

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0011784
Insp Area: 4

Site Address: 2901 TRUXEL RD SAC
Parcel No: 225-0230-070 AND 2921 TRUXEL RD

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

CONTRACTOR
TURNER CONSTRUCTION COMPANY
1450 HARBOR BL SUITE A
WEST SACRAMENTO, CA 95691

OWNER

ARCHITECT
CITY OF SACRAMENTO

Nature of Work: NEW COMMUNITY CENTER & LIBRARY

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 210639 Date 3-29-01 Contractor Signature [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 & 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 3-29-01 Applicant Agent Signature [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 LIBERTY MUTUAL Policy Number WC2-621-004321011 Exp Date 01/01/2002

_____, (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 3-29-01 Applicant Signature [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.

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 # 0011784	Insp. Area 4
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2901 TRUXEL RD. SAC. CA. Suite _____
 PARCEL # 225-0570-049 225-0230-070

<p style="text-align: center;">CONTACT</p> <p>Name <u>JEFF BLANTON (CITY OF SACRAMENTO)</u> Street Address <u>927 10TH ST.</u> City/State/Zip <u>SACRAMENTO, CA. 95814</u> Phone <u>244-8423</u> FAX <u>244-8337</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>210639 AB</u></p> <p>Name <u>TRENTER CONSTRUCTION</u> Address <u>1450 HARBOR BLVD. SUITE A</u> City/State/Zip <u>W. SAC. SUITE A</u> Phone <u>372-9500</u> FAX <u>372-9655</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>BSA ARCHITECTS - MARK SCHWIZ</u> Address <u>350 PACIFIC AVE</u> City/State/Zip <u>SAN FRANCISCO, CA. 94111</u> Phone <u>415-781-1524</u> FAX <u>415-982-1551</u> E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>CITY OF SACRAMENTO</u> Address <u>927 10TH ST. SUITE 200</u> City/State/Zip <u>SACRAMENTO CA. 95814</u> Phone <u>264-8423</u> FAX <u>264-8337</u> E-mail: _____</p>

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

NATURE OF WORK IN DETAIL: 17,435 # FT. COMMUNITY CTR. & 13,500 # LIBRARY BUILDING ONLY FOUNDATION ALREADY PERMITTED #006903
PHASE I ONLY

OCCUPANT/TENANT: CITY STAFF LIBRARY COMMUNITY VALUATION: \$ 5. MILLION

FLOOD STATUS: <input checked="" type="checkbox"/>		S.C.A.T. XI.11, XI.12, XI.16, XI.17, XI.20, XI.27								
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>15615</u> <u>17150</u>		<u>A-3</u>	<u>V-1</u>	SPR	ALARM	<u>08</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>	<u>PW</u>	<u>UTIL</u>	<u>SMR</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: CITY OF SACRAMENTO Phone: 916-497-7233
Site Address: 2901 Truxel Rd. Suite: _____
(Street) (Zip)
Business Owner/Representative: Jeff Blanton Phone: 916-497-9227
Nature of Business: Community Center + Library
Property Owner: CITY OF SACRAMENTO Phone: _____
Address: _____ Suite: _____
(Street) (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: JEFF BLANTON (Print)
(Signature) (Date) 5-29-01

BID Use Only: Plan Ck# 1117 Permit # _____
OK to issue prmt? Yes F.D. Appr Req'd? Yes No
init date _____
Hold on Certificate of Occupancy? Yes No
Fire Dept. Use Only:
OK to issue permit? init _____ date _____
OK to issue Certificate of Occupancy? init _____ date _____

Date of Request: _____

By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: 2901 Troxel Rd

Assessor's Parcel Number: 225-0570-049, 225-0230-070

Previous Use: Vacant

Description of Request/Proposed Use: Community Ctr + Library

Is This a Change of Use? _____

Zoning Designation: _____

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: _____

City Project OK

Are There Any Planning Issues?: (circle one) YES NO

* Staff Site Plan Check Required? (Circle one) YES NO

* Field Inspection Required? (Circle one) YES NO

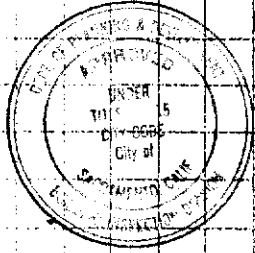
* Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: [Signature]

10-3-00

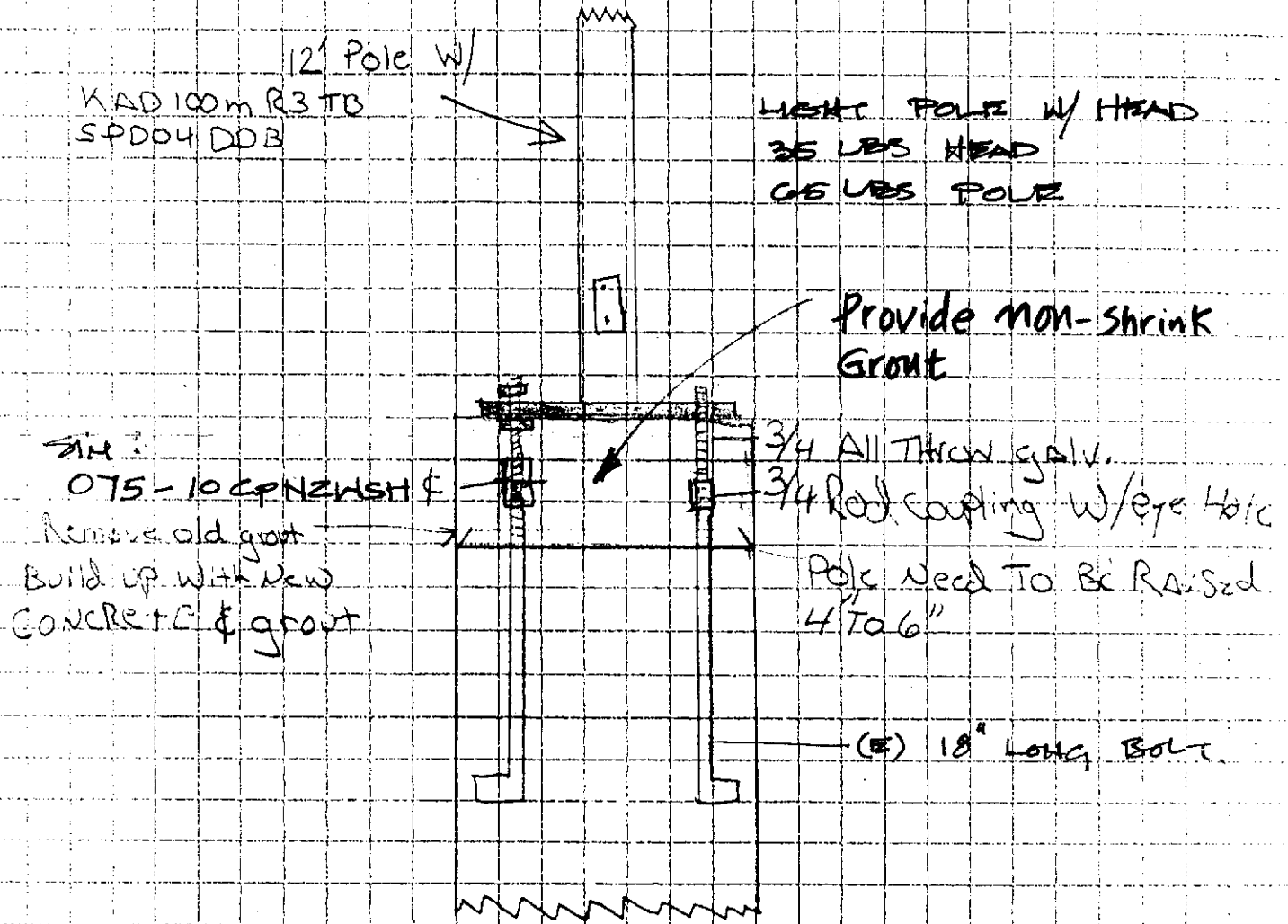
A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.
 The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

ISSUED
 9/24/01
 Sacramento Building Inspection Division



NOT TO SCALE

John Jones
 9/24/01

Permit No. 2011784c
 Address: 2901 TRUXEL Rd.

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 9-19-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2901 TRUKEL Rd

Has been conducted by Inspector

PACK

On

8-7-01

0011784
Permit Number

Square Footage

O.H. SPRINKLER
Type of Inspection

They system is acceptable by this department.

R. Johnson
By: Ross L. Woodman,
Fire Prevention Officer II

✓

00-581
F.D. Reference Number

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 9-19-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2901 Truxel Rd

Has been conducted by Inspector

Bodick

On

9-13-01

00-11784
Permit Number

0
Square Footage

F.A.
Type of Inspection

They system is acceptable by this department.

R. Woodman
By: Ross L. Woodman,
Fire Prevention Officer II

00.551
F.D. Reference Number