

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0003224
Insp Area: 3

Site Address: 6050 SOUTH WATT AV SAC
Parcel No: 062-0060-099 6050 SOUTH WATT AVE

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

CONTRACTOR
PACIFIC BUILDERS
5421 84TH ST
SAC, CA. 95826

OWNER
YOUNGER BRYON L
6050 SOUTH WATT AV
SACRAMENTO CA 95829

ARCHITECT

Nature of Work: PATIO COVER (SPRINKLERED)

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 B1 License Number 214409 Date 10-10-00 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: PLANNING

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 10-10-00 Applicant/Agent Signature [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 159683600 Exp Date 10/01/2001

(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 10-10-00 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.

0003224

Date of Request: 3/28/00
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project
Address: 6050 S. Watt Ave

Assessor's Parcel Number: 062 - 0060 - 099

Previous Use: warehouse

Description of Request/Proposed Use: patio cover - 25' x 105'

Is This a Change of Use? no

Prior Applications for Project Site(P#, Z#, DRPB#): P90-437 (lot split)
Zoning Designation: M-2(S)

Comments: not within Design Review district. meets
all setbacks.

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: Arwen Wacht 3/28/00

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
BUILDING INSPECTION DIVISION
APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: PACIFIC BUILDERS Phone: 383-3168
 Site Address: 6050 South Watt AVE 75829 Suite: _____
(Street) (Zip)
 Business Owner/Representative: Jon Stockton Phone: 383-3168
 Nature of Business: Patrol
 Property Owner: Rick Degen Phone: 383-3168
 Address: 5421 84th Street Suite: _____
CA (City) CA (State) 95821 (Zip)

2. Are you developing an undetermined tenant space? Yes ___ No Is this permit for a shell building? Yes ___ No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes ___ No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No

7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No

If you answered "yes" to questions #6 and/or #7, complete the RMPP Informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No ___

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Jon Stockton
(Print)
[Signature]
(Signature) 16.10.00
(Date)

BID Use Only: Plan Ck# _____	Permit # <u>0003224</u>
OK to issue prmt? <input checked="" type="checkbox"/> <u>10/10/00</u> F.D. Appr Req'd? <input checked="" type="checkbox"/> No	init date
Hold on Certificate of Occupancy? <input checked="" type="checkbox"/> No	
Fire Dept. Use Only:	
OK to issue permit? init _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
12/03/1999

PRODUCER (916)443-0200 FAX (916)443-0251

Owen Dunn Insurance Services,

License Number: 0670167

2831 G Street Suite 200

Sacramento, CA 95816-3721

Attn: Judy Yakes

Ext: 1627

INSURED

Pacific Builders, Inc.

5421 84th Street
Sacramento, CA 95826

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- COMPANY A Northern Ins Co of NY c/o Zurich
- COMPANY B Villanova Insurance Company c/o AARIS
- COMPANY C
- COMPANY D

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	CMM25342982	04/04/1999	04/04/2000	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COM/PROP AGG \$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1,000,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 300,000
					MFD EXP (Any one person) \$ 10,000
A	AUTOMOBILE LIABILITY	CMM25342982	04/04/1999	04/04/2000	COMBINED SINGLE LIMIT \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE \$
	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY \$
					EACH ACCIDENT \$
					AGGREGATE \$
A	EXCESS LIABILITY	UBA93201391	04/04/1999	04/04/2000	EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE \$ 2,000,000
	OTHER THAN UMBRELLA FORM				\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCI1231179	10/01/1999	10/01/2000	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	THE PROPRIETOR, PARTNERS/EXECUTIVE OFFICERS ARE:				EL EACH ACCIDENT \$ 1,000,000
	<input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL DISEASE - POLICY LIMIT \$ 1,000,000
	OTHER				EL DISEASE - EA EMPLOYEE \$ 1,000,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
Job: Orowheat - 1201 W. El Camino Ave., Sacramento

General Liability Additional Insured per form 2M2101 Ed. 1-96 attached to the insured's policy.
*Upon non-payment of premium, 10 day notice of cancellation applies.*REPLACES CERT ISSUED 12/02/99*

CERTIFICATE HOLDER

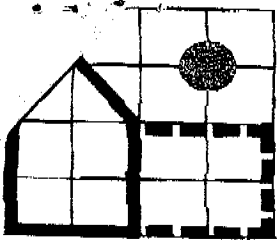
LVI Environmental Services, Inc.
Fax To: (510) 553-0495
851 81st Avenue
Unit B
Oakland, CA 94621-2509

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Judy Yakes/VRB

Judy Yakes



**PACIFIC
BUILDERS**

1/17/00

WESTERN BUILDING SUPPLIES
ATTN: BYRON YOUNGER

PACIFIC BUILDERS TO CUSTOM BUILD, SHIP AND INSTALL 1-25' X 105' COMMERCIAL COVER. THE COVER IS TO BE ATTACHED 20' HIGH, ABOVE THE EXISTING FLOOD LIGHT. THE COLUMNS ARE 6" X 6" STEEL POST, EMBEDDED IN 6' DEEP SPECIAL FOOTINGS. PACIFIC BUILDERS ALSO TO INSTALL SONATUBES AROUND THE BASES OF THE COLUMNS FOR EXTRA SUPPORT. THIS WILL ALLOW A 21' SPAN BETWEEN POSTS. THE BEAMS ARE 10" X 3 1/2" 12 GAGE GALVANIZED C-BEAMS. THE TOP AND SIDES OF THE COVER ARE TO BE CREAM IN COLOR TO MATCH THE COLOR OF THE BUILDING.

OUR PRICE INSTALLED \$ 34,560

PERMITS :

PERMITS AND ENGINEERING INCLUDED IN ABOVE PRICE.

SPRINKLERS:

60 FIRE SPRINKLERS TO BE INSTALLED ON STEEL CANOPY. SPRINKLERS TO BE INSTALLED FOR ALL FIRE CODE REASONS.

OUR PRICE INSTALLED: \$5,890.00

TOTAL AMOUNT: \$40,450.00

35,000

5421 84th Street • Sacramento, CA 95826 • (916) 383-3168

Manufacturers and Contractors: Distributors of Alcan & Tru Lok Products
Contractor's License No. B1 214409

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT
FROM: Troy Malaspino
Fire Marshal
SUBJECT: FIRE SYSTEM INSPECTION

DATE: 11-16-00

A final inspection of the newly installed fire system at:

6050 S. WATT AVE

Has been conducted by Inspector

A. BARNES

On

11-14-00

00-03224-200
Permit Number 194 Square Footage

TI + OH sprinklers
Type of Inspection

They system is acceptable by this department.

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

00-372
F.D. Reference Number

✓

**City of Sacramento
Water and Sewer Service Quotation**

FY 99/00

Date: 06/19/00 Time: _____		Planning No.: None		Plan Check No.: 0003224	
Address: 6050 South Watt Ave.				Parcel No.: 062-0060-099	
Description: Fire Sprinklers					
Subdivision Map: _____				Water Page No.: _____	
Estimate By: Dilley					
Engineering Firm: Pacific Consulting Engineers				Project Engineer: _____	
				Phone No.: _____	
				Fax No.: _____	
Sewer Jurisdiction: <input type="checkbox"/> County <input type="checkbox"/> City					
Comment No.1 Comment No.2 Comment No.3 Comment No.4 Comment No.5 Comment No.6					
TOTAL WATER DEV. FEES:		\$0	1 hrs x \$75 per hour =		\$75
TOTAL SEWER DEV. FEES:		\$0	or \$300.00 (whichever is greater)		
				Total on-site grading and drainage review fee:	
				\$75	

Water Service Quotations

ENTR

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									
											\$0	
											\$0	
											\$0	
											\$0	
											\$0	
											\$0	
											\$0	
4" TAP AND 3" METER												
											n/a	
											n/a	
ABANDONMENT												
					in.							
					in.							
CREDIT												
					in.							
					in.							
								1				
								1				
								0	Fire Hydrant			
Total for Water											\$0	\$0

Sewer Service Quotations

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

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

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