## **CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Site Address: 8200 BERRY AV SAC

Parcel No:

040-0121-025

#160

Permit No:

0104899

Insp Area:

Sub-Type:

**REM** 

3

Housing (Y/N): N

**CONTRACTOR** 

OWNER EXPRESS **ARCHITECT** 

STEAMATIC OF SAC INC 8200 BERRY AV

SACRAMENTO CA 95828

Nature of Work: SET PREFABRICATED CLEANING ROOM INSIDE BLDG & INTERIOR

REMODEL.

	assued (Sec. 3097, Civ. C)
ender's Name	Lender'sAddress
	S DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 of Division 3 of the Business and Professions Code and my license is in full force and effects
icense Class	umber 697339 Date 5/5/0   Contractor Signature
OWNER-BUILDER DECLA following reason (Sec. 7031.5, Bus amy structure, prior to its issuance, of the Contractors License Law (Contractors License L	<b>RATION:</b> I hereby affirm under penalty of perjury that I am exempt from the contractors Eleense Law to the siness and Professions Code, any city or county which requires a permit to construct, alter, improve, demolish, or repairalso requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions hapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civi
or sale (Sec. 7044. Business and	Professional Code: The Contractors License Law does not apply to an owner of property who builds or improve himself or herself or through his/her own employees, provided that such improvements are not intended or offered for improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did to of sale.)
I. as owner of the property Code: The Contractors License La contractor(s) licensed pursuant to the	, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Profession aw does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractors License Law).
I am exempt under Sec	B & PC for this reason:
Date	Owner Signature
IN ISSUING THIS BUILDING I all measurements and locations sho or private agreement relating to per	<b>PERMIT,</b> the applicant represents, and the city relies on the representation of the applicant, that the applicant verified own on the application or accompanying drawings and that the improvement to be constructed does not violate any law rmissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any private agreement relating to location of improvements.
stating to building construction an	ication and state that all information is correct. I agree to comply with all city and county ordinances and state law id herby authorize representative(s) of this city to enter upon the apovementioned property for inspection purposes.
Date 5/5/5/	Applicant/Agent Signature
WORKER'S COMPENSATION  I have and will maintain a concept of work for which the	ON DECLARATION: I hereby affirm under penalty of perjury one of the fortowing declarations: ertificate of consent to self-insure for workers' compensation as provided for the self-insure for the self-insure for workers' compensation as provided for the self-insure for the self-insure for workers' compensation as provided for the self-insure for the self-insure for workers' compensation as provided for the self-insure for the s
I have and will maintain w which this permit is issued. My we	orkers' compensation insurance, as required by Section 3700 of the Labor Cryle, for the performance of the work for orkers' compensation insurance carrier and policy number are:
Carrier STATE FUND	Policy Number 617239-00  Policy Number 617239-00  NELLEWING  Policy Number 617239-00  NELLEWING  Policy Number 617239-00  NELEWING  Policy Number 617239-00  Number
(This section need not be co	ompleted if the permit is for \$100 or less). I certify that in the performance of the work for which this permit is issued, by manner so as to become subject to the workers' compensation laws of California and agree that if I should become
	on provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

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.

## CITY OF SACRAMENTO DUILDING INSPECTIONS DIVISION PERMIT SERVICES

ERMIT II OL	0489	<u>,9                                    </u>	_	•	•
odress:_82		Berry	AV		
this application will before it can be so	need one or	more of the fo	llowing items		- Med
Current Ccr	tificate of W	gal documen /orkers' Com	ıp.		
Hazardous I (Orig. In Io	Materials Folder Ider, golden athorization	orm (hazmat) -applicant, 2 Required to	to fire) sign by Conti	ractor or Own	cr
School Imp	act Fee (cor	y of paid rec -4782) for M	cipt) odular/Coacl	ıcs	
County Rep	gional Sanita	ation Fcc (co)	ny ot receipt) m 105, windo	ow. 10-ph:875 r Farmarz An	-6679) sari)
PERMIT I		548.	84	Duc	1.1 <b>-</b> 17
Driveway	Permit S	(publi	c works)	· · · · · · · · · · · · · · · · · · ·	
·	nent Permit			- of permit at	final allach
instruction	ns to permit,	and 1 copy i	u cach tolact Il lolder I fo	n of permit at ,+Cusamea. CAROLINE)	(A)
Flood Elc	vation Certi	licate (1 cop)	, B. Nakasnii	na, 1 in folde	
Date No	olified		Plans in Bir	11 99	7
Initials	Ву		Processed I	3y: 15°	3

Microfilm @ Final

## CITY OF SACRAMENTO

## BUILDING INSPECTION DIVISION APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

	As Required by Assembly Bill #3205 - A Building	Permit Cannot be Approv	ed Without	This Completed Form
1. [	Business Name: Steamhing of SA	CIBMONTO	Phone:	336-314/
	Site Address: Shou Iserry Me			_ Suite: <u>160</u>
E	Business Owner/Representative: (Street)	Cook	(Zip) Phone	<b>:</b> <u>306-37</u> 9,2
1	Nature of Business:	Con Softier	ia Sia	
F	Property Owner: Details On the Property Owner:		Phone:	3818113
-	Address: 5665 Puwar 111,0 B	17		_ Suite: 1 40
· <u>-</u>	Street) (Street)	CIA	Cyc	くとく
2. A	(City) are you developing an undetermined tenant space? Ye	(State) S No Is this perm	it for a shell	(Zip) building? Yes No
, N	Notify lessee of the responsibility to coordinate with the of hazardous materials.	e Fire Department regardin	g the use a	nd handling
	Does/Will your business generate hazardous waste?	Yes No X		L APPLATE
4. [	Does/Will your business handle, store or transport any	solid, liquid, or gaseous o	hemicals?	Yes X No
ACL 1 5. [	INSULT THE EPA CHEMICAL LIST LOCATED AT THE JTELY HAZARDOUS MATERIALS TO COMPLETE THE FORM AND	HE FOLLOWING QUESTION  Bove, continue on to quesure and a continue on to quesure and the continue on the conti	NS. stions 5 - 8 Standard Te time? Ye	mperature or
	s/Will your business be located within 1,000 feet of a			
	f you answered "yes" to questions #6 and/or #7, c s/Will your business be located within 1,000 feet of a F YOU ANSWERED "YES" TO QUESTION #3 AND/OR	omplete the RMPP inform hospital, and/or long-term	healthcare fa HE CITY OF	SACRAMENTO
F	FIRE DEPARTMENT LOCATED AT 1231 I STREET, SU	ITE 401, SACRAMENTO, C	A OR CALL	. 449-5416.
	r to issuance of a certificate of occupancy, each b artment and comply with the Health and Safety Co			
the viola busi and	ALTY: Any business that violates Section 25531-2 administering agency in an amount of not more that ation occurs. If the violation results in, or significal iness shall also be assessed the full cost of the cit disposing of the hazardous materials. Additional interpretary researches action of the violation	n two thousand dollars (\$ ntly contributes to, an em by emergency response, a	62,000) for e ergency, inc s well as th	each day in which the cluding a fire, the e cost of cleaning up
VIOIE	ation after reasonable notice of the violation.	BID Use Only: Plan C		Permit #
Appl	licant's Name: Stare Cook	OK to issue prmt? Y		D. Appr Req'd? Yes No
Ser.	(Print)	Hold on Certificate of Occ Fire Dept. Use Only:	upancy?	Yes No
\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	(Signature) (Date)	OK to issue permit? init		