

CITY OF SACRAMENTO

Permit No: 9811761

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Site Address: 8465 SPECIALTY CR SAC

Sub-Type: ACOM

Parcel No: 064-0120-009

Housing (Y/N): N

CONTRACTOR

BPI CONSTRUCTION
860 SOUTH RIVER ROAD
WESR SACRAMENTO

95691

OWNER

RICHARDSON JANNIE H
8465 SPECIALTY CR
SACRAMENTO CA

95828

ARCHITECT

Nature of Work: INTERIOR OFFICE TENANT IMPROVEMENT

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 Union Bank Lender's Address 700 L Street

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 574173 Date 9 99 Contractor Signature Tom Swellings

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 2/18/99 Applicant/Agent Signature Tom Swellings

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 REPUBLIC INDEMNITY CO. Policy Number 14033701 Exp Date 10/01/1999

(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 2/18/99 Applicant Signature Tom Swellings

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 ~~RENOVATION~~ BUILDING PERMIT

9811761

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1000 Capitol Mall, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # _____

Insp. Area 30

Applicant MUST complete ALL Unshaded areas this page only

PROJECT # 8465 SPECIALTY COURT Circle Suite _____
TEL # 064-0120-009

<p align="center">CONTACT</p> <p>Name <u>TOM SNELLINGS</u> Address <u>860 S. RIVER RD.</u> <u>WEST SACRAMENTO CA.</u> Zip <u>95691</u> Phone <u>916 373-0909</u> FAX <u>916-373-0970</u></p>		<p align="center">LICENSED CONTRACTOR Lic No. # <u>574-123</u></p> <p>Name <u>BPI</u> Address <u>860 S. RIVER RD.</u> <u>WEST SACRAMENTO, CA.</u> Zip <u>95691</u> Phone <u>916 373-2522</u> FAX <u>916-373-0970</u></p>	
<p align="center">ARCHITECT/ENGINEER</p> <p>Name <u>JEFF SOWELL</u> Address <u>860 S. RIVER ROAD</u> <u>WEST SACRAMENTO, CA</u> Zip <u>95691</u> Phone <u>916 373-0888</u> FAX <u>916-373-0970</u></p>		<p align="center">OWNER <u>7551 14TH AVENUE, STE. A</u></p> <p>Name <u>JOHN PROCIDA</u> Address <u>8465 SPECIALTY COURT</u> <u>SACRAMENTO</u> Zip <u>95820</u> Phone <u>457.0583</u> FAX _____</p>	

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

→ If yes, WORKER'S COMPENSATION POLICY # 00190609 EXPIRATION DATE: 1/01/99

NAME OF INSURANCE COMPANY: REPUBLIC INDEMNITY CO. OF AMER.

NATURE OF WORK IN DETAIL: TENANT IMPROVEMENT - OFFICE SPACE
WITHIN TILT-UP CONCRETE STRUCTURE in Warehouse
Office Tenant Improvement INTERIOR ONLY
(Landscaping Co) INT SITE TIME F.V. 3579 SF area of work

DBA: JOHN PROCIDA VALUATION: 75,000

FLOOD STATUS: <u>NA</u>		S.C.A.T. _____								
JOB DESCRIPTION		BLDG	SHEL	APT	TI <u>(7)</u>	REM()	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>			<u>SITE</u>	<u>FIRE</u>	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
		<u>3359</u>		<u>B/5-3</u>	<u>TH</u>	Spr <u>Y</u> Alarm _____		<u>15</u>		
B	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>R</u>	
								<u>10/11</u>		

COMMENTS: WD FINISH SCHEDULE
(2) TYPICAL FULL HT & INT PARTITION CONST DETAILS
Must be approved by Planning before start work

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
1	1	2	8/19/99	1	1

PLAN CHECK # 92-11761
 ADDRESS: 2025 S. BROADWAY
 Commercial Residential



ACCEPTED by (Staff):


DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Status	Staff	Date	Status	Staff	Date	Status	Staff	Date
LIFE SAFETY	13	GYL	2/10/99						
STRUCTURAL									
MECHANICAL/PLUMBING	13	JMT	2/10/99						
ELECTRICAL									
FIRE									
PLANNING									

STAFF COMMENTS:
 Pulled From Standard PC and put into express
 per GYL & JMT. W/PLB 2-8-99

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

Project Address: 8465 SPECIALTY ~~COURT~~ CR

Assessor's Parcel Number: 064 · 0120 · 009

Current Land Use: Ware house

Description of Request/Proposed Use: _____

divide part off for tenant space
(check 25% office)

Zoning Designation: M2 · S

Prior Applications for Project Site(P#,Z#,DRPB#): 298-138

Comments: Proposed T.F. exceeds
25% office zoning Admin.
Spec Permit is in process
(site plan ck. to verify conditions
when approved.)

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: W. Stearn 12/4/98

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

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: PROCLIDA LANDSCAPE Phone: 457-0583
 Site Address: 8465 SPECIALTY CIRCLE Suite: _____
 Business Owner/Representative: JOHN PROCLIDA (Street) (Zip) Phone: 457-0583
 Nature of Business: LANDSCAPE CONTRACTOR
 Property Owner: JOHN PROCLIDA Phone: 457-0583
 Address: 7551 14TH AVE Suite: A
SACRAMENTO (City) CA (State) 95820 (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: Tom Swollings
Tom Swollings (Print) 2/18/99 (Date)
Tom Swollings (Signature)

BID Use Only: Plan Ck# <u>9811761</u> Permit # <u>9811761</u> OK to issue prmt? Y <input checked="" type="checkbox"/> F.D. Appr Req'd? <input checked="" type="checkbox"/> Yes No W.S.H. <u>2-18-99</u> date 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 _____	

POST THIS CARD IN A CONSPICUOUS PLACE!

SACRAMENTO CITY FIRE DEPARTMENT

1231 I STREET, SUITE 401
SACRAMENTO, CA 95814-2979

FIRE PREVENTION DIVISION
INSPECTION SERVICES

FOR INSPECTIONS _____ CALL (916) 264-5480

NOTICE OF 48 HOURS REQUIRED FOR INSPECTIONS

PERMIT # 98-09273C APPROVED BY J Feld
PROJECT Fire Alarm & Monitoring System
ADDRESS 8465 Specialty Cr
OWNER John Plocida

NOTE

- 1) DO NOT COVER WALLS, CEILINGS OR PIPING UNTIL THE FOLLOWING ITEMS ARE SIGNED OFF.
- 2) ALL WEATHER EMERGENCY ACCESS ROADWAYS AND FIRE HYDRANTS (IN SERVICE) SHALL BE PROVIDED PRIOR TO ANY COMBUSTIBLE CONSTRUCTION OR STORAGE ON SITE.

SITE

INSPECTIONS	INITIALS	DATE
▶ UNDERGROUND WATER MAINS/THRUST BLOCKS		
▶ HYDROSTATIC TEST OF WATER MAINS		
FLUSHING OF WATER MAINS		
REFLECTIVE MARKERS		
PAINTING OF EQUIPMENT		
MARKING OF FIRE LANES		
ADDRESS POSTED		
EMERGENCY ACCESS KEY BOX (KNOX)		
FIRE HYDRANTS		

FIRE & LIFE SAFETY

EXTING SYSTEMS		
FIRE DOORS		
SMOKE VENTING		
HIGH PILED STOCK		
FLAMMABLE LIQUIDS		
HAZARDOUS MATERIALS		
SPECIAL HAZARDS		
INTERIOR FINISH		
POSTED SIGNS FOR OCCUPANT LOAD		

EQUIPMENT

▶ FIRE SPRINKLER WELDED OUTLETS		
▶ FIRE SPRINKLER SYSTEM PIPING		
▶ FIRE SPRINKLER HYDROSTATIC TEST		
▶ STANDPIPES		
▶ FIRE ALARMS/TESTING CONTRACT	<u>J Plocida</u>	<u>4-8-99</u>
KITCHEN HOOD & DUCT SYSTEM		
SPECIAL EXTINGUISHING SYSTEM		
FIRE EXTINGUISHERS		
PRIVATE WATER SYSTEM		

SPECIAL REQUIREMENTS

FINAL APPROVAL

APPROVED FIRE FLOW		
OCCUPANCY GRANTED/ED. APPROVAL	<u>J Plocida</u>	<u>4-8-99</u>

NOTICE:

FAILURE TO COMPLY WITH AN ORDER OF THE FIRE DEPARTMENT MAY RESULT IN THE ISSUANCE OF A CITATION AND/OR DISCONTINUED USE OF THE BUILDING OR PREMISES
1994 UPC SECTIONS 103.4.3.1, 103.4.3.2, 103.4.4

KEEP THIS CARD FOR REFERENCE
THIS IS YOUR RECORD OF FIELD INSPECTIONS

POST THIS CARD IN A CONSPICUOUS PLACE!

SACRAMENTO CITY FIRE DEPARTMENT
 1231 I STREET, SUITE 401
 SACRAMENTO, CA 95814-2979
FIRE PREVENTION DIVISION
INSPECTION SERVICES

FOR INSPECTIONS ----- CALL (916) 264-5480

NOTICE OF 48 HOURS REQUIRED FOR INSPECTIONS

PERMIT # 98-11761C APPROVED BY BJ FOSTER
 PROJECT 8465 SPECIALTY CIRCLE
 ADDRESS PRUCIDA LANDSCAPE
 OWNER JOHN PRUCIDA

NOTE

- 1) DO NOT COVER WALLS, CEILINGS OR PIPING UNTIL THE FOLLOWING ITEMS ARE SIGNED OFF.
- 2) ALL WEATHER EMERGENCY ACCESS ROADWAYS AND FIRE HYDRANTS (IN SERVICE) SHALL BE PROVIDED PRIOR TO ANY COMBUSTIBLE CONSTRUCTION OR STORAGE ON SITE.

SITE

INSPECTIONS	INITIALS	DATE
▶ UNDERGROUND WATER MAINS/THRUST BLOCKS		
▶ HYDROSTATIC TEST OF WATER MAINS		
FLUSHING OF WATER MAINS		
REFLECTIVE MARKERS		
PAINTING OF EQUIPMENT		
MARKING OF FIRE LANES		
ADDRESS POSTED		
EMERGENCY ACCESS KEY BOX (KNOX)		
FIRE HYDRANTS		

FIRE & LIFE SAFETY

EXITING SYSTEMS		
FIRE DOORS		
SMOKE VENTING		
HIGH PILED STOCK		
FLAMMABLE LIQUIDS		
HAZARDOUS MATERIALS		
SPECIAL HAZARDS		
INTERIOR FINISH		
POSTED SIGNS FOR OCCUPANT LOAD		

EQUIPMENT

▶ FIRE SPRINKLER WELDED OUTLETS		
▶ FIRE SPRINKLER SYSTEM PIPING	<u>BJ Foster</u>	<u>4-7-99</u>
▶ FIRE SPRINKLER HYDROSTATIC TEST		
▶ STANDPIPES		
▶ FIRE ALARMS/TESTING CONTRACT		
KITCHEN HOOD & DUCT SYSTEM		
SPECIAL EXTINGUISHING SYSTEM		
FIRE EXTINGUISHERS		
PRIVATE WATER SYSTEM		

SPECIAL REQUIREMENTS

FINAL APPROVAL

APPROVED FIRE FLOW		
OCCUPANCY GRANTED/F.D. APPROVAL	<u>BJ Foster</u>	<u>4-7-99</u>

NOTICE:
 FAILURE TO COMPLY WITH AN ORDER OF THE FIRE DEPARTMENT MAY RESULT IN THE
 ISSUANCE OF A CITATION AND/OR DISCONTINUED USE OF THE BUILDING OR PREMISES.
 1994 UFC SECTIONS 103.4.3.1, 103.4.3.2, 103.4.4.

KEEP THIS CARD FOR REFERENCE
THIS IS YOUR RECORD OF FIELD INSPECTIONS

MEMORANDUM

Sacramento Fire Department

To: BUILDING DEPARTMENT

Date: 4-7-99

From: Gordon Duncan,
Fire Marshal

Subject: **FIRE SYSTEM INSPECTION**

A final inspection of the newly installed fire system at:

8465 SPECIALTY Ctr

has been conducted by Inspector F. JOHNSON

on 4-7-99.

98-11761-C

Permit Number

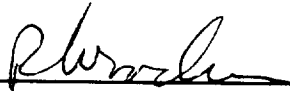
3,800

Square Footage

OH SPL

Type Inspection

The system is acceptable by this department.


By: Ross L. Woodman,
Fire Prevention Officer II

98-392
F. D. Reference Number

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address

8465 SPECIALTY CIRCLE

Permit No.

98-11761/98-02343

Building Use

New #Bell/office TI DMX Proclida Landscape

Occupancy

SI/B

Building Owner

John Proclida

Construction Type

7551-N

Owner Address

7551-A 14th Aven., Sacro., CA

Sprinkled Yes () No

Portion of Building Occupied

100%

Area

3,359

Sq. Ft.

04/09/99

RON PECCI

Date Issued

By-Print

Sign

City/Building Official

CHIEF BUILDING INSPECTOR

Wilhelm/McDonald/Rodgerie/Waskle/Johnson/Magner

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code as adopted per Title 9 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval and use for which the Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation of any not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE