

CITY OF SACRAMENTO

Permit No: 9812501

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 770 L ST SAC

Sub-Type: NOTHR

Parcel No: 0060153015

Housing (Y/N): N

CONTRACTOR

CHATCO INC
5000 E SECOND ST
BENEVIA 94510

OWNER

CITY CENTRE PARTNERS, AN ILLINOIS GEN PAR
1717 I ST
SACRAMENTO CA 95814

ARCHITECT

Nature of Work: INSTALL NEW 26 TON AC UNIT UPGRADING SYSTEM

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 N/A 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 624485 Date 1-6-99 Contractor Signature Tom Malen

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 1-6-99 Applicant/Agent Signature Tom Malen

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.

X 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 UNITED PACIFIC INS. CO. Policy Number 18773.641 Exp Date 07/01/1999

(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 1-6-99 Applicant Signature Tom Malen

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
APPLICATION FOR [REDACTED] BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

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

PLAN CHECK # 1812501 **Insp. Area** _____

Applicant MUST complete ALL Unshaded areas this page only

ADDRESS 770 "L" ST. SACRAMENTO CA 95814 **Suite** 100
PARCEL # 006-0153-015

CONTACT Name <u>TOM MALONE / CHATCO INC</u> Address <u>5000 E. SECOND ST UNIT "G"</u> <u>BENICIA CA</u> Zip <u>94510</u> Phone <u>714 542 7500</u> FAX <u>714 542 7515</u>		LICENSED CONTRACTOR Lic No. # <u>6244851</u> Name <u>CHATCO INC</u> Address <u>5000 E. SECOND ST. UNIT "G"</u> <u>BENICIA CA</u> Zip <u>94510</u> Phone <u>707 748 0943</u> FAX <u>707 748 0946</u>	
ARCHITECT/ENGINEER Name <u>CR. CASNEY Architects</u> Address <u>2080 N. TUSTIN AVE STE B</u> <u>SANTA ANA CA</u> Zip <u>92705</u> Phone <u>714 542 7500</u> FAX <u>714 542 7515</u>		OWNER [REDACTED] Name <u>ICG TELECOM GROUP</u> Address <u>180 GRAND AVE 8TH FLOOR</u> <u>OAKLAND CA</u> Zip <u>94612</u> Phone <u>510 239 7000</u> FAX <u>510 239 7037</u>	

→ Will the permittee have any employees on the jobsite? Yes No
 → If yes, WORKER'S COMPENSATION POLICY # 18773-641 EXPIRATION DATE: 7-1-99
 NAME OF INSURANCE COMPANY: UNITED PACIFIC INSURANCE CO / PRODUCER - WESTERN ASSURANCE

NATURE OF WORK IN DETAIL: INSTALL 26 TON A/C UNIT, upgrading HVAC system for ICG str 100.

DBA: _____ **VALUATION:** 35,000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSP. DISCIPLINES			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	
				<u>B</u>	<u>IFR</u>	Spr	Alarm	<u>15</u>	<u>0</u>	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>R</u>	

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No **HEALTH DEPARTMENT?** Yes No

**CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION**

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
1st Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
/ /	/ /	/ /	/ /	/ /	/ /

PLAN CHECK # 2501
 ADDRESS: 770 L St.
 Commercial Residential

ACCEPTED by (Staff):

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY		NE							
STRUCTURAL									
MECHANICAL/PLUMBING	13	NB							
ELECTRICAL	3	JM	12/24/98	13	JM	1/6/99			
FIRE	13	JM	12/30						
PLANNING									

STAFF COMMENTS: _____

