CITY OF SACRAMENTO		Permit No: 0107618
1231 I Street, Sacramento, CA 95	814	Insp Area: 3
化乳化碱 医骶髓囊炎 化二苯基 海水医疗的		Thos Bros:
Site Address: 5849 88TH ST SAC		Sub-Type: REP
Parcel No: 062-0080-020		Housing (Y/N): N
CONTRACTOR	OWNER	ARCHITECT W. Francisco
CONTRACTOR	<u>OWNER</u> VERMILLION MICHAEL L	ARCHIECT
	5849 88TH ST	· · · · · · · · · · · · · · · · · · ·
	SACRAMENTO CA 95828	
Nature of Work: ELECTRICAL CORRE	CTION PER FIRE SAFETY CORRECTION	NOTICE
CONSTRUCTION LENDING AGENCY : 1	hereby affirm under penalty of perjury that there is a co	onstruction lending agency for the performance
of the work for which this permit is issued (Sec. 3097		
Lender's Name	Lender's Address	<u> </u>
		T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(commencing with section 7000) of Division 3 of the	TON: I hereby affirm under penalty of perjury that Business and Professions Code and my license is in fu	I am licensed under provisions of Chapter 9
		그는 그 가게 하는 뿔이 맞으는 불편이다고 있다. 너
License Class License Number Date	Contractor Signature	-
OWNER-BUILDER DECLARATION: I he	ereby affirm under penalty of perjury that I am exen	upt from the contractors License Law for the
following reason (Sec. 7031.5, Business and Professi	ions 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 a	applicant for such permit to file a signed statement that encing with Section 7000) of Division 8 of the Busine	ess and Professions Code) or that he or she is
exempt therefrom and the basis for the alleged exem	ption. Any violation of Section 7031.5 by any applica	nt for a permit subjects the applicant to a civil
penalty of not more than five hundred dollars (\$500.0	00);	er en
I as a owner of the property, or my employee	s with wages as their sole compensation, will do the wo	ork, and the structure is not intended or offered
for sale (Sec. 7044, Business and Professional Cod	e: The Contractors License Law does not apply to a	in 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 old within one year of completion, the owner-builder w	will have the burden of proving that he/she did
not build or improve for the purpose of sale.)	A C	·
MO I as owner of the property on evalueively	contracting with licensed contractors of confident	AND TOTAL TOTAL TOTAL Professions
Code: The Contractors License Law does not apply	to an owner of property who builds or improves there	on, and who contracts for such projects with a
contractor(s) licensed pursuant to the Contractors Lic	tense Law).	[1] (Barting State of State o
I am exempt under Sec	B & PC for this reason:	<u> </u>
Date 10-11-01	Owner Signature	PLANNING
	Owner Signature	SERVICES
IN ISSUING THIS BUILDING PERMIT, the app	licant represents, and the the clies on the representate ation or accompanying drawings and that the improver	ion of the applicant, that the applicant verified
or private agreement relating to permissible or prohil	bited locations for such improvements. This building p	permit does not authorize any illegal location of
any improvement or the violation of any private agre	ement relating to location of improvements.	
I certify that I have read this application and state t	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 abovement	entioned property for inspection purposes.
/ Date \0-((- 0)	Applicant/Agent Signature	\mathcal{N}
WORKER'S COMPENSATION DECLARA	TION: I hereby affirm under penalty of perjury one on to self-insure for workers' compensation as provided	of the following declarations:
performance of work for which the permit is issued.	at to sen-instite for workers compensation as provided	tor by sociality to be an experience of the many
I have and will reciptain accordant common popular	tion insurance, as required by Section 3700 of the Lal	or Code for the performance of the work for
which this permit is issued. My workers' compensati	ion insurance carrier and policy number are:	w
G	Policy Number	Exp Date
Carrier	·	
(This section need not be completed if the pe	rmit is for \$100 or less) I certify that in the performan	ce of the work for which this permit is issued,
shall not employ any person in any manner so as to subject to the workers' compensation provisions of S	o become subject to the workers' compensation laws of ection 3700 of the Labor Code, I shall forthwith complete.	y with those provisions.
•		. .
	Applicant Signature	*************************************
WARNING: FAILURE TO SECURE WORKER'S	COMPENSATION COVERAGE IS UNLAWFUL A	AND SHALL SUBJECT AN EMPLOYER TO
CRIMINAL PENALTIES AND CIVIL FINES UP	TO ONE HUNDRED THOUSAND DOLLARS (\$ OR IN SECTION 3706 OF THE LABOR CODE, INTE	100,000) IN ADDITION TO THE COST OF 🦠
COMPENSATION, DAMAGES AS FROVIDED PO	AN IN SECTION 5700 OF THE EMBOR CODE, INTE	CONTRACTOR OF THE
	PART TRAINING TO WORK TO NOT COMMEN	CUD BUITHIN 100 DANC

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

7 1.	I personally plan to provide Improvement (yes ortio)	the major labor and materials for constru	ction of the proposed
1 2.	I (have have not) A building permit for the pro-	oposed work.	signed an application for
3.	I have contracted with the fo	ollowing person (firm) to provide the pro	posed construction:
	Name	Address	100 - 100 -
	City	Telephone	·
	Contractors License No.		
4 .	I plan to provide portions of Supervise, and provide the	f the work, but I have hired the following major work.	person to coordinate,
	Name	Address	
	City	Telephone	
	Contractors License No		
	Work indicated:	ork but I have contracted (hired) the foll	
	Name David A Hill Cons	Address Phone CCL#630510 truction (916) 372 4455 CCL#527089 tal Fabicating 3710192	Type of work townstan
4	HARRY GROCN Me	tal Fabicating 3710192	Dust collectorinstall + All Duet Work
,	gned		·
	ob Address <u>5849</u>	88H ST	
p	ermit No: 010761	8	•

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION

PERMIT SERVICES SECTION

1231 I Street, Rm. 200

Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0107618

Insp. Area 3

Applicant MUST complete ALL Unshaded areas

ADDRESS	5849	88 Th	<u>s+</u>	<u> </u>			Suite		_
PARCEL #	<u> </u>	p'L' OC	780 .	7.2-0					
City/State/Zip	FARY O.	ento (A 9582	/ N A C 7 PI	ame ddress ity/State/Zip	CONTRACTOR			
Address7 City/State/Zip Phone_567	ARCHIT terface 707 Com SACTAM 3700 yb@inte	mans to	Alif 958 567-37	1 200 A 2 8 C 37 P	ddress <u>3 s</u> ity/State/Zip none(914)	OWN chacl Vern OII Morse Sacranen 488-3875	illion Ave to Cal	£ 95	821
→ Will permi	ttee have any <u>e</u> r	mployees on t	he jobsite? 🗖	No ☐ Yes →	INSURAN	CE CO:			
→ worker	R'S COMPENS	SATION POI	ICY #			EXPIRA	TION DATE:		
					ection	rrection notic			
OCCUPAN	r/tenant: 人	<u> Aichael</u>	s turv	111111111111111111111111111111111111111	310000000000000000000000000000000000000	VALUATION	:\$ /500)	
FLOOD STA	TUS:	1		S.C.A.T.					
JOB DESCR	IPTION	BLDG	SHELL .	APT TI()	REM SW	/ FIRE	ADD	OTH
INSPECTIO	N DISCIPLIN	TES .	BLDG	месн	PLUMB	ELEC	SITE	F	IRE
# Stories	1st firArea.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N	Fed Code		. File [Quad]
В	1	Р	М	(E)	F	s	D	PW	UTIL
COMMENTS									
REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No									

dssu/forms/commercialapp. [rev. 03/28/00]



SACRAMENTO CITY FIRE DEPARTMENT FIRE PREVENTION DIVISION

1231 I Street, Suite 461, Sacramento, CA 95814-2979 Phone: (916) 264-5863 / Fax: (916) 264-8130



FIRE SAFETY CORRECTION NOTICE

OCCP # PERMIT #	4275
PHONE #	381. 9086 x 10
acility and found the	following violations of
Exchan- Exchan- pand Ep Exchan- proved for and for permanent RED all work de perton e installati	inspected have extensive condi- clocke trunking lefting
e within <u>90</u> days nd 5:00 p.m., Monday	s. If you have any y through Friday.
	PERMIT # PHONE # acility and found the paral Exchan- Exchan- Mustine 2 near time 2 near time 2 near time 2 near time 4 permanent All work S de pertme e instellati e within 90 days



DEPARTMENT OF NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO CALIFORNIA

1231 I STREET ROOM 200 SACRAMENTO, CA 95814-2904

916-264-7619 FAX 916-264-7046

DEVELOPMENT SERVICES DIVISION

EXHIBIT 1

I have read and am familiar with the contents of the City's Standard

Owner-Builder Notification and Owner-Builder Verification, as required by

California Health and Safety Code Section 19830 and 19831. I authorize my

agent(s)

to sign the Owner-Builder Verification on my behalf.

Signature

Print Name

Michael Vermillion

Address

3011 morse aux

Sac Ca 95821

Telephone 916 0 4883875