

Permit No: 0114900

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Thos Bros: 318 D2

Sub-Type: TI

Housing (Y/N): N

ARCHITECT

OWNER GRANITE CONSTRUCTION(GRA)

CONTRACTOR PANATONI CONSTRUCTION INC

8745 FOLSOM BL

SACRAMENTO CA

00000

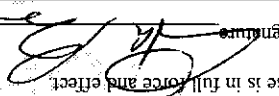
SAC CA 95826

Nature of Work: TENANT IMPROVEMENT 1ST AND 2ND FLOOR.

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 759899 Date 10/1/02 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 3 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 Professions 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.)

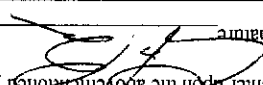
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s)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

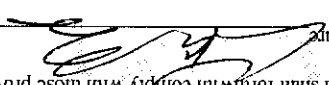
Date 2/13/02 Applicant/Agent Signature 

WORKERS' 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 STATE COMPENSATION INS FUND Policy Number 713-6577-001 Exp Date 10/01/2002

(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 2/13/02 Applicant Signature 

WARNING: FAILURE TO SECURE WORKERS' 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

30 DAY TEMPORARY
Certificate of Occupancy

For Information Contact (916) 264-5716

Building Address: 3701 POWER INN RD Permit No. 0114900

Building Use: OFFICE Occupancy: B

Building Owner: GRANITE REGIONAL PARTNERS Construction Type: II-FR

Owner Address: SACRAMENTO, CA Sprinkled? [X] Yes [] No

Portion of Building Occupied: 1ST & 2ND FL Area: _____ Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

6/13/02

Date

Willie Harris

By:Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[TCO approvals:DB,LLS,CP,KR]

BC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 3701 POWER INN RDD Permit No. 0114900

Building Use: OFFICE Occupancy: B

Building Owner: REGIONAL PARK GEN. PART. Construction Type: II-FR

Owner Address: SACRAMENTO, CA Sprinkled? Yes No

Portion of Building Occupied: 1ST & 2ND FL Area: 101333 Sq. Ft.

9/23/02 Carl Heffner Dennis Richardson
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By:DPB,LLS,KR,CP]

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 15 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 of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall 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

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>0114900</u>	Insp. Area <u>3C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3151 Power Inn Road Suite 1ST & 2ND FLOOR
 PARCEL # 079-0291-004

CONTACT Name <u>Pam Brown / Panattoni Constr</u> Street Address <u>8745 Folsom Blvd #150</u> City/State/Zip <u>Sac CA 95826</u> Phone <u>(916) 340-2400 ext 423</u> FAX <u>(916) 340-0565</u> E-mail: <u>pjb@panconinc.com</u>		LICENSED CONTRACTOR Lic No. # <u>759899</u> Name <u>Panattoni Constr Inc</u> Address <u>8745 Folsom Blvd #150</u> City/State/Zip <u>Sacramento CA 95826</u> Phone <u>(916) 340-2400 ext 423</u> FAX <u>(916) 340-0565</u> E-mail: <u>pjb@panconinc.com</u>	
ARCHITECT/ENGINEER Name <u>EM Kado</u> Address <u>1661 Garden Highway</u> City/State/Zip <u>Sac CA 95833</u> Phone <u>(916) 921-1661</u> FAX <u>(916) 921-1839</u> E-mail:		OWNER Name <u>Granite Regional Partners</u> Address <u>3221 Power Inn Road #100</u> City/State/Zip <u>Sac CA 95826</u> Phone <u>(916) 736-9000</u> FAX <u>(916) 736-6979</u> E-mail:	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Fund
 → WORKER'S COMPENSATION POLICY # 713-6577-00 EXPIRATION DATE: 10/1/02

NATURE OF WORK IN DETAIL: Tenant Improvement 1st & 2nd Floor

SPECIAL Conditions: 200

OCCUPANT/TENANT: _____ * VALUATION: \$ 3,546,655

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>		SITE	<u>FIRE</u>		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req <u>N</u>		Fed Code	Vio. File	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>B</u>	<u>11-FR</u>	<u>SPR</u>	ALARM	<u>15</u>	[H]	[Quad]
				<u>E</u>	<u>F</u>		S	<u>D</u>	PW	UTIL
								<u>FR</u>		

COMMENTS: _____

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



File Copy

Insp. Area _____

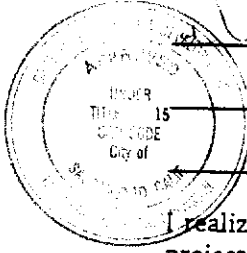
AUTHORIZATION TO START WORK

CITY OF SACRAMENTO, BUILDING INSPECTIONS DIVISION
1231 I ST., ROOM 200, SACRAMENTO, CA 95814

Company: Panation Construction Inc. PC # 0114900
Address: 3451 Power Inn Road 8745 Folsom Blvd - 150 BID App. _____
Job Phone: (916) 416-0680 Office Ph. (916) 340-2400 Fee 350⁰⁰
SUBJECT: Project Address: 3451 Power Inn Road Suite # _____



I request permission to start the following work frame rough HVAC plant



I realize that all work will be at the owner's and contractor's risk without assurance that the permit for the project will be granted. Any code conflicts will be corrected. I agree not to cover or conceal any work or portion thereof. I realize that inspections will not be made on this project until a building permit is issued. All changes required to conform to the approved plans will be completed without dispute. Work affecting the structural integrity of the existing building is not permitted.

I will expedite necessary revisions, corrections and clarifications as required to obtain the building permit.

If it should be determined subsequently by the City that changes in the design of the building are necessary after commencement of the work authorized, I assume full responsibility and all risk of loss which may result by reason of such changes. I agree that the building shall conform to the approved final plans as amended, without regard to the stage of completion.

This authorization is valid for 30 days while the plans are being processed for permit. These state required declarations must be properly executed before this authorization is valid. This authorization is valid when initialed by authorized Building Department personnel and stamped approved. Keep posted on job site at all times.

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 _____

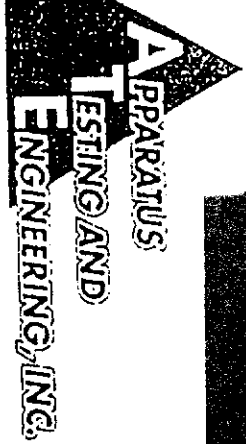
Lender's Address _____

LICENSED CONTRACTORS DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of the Business and Professions Code and my license is in full force and effect.

Lic. Class: B Lic. Number: 759899
[Signature]
SIGNATURE

Panation Construction
COMPANY NAME
1-11-02
DATE



SACRAMENTO (916)853-6280 • LIVERMORE (925)454-1363



FULL MEMBER

GROUND FAULT SYSTEM TEST REPORT-1

CUSTOMER: <u>GATJENSEN</u>		LOCATION: <u>3451 Power Ln</u>		JOB NO.: <u>S-6301</u>
SWGR. PNL IDENTIFICATION: <u>3000A MAIN SWBD</u>		TEST EQUIPMENT USED: <u>MULTI-AMP MS-2/CB-845</u>		DATE: <u>4/2/02</u>
GROUND FAULT INFORMATION		ELECTRICAL TEST DATA		TESTED BY: <u>LM</u>
MFG. <u>GE</u>	TYPE <u>MVT-1</u>	RELAY PICKUP		<u>933</u> AMPS
CAT. NO. <u>C330L1G</u>		RELAY TEST AT 150%		<u>0.27</u> SECONDS/RESETS
RANGE <u>600-1110</u> AMPS	<u>1-3 5/10 TIME BAND</u>	RELAY TEST AT 90% <u>300%</u>		<u>0.27</u> SECONDS/RESETS
CONTROL VOLTAGE <u>N/A</u>		RELAY TRIP AT 57% CONTROL VOLTS		<input checked="" type="checkbox"/> NOT APPLICABLE
TRANS KVA. <u>N/A</u>		NEUTRAL INSULATION RESISTANCE	<input checked="" type="checkbox"/> ACCEPTABLE	NOT APPLICABLE
SYSTEM CONFIGURATION		MONITOR PANEL OPERATION	<input checked="" type="checkbox"/> ACCEPTABLE	NOT APPLICABLE
<input checked="" type="checkbox"/> RESIDUAL	ZERO SEQ.	NEUTRAL SENSOR POLARITY	<input checked="" type="checkbox"/> ACCEPTABLE	NOT APPLICABLE
BREAKER/SWITCH INFORMATION		VISUAL INSPECTION		
MFG. <u>GE</u>	TYPE <u>Passenger</u>	NEUTRAL GROUND LOCATION	<input checked="" type="checkbox"/> ACCEPTABLE	NOT ACCEPTABLE
STYLE NO. <u>TP3030TR</u>		NEUTRAL LINK ACCESSIBILITY	<input checked="" type="checkbox"/> ACCEPTABLE	NOT APPLICABLE
RATING <u>3000</u> AMPS	<u>600</u> VOLTS	SENSOR MOUNTING	<input checked="" type="checkbox"/> ACCEPTABLE	NOT APPLICABLE
GROUND FAULT SYSTEM SETTINGS (1)				
CURRENT <u>900</u> AMPS				
TIME <u>2 OUT TIME BAND</u>				
REMARKS (1) SETTINGS ARE FOR TESTING PURPOSES ONLY. PROJECT ENGINEER SHOULD DETERMINE FINAL SETTINGS.				