

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0006184

Insp Area: 3

Thos Bros: 319H1 792

Site Address: 8449 SPECIALTY CR SAC

Parcel No: 064-0120-007

Sub-Type: NCOM

Housing (Y/N): N

CONTRACTOR

BUNTAIN CONSTRUCTION
4531 HARLIN DR
SAC CA

OWNER

IRISH CONSTR.&COMMUNICATIONS
2641 RIVER AV
ROSEMEAD CA 91770

ARCHITECT

Nature of Work: NEW WAREHOUSE INCLUDING 48% OFFICE

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 _____ License Number 537343 Date 8/31/01 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.)

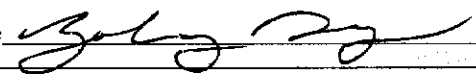
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s)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

Date 8/31/01 Applicant/Agent Signature 

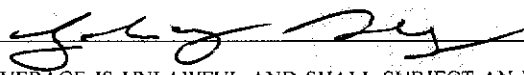
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

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 FUND Policy Number 1586842 Exp Date 07/01/2002

(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 8/31/01 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

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

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

ACTIVITY # 00-06184 Insp. Area 3 C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 8449 Speciality Circle Suite _____
 PARCEL # 064-0120-007

CONTACT		LICENSED CONTRACTOR Lic No. # _____	
Name <u>Laura Kass</u>	Name THANKA <u>TBD</u>		
Address <u>9104 Folsom Blvd. P.M.B #137 SAKS 827</u>	Address _____		
Phone <u>916-264-7604</u> FAX <u>360-7604</u>	Phone _____ FAX _____		
E-mail <u>allaccesspermits@me.com</u>	E-mail _____		
ARCHITECT/ENGINEER		OWNER	
Name <u>Nakaishi Associates</u> <u>LA</u>	Name <u>Irish Communications (Greg Ward)</u>		
Address <u>2910 W. Broadway Suite 100 91041</u>	Address <u>2641 River Ave. Rosemead CA 91770</u>		
Phone <u>323-255-1008</u> FAX <u>323-255-1015</u>	Phone <u>626-288-8530</u> FAX <u>626-288-6782</u>		
E-mail _____	E-mail <u>6782</u>		

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

NATURE OF WORK IN DETAIL: new warehouse (office 48% incl.)

OCCUPANT/TENANT: IRISH Construction VALUATION: \$ 673,322.81
~~450,000~~ B.7

FLOOD STATUS: <u>X</u> <u>ONE</u>				S.C.A.T.						
JOB DESCRIPTION		<input checked="" type="checkbox"/> 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"/> OTH
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDC	<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 fl Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vio. File		
<u>2</u>	<u>7453</u>	<u>9761</u>		<u>SI/B</u>	<u>III-N</u>	<u>Y/N</u>	<u>18/15</u>	[H]	[Quad]	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S	<input checked="" type="checkbox"/> D	<input checked="" type="checkbox"/> PW	<input checked="" type="checkbox"/> UTL	

COMMENTS: _____

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

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 (MUST BE FILLED OUT COMPLETELY)

OWNER'S NAME IRISH Construction
 OWNER'S ADDRESS 2041 River Ave. Rosemead CA 91770
 PROJECT ADDRESS 3441 Specialty Circle
 PARCEL NUMBER 004-0120 007 LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS _____

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 Project Coordinator
 DATE 3-13 01 PHONE NUMBER 612 7604

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 0004184
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 9808
 SIGNATURE [Signature]
 TITLE BLDG TECH DATE 15 AUG 01

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT E. J. Hill
 DISTRICT CERTIFICATION NO. 27840

EXEMPT	COMMENTS
RESIDENTIAL/APT/CONDO	SQ FT X \$ = \$
COMMERCIAL/INDUSTRIAL <u>9808</u>	SQ FT X \$ <u>331</u> = \$ <u>3236 64</u>
OTHER FEE TYPE	SQ FT X \$ = \$
TOTAL FEES COLLECTED	= \$ <u>3236 64</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

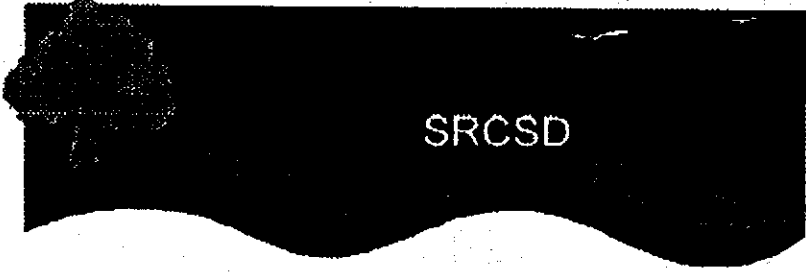
SIGNATURE [Signature] DATE 01/20/01
 TITLE _____

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

CRB 3236.64

Parcel No. **064-0120-007**

8449 SPECIALTY CR



June 8, 2000

RECEIVING FAX: 361-7604

SENDING FAX: 875-6253

TO: **LAURA KASS**
ALL ACCESS PERMITS

FROM: **ROBB F. ARMSTRONG**
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

PHONE NUMBER: 875-6756

RE: **SEWER FACILITY IMPACT FEES**
8449 SPECIALTY CR.

APN # 229-0023-027
PLAN CHECK # 00-6184C

The Sewer Facility Impact Fees due for a 9,761sq.ft. "Office/Warehouse" on the above-mentioned 1.524+N. parcel are as follows: \$23,410. Please note that this fee is based on information provided by the customer and is subject to change if the data supplied is changed. Contact Water Quality Engineering, Customer Service Section @ 875-6756 with any questions or concerns regarding this quote.

APN # 064-0120-007 = 1.524+N. x 5.5 = 8.4 esd's
6.8 esd's x \$473 = \$3,216 CSD-1 (19% CSD-1 credit, 1.6 esd's)
8.4 esd's x \$2,404 = \$20,194 SRCSD
Total Due = \$23,410

Please note that this fee is due and payable @ 827 Seventh Street, Room # 105, Window 11.

Thank You,
Robert F. Armstrong

PLAN CHECK ROUTING PROCEDURE

Date Received: 6/7/00 Plan Check #: 00-06184
Project: NEW Warehouse + 4870 Office
Address: 8449 SPECIALTY CIRCLE
Legal Description: 064-0120-007
Contact Person: Laura Kass Telephone: 612-7609
Address: 9647 Folsom Bl
Architect or Civil Engineer: UNEA ARCH ASSOC. Telephone: (323)-2551048

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: Yes No Date Received: _____
Approved: _____ Disapproved: _____
Removal of abandoned driveway: _____
Comments: _____

PUBLIC WORKS - DEVELOPMENT SERVICES ENCROACHMENT/EXCAVATION PERMIT

Encroachment/Excavation Permit Required: Yes No
Approved: _____ Disapproved: _____
Comments: _____

DEPT. OF UTILITIES DRAINAGE, SEWER, & WATER

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

PLANNING AND DEVELOPMENT SERVICES SITE CONDITIONS

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

Date of Request: 6/7/00
By: BZ

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 8449 SPECIALTY CIR.

Assessor's Parcel Number: 064-0120-007

Previous Use: Vacant

Description of Request/Proposed Use:

New ~~FF~~ Warehouse with office
in excess of 25%.

Is This a Change of Use? Yes

Prior Applications for Project Site(P#, Z#, DRPB#): Z99-120
Zoning Designation: M-2-S

Comments: Must comply w/ conditions
of Spec. Permit (Z99-120)

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 Bour 6/7/00

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

MICROFILM AFTER FINAL

CITY OF SACRAMENTO
DEPARTMENT OF PLANNING & DEVELOPMENT
ZONING ADMINISTRATOR
1231 I Street, Sacramento, CA 95814

ACTION OF THE ZONING ADMINISTRATOR
On Wednesday, November 10, 1999, the Zoning Administrator approved with conditions a special permit to allow additional office space exceeding the 25 percent allowed by right in the Heavy Industrial (M-2S) zone for the project known as Z99-120. Findings of Fact and conditions of approval for the project are listed on pages 3-4..

Project Information

Request: **Zoning Administrator Special Permit** to exceed the maximum allowed 25 percent office space in the industrial M-2S zone for 4,654 square feet of office within a proposed 9,761 square foot building (48 percent) located on 1.52± developed acres in the Heavy Industrial (M-2S) zone.

Location: 8449 Specialty Circle (D6, Area 3)

Assessor's Parcel Number: 064-0120-007

Applicant: Laura Kass-All Access Permits
9647 Folsom Boulevard, RM B#137
Sacramento, CA 95827

Property Owner: Greg Warde-Irish Construction
2641 River Avenue
Rosemead, CA 91770

Project Planner: Sandra Yope

General Plan Designation: Heavy Commercial or Warehouse
South Sacramento
Community Plan Designation: Industrial
Existing Land Use of Site: Industrial
Existing Zoning of Site: Heavy Industrial, M-2S

Surrounding Land Use and Zoning:
North: M-2S; Vacant and Industrial
South: County; Industrial
East: M-2S; Vacant
West: M-2S; Industrial

Property Dimensions: Irregular
Property Area: 1.52± acres

MASOUD DEJBAN, STRUCTURAL ENGINEER

PROJECT Irish Construction DATE 10/19/01 SHEET NO A-1
Sacramento JOB NO _____

Field Clarifications & Revisions

- 1- Hairpins as shown on elevations are required only from bottom of lintel to bottom of panel.
- 2- All Anchor bolts could be replaced with epoxy bolts using Simpson SET Epoxy (8" Min. Embedment) Size & Spacing should remain the same.
- 3- All ledger bolts could be Nelson Studs in lieu of Anchor bolts.

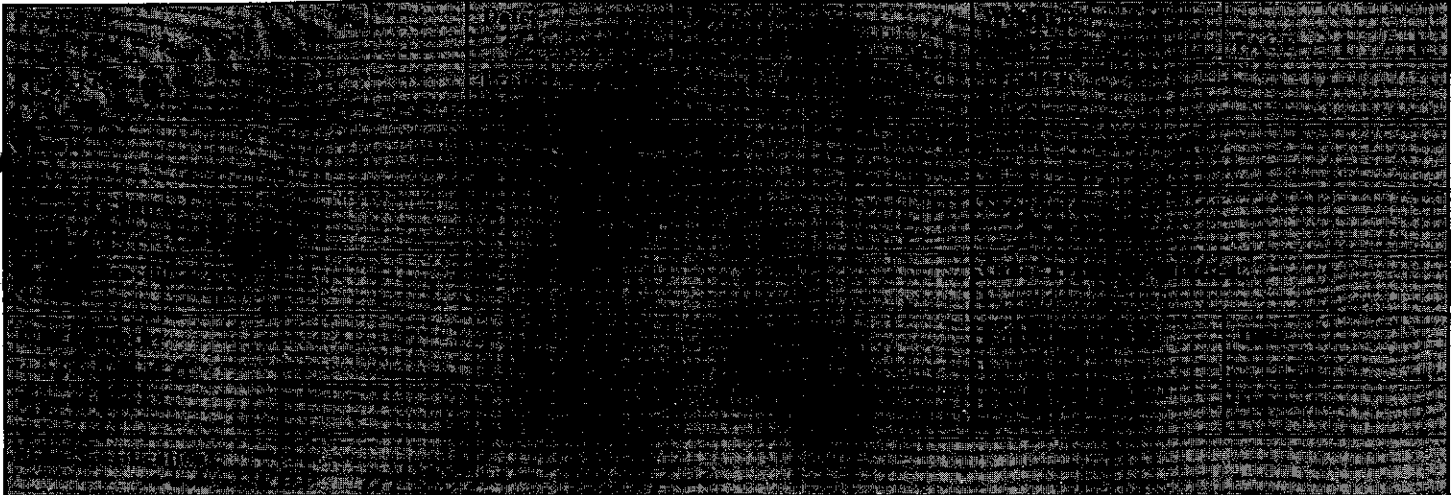


DAILY FIELD REPORT

Project # 3761-13200	Date 9/18/07	Day	Weather D/C	PAGE 1/1
Project Name 725th Construction	Project Location SAC	Permit #		
Client Mountain View		Client's Representative		
General Contractor		Supervisor		
Sub-Contractor		Other Persons Contacted		
Type of Work Corkdown	Location/Element Slopes	Equipment used	Time	
Type of Work	Location/Element	Equipment used	Time	
Plans/specifications				
<p>opened at 2049 special circle, this one Bldg needed footings installed.</p> <p>observed Section and all appears to firm stable soil and weak layers of no basis at time of observation. soil was dry and will be monitored prior to concrete pour. no discrepancies were noted.</p>				
<p>ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:</p>				
Copy received by/given to:	Arrived: 9:00	Departed: 3:00	Report by: White A B	



DAILY FIELD REPORT



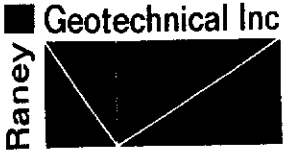
INSPECTED REBAR FOR EXTERIOR + INTERIOR FIGS +
FOUND THAT PLACEMENT WAS PER DETAILS 1, 2, + 3 S-6,
+ MAINTAINED 3" CLEARANCE FROM EARTH. REBAR WAS
GRADE 60 PER NOTES, SHEET S1-1. (FOR FIGS (EXTERIOR))
WERE PLICED PER NOTE, SHEET S-7. NO DISCREPANCIES
NOTED.

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: 1/45	Departed:	Report by: [Signature]



DAILY FIELD REPORT

Object # 581139-20	Date 9-24-01	Day MON	Weather Partly cloudy	PAGE 1 of 2
Project Name West Coast Blvd	Project Location 2999 Sycamore Cir		Permit #	
Client Bentall Inc	Client's Representative Brent Crane		Superintendent	
General Contractor	Sub-Contractor		Other Persons Contacted	
Type of Work Concrete	Location/Element PAVING DRIVE	Equipment used	Time 5.75	
Type of Work	Location/Element	Equipment used	Time	
Plan Specifications NANNISKI ASSOCIATES 8-31-01				
ARRIVED AT SITE INSPECTED FOOTINGS TO BE POURED AND THEY WERE CLEAN AND IN ORDER				
OBSERVED CONCRETE PLACEMENT BY PUMP (VALLEY) AND USE OF MECHANICAL VIBRATION HAND LEVELLED AND OBSERVED REBAR MAT BEING HELD IN PLACE WHILE CONCRETE WAS PUMPED IN				
TOOK ONE SAMPLE AND MADE 4 CYLINDERS MIX # 277 3000 P.S.F.				
NO TRUCKS OVER 90 MIN ONE TRUCK OVER SLUMP				
AREA POURED COMPLETE PERIMETER FOOTINGS AND INTERIOR FOOTINGS				
37 YDS PLACED				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input checked="" type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:				
Copy received by/given to: BRUCE	Arrived: 9:30	Departed: 2:45	Report by: A.J. MAGAROWICZ	



DAILY FIELD REPORT

Project #: <i>CBT-189,00</i>	Date: <i>9-25-01</i>	Day: <i>TUE</i>	Weather: <i>Cloudy</i>	PAGE <i>1</i> of <i>11</i>
Project Name: <i>Highway 405</i>	Project Location: <i>8449 Security Ct.</i>	Partial #:		
Client: <i>Continental</i>	Client's Representative:		Superintendent:	
General Contractor:	Sub-Contractor:		Other Persons Contacted:	
Type of Work: <i>CONCRETE PAV</i>	Location/Element: <i>CLY</i>	Equipment used:	Time: <i>1.0</i>	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications:				
<i>PICK UP 4 CYLINDERS CAST 9-24-01 FOR LAB TESTS</i>				
<i>CYLINDERS WERE PROTECTED AND APPEARED UNDISTURBED</i>				
<i>CYLINDERS WERE COVERED AND SECURED FOR TRANSPORT</i>				
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:				
Copy received by/given to: <i>LIFE STORAGE BOX</i>	Arrived: <i>5:15</i>	Departed: <i>5:30</i>	Report by: <i>A.J. MARRONCZ</i>	

DAILY FIELD REPORT

Project #: <i>351-137-20</i>	Date: <i>9/20/01</i>	Day: <i>Friday</i>	Weather:	PAGE <i>1</i>
Project Name: <i>Elgin Project Bldg</i>	Project Location: <i>9409 Sacramento Blvd. S.O.B. CA</i>		Permit #:	
Client: <i>Bechtel</i>	General Contractor:		Client's Representative: <i>Blunt</i>	
Sub-Contractor: <i>Shawmut Group</i>	Other Persons Contacted:		Superintendent:	
Type of Work: <i>Reinforcement Observation</i>	Location/Element: <i>S.O.B.</i>	Equipment used:	Time: <i>1.5</i>	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: <i>AS 1000 & 11500</i>				
<i>Arrived @ site + Renewed Plans for Reinforcement Prod. in S.O.B. in Lines A-E + 1-2 & 10.</i>				
<i>I observed placement of # 3 Bars in 18" on depth on day 4 of Bars in 16" as Floor Doweled as Recorder. All 100% Pass & observed smooth down to see Photo of Plan on SAT 5-2</i>				
<i>W/NO Discrepancies noted</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: <i>Raney</i>	Arrived: <i>8:00</i>	Departed: <i>8:45</i>	Report by: <i>J. H. [Signature]</i>	

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 8449 Specialty Circle Permit No. 0006184

Building Use: Warehouse/Office Occupancy: B/S2/S3

Building Owner: Irish Construction & Communication Construction Type: III-N

Owner Address: 2641 River Avenue Sprinkled? [] Yes [] No

Portion of Building Occupied: ENTIRE Area: 9,808 Sq. Ft.

06/10/02

Date

By:Print



Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finaled By: DPB,LLS,KR,MJG,CP]

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 City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE