

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0106944
Insp Area: 4

Site Address: 2525 NATOMAS PARK DR SAC
Parcel No: 274-0042-025 3RD FLOOR

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

CONTRACTOR
HARBISON-MAHONY-HIGGINS INC
8589 THYS CT
SAC CA 95828

OWNER
2525 NATOMAS INVESTORS
2525
SACRAMENTO CA 95826

ARCHITECT

Nature of Work: SOME DEMOLITIONS, NEW PARTITIONS, A FEW ELECTRICAL OUTLETS.
RELOCATE LIGHT FIXTURES AND HVAC AND SPRINKLER HEADS 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 280934 Date 6-6-01 Contractor Signature A Baker

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 6-6-01 Applicant/Agent Signature A Baker

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 INS CO OF THE STATE OF PA Policy Number 7083206/7083207 Exp Date 08/01/2003

(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 6-6-01 Applicant Signature A Baker

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.

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

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

ACTIVITY # 0106944 Insp. Area 11

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2525 Natomas Park Drive Suite 300

PARCEL # 274-042-21

CONTACT Name <u>Terry / Stafford Space Planning</u> Address <u>7585 Gold Drive, Loomis</u> Phone <u>652-3400</u> FAX <u>652-7805</u> E-mail _____		LICENSED CONTRACTOR Lic No. # <u>280934</u> Name <u>H M H</u> Address <u>20 Business Park Way</u> Phone <u>383-4825</u> FAX _____ E-mail _____	
ARCHITECT/ENGINEER Name <u>Stafford Space Planning</u> Address <u>7585 Gold Drive</u> Phone <u>652-3400</u> FAX <u>652-7805</u> E-mail _____		OWNER Name <u>Prentiss Property</u> Address <u>2485 Natomas Park Drive,</u> Phone <u>646-0760</u> FAX <u>646-3245</u> E-mail _____	

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

NATURE OF WORK IN DETAIL: some demolitions, new partitions, a few electrical outlets. Relocate light fixtures & HVAC & sprinkler head only.

OCCUPANT/TENANT: Farmers' Rice Cooperative VALUATION: \$15,000.⁰⁰ -

FLOOD STATUS:			S.C.A.T.							
JOB-DESCRIPTION		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION 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>V-I</u>	SPR	ALARM	<u>15</u>	[H]	[Quad]
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	PW	UTIL
<u>1301</u>	<u>1301</u>		<u>RM 13</u>	<u>B</u>	<u>RM 13</u>			<u>70</u>		

COMMENTS: _____

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

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: Farmers Rice Cooperative Phone: 923-5100 ^{fax} 920-3321
 Site Address: 2525 Natomas Park Dr Suite: 300
(Street) (Zip)
 Business Owner/Representative: James Dodson Phone: 923-5100
 Nature of Business: office
 Property Owner: Preuss Properties Phone: 646-0700
 Address: 2485 Natomas Park Dr Suite: 300
Sacramento Ca 95833
(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: Jill Condon
(Print)
Jill M Condon
(Signature) 6/1/01
(Date)

BID Use Only: Plan Ck# <u>0106944</u> Permit # _____ OK to issue prmt? Y <u>6-6-01</u> <small>init date</small> <u>AMF</u> D. Appr Req'd? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
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 _____	

AIR SYSTEMS of SACRAMENTO, INC

3850 Happy Lane
Sacramento, CA 95827

AIR OUTLET TEST REPORT

PROJECT Farmers Rice

SYSTEM VAVS 3rd FL.

Flow Hood

OUTLET MANUFACTURER

TEST APPARATUS

AREA SERVED	OUTLET				DESIGN		PRELIMINARY			FINAL CFM		NOT
	No.	Type	Size	AK	Max	Min	Vel or CFM	Vel or CFM	Vel or CFM	MAX	MIN	
VAV	1	SI	12		575		800	600			600	
3-2	2	SI	12		575		830	605			605	
VAV	1	SI	10		365		355				355	
3-3	2	SI	10		315		320				320	
MAX					680							
MIN												

REMARKS:

Test Date: 6/26/01

Reading By: Brad C.