

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0113207

Insp Area: 1

Thos Bros: 297C3

Site Address: 980 9TH ST SAC

Parcel No: 006-0036-031 #1540

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

DELTA CONSTRUCTION & COMMUNICATION CO INC  
3261 FITZGERALD RD  
RANCHO CORDOVA CA 95742

OWNER

100 PINE ST STE 3200  
SAN FRANCISCO CA 94111

ARCHITECT

LPT ASSOCIATES

Nature of Work: OFFICE REMODEL STE. #1540

**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 434215 Date 10/12/01 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 10/12/01 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 OCCUCARE USA INC Policy Number 27A2WC0008442-00 Exp Date 10/01/2001

(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 10/14/01 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.**

CITY OF SACRAMENTO

**30 DAY TEMPORARY  
Certificate of Occupancy**  
For Information Contact (916) 264-5716

Building Address: 980 9<sup>th</sup> Street #1540 Permit No. 01-13207

Building Use: Office Occupancy: B

Building Owner: 980 9<sup>th</sup> Street Construction Type: I-FR

Owner Address: 100 Pine Street, Ste 300 San Francisco Sprinkled?  Yes [ ] No

Portion of Building Occupied: Suite 1540 Area: 2,506 Sq. Ft.

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

11/16/01 Willie Harris DENNIS RICHARDSON  
Date By:Print Sign CITY BUILDING OFFICIAL

[TCO approvals: DRP, MB, JB, RH]

**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**

# 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 # <span style="font-size: 1.5em; font-family: cursive;">0113207C</span>	Insp. Area <span style="font-size: 1.5em; font-family: cursive;">1</span>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 980 9th St. Suite 1540  
 PARCEL # 006-0036-031

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>Jill Condon, Stafford Spree Planning</u>                  Street Address <u>7505 Gold Dr</u>                  City/State/Zip <u>Lodi CA 95165</u>                  Phone <u>916/452-3400</u> FAX <u>916/452-7805</u>                  E-mail: <u>ssp@quickenet.com</u></p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # <u>434215</u></p> <p>Name <u>Delta Construction &amp; Comm.</u>                  Address <u>3261 Fitzgerald Rd</u>                  City/State/Zip <u>Rancho Cordova CA 95742</u>                  Phone <u>916/438-1772</u> FAX <u>916/858-8116</u>                  E-mail:</p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>Stafford Spree Planning</u>                  Address <u>7505 Gold Dr.</u>                  City/State/Zip <u>Lodi CA 95165</u>                  Phone <u>916/452-3400</u> FAX <u>916/452-7805</u>                  E-mail: <u>ssp@quickenet.com</u></p>	<p style="text-align: center;"><b>OWNER</b></p> <p>Name <u>980 9th St. UC c/o Grosvenor Int'l</u>                  Address <u>100 Pine St., Ste. 3200</u>                  City/State/Zip <u>S.F. CA 94111</u>                  Phone <u>916/557-1800</u> FAX <u>916/557-1810</u>                  E-mail: <u>Contract - Liz Ames</u></p>

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

NATURE OF WORK IN DETAIL: Demolition, New int. partitions, new power & telephone, no new lighting, new location for fire sprinkler heads & mech ducts / gutts.

OCCUPANT/TENANT: Duke Energy VALUATION: \$ 59,060.00

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>	<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>2506</u>		<u>B</u>	<u>I-FR</u>	SPR <u>Y</u> 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>13 ft</u>	<u>13 ft</u>	<u>13 JMT</u>	<u>13 JMT</u>		<u>13 JMT</u>		<u>13</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: Dura Energy Phone: 484-1172  
 Site Address: 980 9th St Suite: 1540  
 (Street) (Zip)  
 Business Owner/Representative: William N. Davis Phone: 484-1172  
 Nature of Business: Energy  
 Property Owner: 980 9th St LLC Phone: 557-1502  
 Address: 980 9th St Suite: 660  
 (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.

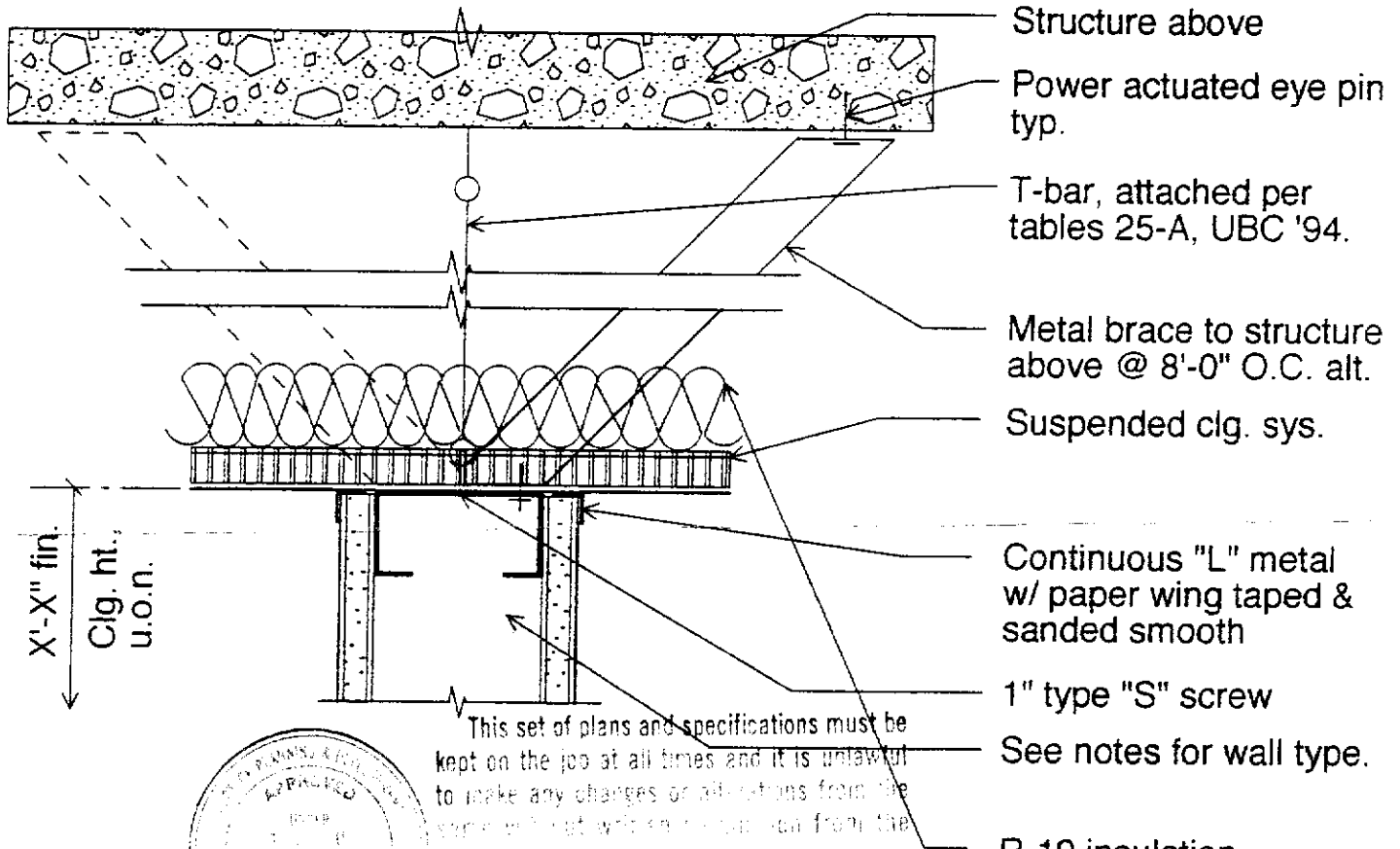
Applicant's Name: William N. Davis  
 (Print)  
William N. Davis (Signature) 10/12/01 (Date)

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



Permit #: 0113207

980 9th St. #1540

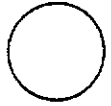


- Structure above
- Power actuated eye pin typ.
- T-bar, attached per tables 25-A, UBC '94.
- Metal brace to structure above @ 8'-0" O.C. alt.
- Suspended clg. sys.
- Continuous "L" metal w/ paper wing taped & sanded smooth
- 1" type "S" screw
- See notes for wall type.
- R-19 insulation layed over, 4'-0" each side of wall only as noted in construction notes, page A.1.



ISSUED

OCT 20 2001



# T-BAR CEILING W/ BATT INSULATION

SCALE 3" = 1'-0"

*John Tang*  
o.k.