

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9906966
Insp Area: 3

Site Address: 5400 SOUTH WATT AV SAC
Parcel No: 063-0053-020 BUILDING A

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

CONTRACTOR
BUZZ OATES ENTERPRISES
8615 ELDER CREEK RD
SACRAMENTO CA 95828

OWNER
BUZZ OATES ENTERPRISES II
8615 ELDER CREEK RD 200
SACRAMENTO CA 95828

ARCHITECT

Nature of Work: CONCRETE TILT UP SHELL

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 Self (BUELL) 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 702621 Date 14 Feb 05 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 3 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 May 19 00 Owner Signature [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 19 May 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 CALIFORNIA INDEMNITY INS. CO. Policy Number N5048119D Exp Date 03/01/2000

____ (This section need not be completed if a 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 19 May 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.

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 # 9910066 Insp. Area

Applicant MUST complete ALL Unshaded areas

ADDRESS 5400 South Watt Bld A Suite Bldg A
 PARCEL # 063-0053-070

CONTACT Name <u>Michael J. Peters (Mike)</u> Address <u>8615 Elder Creek 95828</u> Phone <u>381-3600</u> FAX <u>381-4707</u> E-mail <u>mpeters@buzzoates.com</u>		LICENSED CONTRACTOR Lic No. # <u>70621</u> Name <u>Buzz Oates Enterprises II</u> Address <u>8675 Elder Creek 95828</u> Phone <u>381-3600</u> FAX <u>381-4707</u> E-mail <u>mpeters@buzzoates.com</u>	
ARCHITECT/ENGINEER Name <u>Leo McGlade & Assoc</u> Address <u>3417 Arden Way, Suite A.</u> Phone <u>488-8380</u> FAX <u>488-2062</u> E-mail		OWNER Name <u>Buzz Oates Ent. II</u> Address <u>8675 Elder Creek 95828</u> Phone <u>381-3600</u> FAX <u>381-0760</u> E-mail <u>mpeters@BUZZOATES.COM</u>	

→ Will permittees have any employees on the jobsite? No Yes → INSURANCE CO: Calif. Fidelity
 → WORKER'S COMPENSATION POLICY # N5048119D EXPIRATION DATE: 3/00

NATURE OF WORK IN DETAIL: Spec. tilt-up concrete shell Bldg
Bld 'A' 18,400 SF
tot. site value needed

OCCUPANT/TENANT: unknown VALUATION: (S)

FLOOD STATUS:		S.C.A.T. <u>XI</u>								
JOB DESCRIPTION		BLDG	<u>(SHELL)</u>	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>(BLDG)</u>	<u>(MECH)</u>	<u>(PLUMB)</u>	<u>(ELEC)</u>	<u>(SITE)</u>	<u>(FIRE)</u>			
# Stories	Lst Cr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req <u>(Y/N)</u>	Fed Code	Vio. File		
		<u>18,400</u>		<u>S-1</u>	<u>III-N</u>	<u>(SPR)</u> <u>(ALARM)</u>	XXXX	[H]	[Quad]	
<u>(B)</u>	<u>(L)</u>	<u>(P)</u>	<u>(M)</u>	<u>(E)</u>	<u>(F)</u>	<u>(S)</u>	<u>(D)</u>	<u>(PW)</u>	<u>(UTIL)</u>	

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided None Faxed



CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
 1231 I STREET, ROOM 200, SACRAMENTO, CA 95814

Prior to issuance of a permit, the applicant shall complete Part I of this form. Part II and Part III shall be completed by the project Architect/Engineer and the Development Services Department as a part of the plan review process. Before permit issuance all parties must sign this agreement. Please note that failure to comply with special inspection requirements could be expensive in terms of retrofit design and construction as well as delays in the project.

PART I • SPECIAL INSPECTION AND TESTING AGREEMENT

PROJECT NAME New tilt-up Concrete Shell
 PROJECT ADDRESS 5400 South Watt
 PLAN REVIEW NUMBER 9906966
 PERMIT NUMBER _____
 OWNER'S NAME Buzz Oates Enterprises - Buzz Oates
 OWNER'S ADDRESS 8675 Elder Creek Rd Sac. 95828
 OWNER'S REPRESENTATIVE Mike Peters PHONE NUMBER (916) 381 3600

TESTING/INSPECTION FIRM(S) ITEMS
 1 Raney Geotechnical

CONTACT PERSON: John Raney - 922 1144
 2 _____

CONTACT PERSON: _____

PART II • SPECIAL INSPECTION AND TESTING AGREEMENT • INSPECTION REQUIRED

In accordance with Chapter 17 Section 1701 of the UBC, as adopted by this jurisdiction, SPECIAL INSPECTION is required as noted below:

PRECONSTRUCTION MEETING () REQUIRED () WAIVED

CODE SECTION	TYPE OF WORK	CONTINUOUS	PERIODIC
1701.5.1	CONCRETE	X	
1701.5.2	BOLTS INSTALLED IN CONCRETE		X
1701.5.3	SPECIAL MOMENT - RESISTING CONCRETE FRAME		
1701.5.4	REINFORCING STEEL AND PRESTRESSING STEEL TENDONS		X
1701.5	STRUCTURE WELDING		
1701.5.1	GENERAL		
	FIELD STRUCTURAL WELDING	X	
	SHOP STRUCTURAL WELDING (REQUIRING SPECIAL INSPECTION)		
1701.5.2	SPECIAL MOMENT - RESISTING STEEL FRAMES		
1701.5.3	WELDING OF REINFORCING STEEL		
1701.5.6	HIGH STRENGTH BOLTING		
1701.5.7	STRUCTURAL MASONRY		
1701.5.8	REINFORCED GYPSUM CONCRETE		
1701.5.9	INSULATING CONCRETE FILL		
1701.5.10	SPRAY APPLIED FIREPROOFING		
1701.5.11	PILING, DRILLED PIERS AND CAISSONS		
1701.5.12	SHOTCRETE		
1701.5.13	SPECIAL GRADING, EXCAVATION & FILLING		X
1701.5.14	SMOKE CONTROL SYSTEM		
1701.5.15	SPECIAL CASES		
1702	STRUCTURAL OBSERVATION PER SECTION 307 REQUIRED: () YES (X) NO		
SCC 9.26.1004	FLOOD PROOFING INSPECTION & CERTIFICATION		

OTHER: _____
 SPECIAL INSTRUCTIONS: _____

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 CATES
 OWNER'S ADDRESS 9615 Elder Creek Rd 95628
 PROJECT ADDRESS 5400
 PARCEL NUMBER 063-0053-000 LOT NO. _____
 SUBDIVISION NAME S. 4th Business Park
 NUMBER OF UNITS 1

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] Mike Peters
 TITLE OF APPLICANT Director of Construction Management
 DATE 16 Dec 99 PHONE NUMBER 361 3600

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 77-067166
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 18,400
 SIGNATURE [Signature]
 TITLE County Manager DATE Dec 2, 1999

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT EGUSD
 DISTRICT CERTIFICATION NO. 25043

EXEMPT	COMMENTS
RESIDENTIAL/APT/CONDO	SQ FT X \$ = \$ <u>6072.00</u>
COMMERCIAL/INDUSTRIAL <u>18,400</u>	SQ FT X \$ <u>0.3133</u> = \$ <u>5,764.00</u>
OTHER FEE TYPE	SQ FT X \$ = \$
TOTAL FEES COLLECTED <u>18,400</u>	<u>.33</u> = \$ <u>6072.00</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 MAR 16 2000
 TITLE [Signature]

PAID

MAR 16 2000

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

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO: _____		BLDG PERMIT NO: _____	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
		THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1		COMMERCIAL USE	UNITS
SRCSO			
CONSTRUCTION			
IN-LIEU			
TOTAL FEE			
APN: _____			
DESCRIPTION/ SUBDIVISION		LOT: _____	
PROPERTY ADDRESS _____			
OWNER _____			
MAILING ADDRESS _____			
CITY-STATE-ZIP		PHONE	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE _____			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

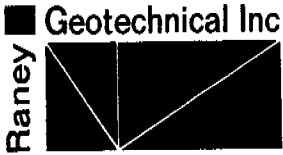
RECEIPT

DAILY FIELD REPORT

Project #: 146-315-01	Date: 9/7/01	Day: TUESDAY	Weather: 100° Sunny	PAGE: 21
Project Name: S. UAH BOSS PARK II	Project Location: SAC	Permit #:		
Client: B.O.E.	Client's Representative: DAN ROY			
General Contractor:	Superintendent:			
Sub-Contractor: BlueLine	Other Persons Contacted: Mike Smith			
Type of Work: REPAIR	Location/Element: PARAS	Equipment used:	Time:	
Type of Work:	Location/Element:	Equipment used:	Time:	
Plans/Specifications: Leo McClure & ASSOC.				
Arrived @ site meet w/ Mike Roy, check plans & details of				
S. UAH BOSS PARK II: OBSERVE TOP OF FOUNDATION WALL				
#4, #5, #6, on PARAS # 2, 3, 4, 5, 6, 7, 8, All OK.				
Foundational LATER, reference to per plan details and				
Discrepancies noted				
Bldg B: OBSERVE TOP OF 4" #6 TYP. REINFORCED				
FOOT ON PARAS # 35, 39. All OK, recheck drawings,				
LATER, & reference to per plan details and				
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: [Signature]	Arrived: 12:00	Departed:	Report by: [Signature]	

DAILY FIELD REPORT

Project #: 146-315-01		Date: 8-17-01	Day: FRI	Weather: CLEAR	PAGE 1/1
Project Name: SO. WATT BOSS PK II		Project Location: SO. WATT		Permit #:	
Client: BUZZ CATS			Client's Representative:		
General Contractor:			Superintendent: MIKE		
Sub-Contractor: BLUE LINE			Other Persons Contacted:		
Type of Work: REBAR TIES	Location/Element: PANELS		Equipment used:	Time: 4.5	
Type of Work: CONCRETE	Location/Element: PANELS		Equipment used:	Time:	
Plans/Specifications: LEO McGLADE 5-22-00					
<p>NOTED AT THE TIME OF THE VISIT THAT THE REBAR CORRECTIONS @ BOTTOM END OF PANELS 1-6 WAS LOWERED FROM 2" TO 1" FROM FACE TO FACE OF IT INTO BOTTOM (CON) CONTAIN PER DETAIL FIG 11 PER APPROVE PLANS</p> <p>INSPECTED PANELS AND THEY WERE CLEAN AND WE CAN OBSERVE CONCRETE PLACEMENT BY HAND (USE) USE OF MECHANICAL VIBRATION WAS BY THE USE OF PLACEMENT HAND SCREEN</p> <p>TOOK TWO SAMPLES AND MADE 8 CYLINDERS MIX # 58-3000 P.S.T.</p> <p>NO TRENCHES OR 90 MIN. OR OVER CLUMP</p> <p>NO DEFECTS OBSERVED</p> <p>4.00 YRS</p>					
PANELS 1-2-3-4-5-6-7-8-11-12-16-17-18-19-20-21-22					
BLUE P					
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input checked="" type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH OTHER:					
Copy received by/given to: MIKE		Arrived: 3:30	Departed:	Report by: A.J. MURPHY	



DAILY FIELD REPORT

BLDG A

Project #: <i>196-315.01</i>	Date: <i>9/13/01</i>	Day: <i>THURS</i>	Weather:	PAGE <i>1</i>
Project Name: <i>SOUTHWEST BUSINESS BLDG</i>	Project Location: <i>SOUTHWEST AVE SAC CA</i>		Permit #:	
Client: <i>B.O.E</i>			Client's Representative: <i>MIKE</i>	
General Contractor:			Superintendent:	
Sub-Contractor: <i>Blue Line</i>			Other Persons Contacted: <i>MIKE</i>	
Type of Work: <i>REINFORCEMENT OBSERVATION</i>	Location/Element: <i>Beams Bldg A</i>		Equipment used:	Time:
Type of Work:	Location/Element:		Equipment used:	Time:
Plans/Specifications: <i>Leo McGrade</i>				
<i>Performed visual observation of Reinforce-</i>				
<i>ment placed in Level #'s 1, 9, 10, 11, 12, 13</i>				
<i>23 + 25 for Building A</i>				
<i>All reinforcement embed thru ledger</i>				
<i>beams & Pick Points per placed</i>				
<i>per plans</i>				
<i>All ledge clearance & Ding holes @</i>				
<i>openings are per plans</i>				
<i>All work is per plans & USC</i>				
<i>codes 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>MIKE</i>	Arrived: <i>7:50</i>	Departed: <i>10:15</i>	Report by: <i>MIKE</i>	