

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0509932

Insp Area: 4

Thos Bros: 257A7

Site Address: 2420 DEL PASO RD SAC

Parcel No: 225-0070-082

Sub-Type: TI

Housing (Y/N): N

CONTRACTOR

BUZZ OATES CONSTRUCTION L P
8615 ELDER CREEK RD
SACRAMENTO, CA 95828

OWNER

MARVIN L OATES TRUST
8615 ELDER CREEK RD SUI
SACRAMENTO, CA 95828

ARCHITECT

Nature of Work: 1ST TIME TI - OFFICE SPACE ON 1ST & 2ND FLOOR

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 826900 Date 10/6/05 Contractor Signature Brian Sesseth

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: **PAID**

Date _____ Owner Signature **CITY OF SACRAMENTO**

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city certifies on behalf 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.

NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES

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 10/6/05 Applicant/Agent Signature Brian Sesseth

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.

B 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 FUND Policy Number 1625130 Exp Date 04/01/2006

(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 10/6/05 Applicant Signature Brian Sesseth

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

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address: 2420 DEL PASO RD Permit No.: 0509932
Building Use: OFFICE Occupancy: B
Building Owner: MARVIN OATES TRUST Construction Type: III-N
Owner Address: SACRAMENTO, CA Sprinkled? Yes No
Portion of Building Occupied: ENTIRE Area: 35220 Sq. Ft.
02/14/06 ROBERT T. STETSON *Robert T. Stetson PE* RON BEEHLER
Date By: (Print) Sign CHIEF BUILDING OFFICIAL

[Finaled By:RCY; JBB; SLG; GEP; DIH]

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

CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 PERMIT SERVICES SECTION
 1231 I Street, Suite 200
 Sacramento, CA 95814 (916) 264-7619 FAX (916) 264-7046

ACTIVITY # 0509932	Isnp. Area
------------------------------	-------------------

Applicant MUST complete ALL Unshaded areas

ADDRESS 2420 DEL PASO BLVD Suite _____
PARCEL # 225-0070-~~083~~ 082

CONTACT		LICENSED CONTRACTOR Lic No. # <u>826900</u>	
Name <u>BRIAN LERSETH</u>		Name <u>BUZZ OATES CONSTRUCTION</u>	
Street Address <u>8615 ELDER CREEK RD</u>		Address <u>8615 ELDER CREEK RD</u>	
City/State/Zip <u>SACRAMENTO CA 95828</u>		City/State/Zip <u>SACRAMENTO CA 95828</u>	
Phone <u>(916) 997-0504</u> FAX <u>(916) 381-9101</u>		Phone <u>(916) 381-3600</u> FAX <u>(916) 381-9101</u>	
E-mail: <u>BRIANLERSETH@BUZZOATES.COM</u>		E-mail:	
ARCHITECT/ENGINEER		OWNER	
Name <u>LIDNAKIS BEAUMONT</u>		Name <u>MARVIN L OATES</u>	
Address <u>1919 NINETEENTH STREET</u>		Address <u>8615 ELDER CREEK RD</u>	
City/State/Zip <u>SACRAMENTO CA 95814</u>		City/State/Zip <u>SACRAMENTO CA 95828</u>	
Phone <u>(916) 558-1900</u> FAX <u>(916) 558-1919</u>		Phone <u>(916) 381-3600</u> FAX <u>(916) 381-9101</u>	
E-mail:		E-mail:	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: AMERICAN ZURICH INS. CO.
 → WORKER'S COMPENSATION POLICY # WC 3486802 EXPIRATION DATE: 4/1/06

NATURE OF WORK IN DETAIL: CONSTRUCT NEW OFFICE SPACE ON 1ST + 2ND FLOOR
OF IN EXISTING BUILDING LOCATED AT 2420 DEL PASO RD.

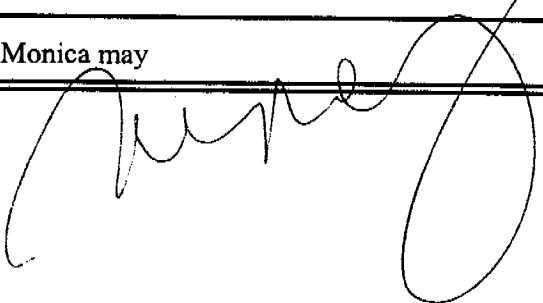
OCCUPANT/TENANT: DEPT. OF CONSUMER AFFAIRS VALUATION: \$ 774,840

FLOOD STATUS					S.C.A.T.				
JOB DESCRIPTION					BLDG <input type="checkbox"/> SHELL <input type="checkbox"/> APT <input type="checkbox"/> TI () <input type="checkbox"/> REM () <input type="checkbox"/> SW <input type="checkbox"/> FIRE <input type="checkbox"/> ADD <input type="checkbox"/> OTHER <input type="checkbox"/>				
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC	SITE	FIRE	
# Stories	1 st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File
						SPR	ALARM		
B	L	P	M	E	F	S		D	PW UTIL

COMMENTS:

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

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 2420 Del Paso Road	APN: 225-0070-082
DRPB AREA / PUD / SPD: Del Paso Road PUD/Ex North DRD	ZONING: EC-65-PUD
EXISTING LAND USE: 107,154' office building	
PROPOSED USE: First time TI for total 35,220 square feet for Department of Consumer Affairs office, to be split between 2 floors as follows: 17,503 1 st floor and 17,717 for 2 nd floor.	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input checked="" type="checkbox"/>	Application(s) COMPLETED: P99-027 (7-22-99) P00-078. Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: No exterior changes. Office use in office building. Use okay. Building designed for office use, so no parking concerns.	
DATE: 7/7/2005	BY: Monica may 

CITY OF SACRAMENTO

30 DAY TEMPORARY
Certificate of Occupancy

For Information Contact (916) 808-5716

Building Address: 2420 DEL PASO BLVD. Permit No.: 0509932
Building Use: OFFICE Occupancy: B
Building Owner: MARVIN OATES TRUST Construction Type: III-N
Owner Address: SACRAMENTO CA Sprinkled? Yes No
Portion of Building Occupied: ENTIRE Area: 35220 Sq. Ft.

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

01-09-06
Date

By: (Print)

Carolyn Cooper
Sign

RON BEEHLER
CHIEF BUILDING OFFICIAL

[TCO approvals:: RCY, DCY, SLG, DIH, MF]

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



**SACRAMENTO FIRE DEPARTMENT
FIRE PREVENTION DIVISION**

Code Enforcement Unit
5770 Freeport Blvd, Suite 200
Sacramento, CA 95822
Phone: (916) 433-1300/Fax: 433-1677

Development Services Unit
2101 Arena Blvd., Suite 200
Sacramento, CA 95834
Phone: (916) 808-5558/Fax: 566-3640



CORRECTION NOTICE

BUSINESS	<u>Dept. Consumer Affairs</u>	DATE	<u>1/8/06</u>
ADDRESS	<u>2420 Del Paso Rd.</u>	CASE#	_____
RESPONSIBLE	<u>Marty</u>	OCC #	_____
PHONE #	<u>997-2411</u>	PERMIT #	<u>0509932</u>
INSPECTOR NAME (PRINT)	<u>Gary Paul</u>	PHONE #	<u>808-1010</u>

①	Add Additional Horn/strobes in Room indicated on inspection Dated 1/8/06.	1
		2
②	Repair Emergency lighting as indicated.	3
③	Obtain Revisions of Fire Alarm Plans to Add Devices indicated.	4
		5
④	All Visual Devices checked and are ok on the East side of 1st & 2nd Floors. As indicated on site plans.	6
⑤	Label all doors with Room numbers.	8
⑥	All Smoke Detectors & troubles tested as indicated on site plans.	9
		10
* ⑦	TCO Granted for consumer Affairs 1st & 2nd Floors East side. 1/8/06	11
		12
		13
		14
		15
		16
		17

I have read and understand the violations on this list and I agree to correct them. Responsible Initials: _____
The above violations shall be corrected immediately. I agree to a re-inspection date of _____ at _____ am/pm.

Received by (PRINTED NAME): <u>MARTY BECHTEL</u>	Signature: <u>Marty Bechtel</u>	Date: <u>1-8-06</u>
---	------------------------------------	------------------------

KEEP THIS NOTICE ON FILE FOR 18 MONTHS FROM DATE OF COMPLETION