

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 9902335**  
**Insp Area: 1**

**Site Address: 770 L ST SAC**  
Parcel No: 006-0153-015  
N

**PARKING LEVEL P-3(3RD FLOOR)**

**Sub-Type: NOTHR**  
**Housing (Y/N):**

CONTRACTOR  
CHATECO INC  
5000 E SECOND ST  
BENECIA 94510

OWNER  
CITY CENTRE PARTNERS, AN ILLINOIS GEN PAR  
1717 I ST  
SACRAMENTO CA 95814

ARCHITECT

**Nature of Work: REPLACE W/ NEW 250 KW GENERATOR AND 650 GAL DIESEL FUEL TANK**

**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.

X License Class B License Number 6-2445 Date 7-27-99 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.

X Date [Signature] Applicant/Agent 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 UNITED PACIFIC INS. CO. Policy Number 18773.641 Exp Date 07/01/2000 [Signature]

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.

X Date 7-27-99 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**  
APPLICATION FOR ~~REPAIR~~ BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES SECTION

1231 I Street, Rm. 200  
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # 940335 Insp. Area 15

Applicant **MUST** complete ALL Unshaded areas this page only

**PARKING LEVEL**  
**P-3**

ADDRESS 770 "L" STREET, SACRAMENTO, CA. Suite \_\_\_\_\_  
PARCEL # \_\_\_\_\_

|                                                                                                                                                                                         |  |                                                                                                                                                                                                             |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>CONTACT</b><br>Name <u>TOM MALONE</u><br>Address <u>5000 E. 2ND ST.</u><br><u>BENICIA CA</u> Zip <u>94510</u><br>Phone <u>707-748-0943</u> FAX <u>707-748-0946</u>                   |  | <b>LICENSED CONTRACTOR</b> Lic No. # <u>624485</u><br>Name <u>CHATCO INC.</u><br>Address <u>5000 E. 2ND ST.</u><br><u>BENICIA CA.</u> Zip <u>94510</u><br>Phone <u>707-748-0943</u> FAX <u>707-748-0946</u> |  |
| <b>ARCHITECT/ENGINEER</b><br>Name <u>CR CARNEY</u><br>Address <u>2080 N. TUSTIN AV. #B</u><br><u>SANTA ANA CA</u> Zip <u>92705</u><br>Phone <u>714 542-7300</u> FAX <u>714-542-7515</u> |  | <b>OWNER</b><br>Name <u>ICG TELCOM.</u><br>Address <u>770 "L" STREET #100</u><br><u>SACRAMENTO CA.</u> Zip <u>95814</u><br>Phone <u>510-239-7000</u> FAX _____                                              |  |

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # 18773.041 EXPIRATION DATE: 7-1-99

NAME OF INSURANCE COMPANY: WEST ASSURANCE / UNITED PACIFIC INS. Co.

DESCRIPTION OF WORK IN DETAIL: REPLACE ~~EXISTING~~ 125 KW GENERATOR  
WITH NEW 250 KW GENERATOR. PARKING STRUCTURE  
AND INSTALL NEW 600 GAL. 4 IN RATED DIESEL  
DIESEL FUEL OIL

DBA: SACRAMENTO SWITCH VALUATION: 7,800.00

|                                       |                                       |                                          |                                          |                                           |                                          |                                          |                                          |           |           |     |
|---------------------------------------|---------------------------------------|------------------------------------------|------------------------------------------|-------------------------------------------|------------------------------------------|------------------------------------------|------------------------------------------|-----------|-----------|-----|
| FLOOD STATUS:                         |                                       | S.C.A.T.                                 |                                          |                                           |                                          |                                          |                                          |           |           |     |
| JOB DESCRIPTION                       |                                       | BLDG                                     | SHEL                                     | APT                                       | TI( )                                    | REM( )                                   | SW                                       | FIRE      | ADD       | OTH |
| ENSP. DISCIPLINES                     |                                       | <input checked="" type="checkbox"/> BLDG | <input checked="" type="checkbox"/> MECH | <input checked="" type="checkbox"/> PLUMB | <input checked="" type="checkbox"/> ELEC | <input checked="" type="checkbox"/> SITE | <input checked="" type="checkbox"/> FIRE |           |           |     |
| # Stories                             | 1st fir Area                          | Total Area                               | Use Zone                                 | Occp Group                                | Const type                               | Fire Req. Y/N                            |                                          | Fed Code  | Vio. File |     |
|                                       |                                       |                                          |                                          | <u>S-R</u>                                | <u>L-RR</u>                              | Spr Alarm                                |                                          | <u>16</u> | <u>NO</u> |     |
| <input checked="" type="checkbox"/> B | <input checked="" type="checkbox"/> E | <input checked="" type="checkbox"/> P    | <input checked="" type="checkbox"/> M    | <input checked="" type="checkbox"/> E     | <input checked="" type="checkbox"/> F    |                                          |                                          | <u>D</u>  | <u>R</u>  |     |

COMMENTS:

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

~~CITY OF SACRAMENTO~~  
 DEVELOPMENT SERVICES DIVISION

# EXPRESS PLAN REVIEW

| SUBMITTAL DATES |     |            |     |            |     |
|-----------------|-----|------------|-----|------------|-----|
| First Review    |     | 2nd Review |     | 3rd Review |     |
| IN              | OUT | IN         | OUT | IN         | OUT |
| / /             | / / | / /        | / / | / /        | / / |

PLAN CHECK # 9902335  
 ADDRESS: 770 LST  
 Commercial     Residential



ACCEPTED by (Staff):  
[Signature]

| DISCIPLINE          | 1ST REVIEW |       |           | 2ND REVIEW     |       |      | 3RD REVIEW |       |      |
|---------------------|------------|-------|-----------|----------------|-------|------|------------|-------|------|
|                     | Status     | Staff | Date      | Status         | Staff | Date | Status     | Staff | Date |
| LIFE SAFETY         | 3          | JL    | 3/17/99   | See neg review |       |      |            |       |      |
| STRUCTURAL          | 3          | JL    | 3/17/99   |                |       |      |            |       |      |
| MECHANICAL/PLUMBING | 3          | JL    | 3/17/99   |                |       |      |            |       |      |
| ELECTRICAL          | 3          | Jm    | 3/17/99   |                |       |      |            |       |      |
| FIRE                | 3          | DW    | 17 mar 99 |                |       |      |            |       |      |
| PLANNING            |            |       |           |                |       |      |            |       |      |

STAFF COMMENTS:

*Too much to look at for express -> "Regular" plan check.*

*Take off express*



CONSTRUCTION MATERIALS TESTING, INC.

CMT File No. C9-95266  
August 31, 1999

Building Inspection Department  
City of Sacramento  
770 L Street  
Sacramento, CA 95814

Attn: Valerie Brown

Permit No. 9902335C

Project: Support Structure for Generator and Fuel Tank

770 L Street  
Sacramento, CA

**SPECIAL INSPECTION FINAL REPORT AFFIDAVIT**

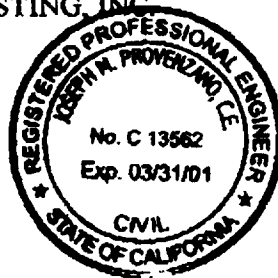
THIS IS TO CERTIFY that in accordance with Section 1701 of UBC-1994 Code and AWS D1.1, we have provided special inspection as listed below:

- 1) Visual Welding Inspection

The completed inspection and tests noted above were performed by qualified personnel under the direct supervision of the undersigned Professional Engineer. Based upon inspection and/or tests performed and substantiating reports, it is our professional judgement that the work requiring special inspection was, to the best of our knowledge, in conformance with the approved plans, specifications and the applicable workmanship provisions of these Codes.

Respectfully submitted,  
CONSTRUCTION MATERIALS TESTING, INC.

  
Joseph M. Provenzano, P.E.  
Registered Civil Engineer, No. 13562



pc Client -C.R. Carney Architects

**MEMORANDUM**

**SACRAMENTO FIRE DEPARTMENT**

**TO:** BUILDING DEPARTMENT

**DATE:** 9-30-99

**FROM:** Troy Malaspino  
Fire Marshal

**SUBJECT: FIRE SYSTEM INSPECTION**

A final inspection of the newly installed fire system at:

770 L ST (PARKING LEVEL)

has been conducted by Inspector C. PACK

on 9-29-99.

99-02335-C  
Permit Number

—  
Square Footage

New Generation  
Type of Inspection

The system is acceptable by this department.

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

99-301  
F. D. Reference Number