CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0412491
Insp Area: 2
Thos Bros: 337H2

Site Address: 9 EL LIMON CT SAC
Parcel No: 049-0291-010

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

CONTRACTOR
BROWN CONSTRUCTION INC
1465 ENTERPRISE BLVD STE 100
WEST SACRAMENTO, CA 95798

OWNER
JOHNSON GLENN P/REGINA B
14024 NE 63RD CT
REDMOND WA 98052

ARCHITECT

Nature of Work: DEMO FRONT PORTION OF COMMERCIAL BLDG 795 SQ FT.

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'sAddress_____

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 396120 Date 8/3/04 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 8/3/04 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.

__X__ 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:

PAID
CITY OF SACRAMENTO

Carrier STATE COMP.INSURANCE Policy Number 1727418-03 Exp Date 03/05/2005

AUG 03 2004

NEIGHBORHOOD SERVICES
AND DEVELOPMENT SERVICES

_____ (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 8/3/04 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.

SACRAMENTO METROPOLITAN AIR QUALITY MANAGEMENT DISTRICT

ASBESTOS SURVEY AND DEMOLITION NOTIFICATION FORM

#39

Revised: 1/01

1

Contractor Two Rivers Demo — Owner Phoenix Park LP

Address 11493 Folsom Blvd — Address 630 I St

City Rancho Cordova — City Sacramento

State/Zip CA 95742 — State/Zip CA 95814

Telephone 638-6775 — Telephone 442-1382

2

Structure Name Franklin Villa — Use Res

Address 9 El Limon Ct — City/Zip Sacramento

3

Structure Age 35 (years) — Number of floors: 1 — Size 900 sq. ft.

4

Has RACM reported by the consultant been removed? (circle) (YES) NO N/A

Asbestos contractor who removed or will remove RACM L+B Environmental

5

DEMOLITION Start Date 7/27/04 — Completion Date 7/30/04

6

Preference for return of form: ☐ **Mail** ☒ **Pick-Up (after 2 working days)**

7

I have read and understand the directions. The information on this form is true and accurate.

Applicant Name (Print) Julie Polisso — ☐ Owner ☒ Contractor

Applicant's Signature Julie Polisso — Date 7/21/04

8

To Be completed by CAL-OSHA Consultant

Company Name: _____ Telephone: (___) _____

Surveyor's Name: _____ Survey Date: ___/___/___ OSHA # _____

Company Address: _____ City/State/Zip: _____

Amount of RACM: _____ lineal feet _____ square feet _____ cubic feet _____

Amount of Category I: _____ Amount of Category II: _____

Analytical Procedure: _____

Consultant's Signature: _____ Date: ___/___/___

9

REVISION #: 1 2 3 4 5 6 7 8 9 (Circle)

Old: Start Date ___/___/___ New: Start Date ___/___/___

Old: Completion Date: ___/___/___ New: Completion Date: ___/___/___

Demolition Permit Shall Not Be Issued Prior To

SACRAMENTO METROPOLITAN
JUL 22 2004
AIR QUALITY MANAGEMENT DISTRICT

SMAQMD USE ONLY: Project # _____ **Received Date/Postmark:** 7/21/04

Check # NA **Receipt #** NA **Amount Paid** Ø **Staff** CSO **Date Approved** 7/22/04