CITY OF SACRAMENTO 1231 I Street, Sacramento, CA 95814

Permit No: 0310678

Insp Area: Thos Bros:

298 C5

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Site Address: 391 HOWE AV SAC

Parcel No: 295-0402-001

Sub-Type:

REM

CONTRACTOR

OWNER

Housing (Y/N): N

HOLLAND CONST. 4712 DICKENS DR GRANITE BAY CA 95746

GIANULIAS INVESTMENTS 2264 FAIR OAKS BLVD #100 SACRAMENTO CA 95825

<u>ARCHITECT</u>

Nature of Work: INT OFFICE REMODEL 1ST FLOOR	
CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that the work for which this permit is issued (Sec. 3097, Civ. C).	here is a construction lending agency for the performance of
Lender's NameLender's Address	
LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of (commencing with section 7000) of Division 3 of the Business and Professions Code and my licens License Class Date Contractor Signature Contractor Signa	perjury than I am/licensed under provisions of Chapter 9 te is in full force and effect.
OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to prior to its issuance, also requires the applicant for such permit to file a signed statement that he or License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit su hundred dollars (\$500.00);	construct, alter, improve, demolish, or repair any structure, she is licensed pursuant to the provisions of the Contractors essions Code) or that he or she is exempt therefrom and the
I, as a owner of the property, or my employees with wages as their sole compensation, will sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to who does such work himself or herself or through his/her own employees, provided that such improvement is sold within one year of completion, the owner-builder will have the purpose of sale.)	an owner of property who builds or improves thereon, and overneuts are not intended or offered for sale. If, however,
I, as owner of the property, am exclusively contracting with licensed contractors to construct The Contractors License Law does not apply to an owner of property who builds or improves there licensed pursuant to the Contractors License Law).	on, and who contracts for such projects with a contractor(s)
I am exempt under Sec. B & PC for this reason:	CITY OF SACRAMENTO
DateOwner Signature	SEP 0 8 2003
IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the remeasurements and locations shown on the application or accompanying drawings and that the in private agreement relating to permissible or prohibited locations for such improvements. This buimprovement or the violation of any private agreement relating to location of improvements.	nprovement to be constructed does not violate any law or ilding permit does not authorize any illegal location of any
I certify that I have read this application and state that all information is correct. I agree to deputy building construction and herby authorize representative(s) of this city to enter upon the above mention of the property of the prope	
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of per I have and will maintain a certificate of consent to self-insure for workers' compensation a performance of work for which the permit is issued.	Jury one of the following declarations: s provided for by Section 3700 of the Labor Code, for the
I have and will maintain workers' compensation insurance, as required by Section 3700 of this permit is issued. My workers' compensation insurance carrier and policy number are:	he Labor Code, for the performance of the work for which
Carrier NO EMPLOYEES Policy Number	Exp Date
(This section need not be completed if the permit is for \$100 or less) I certify that in the permote employ any person in any manner so as to become subject to the workers' compensation laws of workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith a pmply with the permote that the permote in the permote subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith a pmply with the permote subject to the workers' compensation laws of workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith a pmply with the permote subject to the workers' compensation laws of wo	f California and agree that if I should become subject to the
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLA CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOL COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR COD	AWFUL AND SHALL SUBJECT AN EMPLOYER TO LARS (\$100,000) IN ADDITION TO THE COST OF E INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

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CITY OF SACRAMENTO

130 DAY TEMPORARY Certificate of Occupancy

For Information Contact (916) 264-5716

Building Address:	391 HOWE AV	Permit No.:	0310678
Building Use:	OFFICE 1 ST FL	Occupancy	B
Building Owner:	GIANULIAS INVESTMENTS	Construction Type:	VN
Owner Address:	SACRAMENTO, CA	Sprinkled? [] Yes	[X] No
Portion of Building Specific purpose	Occupied: REMODEL for temporary occupancy and/or	Area: 3954 conditions/limitations of ten	Sq. Ft.
occupancy:			
10/7/03	Jesei Just	LO DENNIS RICI	
Date By:	An after	CHIEF BUILDING	G OFFICIAL

CBC 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: 391 HOWE AV	Permit No.: 0310678
Building Use: OFFICE DBA: ALLIANCE TITLE	Occupancy: B
Building Owner: GIANULIAS INVESTMENTS	Construction Type: _VN
Owner Address: SACRAMENTO, CA	Sprinkled? [X] Yes [] No
Portion of Building Occupied: 1 ST FL REMODEL	Area: 3954 Sq. Ft.
12/4/03	DENNIS RICHARDSON
Date By: (Print) Sign	CHIEF BUILDING OFFICIAL

[Finaled By: DSP,DJP,KR,JI]

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 Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

APPLICATION FOR COMMERCIAL BUILDING PERMIT

PERMIT SE	G DIVIS	SECTION			·		VITY #) 7	Insp.	Area
NORTH OFFICE	2101 Aren Sacrament 1231 I Str	a Blvd., Ste. 2 to, CA 95834 eet, Rm. 200	(916) 808-2		808-7046			/ ف	8	
^ •••	Sacrament	io, CA 95814	(916) 808-2	534 FAX	264-5987			Applicant ALL Un	MUST c shaded o	omplete Treas
ADDRESS 3	391 -	HONE	AN	•			C 1 (
PARCEL# 295-040001 Suite 15-4 FLOOR										
Name Street Address 44 City/ State/ Zip 65 Phone 1657 E-mail:	12	ONTACT CHENS CHENS FAX 91	DR. 1078914	84	LICENSED CO Name + Address Address City/ State/ Zip Phone 11 a C	AND 12- 12-An		ic No.# 7	533.F. 76714	164
Name	16 FI 2 754	ECHENGINER ECHE AL AL GE SE FAX GE FAX	ANE - 5819 104532	###	Name DUS (Address Zip	JIA AC		<u> </u>	Page	INERS
Will permitte WORKER'S	e have any <u>er</u> S COMPENS	mployees on the	e jobsite?	No ☐ Ye	s → INSURA		D:	DATE:	·	
NATURE OF	WORK IN D	ETAIL: B	und (DUT Sem	OFFICE	<u> </u>	PNE	0 13	FL.	

OCCUPANT/I	ENANT:	LIANCE T	me Co)		V/	ALUATION	\$ 950	DDD	
LOOD STATE	JS:			S.C.A.T.						
OB DESCRIP	TION	BLDG ;	SHELL	APT	II(REM	(syw	FIRE AI	D OTH		
NSPECTION 1	DISCIPLIN	ES	BLDG	MECH	PLUMB		ELEC)	SITE		TRE
Stories 1s	et firAres.	3954	Use Zone	Occp Grou	Const type	Fire SPR	Req (N)	Fed Code		o. File [Quad]
В	L	P	™	E		5	s	D	PW	UTIL
DMMENTS:										
REGIONAL	SANITAT	ION FEES?	☐ Yes	□ No	HEAL	TH DI	EPARTME	NT? 🗆 Y	es 🔲 N	o
WATER FLO			BUILDING	S OR AD	DITIONS?		Provided	☐ Fa	xed	