

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0000996
Insp Area: 1

Site Address: 1050 RICHARDS BL SAC
Parcel No: 001-0090-001

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

CONTRACTOR
BUZZ OATES
8615 ELDER CREEK RD
SACRAMENTO, CA 95828

OWNER
BUZZ OATS ENTERPRISES
8615 ELDER CREEK
SAC, CA 95828

ARCHITECT
LEO MC GLADE & ASSOC
2444 GLENDALE LN
SACRAMENTO CA

Nature of Work: NEW CONCRETE TILT-UP WAREHOUSE

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 _____ Date 9 Aug 00 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 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.)

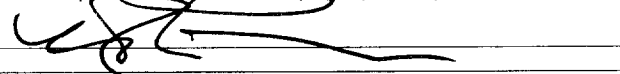
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s)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

Date 9 Aug 00 Applicant/Agent Signature 

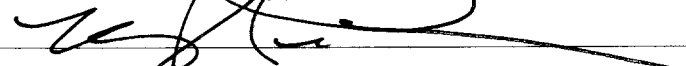
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

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 STATE COMP INS FUND (CA) Policy Number 1579398-00 Exp Date 03/01/2001

(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 9 Aug 00 Applicant 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 COMMERCIAL BUILDING PERMIT

BINDER
FOLDER

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

ACTIVITY # 0000996 Insp. Area 1

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

Applicant **MUST** complete ALL Unshaded areas

ADDRESS ~~10111 RICHARDS~~ 1050 RICHARDS ROAD Suite _____
 PARCEL # PN # 001-0090-001 (DR 99-126)

CONTACT Name <u>Mike Peters</u> Address <u>8615 Elder Creek Rd 95828</u> Phone <u>(916) 381-3600 (cell) FAX 381 4707</u> E-mail <u>mpeters@buzzates.com</u>		LICENSED CONTRACTOR Lic No. # _____ Name <u>UNKN</u> Address _____ Phone _____ FAX _____ E-mail _____	
ARCHITECT/ENGINEER Name <u>Leo McGlade & Ass</u> Address <u>3417 Arden Way 95825</u> Phone <u>488-9380</u> FAX _____ E-mail _____		OWNER Name <u>Buzz Oates Enterprises</u> Address <u>8615 Elder Creek 95828</u> Phone <u>381-3600</u> FAX _____ E-mail _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: CAI TNDentity
 → WORKER'S COMPENSATION POLICY # N5048119D EXPIRATION DATE: 4/00

NATURE OF WORK IN DETAIL: Concrete tilt-up spec shell - 48033 #
Where home / office

OCCUPANT/TENANT: Spec Unkn VALUATION: \$ ~~1,895,000~~

FLOOD STATUS: <u>AR</u>		S.C.A.T. <u>XII, XII, 101, 200, 201</u>							
JOB DESCRIPTION	BLDG	<u>SHELL</u>	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	MECH	<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>1</u>	<u>48033</u>	<u>48033</u>	<u>M2-N-SP</u>	<u>51+B</u>	<u>11-N</u>	SPR	ALARM	<u>10</u>	[H] [Quad]
<u>B</u>	<u>D</u>	<u>F</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>PW</u>	<u>UTIL</u>

COMMENTS: 1) TO PROVIDE WATER FLOW, 2) TITL SET, 3) SOILS REPORT
BY FRIDAY 2/4/00

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

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 1100 RICHARDS BLVD

Assessor's Parcel Number: 001 - 0090 - 001

Previous Use: vacant

Description of Request/Proposed Use: New Warehouse
w/ office

Is This a Change of Use? _____

Prior Applications for Project Site(P#, Z#, DRPB#): Richard Bl. North SPD
Zoning Designation: M-2

Comments: See File # 99-098, + DR 99-126
for conditions of
approval

Are There Any Planning Issues?: (circle one) YES NO

* Staff Site Plan Check Required? (Circle one) YES NO

* Field Inspection Required? (Circle one) YES NO

* Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: WJ/604R 2/2/00

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

PLAN CHECK ROUTING PROCEDURE

Date Received: <u>2-2-00</u>	Plan Check #: <u>0000996</u>
Project: <u>SITEL</u>	
Address: <u>1100 RICHARDS BL</u>	
Legal Description:	
Contact Person: <u>MIKE PETERS</u>	Telephone: <u>381-3600</u>
Address: <u>8615 ELDER CREEK RD</u>	
Architect or Civil Engineer:	Telephone:

PUBLIC WORKS - DEVELOPMENT SERVICES STREET IMPROVEMENTS

Approved: _____	Date Received: _____
Total frontage length of New Street Improvements: _____	If _____
Comments: _____	
Right of Way Dedication : _____	Approved _____ Disapprove _____
Public Improvement Agreement: _____	Approved _____ Disapprove _____
Surety Bond, etc. : _____	Approved _____ Disapprove _____
Staking and Inspection Fee : _____	\$ _____

PUBLIC WORKS - DEVELOPMENT SERVICES DRIVEWAY

Driveway Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Received: _____
Approved: _____	Disapproved: _____
Removal of abandoned driveway: _____	
Comments: _____	

PUBLIC WORKS - DEVELOPMENT SERVICES ENCROACHMENT/EXCAVATION PERMIT

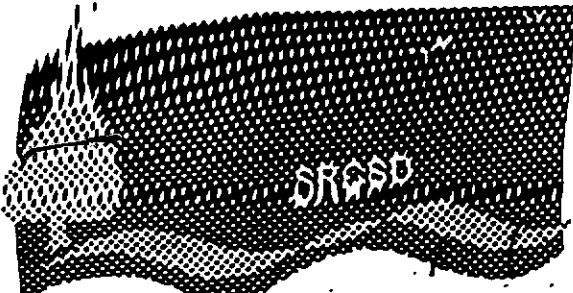
Encroachment/Excavation Permit Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Approved: _____	Disapproved: _____
Comments: _____	

DEPT. OF UTILITIES DRAINAGE, SEWER, & WATER

Approved: _____	Date Received: _____
Disapproved: _____	
Comments: _____	

PLANNING AND DEVELOPMENT SERVICES SITE CONDITIONS

Approved: _____	Approved with Changes: _____	Date Received: _____	Disapproved: _____
Review Zone: _____	Special Permit: _____	Variances: _____	
Parking Spaces Furnished: _____		Parking Spaces Required: _____	
Comments: _____			



Customer Service Group
 PWA Water Quality Engineering for
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

REQUEST FOR SEWER FEE QUOTE

PC# 0000996

DATE	2-2-2000	REQUESTOR	SEAN	NUMBER OF PAGES	1	PHONE	264-7046
FROM	City of SACRAMENTO	RESPONDER	DULORES ROSS	FAX	875-6253	PHONE	
TO	SRCSO Customer Service						

URGENT -- Applicant is in office or ready to pay permit.
 If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.
 Press zero to speak to the operator.
 1 WEEK WOULD BE FINE
 NOT URGENT -- Applicant has requested informal quote

Applicant	NAME	MIKE Peters		PHONE	381-3600
Property	ASSESSOR'S PARCEL NUMBER(S)	001-0090-001		PROPERTY ADDRESS	1100 Richards Blvd
	PLAN CHECK / BUILDING PERMIT NO.	0000996		(mark all that apply)	
Project		New construction	YES	Remodel	
	USE	CURRENT // PREVIOUS		PLANNED	
	SQUARE FOOTAGE	CURRENT // PREVIOUS		PLANNED	

USE: SI-B
 CURRENT // PREVIOUS: VACANT
 PROPERTY ADDRESS: 1100 Richards Blvd
 PROJECT TYPE: SHELL
 SQUARE FOOTAGE: 48,033 SQ FT

9660 ECOLOGY LANE • SACRAMENTO, CALIFORNIA • 95827-3881
 ENGINEERING (916) 875-6820 • FAX (916) 875-6253

MESSAGE CONFIRMATION

02/02/00 15:53
ID=DEVELOPMENT SERVICES

NO.	MODE	BOX	GROUP
115	TX		

DATE/TIME	TIME	DISTANT STATION ID	PAGES	RESULT	ERROR PAGES	S. CODE
02/02 15:53	00'30"	916 875 6253	001/001	OK		0000



Customer Service Group
PWA Water Quality Engineering for
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

REQUEST FOR SEWER FEE QUOTE

PC# 0000996

DATE	2-2-2000	NUMBER OF PAGES	1	PHONE	264-7046
FROM	City of SACRAMENTO	REQUESTOR	SEW	FAX	
TO	SRCSD Customer Service	RESPONDER	DULORE'S ROSS	FAX	875-6253

URGENT -- Applicant is in office or ready to pay permit.
If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.
Press zero to speak to the operator.

1 WEEK WOULD BE FINE

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME	PHONE
	MIKE Peters	381-3600
Property	ASSESSOR'S PARCEL NUMBER(S)	PROPERTY ADDRESS
	001-0090-001	1100 Richards Blvd

WATER SUPPLY TEST - DEPARTMENT OF UTILITIES

1395 35TH AVENUE SACRAMENTO, CA. 95822 PHONE: 916 / 264-1430 FAX: 916 / 264-8897	TEST NO: 99-88 - COMPLETE DATE: 10-27-99 ANALYSIS FEE: \$90.00 FIELD TEST FEE: \$360.00	FILE NO: R99-0088 PC# DATE PAID: 10-22-99 DATE PAID: 10-22-99
CONTACT PERSON: Mike Peters	PHONE NO: 381-3600	FAX NO: 381-4707
COMPANY: Buzz Cates	CELL PHONE NO: 997-0291	
COMPANY ADDRESS: 8615 Elder Creek	STREET ADDRESS OF TEST: Richards Blvd	
PURPOSE OF TEST: 	ASSESSOR'S PARCEL NUMBER: 001-0090-001	

The undersigned agrees to the following items and conditions:

- (1) The street address shown above is correct.
- (2) Water supply data is developed from several sources of information which may include water supply test data, pipe network computer models, and continuous pressure recording stations. The design water supply data given below is to be used for design purposes.
- (3) Although the water supply data reported herein is believed to be accurate, the City makes no warranty, guaranty, certification or other representation of any kind that such data is accurate or correct, or that the pressures and/or flow rates reported herein can or will be maintained. The undersigned agrees that the City, its officers and employees shall not be liable for any damages of any kind resulting from the use of or reliance upon the water supply data reported herein by the undersigned or by any third party.
- (4) If the undersigned desires to witness the water supply test performed by the City, please check the box below:
 I want to witness this water supply test, which will be scheduled at the convenience of the Department of Utilities.
- (5) If the undersigned elects to hire a licensed engineer, at the undersigned's sole expense, to witness and certify the water supply test performed by the City, please check the box below:
 At my expense, I will arrange for a licensed engineer to witness and certify this water supply test, which will be scheduled at the convenience of the Department of Utilities.

Print Name: **Mike Peters** Signature: Date:

ENGINEERING REQUEST DATE: **10-25-99** DATE OF TEST: **10-27-99** TIME OF TEST: **9:05 AM**

WATER MAIN SIZE: **12"** TEST CONDUCTED BY: **Perrone, Steckline, Ledesna, Roy**

	HYDRANT NO.	MAP PAGE	STATIC PRES. (PSI)	RESIDUAL PRES. (PSI)	PTOT PRES. (PSI)	OUTLET DIA. (IN.)	COEFFICIENT		CALC. FLOW @ PRES. (G.P.M.)	FLOW @ 20 PSI (G.P.M.)
							C ₁	C ₂		
RESIDUAL	43'	2	53	46						
FLOWED	2'	2			-12	4.5	0.90	0.83	1563	
FLOWED	18'	2			-18	4.5	0.90	0.83	1914	
FLOWED								TOTAL	3478	
FLOWED										

- THE WATER SUPPLY TEST DATA IS NOT TO BE USED FOR THE DESIGN OF DOMESTIC WATER SYSTEMS.
- (STATIC PRES. - RESIDUAL PRES.) / (STATIC PRES. - 20 PSI) IS LESS THAN 25%. THEREFORE, THESE RESULTS ARE ONLY VALID FOR FLOWS NOT EXCEEDING _____ G.P.M.

	ACTUAL	DESIGN (1)
STATIC PRESSURE	53 - PSI	52 - PSI
RESIDUAL PRESSURE	46 - PSI	45 - PSI
TOTAL FLOW @ RESIDUAL	3500 G.P.M.	3500 G.P.M.
TOTAL FLOW @ 20PSI	8000 G.P.M.	7900 G.P.M.

(1) The Design Water Supply Data reflects fluctuations and time demands on the system.

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

0000996

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME BUZZ OATES ENTERPRISES		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1100 RICHARDS BOULEVARD		Company NAIC Number
CITY SACRAMENTO	STATE CA.	ZIP CODE 95814
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) NON-RESIDENTIAL		APN 001-009-001
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ##.#####")	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF SACRAMENTO 060266		B2. COUNTY NAME SACRAMENTO		B3. STATE CALIFORNIA	
B4. MAP AND PANEL NUMBER 060266 0025	B5. SUFFIX F	B6. FIRM INDEX DATE JULY 6, 1998	B7. FIRM PANEL EFFECTIVE/REVISED DATE JULY 6, 1998	B8. FLOOD ZONE(S) AR	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 35.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

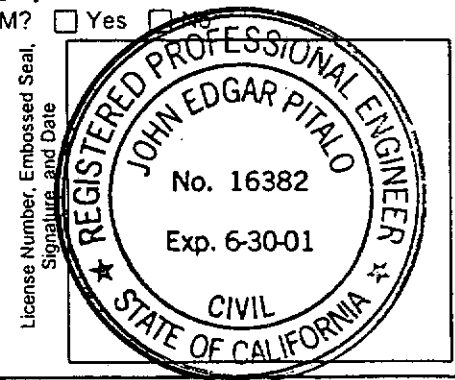
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum **City of Sacramento** Conversion/Comments **City of Sacramento NVGD 1929**

Elevation reference mark used **291.51A** the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) **23.7** ft.(m)
- o b) Top of next higher floor _____ ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
- o d) Attached garage (top of slab) _____ ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building **23.7** ft.(m)
- o f) Lowest adjacent grade (LAG) **19.7** ft.(m)
- o g) Highest adjacent grade (HAG) **23.7** ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____
- o i) Total area of all permanent openings (flood vents) in C3h _____ sq. in. (sq. cm)



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME **JOHN E PITALO** LICENSE NUMBER **16382**

TITLE **PRESIDENT** COMPANY NAME **MORTON'S PITALO INC.**

ADDRESS **1788 TRIBUTE ROAD** CITY **SACRAMENTO** STATE **CA** ZIP CODE **95815**

SIGNATURE *[Signature]* DATE **2-7-00** TELEPHONE **916-927-2400**

CBL PAID BY CONTRACTOR
01/01/2000 to 08/01/2000

ACTIVITY #	ADDRESS	ISSUED	VALUATION	NATURE OF WORK	CLB
BUZZ OATES					
0001178	5961 OUTFALL CR	05/31/2000	\$ 50,000.00	GRADING FOR 96658 SQ FT SHELL BLDG ONLY .NO U.G. UTILITIES	20.00
0001182	6001 OUTFALL CR	05/31/2000	50,000.00	GRADING FOR 81225 SQ FT SHELL BLDG ONLY(NO U.G. UTILITIES)FLOOD ZONE X	20.00
0004289	8670 YOUNGER CREEK DR	06/19/2000	99,999.00	CONVERT WAREHOUSE TO CONDITIONED OFFICE / WAREHOUSE	40.00
0004875	8425 BELVEDERE AV	06/20/2000	15,000.00	CONSTRUCT DEMIZING WALL BETWEEN TENANTS	6.00
0006426	8583 ELDER CREEK RD	06/12/2000	1,000.00	CONNECTIN 4 MILLS & LATHES TO EXISTING WAREHOUSE FLOOR	0.40
9906993	2400 DEL PASO RD	06/29/2000	6,174,605.84	2 STORY OFFICE BLDG SHELL (BUILDING II) LOT #8	2,469.84
TOTAL for BUZZ OATES					\$ 2,556.24
BUZZ OATES ENTERPRISES					
0000041	2000 O ST	02/11/2000	69,000.00	4000 SQFT OFFICE REMODEL	27.60
9906963	6350 SKY CREEK DR	07/03/2000	5,029,425.56	NEW SHELL BUILDING	0.00
9906966	5400 SOUTH WATT AV	05/19/2000	696,808.00	CONCRETE TILT UP SHELL	278.72
9906967	8935 FRUITRIDGE RD	05/19/2000	1,060,360.00	CONCRETE TILT UP SHELL	390.54
9906968	5370 SOUTH WATT AV	05/19/2000	868,737.80	CONCRETE TILT UP WAREHOUSE	319.97
9913353	5250 SOUTH WATT AV	06/22/2000	558,416.40	NEW TILT UP WHAREHOUSE - 13720SQ FT	223.37
9914548	1050 RICHARDS BL	03/31/2000	27,000.00	ROUGH GRADING	10.80
TOTAL for BUZZ OATES ENTERPRISES					\$ 1,251.00

City of Sacramento
Water and Sewer Service Quotation
 FY 99/00

Date: 08/02/00	Time:	Planning No.:	Plan Check No.: 0000996
Address: 1050 Richards Blvd		Parcel No.: 001-0090-001	
Description: Warehouse/Office Bldg			
Subdivision Map: American River District 429		Water Page No.:	
Estimate By: RT			
Engineering Firm: Morton & Pitalo		Project Engineer: Alex Aliabadi	Phone No.: 297-2400
		Fax No.:	
Sewer Jurisdiction: <input type="checkbox"/> County <input checked="" type="checkbox"/> City			
Comment No.1	All taps (2"D, 1.5" I, 6"FS, 2-8" FH) are to be done by contractor under PW drawings.		
Comment No.2	Sewer tap also is to be done by contractor.		
Comment No.3			
Comment No.4			
Comment No.5			
Comment No.6			
TOTAL WATER DEV. FEES: \$11,334		24 hrs x \$75 per hour = \$1,800	
TOTAL SEWER DEV. FEES: \$278		or \$300.00 (whichever is greater)	
		Total on-site grading and drainage review fee:	\$1,800

Water Service Quotations

Main Size	Serv. Size			St. Tap	Esmt. Tap	Description	No. of Tap	No. of Meter	Tap Fee/ea.	Meter Fee/ea.	Total Tap cost	Development Fees
	D	I	F									
12	2							1		\$610	\$610	\$7,642
12		1 1/2						1		\$500	\$500	\$3,692
										\$0	\$0	
										\$0	\$0	
										\$0	\$0	
										\$0	\$0	
4" TAP AND 3" METER												
											n/a	
											n/a	
ABANDONMENT												
	Abandon			in.								
	Abandon			in.								
CREDIT												
	Credit for			in.								
	Credit for			in.								
								0	Fire Hydrant			
Total for Water											\$1,110	\$11,334

Sewer Service Quotations

Main Size	Service Size	Description	QTY	Full St W (FT)	No. OF MH	Total Tap cost	Development Fees
8	6	Development Fee Only	1			\$0	\$278
		Easement Tap + MH + Dev. Fee				\$0	
		Street Tap + MH + Dev. Fee				\$0	
		Credit					\$0
Total for Sewer						\$0	\$278

Note: Total cost = Qty. x Street/2 x Tap Fee + MH Fee, MH Fee is \$1200.00

Robt Jly
 8/2/00

Sewer Tap Construction Charge: \$0
 Water Main Construction Charge: \$1,110
Total For Address: \$1,110

1.31 x 14 11

Certification of Compliance School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT

OWNER'S NAME Buzz Oates / Phil Oates (Buzz Oates Enterprises)
 OWNER'S ADDRESS 8075 Shiloh Park Sacto 95828
 PROJECT ADDRESS 1050 K... ..
 PARCEL NUMBER APN 001-1-90-001-000 LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS 200

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT Director of Sales - POE
 DATE 3 Aug 00 PHONE NUMBER 361-3600

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 0000776
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 47,775
 SIGNATURE [Signature]
 TITLE Counter Manager DATE 4-18-2000

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT ...
 DISTRICT CERTIFICATION NO. ...
 EXEMPT _____ COMMENTS _____

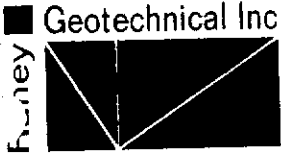
RESIDENTIAL/APT/CONDO	_____	SQ FT X \$	= \$
COMMERCIAL/INDUSTRIAL	<u>47,775</u>	SQ FT X \$	= \$ <u>14,310.25</u>
OTHER FEE	_____	TYPE _____	SQ FT X \$ _____ = \$ _____
TOTAL FEES COLLECTED			= \$ <u>14,310.25</u>

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

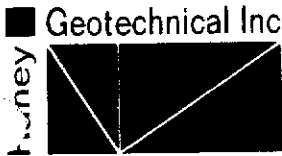
AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE _____
 TITLE _____ DATE _____



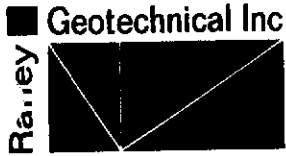
DAILY FIELD REPORT

Project #: 146-313-01	Date: 11/6/01	Day: Friday	Weather: 60 Sunny	PAGE 1/1
Project Name: 1030 Richards Blvd Wash DC	Project Location: SAC	Permit #:	Client's Representative: MICK PETERSON	
Client: BUZZ DATES	General Contractor: BENTON & BOWLES	Superintendent: Doug	Other Persons Contacted:	
Type of Work: KEINF	Location/Element: PANELS	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: (EO McGLADE 1-19-00)				
ARRIVED @ SITE MEET W/ DONG W/ ENR OVER PLANS & DETAILS. OBS THE KEINF IN THE FOLLOWING PANELS: 1-4, 6-9, 12, 24, 29, 33-37. THE FOLLOWING DETAILS ARE AS FOLLOWS: PANELS # 1, 24 @ A/O & A/O, PANELS # 7-4 ARE (ALSO # 12) @ DETAIL B/O, PANEL # 6-9, 33-37 per Detail D/O & D/O.				
Found A Couple OF DISCREPANCIES (MISSING CHORD BARS) NOTIFIED CONTRACTOR, WHO HAD THE REPAIRS DONE PRIOR TO MY LEAVING.				
ALL PLACEMENT, PER PLANS & DETAILS FOR TYPE, SIZE, PLACEMENT & LAYS OF BAR, W/ NO DISCREPANCIES NOTED W/ ONE EXCEPTION: @ # 29, USED # 3 @ 4" OC TIES, INSTEAD OF # 4 @ 6" OC. CONTRACTOR GOT VERBAL OK FROM ENGINEER.				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:				
Copy received by/given to: Doug	Arrived: 12:30	Departed: 2:15	Report by: James Hall	



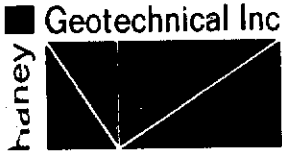
DAILY FIELD REPORT

Project #: <u>146-313 01</u>		Date: <u>12/22/00</u>	Day: <u>FRI</u>	Weather:	PAGE <u>1</u>
Project Name: <u>Richards Blvd Warehouse B/W</u>		Project Location: <u>1450 Richards Blvd</u>		Permit #:	
Client: <u>B.O.G.</u>		Client's Representative:			
General Contractor:		Superintendent:			
Sub-Contractor:		Other Persons Contacted:			
Type of Work: <u>REINF. OBS</u>	Location/Element: <u>PANEL # 30</u>		Equipment used:	Time: <u>1.0</u>	
Type of Work:	Location/Element:		Equipment used:	Time:	
Plans/Specifications: <u>LEO 11'6" GRADE SH 8</u>					
<u>ARRIVED @ SITE & VISUALLY OBSERVED</u>					
<u>REINFORCEMENT PLACED IN PANEL # 30</u>					
<u>CONSISTING OF # 5 @ 10" O.C. E.W. 2 # 6 CHORD</u>					
<u>BARS @ TOP, MIDDLE & BTM OF PANEL</u>					
<u>8 # 6 EA FACE @ LEFT & RIGHT LEGS</u>					
<u>W/ # 3 STIRRUPS @ 4" O.C.</u>					
<u>6 # 6 @ MIDDLE LEG EA FACE W/ # 3 STIRRUPS</u>					
<u>@ 4" O.C. CENTER.</u>					
<u>ALL PLACEMENT PER PLANS & DETAILS</u>					
<u>FOR TYPE, SIZE, CLEARANCES & LAPS OF BARS</u>					
<u>W/ NO DISCREPANCIES NOTED.</u>					
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER:					
Copy received by/given to: <u>12009</u>	<u>7.5</u>	Arrived: <u>11:30</u>	Departed: <u>12:00</u>	Report by: <u>A. Howard</u>	



DAILY FIELD REPORT

Project #: 146-313 01	Date: 10/16/00	Day: TUE 5	Weather:	PAGE: 1
Project Name: 1050 Richards Blvd Warehouse	Project Location: 300 CA	Permit #:		
Client: BOE	Client's Representative: DOUG			
General Contractor:	Superintendent:			
Sub-Contractor:	Other Persons Contacted:			
Type of Work: REIN. OBS	Location/Element: Panel #26	Equipment used:	Time: 1.0	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: Leo McClade				
PERFORMED VISUAL OBSERVATION OF REINFORCEMENT PLACED IN PANEL # 26 CONSISTING OF 8 # 6 BARS EA FACE @ 2 OUTSIDE VERT LEGS 6 # 6 BARS EA FACE @ 1 MIDDLE LEG W/ # 3 STIRRUPS SPACED @ 4" O.C. W/ # 5 @ 10" O. CENTER EA WAY				
ALL PLACEMENT FOR CLEARANCES LAPS & TYPE OF REINFORCEMENT IS PER PLANS W/ NO DISCREPANCIES NOTED				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:				
Copy received by/given to: DOUG	Arrived:	Departed:	Report by: M. HANE	

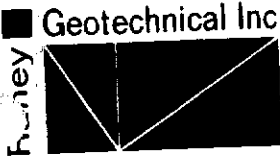


DAILY FIELD REPORT

Project #: 146-313-01	Date: 11/16/00	Day: THUR	Weather: 45	PAGE: 1/1
Project Name: USO Richards Blvd Warehouse	Project Location: SAC	Permit #:		
Client: BURT DAVIS	Client's Representative:			
General Contractor: Burt Davis	Superintendent: Doug			
Sub-Contractor:	Other Persons Contacted:			
Type of Work: REINF	Location/Element: FOOTINGS	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: LEO McGLADE & ASSOC 1/19/00				
ARRIVED @ SITE MEET W/ DOUG, WENT OVER PLANS & DETAILS				
OBS THE FOLLOWING REINF: TYP INT FOOTINGS W/ 8#5'S EACH WAY				
TYP INT FOOTINGS: ALSO OBS THE REINF OF ALL EXT FOOTINGS ALL				
EXT FOOTINGS W/ #5 REINF, W/ 10#5 E.W., W/ 5#2" O.C. E.W.,				
W/ 9#5" E.W. RE 6x15 CRACK LAD REINF IS USED IN ALL FOOTINGS				
LOADLINES FOR EXT FOOTINGS ARE 1/89-F, F-11-6, L/ A/F, A/39-S,				
3.9/A-B9, INT ARE, 2/D/E, 3/D/E, 3.9/D/E, 5/B/C/D/E.				
ALL REINF & CLEARANCES IS PER APPROVED PLANS & DETAILS ON S/S, &				
S/G. W/ NO DISCREPANCIES NOTED				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input checked="" type="checkbox"/> SKETCH OTHER:				
Copy received by/given to: Doug	Arrived: 7:00	Departed: 8:00	Report by: [Signature]	

DAILY FIELD REPORT

Project #: 146-313.01	Date: 11-10-00	Day: FR	Weather: CLOUDY	PAGE: 11
Project Name: 1050 Concord Blvd	Project Location: SAC.	Permit #:	Client's Representative:	
Client: BUREAU OF CALIFORNIA	General Contractor: BONTAIN	Sub-Contractor:	Superintendent: WHITE	Other Persons Contacted:
Type of Work: FOOTING STABILITY	Location/Element: 6FT. PAD	Equipment used: PROBE	Time: 1HR	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: 20 The Engr' Assoc. / 6-00/				
ARRIVED ON SITE & MET W/ BOB, OPERATOR FOR BONTAIN. CONTRACTOR HAS CUT 6FT DEEP FTGS @ E @ 6 & E.S @ 6. PROBES BAKE OF FOOTINGS & FOUND THEM TO BE FIRM & STABLE. VERIFIED OPERATOR HAS CUT THRU FILLS PREVIOUSLY PLACED DURING PAD CONSTRUCTION. SPOKE TO JOHN DAVEY RE: 6FT. DEEP FOOTINGS CUT BACK ALONG F LINE. JOHN MADE A SITE VISIT THURSDAY & INSTRUCTED THE BACKHOE OPERATOR TO CUT ONE ADDITIONAL FOOT OF MATERIAL FROM THE FOOTINGS LOCATED @ F LINE @ 2. REMAINING FOOTING ON F LINE DETERMINED SATISFACTORY.				
CONDUCTED STABILITY STABILITY CHECK OF F @ 2 & E.S @ 6 & E @ 6 & FOUND MATERIAL THRU FILL SOIL AND STABLE WITH PROBE				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER:				
Copy received by/given to: J. J. J. / Bontain	Arrived: 9am	Departed: 9:30am	Report by: J. J. J.	



DAILY FIELD REPORT

Project #: 146-313.01	Date: 11-9-00	Day: THURS	Weather: CLEAR 45	PAGE 1/1
Project Name: 1050 FLOWER BLDG. WARE	Project Location: SAC	Permit #:	Client's Representative:	
Client: DURE OPS	General Contractor: ENSTAD OUT	Sub-Contractor:	Superintendent: DOUG	Other Persons Contacted:
Type of Work: FOOTING STABILITY	Location/Element: WAS FOUND	Equipment used: REUSE	Time: 1.5	
Type of Work:	Location/Element:	Equipment used:	Time:	

Plans/Specifications:

LEO McGLADE & ASSOC. (6/00)
 ARRIVED ON SITE & MET DOUG, SUPERINTENDENT WITH BUSTAIN. CONTRACTOR HAS CUT 24" DEEP FOOTINGS ON LINE 1 FROM B.9 TO F LINE & 6 FT. DEEP FOOTINGS ON F LINE FROM LINE 2 thru 6. TWO ADDITIONAL INTERIOR FTGS (24" DEEP) ALSO CHECKED JUST EAST OF LINE 1.
 PROBES EACH FOOTING TO VERIFY STABILITY AND NOTED THE FOLLOWING:
 - (6 FT. DEEP FTGS @ THE SOUTH/BACK) SIDE OF BLDG. (6 CK'S) PROBES 1 1/2 - 2 1/2 FT. THE 24" DEEP FTGS FOUND TO BE FIRM & STABLE. CONTACTED JOE TRUSCA, ENG. @ PANAY WHO WILL CONTACT DOUG (BUSTAIN) WITH RECOMMENDATION

ATTACHMENTS: FIELD DENSITY DATA CONCRETE PLACEMENT DATA SKETCH OTHER:

Copy received by/given to: Doug / BUSTAIN	Arrived: 7:30 AM	Departed: 8:30	Report by: [Signature]
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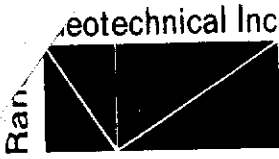
DAILY FIELD REPORT

Project #:	Date:	Day:	Weather:	PAGE
Project Name:	Project Location:	Permit #:		
Client:	Client's Representative:			
General Contractor:	Superintendent:			
Sub-Contractor:	Other Persons Contacted:			
Type of Work:	Location/Element:	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: <i>See All Specs 11/19/03</i>				
<i>Arrived @ site about w/dug next over progress of job. Observed</i>				
<i>tile interior footings, picking @ various locations. F-B TILES, All soils</i>				
<i>seemed firm & stable (contaction) & also footings are cleaned out @ time</i>				
<i>of visit. Top int footings per D/7 6'9" sq x 24" deep. All interior</i>				
<i>footings per plans & Rainey soils report w/ no discrepancies noted.</i>				
<i>Gridline Above: C/S - D/7-S, E/7-C, B/S.</i>				
<i>Also observed tile ext footings @ A/3.9 - C/3.9, C/3.9-3,</i>				
<i>A/3.9-5, All above footings 8'0" sq x 24" deep. Is per plans & Rainey soils</i>				
<i>report, footing @ A/3.9 was dug approx 12" to hit Premier soils (36" deep)</i>				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER:				
Copy received by/given to:	Arrived:	Departed:	Report by:	
	<i>7:00</i>		<i>James Hall</i>	



DAILY FIELD REPORT

Project #:	Date:	Day:	Weather:	PAGE 1
Project Name:	Project Location:		Permit #:	
Client:			Client's Representative:	
General Contractor:			Superintendent:	
Sub-Contractor:			Other Persons Contacted:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications:				
I PROBE TESTED APPROX 10 FOOTINGS				
OF 8'4" X 8'1/2" X 1' IN THE EAST SIDE OF				
PROJECTS.				
I FOUND FOOTINGS TO BE SOFT				
I EASILY PROBED TO DEPTHS OF 18"-24"				
I TALKED TO JOHN RANEY BY RADIO				
AND INFORMED HIM AS WHAT I FOUND				
AND HE WILL MAKE A VISIT TO				
JOB SITE & INVESTIGATE FINDINGS				
I SPOKE W/ DOUG (SOFT) AND EXPLAINED				
EVERYTHING TO HIM				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:				
Copy received by/given to:	Arrived:	Departed:	Report by:	
T. DONG	1:15	2:30	A. Harris	



DAILY FIELD REPORT

6'50'69

Project #: 146-313-01	Date: 1/16/02	Day: Monday	Weather: Clear Sunny	PAGE: 1/1
Project Name: 1050 Rich Blvd Sacramento	Project Location: Richards Blvd & 10th St SAC	Permit #:		
Client: BUZZ CASES	Client's Representative: Mike Peltier	Superintendent: Doug		
General Contractor: Buntain	Sub-Contractor: Robert Feltus Exc.	Other Persons Contacted:		
Type of Work: Footings	Location/Element: INTERIOR FOOTING	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: Leo McGlade Assoc 1/19/02				
ARRIVED @ SITE, MEET W/ DOUG WENT OVER PLANS & RECALLED				
THE 1 ST INT. FOOTING @ BARCLINE R/ @ 5. TYPE 2 INT FOOTING DETAIL				
@ D/S 7. ON APPROVED PLANS FOOTING SIZE 7'0" X 7'0" X 24" DEEP STUCK				
PROBE IN GROUND SEVERAL TIMES @ VARIOUS PLACES IN FOOTING SOILS				
SEEMED FIRM & STABLE W/ PROBE PENETRATING THE SOIL APPROX 3"				
DEEP THIS IS THE 1 ST FOOTING DOG. WILL RE-CHECK REST OF				
FOOTINGS @ LATER VISIT.				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:				
Copy received by/given to: Doug	Arrived: 7:30	Departed:	Report by: James Hall	