

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0110170
Insp Area: 4
Thos Bros:
Sub-Type: NFNDTN
Housing (Y/N): N

Site Address: 135 MAIN AV SAC

Parcel No 226-0050-03 INSIDE

CONTRACTOR

RE DOLPH AND SLETTEN INC
1750 CREEKSIDE OAKS DR STE 150
SAC, CA 95833

OWNER

MASSIE CHARLES T & CLARA K
805 S ELDER CREEK RD #100
SACRAMENTO, CA 95828

ARCHITECT

Nature of Work: NEW INT FOUNDATION FOR ADDITIONAL FLOOR AREA INSIDE BLDG

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, C.C.P.).

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 8 of the Business and Professions Code and my license is in full force and effect.

License Class **BA** License Number 198069 Date 8/10/01 Contractor 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.

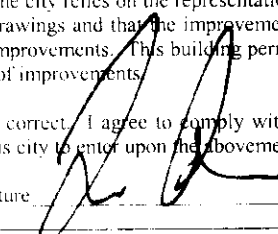
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code). The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.

I am exempt under Sec. _____ B & P 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 admissible 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 above-mentioned property for inspection purposes.

Date 8/10/01 Applicant/Agent 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 AMERICAN ZURICH Policy Number WC 3495307-00 Exp Date 06/30/2002

(This section need not be completed if the permit applicant is self-insuring for 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 8/10/01 Applicant 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.

CITY OF SACRAMENTO
BUILDING INSPECTIONS DIVISION
PERMIT SERVICES

PERMIT # 011852 Rev to 0110170

ADDRESS: 135 Main Ave

This application will need one or more of the following items
before it can be issued:

- Owner/Builder Form (legal document)
- Current Certificate of Workers' Comp.
- Hazardous Materials Form (hazmat)
(Orig. in folder, golden-applicant, 2 to fire)
- Letter of Authorization Required to sign by Contractor or Owner
- School Impact Fee (copy of paid receipt)
- HCD Forms (state 445-4782) for Modular/Coaches
- County Regional Sanitation Fee (copy of receipt)
(Deloras Ross @ 827-7th street, Rm 105, window. 10-ph:875-6679)
- Habitat Conservation Plan Fee (Bob Robinson or Farmarz Ansari)

PERMIT FEES _____ Duc

Driveway Permit \$ _____

Encroachment Permit \$ _____ (public works)

Special Conditions (enter computer, mark margin of permit at final, attach instructions to permit, and 1 copy in each folder, + CUSTOMER COPY)

Special Inspections X1 (1 copy each folder, 1 to CAROLINE)

Flood Elevation Certificate (1 copy B. Nakashima, 1 in folder)

Other _____

Date Notified _____

Plans in Bin// 52

Initials By _____

Processed By: (B)

Microfilm @ 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>01-10170</u>	Insp. Area
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 135 MAIN AVE Suite _____
 PARCEL # 220-0050-034

<p align="center">CONTACT</p> Name <u>SEB ARCHITECT</u> Street Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____		<p align="center">LICENSED CONTRACTOR Lic No. # <u>198069</u></p> Name <u>RUDOLPH & SLETTER IHC.</u> Address <u>1750 CROSSBIRD OAKS DR. #150</u> City/State/Zip <u>SACRAMENTO, CA. 95833</u> Phone <u>568-5000</u> FAX <u>568-5500</u> E-mail: _____	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>GARY ROBERTS</u> Address <u>1512 14TH STREET</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone <u>498-7900</u> FAX <u>498-7909</u> E-mail: <u>GROBERTS@CWO.COM</u>		<p align="center">OWNER</p> Name <u>RICHARD BECK</u> Address <u>135 MAIN AVE</u> City/State/Zip <u>SACRAMENTO, CA 95838</u> Phone <u>564-9727 x 210</u> FAX <u>564-9484</u> E-mail: _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: AMERICAN GUARANTY & LIABILITY INSURANCE
 → WORKER'S COMPENSATION POLICY # WC-3495307-01 EXPIRATION DATE: 10/1/01

NATURE OF WORK IN DETAIL: FOUND. FOUNDATION ONLY PERMIT NO EXTERIOR WSK
DBA:

OCCUPANT/TENANT: SASC ELECTRIC VALUATION: \$ 25,000⁰⁰

FLOOD STATUS:		S.C.A.T.								
JOB DESCRIPTION		<input checked="" type="checkbox"/> BLDG	SHELL	APT	TI ()	REM (X)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
						SPR	ALARM		[H]	[Quad]
<input checked="" type="checkbox"/> B	L	P	M	E	F	S	D	PW	UTIL	

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed



**CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
1231 I STREET, ROOM 200, SACRAMENTO, CA 95814**

SPECIAL INSPECTION AND TESTING AGREEMENT

When special inspection is required by Section 1701, the architect or engineer of record shall prepare an inspection program which shall be submitted to the Building Official for approval prior to issuance of the building permit. The special inspector shall be employed by the owner (other than owner-builder/developer), the engineer or architect of record, or an agent of the owner, BUT NOT the contractor, or any other person responsible for the work (such as an owner-builder/developer).

The special inspection firm(s) named in Part I have been authorized to perform the special inspection and testing services designated in this agreement, and in accordance with the Uniform Building Code (UBC) requirements, and to report all activities to the Building Official, and other parties as listed. It is understood that special inspections are required in addition to the normal inspections performed by the Building Inspector.

The undersigned hereby affirm, under penalty of law, that the special inspection program is in accordance with the requirements of the UBC and the City of Sacramento.

The undersigned has used all reasonable diligence in completing this form and to the best of his/her knowledge the information contained herein is true and complete. The undersigned hereby certifies under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

	SIGNATURES	PHONE NUMBER
OWNER		
ARCHITECT		
ENGINEER	<i>[Signature]</i>	916 631-3030
CONTRACTOR		
DEVELOPER		
SPECIAL INSPECTOR		

WARNING: Any person, who certifies under penalty of perjury in any case where certification is permitted by law and willfully states as true any material matter which he or she knows to be false, may be found guilty of perjury and subject to penalties which may include fines or imprisonment under the California Penal Code.

PART III • GEOTECHNICAL INSPECTION REQUIREMENTS

GEOTECHNICAL FIRM		
GEOTECHNICAL FIRM ADDRESS		PHONE NUMBER
GEOTECHNICAL ENGINEER		
REPORT NUMBER		
REPORT DATE	RECEIPT NUMBER	REVISION DATES
TYPE OF WORK		REQUIRED

SITE PREPARATION/FILL COMPACTION	
FOUNDATION OBSERVATION	
DRILLED PIERS AND CAISSONS	

IF THE EARTHWORK INSPECTION IS NOT BEING DONE BY THE ABOVE GEOTECHNICAL ENGINEERING FIRM THEN A REVISED REPORT MUST BE SUBMITTED TO AND APPROVED BY THE CITY'S DEVELOPMENT SERVICES DIVISION.

ACCEPTED FOR THE BUILDING DEPARTMENT

PLAN CHECK ENGINEER (Please Print) <i>YANG LIM</i>	
PLAN CHECK ENGINEER SIGNATURE <i>[Signature]</i>	DATE 8/9/01

INSTRUCTIONS TO THE SPECIAL INSPECTOR

- 1 - PROVIDE DAILY FIELD REPORTS TO THE BUILDING INSPECTOR ON SITE AS CONSTRUCTION PROGRESSES.
- 2 - A COPY OF ALL SPECIAL INSPECTIONS LABORATORY REPORTS SHALL BE SENT TO THE PLAN CHECK ENGINEER IDENTIFIED ABOVE AND THE ARCHITECT OR ENGINEER OF RECORD.
- 3 - UPON COMPLETION OF SPECIAL INSPECTIONS AND TESTING WORK, PROVIDE THE CITY'S PLAN CHECK ENGINEER WITH A FINAL SPECIAL INSPECTIONS TEST REPORT, WET STAMPED AND SIGNED BY THE RESPONSIBLE



CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
 1231 I STREET, ROOM 200, SACRAMENTO, CA 95814

Prior to issuance of a permit, the applicant shall complete Part I of this form. Part II and Part III shall be completed by the project Architect/Engineer and the Development Services Department as a part of the plan review process. Before permit issuance all parties must sign this agreement. Please note that failure to comply with special inspection requirements could be expensive in terms of retrofit design and construction as well as delays in the project.

PART I • SPECIAL INSPECTION AND TESTING AGREEMENT

PROJECT NAME Sasco Warehouse
 PROJECT ADDRESS 135 Main Avenue, Sacramento, CA 95838
 PLAN REVIEW NUMBER _____
 PERMIT NUMBER _____
 OWNER'S NAME _____
 OWNER'S ADDRESS _____
 OWNER'S REPRESENTATIVE _____ PHONE NUMBER _____

TESTING/INSPECTION FIRM(S) ITEMS
 1 WALLACE-KUHL & ASSOCIATES
3050 INDUSTRIAL BOULEVARD WEST SAC, CA 95691

CONTACT PERSON: _____
 2 _____

CONTACT PERSON: _____

PART II • SPECIAL INSPECTION AND TESTING AGREEMENT • INSPECTION REQUIRED

In accordance with Chapter 17 Section 1701 of the UBC, as adopted by this jurisdiction, SPECIAL INSPECTION is required as noted below:

PRECONSTRUCTION MEETING () REQUIRED () WAVED

CODE SECTION	TYPE OF WORK	CONTINUOUS	PERIODIC
1701.5.1	CONCRETE	XX	
1701.5.2	BOLTS INSTALLED IN CONCRETE		XX
1701.5.3	SPECIAL MOMENT - RESISTING CONCRETE FRAME		
1701.5.4	REINFORCING STEEL AND PRESTRESSING STEEL TENDONS		XX
1701.5	STRUCTURE WELDING		
1701.5.1	GENERAL		
	FIELD STRUCTURAL WELDING		XX
	SHOP STRUCTURAL WELDING (REQUIRING SPECIAL INSPECTION)		XX
1701.5.2	SPECIAL MOMENT - RESISTING STEEL FRAMES		
1701.5.3	WELDING OF REINFORCING STEEL		XX
1701.5.6	HIGH STRENGTH BOLTING		
1701.5.7	STRUCTURAL MASONRY		
1701.5.8	REINFORCED GYPSUM CONCRETE		
1701.5.9	INSULATING CONCRETE FILL		
1701.5.10	SPRAY APPLIED FIREPROOFING		
1701.5.11	PILING, DRILLED PIERS AND CAISSONS		
1701.5.12	SHOTCRETE		
1701.5.13	SPECIAL GRADING, EXCAVATION & FILLING		
1701.5.14	SMOKE CONTROL SYSTEM		
1701.5.15	SPECIAL CASES		
1702	STRUCTURAL OBSERVATION PER SECTION 307 REQUIRED: () YES (X) NO		

SCC 9.26.1004 FLOOD PROOFING INSPECTION & CERTIFICATION

OTHER: _____

SPECIAL INSTRUCTIONS: _____

REVISION ON ACTIVE PERMIT

NEW PLAN CHECK NO#: 0111852
 OLD PLAN CHECK NO#: 0110170

DATE: 9/13/01

This sheet is to be used only when a permit has been issued, is still active, and the applicant wishes to make changes to the existing approved plans.

All revisions clouded? YES _____ NO _____

JOB ADDRESS 135 MAIN AVE. SUITE — PERMIT NO ~~0111852~~
~~0110170~~ 0110170

AREA: _____ DBA: _____

DESCRIPTION OF REVISIONS PLUMBING UNDERGROUND, STRUCTURAL
REVISIONS FOR FOUNDATION ONLY

DISCIPLINE	(B)	L	(P)	M	E	F	S	R	D
CHECKED BY	JT								
ROUTE TO									
CODE	13								
HOURS SPENT	1.0								

CONTACT: GARY ROBERTS

ADDRESS: 1512 14TH STREET
SACRAMENTO, CA 95814

PHONE#: 498-7900

OF PLANS SUBMITTED 2 SUBMITTED TO Ben

I understand that I am responsible for all plan check fees that I incur during the course of this additional plan check and that any approved plans not claimed and paid for within 3 months of notification will be disposed of and an invoice procedure for the amount due will be initiated. I further understand that an unclaimed revision may result in delay of final approval for the subject project.

Gary Roberts 9/13/01
 Applicant signature Date

DATE NOTIFIED	PLAN BIN

APP FEE	PAID
pc =	85 ⁰⁰

AGENCY	TOTAL HRS	TOTAL FEES
BLDG		
PW		
PLEASE PAY THIS AMOUNT		