 9811664

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 199 HARRIS AV SAC

Sub-Type: NCOM

Parcel No: 250-0028-016

Housing (Y/N): N

CONTRACTOR

DIODATI DEV. INC.
11423 SUNRISE GOLD CR #16
RANCHO CORDOVA 95742

OWNER

KIRK S DIODATI REVOCABLE LIVING TRUST
11423 SUNRISE GOLD CR #1
RANCHO CORDOVA A. 95745

ARCHITECT

Nature of Work: NEW WAREHOUSE BUILDING - 22,061 SF

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 NONE 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 17 License Number 636372 Date 2-3-99 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 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.

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 3-2-99 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 CLARENDON NATIONAL INS CO. Policy Number 01KR0004611 Exp Date 09/01/1999

(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 3-2-99 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.

2 apps here

APPLICATION FOR BUILDING PERMIT

98-11664C

DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES SECTION

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

PLAN CHECK

Insp. Area

Applicant MUST complete ALL Unshaded areas this page only

ADDRESS HARRIS AVE & PONDROSA DR. Suite \_\_\_\_\_  
PARCEL # 250-1028-016

<b>CONTACT</b> Name <u>AL CACIOPO / Kirk Diodati</u> Address <u>11423 Sunrise Blvd Ct #16</u> <u>Rancho Cordova</u> Zip <u>95742</u> Phone <u>852 4200</u> FAX <u>631-8324</u>		<b>LICENSED CONTRACTOR</b> Lic No. <u>636370</u> Name <u>Kirk Diodati</u> <u>OTB</u> Address <u>11423 Sunrise Blvd Ct #16</u> <u>Rancho Cordova</u> Zip <u>95742</u> Phone <u>852-4200</u> FAX <u>631-8324</u>	
<b>ARCHITECT/ENGINEER</b> Name <u>Carlson Eng.</u> Address <u>3931 Pondrosa Rd.</u> <u>Pondrosa Rd.</u> Zip <u>95682</u> Phone <u>5306275515</u> FAX <u>6776645</u>		<b>OWNER</b> Name <u>Diodati Dec.</u> Address <u>11423 Sunrise Blvd Ct.</u> <u>Rancho Cordova</u> Zip <u>95742</u> Phone <u>8524200</u> FAX <u>631-8324</u>	

Will the permittee have any employees on the jobsite?  Yes  No

If yes, WORKER'S COMPENSATION POLICY # 01KR0004611 EXPIRATION DATE: 9-1-99

NAME OF INSURANCE COMPANY: \_\_\_\_\_

NATURE OF WORK IN DETAIL: New Warehouse Bldg

Site 331,000

DBA: \_\_\_\_\_ VALUATION: 879,997.15

FLOOD STATUS: <u>ZONE X</u>		S.C.A.T. <u>yes X-1, X11, X12, 200, 201</u>								
JOB DESCRIPTION		<input checked="" type="checkbox"/> BLDG	<input type="checkbox"/> SHEL	<input type="checkbox"/> APT	<input type="checkbox"/> TI( )	<input type="checkbox"/> REM( )	<input type="checkbox"/> SW	<input type="checkbox"/> FIRE	<input type="checkbox"/> ADD	<input type="checkbox"/> OTH
INSP. DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" type="checkbox"/> SITE	<input checked="" type="checkbox"/> FIRE			
# Stories	1st Str Area	Total Area	Use Zone	Ocup Group	Const type	Fire Req <input checked="" type="checkbox"/> Y/N	Fed Code	Vio. File		
		<u>2,041</u>		<u>S1/B</u>	<u>3N</u>	<input checked="" type="checkbox"/> Spr <input type="checkbox"/> Alarm	<u>18</u>	<u>None</u>		
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S	<input checked="" type="checkbox"/> D	<input checked="" type="checkbox"/> R		

COMMENTS:  
Get Receipt for Receipt  
Adding Trust Fund?

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

# PERMIT SUMMARY DOCUMENT

Bldg Commercial

Address: **199 HARRIS AV SAC** Date: Area: 4

Permit #: **9811664**

Location:

APN: 250-0028-016

PLAN CHECK #: \_\_\_\_\_

Owner: **KIRK S DIODATI REVOCABLE LIVING TRUST**  
**DIODATI DEV. INC.**

Contractor:

Phone:

Phone: 852-4200

JOB DESCRIPTION: **CONSTRUCT NEW WAREHOUSE BUILDING - 22,061 SF**

DBA:

Occupancy:: 25

Change of Use:

Zoning:

Const Type: 3N

Sub-Type: NCOM

DR:

Fire Sprinkler?: Y

Activity Code: NI

Fed Code: 18

BLDG Y

MECH Y

PLBG Y

ELEC Y

SITE Y

FIRE Y

VALUATION: \$879,997.15

Sq. Footage:

22061

CONDITIONS: Cond: X1

SPI - Special inspections in accordance with Section 306 of  
the UBC (All)

Cond: X11

SCU - Site improvements/T-24 handicap

Cond: X12

SCU - Site improvements/Zoning Code

Cond: 200

FRI - Fire Sprinkler O/H

Cond: 201

FRI - Fire Sprinkler U/G

**CITY OF SACRAMENTO**  
 BUILDING INSPECTION DIVISION  
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

*As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form*

1. Business Name: NORWOOD Tech Bus Park II Phone: 852 4200  
 Site Address: 199 HARRIS AVE Suite: ---  
(Street) (Zip)  
 Business Owner/Representative: Dicofati Dev. Phone: 852 4200  
 Nature of Business: SHELL warehouse  
 Property Owner: Richard + Thomas Diadetti Phone: 852 4200  
 Address: 11423 Sunrise Blvd Ca. Suite: 16  
Rancho Cordova Cal. 95742  
(City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes  No  Is this permit for a shell building? Yes  No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes  No   
 4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes  No

**CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.**

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes  No   
 6. Do you handle, store or transport any amount of acutely hazardous materials? Yes  No   
 7. Is/Will your business be located within 1,000 feet of a school? Yes  No

If you answered "yes" to questions #6 and/or #7, complete the RMPP Informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes  No

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

**Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.**

**PENALTY:** Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: AL CACIOPPO  
(Print)  
[Signature] 3-2-98  
(Signature) (Date)

BID Use Only: Plan Ck# _____	Permit # <u>98-11664C</u>
OK to issue prmt? <u>YES</u> <u>3-2-98</u> F.D. Appr Req'd? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<small>init date</small>
Hold on Certificate of Occupancy? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Fire Dept. Use Only:	
OK to issue permit? init _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	

**CITY OF SACRAMENTO**  
**BUILDING INSPECTION \* DEPARTMENT OF PLANNING AND DEVELOPMENT**  
 1231 I STREET \* SACRAMENTO, CA 95814 \* PHONE (916)264-7619

**STRUCTURAL TESTS AND INSPECTIONS SCHEDULE**

PRIOR TO OBTAINING THE PERMIT, THE PROJECT OWNER SHALL COMPLETE, SIGN AND SUBMIT THIS FORM FOR THE BUILDING INSPECTION DIVISION FOR APPROVAL.

PROJECT NAME: YORWOOD Tech PHASE II PLAN REVIEW # 9811664  
 PROJECT ADDRESS: 199 Harris Ave. PERMIT NUMBER \_\_\_\_\_

TESTING/INSPECTION AGENCY/IES: Consolidated Eng. Lab.  
201 HARRIS AVE #14

OWNER'S NAME: Prod. Dev. SIGNATURE: [Signature]  
 or EOR (Please Print)

hereby certifies that the Testing/Inspection agency named above has been engaged to perform structural tests and inspections during construction, as noted below, to satisfy all applicable portions of the Uniform Building Code.

**INSPECTIONS REQUIRED**



In accordance with Sections 302 and 306 of the Uniform Building code, special inspections shall be performed on the following items (circled):

Item	Description	Ref. Dwg.*
①	CONCRETE <u><math>f_c' = 3,500</math> psi tilt-up wall panels</u>	<u>S1.1</u>
②	REINFORCING/PRESTRESS STEEL <u><math>f_y = 60</math> ksi</u>	_____
③	WELDING <u>shop &amp; field welding</u>	<u>S1.1, SB, S9</u>
4.	HIGH STRENGTH BOLTING _____	_____
5.	STRUCTURAL MASONRY _____	_____
6.	PILING, DRILLED PIERS, CAISSONS _____	_____
7.	SPRAY APPLIED PROOFING _____	_____
⑧	OTHER: <u>Excavation &amp; compaction</u>	<u>S1.1</u>

\* Referenced drawings listed represent a sample of the item requiring special inspection and are not intended to document all drawings or specifications containing information pertaining to that item.

BID APPROVAL [Signature] Date 3-2-99 BID #382(02/95)

**City of Sacramento  
Water and Sewer Service Quotation**

FY 98/99

<b>Date:</b> 01-Mar-99	<b>Time:</b> 08:48:07 AM	<b>Building Permit No.:</b> B98-99	<b>Plan Check No.:</b> 9811664
<b>Address:</b> 199 Harris, 198 Opportunity			<b>Parcel no.:</b> 250-0028-016
<b>Description:</b> 2 new warehouses			
<b>Subdivision Map:</b> Norwood Tech Business Park			<b>Water Plan No.:</b>
<b>Estimate by:</b> Dilley		<b>Bldg. Insp. Reviewer:</b>	
<b>Engineering Firm:</b> Carlton Engineering			
<b>Sewer Jurisdiction:</b> City Sewer			
Comment No. 1 No new sewer or water taps with this project Comment No. 2 Comment No. 3 Comment No. 4			
<b>TOTAL WATER DEV. FEES:</b>		24.0 hrs x \$75 /hr = or \$300.00 (whichever is greater)	1800.00
<b>TOTAL SEWER DEV. FEES:</b>		<b>total on-site grading and drainage review fee:</b>	1,800.00

**Water Service Quotations**

Main Size	Service Size	Description	Qty	Tap Fee/ea.	Meter Fee/ea.	Total Tap Cost	Dev. Fees
						0.00	
						0.00	
						0.00	
						0.00	
						0.00	
			1	Fire Hydrant:		0.00	
<b>Total for Water:</b>						0.00	
<b>Acreege Charge:</b>							0.00

**Sewer Service Quotations**

Main Size	Service Size	Description	Qty	St. (FT)	MH Fee/ea.	Tap Fee/ea.	Total Cost	Dev. Fees
							0.00	
							0.00	
							0.00	
							0.00	
							0.00	
<b>Total for Sewer:</b>							0.00	

**Note:** Total cost = Qty. x St/2 x Tap Fee + MH Fee

**Water Main Construction Charge:** 0.00

**Total For Address:** 0.00

Water development fees are based on the size of domestic service. total water development for commercial property includes a \$3,058.00 per acre charge in addition to the standard fee.

# PLAN CHECK ROUTING PROCEDURE

Date Received: \_\_\_\_\_ Plan Check #: 981166P  
Project: \_\_\_\_\_  
Address: 199 HARRIS DR, 198 OPPORTUNITY  
Legal Description: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Architect or Civil Engineer: \_\_\_\_\_ Telephone: \_\_\_\_\_

## PUBLIC WORKS - DEVELOPMENT SERVICES STREET IMPROVEMENTS

Approved: [Signature] 3-1-99 Date Received: \_\_\_\_\_  
Total frontage length of New Street Improvements: EXISTING ft  
Comments: \_\_\_\_\_  
Right of Way Dedication : Approved \_\_\_\_\_ Disapprove \_\_\_\_\_  
Public Improvement Agreement: Approved \_\_\_\_\_ Disapprove \_\_\_\_\_  
Surety Bond, etc. : Approved \_\_\_\_\_ Disapprove \_\_\_\_\_  
Staking and Inspection Fee : \_\_\_\_\_ \$ \_\_\_\_\_

## PUBLIC WORKS - DEVELOPMENT SERVICES DRIVEWAY

Driveway Required:  Yes  No Date Received: \_\_\_\_\_  
Approved: [Signature] Disapproved: \_\_\_\_\_  
Removal of abandoned driveway: \_\_\_\_\_  
Comments: Complete Application & Pay Fees

## PUBLIC WORKS - DEVELOPMENT SERVICES ENCROACHMENT/EXCAVATION PERMIT

Encroachment/Excavation Permit Required:  Yes  No  
Approved: [Signature] Disapproved: \_\_\_\_\_  
Comments: RELOCATE EX. FIRE HYDRANT FROM DRIVEWAY

## DEPT. OF UTILITIES DRAINAGE, SEWER, & WATER

Approved: [Signature] Date Received: \_\_\_\_\_  
Comments: \_\_\_\_\_ Disapproved: \_\_\_\_\_

## PLANNING AND DEVELOPMENT SERVICES SITE CONDITIONS

Approved: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Review Zone: \_\_\_\_\_ Approved with Changes: \_\_\_\_\_ Disapproved: \_\_\_\_\_  
Special Permit: \_\_\_\_\_  
Parking Spaces Furnished: \_\_\_\_\_ Parking Spaces Required: \_\_\_\_\_  
Comments: \_\_\_\_\_

NEW: 2266 0 SF and 454 PO SF  
 Putting in 2 new branches  
 100 spitting

**WATER SUPPLY TEST - DEPT. OF UTILITIES**  
 1395 35TH AVENUE  
 SACRAMENTO, CA. 95822  
 PHONE: 916/264-1430  
 FAX: 916/264-1197 264-8897

TEST NO: 98-144 FILE NO: R98-0249  
 REQUEST DATE:  
 COMPLETE DATE: 12-23-98  
 ANALYSIS FEE: \$90.00 DATE PAID: 11-7-98  
 FIELD COST FEE: \$360.00 DATE PAID: 1/14/99  
 PHONE NO: 8524200 FAX NO: 631 8324  
 CELL PHONE NO: 870-7187  
 COMPANY ADDRESS: 14403 Sunrise Blvd. Ca. 95828  
 STREET ADDRESS OF TEST: 199 HALLIS AVE  
 ASSESSOR'S PARCEL NUMBER: 250 0028-016

CONTACT PERSON: AL CARLOPPO  
 COMPANY: Diodot, Dev. Inc.  
 PURPOSE OF TEST:

The undersigned agrees to the following items and conditions:  
 (1) The street address shown above is correct.  
 (2) Water supply data is developed from several sources of information which may include water supply test data, pipe network computer models, and continuous pressure recording stations. The design water supply data given below is to be used for design purposes.  
 (3) Although the water supply data reported herein is believed to be accurate, the City makes no warranty, guaranty, certification or other representation of any kind that such data is accurate or correct, or that the pressures and/or flow rates reported herein can or will be maintained. The undersigned agrees that the City, its officers and employees shall not be liable for any damages of any kind resulting from the use of or reliance upon the water supply data reported herein by the undersigned or by any third party.  
 (4) If the undersigned desires to witness the water supply test performed by the City, please check the box below:  
 I want to witness this water supply test, which will be scheduled at the convenience of the Department of Utilities.  
 (5) If the undersigned elects to hire a licensed engineer, at the undersigned's sole expense, to witness and certify the water supply test performed by the City, please check the box below:  
 At my expense, I will arrange for a licensed engineer to witness and certify this water supply test, which will be scheduled at the convenience of the Department of Utilities.

Used Test # 98-104

Print Name: AL CARLOPPO Signature: Date:  
 ENGINEERING REQUEST DATE: / DATE OF TEST: 5-11-98 TIME OF TEST: 8:30 AM

WATER MAIN SIZE: 12" TEST CONDUCTED BY: Colasanti, Stecklin, Lopez, James

	HYDRANT NO.	MAP PAGE	STATIC PRES. (PSI)	RESIDUAL PRES. (PSI)	PISTOL PRES. (PSI)	OUTLET DIA. (IN.)	COEFFICIENT		CALC. FLOW @ PRES. (G.P.M.)	FLOW @ 20 PSI (G.P.M.)
							C <sub>1</sub>	C <sub>2</sub>		
RESIDUAL	66	38N	54	32						
FLOWED	65	38N			15	4.5	0.90	0.83	1748	
FLOWED	53	38N			17	4.5	0.90	0.83	1860	
FLOWED								TOTAL	3608	4564
FLOWED										

• THE WATER SUPPLY TEST DATA IS NOT TO BE USED FOR THE DESIGN OF DOMESTIC WATER SYSTEMS.  
 • (STATIC PRES. - RESIDUAL PRES.) / (STATIC PRES. - 20 PSI) IS LESS THAN 25%. THEREFORE, THESE RESULTS ARE ONLY VALID FOR FLOWS NOT EXCEEDING \_\_\_\_\_ G.P.M.

$$Q = C_d A \sqrt{2 P_{pistol}}$$

$$Q_{20} = Q_r \left( \frac{P_r - 20}{P_r - P_r} \right)^{0.54}$$

	ACTUAL	DESIGN (D)
STATIC PRES.	54 PSI	38 PSI
RESIDUAL PRES.	32 PSI	16 PSI
TOTAL FLOW @ RESIDUAL PRES.	3600 G.P.M.	3600 G.P.M.
TOTAL FLOW @ 20 PSI	4600 G.P.M.	3200 G.P.M.

(1) The Design Water Supply Data reflects fluctuations and future demands on the water distribution system. It is to be used for design purposes. 7/18/98



# Engineer's Cost Estimate

For: Norwood Business Park Phase II  
 Job # 98-109  
 Date: 17-Nov-98  
 File: 98109cost.xls

ITEM NO.	ITEM	QUANTITY	UNIT	UNIT PRICE	TOTAL
<b>GENERAL SITEWORK</b>					
1	Clearing, grubbing (acres)	1	LS	\$1,000.00	\$1,000.00
2	Excavation	1,825	CY	\$3.50	\$6,387.50
3	Emergency Erosion Control	1	LS	\$1,500.00	\$1,500.00
				<b>Subtotal</b>	<b>\$8,887.50</b>
<b>SURFACE IMPROVEMENTS</b>					
4	6" PCC over 4" Class 2 AB	57,806	SF	\$3.00	\$173,418.00
5	4" PCC Sidewalk	4,186	SF	\$2.00	\$8,372.00
6	6" Monolithic Curb	3,819	LF	\$3.00	\$11,457.00
7	Handicap Ramps	2	EA	\$100.00	\$200.00
8	Concrete Driveway	2	EA	\$1,500.00	\$3,000.00
9	Remove Existing Concrete	6,697	SF	\$0.50	\$3,348.50
10	Remove Existing Curb	508	LF	\$0.50	\$254.00
				<b>Subtotal</b>	<b>\$200,049.50</b>
<b>DRAINAGE</b>					
11	4" x 4" Steel Tube Roof Drain	63	LF	\$14.00	\$882.00
12	8" Storm Drain	858	LF	\$18.00	\$15,444.00
13	8" PVC (C900, CL150)	234	LF	\$18.00	\$4,212.00
14	Drain Inlet	12	EA	\$1,200.00	\$14,400.00
15	Storm Drain Manhole No. 3A	2	EA	\$3,500.00	\$7,000.00
16	Storm Drain Cleanout	2	EA	\$675.00	\$1,350.00
17	2" Class C PCC Storm Drain Plug	2	EA	\$300.00	\$600.00
18	Remove Existing DI	4	EA	\$100.00	\$400.00
19	Remove Existing Storm Drain	410	LF	\$2.50	\$1,025.00
				<b>Subtotal</b>	<b>\$45,313.00</b>
<b>SEWER</b>					
20	Complete 6" Sewer Cleanout	1	EA	\$350.00	\$350.00
21	Complete SSMH	3	EA	\$3,000.00	\$9,000.00
22	Remove (E) 6"SS	34	LF	\$5.00	\$170.00
				<b>Subtotal</b>	<b>\$9,520.00</b>
<b>WATER</b>					
23	1-1/2" PVC (C900, CL150) & Appurtenances	47	LF	\$20.00	\$940.00
24	4" PVC (C900, CL150) & Appurtenances	365	LF	\$25.00	\$9,125.00
25	6" PVC (C900, CL150) & Appurtenances	92	LF	\$30.00	\$2,760.00
26	8" PVC (C900, CL150) & Appurtenances	272	LF	\$40.00	\$10,880.00
27	Fire Department Connection	1	EA	\$1,000.00	\$1,000.00
28	Fire Protection Assembly	1	EA	\$9,000.00	\$9,000.00
29	Relocate Existing FH	3	EA	\$1,000.00	\$3,000.00
30	Remove (E) Waterline	454	LF	\$0.50	\$227.00
				<b>Subtotal</b>	<b>\$36,932.00</b>
<b>OTHER UTILITIES</b>					
31	Utility Traffic Lid	2	EA	\$300.00	\$600.00
				<b>Subtotal</b>	<b>\$600.00</b>
<b>SUBTOTAL:</b>					<b>\$301,382.00</b>
10 % Contingency					<b>\$30,138.20</b>
<b>TOTAL:</b>					<b>\$331,520.20</b>

**City of Sacramento Development Services Division  
Planning and Zoning Information Request**

Project Address: 199 HARRIS + 198

Assessor's Parcel Number: 250-0028-016

Current Land Use: BAE

Description of Request/Proposed Use: warehouse

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zoning Designation: M-1

Prior Applications for Project Site(P#,Z#,DRPB#): 298-044

Comments: O.K. - must comply with  
conditions of approval for  
above referenced project.

\_\_\_\_\_  
\_\_\_\_\_

- Are There Any Planning Issues?: (Circle One) YES  NO
- Site Plan Check Required? (Circle One) YES  NO
- Design Review/ Preservation Required?: (Circle One) YES  NO

Planning Review by/Date: H. D. [Signature] 11.13.98

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



CITY OF SACRAMENTO  
CALIFORNIA

DEPARTMENT OF  
NEIGHBORHOODS, PLANNING  
AND DEVELOPMENT SERVICES

1231 I STREET  
ROOM 200  
SACRAMENTO, CA  
95814-2998  
PH 916-264-7615

MEMORANDUM OF UNDERSTANDING RELATED TO  
MITIGATION MEASURES, PLANNING CONDITIONS,  
ZONING ORDINANCE PROVISIONS AND/OR SIGN ORDINANCE PROVISIONS

In order to proceed with construction/occupancy of the project located at 201 Harris St.

\_\_\_\_\_, Plan Check/Permit Number \_\_\_\_\_

I agree that the following Mitigation Measures/Planning Conditions/Zoning Ordinance Provisions/Sign Ordinance Provisions associated with project 298-064 will be fully implemented to the satisfaction of the City of Sacramento by 1st. of Occupancy (Date) (File Number)

LIST OF MEASURES/CONDITIONS/PROVISIONS:

- 1) Build as shown on plans
- 2) Obtain Building permits
- 3) Any other needs by planning review approval

The above language shall not be deemed a waiver by the City of Sacramento of any Mitigation Measure, Planning Condition, Zoning Ordinance Provision, or Sign Ordinance Provision applicable to the project whether or not the measure, condition or provision is listed above.

Signature: [Signature] Date: 11-23-98

Name & Title: AL Cacioppo Project Manager

Address: 11423 Sunrise Gold Cr. # 16 Rancho Cordova. 95742

Phone Number: 852 4200

Reviewed by: [Signature] Date: 8-10-98



November 30, 1998  
RECEIVING FAX : 631-8324  
SENDING FAX : 875-6253

TO: AL CACIOPPO

FROM: DOLORES ROSS  
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

PHONE NUMBER: 875-6679

RE: SEWER FACILITY IMPACT FEES APN: 250-0028-016  
199 HARRIS AVE. / 198 OPPORTUNITY ST.  
Plan Check # 98-11664 / 98-11665

There are no Sewer Facility Impact Fees due for a 22,660 sq. ft. and a 45,480 sq. ft. warehouse on the above parcel. Acreage fees were paid in 1991 and usage has not yet exceeded the acreage credits.

A handwritten signature in cursive script, appearing to read "Dolores", is located below the main text.

cc: Barbara Larsen  
City of Sacramento

*This fee is due and payable at 827 Seventh Street, Room 105.  
This fee is also subject to adjustment if the data supplied is changed.*

e-mail: [rossd@pwa.co.sacramento.ca.us](mailto:rossd@pwa.co.sacramento.ca.us)



**PART I To be completed by APPLICANT**

Owner's Name & Address Richard + Martha Diodati  
 Project Address 199 Harris Ave & 198 Opportunity St  
 Parcel Number 250-0028-016 Lot No. PC # 98-11664/98-11665  
 Subdivision Name NORWOOD Tech Bus. PARK II Number of Units BLD B+C  
 Applicant's Signature & Title (Signature) (AGENT)  
 Date 3-1-99 Phone No. 916-852-4200

**NOTICE TO APPLICANT:** Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

**PART II To be completed by BUILDING DEPARTMENT**

Plan Identification Number 98-11664 & 98-11665 Building Type (CHECK ONE)  
 Square Feet of Chargeable Building Area 66,539 S.F. total  Residential  
 Signature (Signature)  Apartment / Condominium  
 Title Bldg Insp III  Commercial / Industrial  
 Date 3-1-99

**PART III To be completed by SCHOOL DISTRICTS**

**Grant Joint Union High School District**  
 District Certification No. 076-99  
 EXEMPT \_\_\_\_\_  
 Comments \_\_\_\_\_  
 RESIDENTIAL / APARTMENT / CONDOMINIUM  
 Sq. Ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 COMMERCIAL / INDUSTRIAL  
66,539 Sq. Ft. X \$ 18.00 = \$ 1,197,702  
 OTHER FEE TYPE \_\_\_\_\_  
 Sq. Ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 TOTAL FEES COLLECTED \$1,197,702

**Robla Elementary School District**  
 District Certification No. \_\_\_\_\_  
 EXEMPT \_\_\_\_\_  
 Comments \_\_\_\_\_  
 RESIDENTIAL / APARTMENT / CONDOMINIUM  
 Sq. Ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 COMMERCIAL / INDUSTRIAL  
 Sq. Ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 OTHER FEE TYPE \_\_\_\_\_  
 Sq. Ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 TOTAL FEES COLLECTED \_\_\_\_\_

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.  
 As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

<b>GRANT</b>	<b>Authorized School District Official</b>	<b>ROBLA</b>
Signature <u>Evelyn Wautal</u>	Signature _____	Signature _____
Title <u>Pres Tech</u>	Title _____	Title _____
Date <u>3/1/99</u>	Date _____	Date _____

Original: Grant Joint Union High School District  
 1st Copy: Robla Elementary School District  
 2nd Building Department  
 3rd Copy: Applicant