1231 I Street, Sacram	ento, CA 95814			Insp Area: 4	
			V 8	Thos Bros: 277	7 H6
			1		
Site Address: 2579 TRA				Sub-Type: NC	OM
Parcel No: 263-0201-	-001		8 4 3	Housing (Y/N): N	4. 34
CONTRACTOR	OWNER	:		450	
UNIKACIOK	<u>ØWNER</u> CITY OF SA	CRAMENTO	*	ARCHITECT	1
	915 I ST SUI				
	SACRAMEN	NTO CA 95814			
Nature of Work: ELECT.	FOR BOOST FOR IRREG	ATION SYSTEM.			
	G AGENCY: I hereby affirm to	inder penalty of perjury th	at there is a const	ruction lending agency for t	he performanc
te work for which this permit is is	sued (Sec. 3097, Civ. C).				
ender's Name		dnder's Address			
ICENCED COMEDACTOR	DE DECK ADAMSON	1 02			
ACENSED CONTRACTOR	RS DECLARATION: 1 here f Division 3 of the Business and Pro	by affirm under penalty ofessions Code and my lic	of perjury that I	am licensed under provisi	ons of Chapte
	Division 5 of the Business and Th	·	conse is in full fore	c and cricci.	**
icense Class License N	umber Date	Contractor Signature			
WNFR-RUII DER DECLA	RATION: I hereby affirm unde	r nonelty of narium, that I	non avanout fram	the continuators Figures Law	for the faller
ason (Sec. 7031.5, Business and	Professions Code; any city or coun	ity which requires a perm	it to construct, alte	r, improve, demolish, or re	pair any struct
rior to its issuance, also requires the	he applicant for such permit to file	a signed statement that he	e or she is licensed	pursuant to the provisions	of the Contrac
icense Law (Chanter 9 (commenc	ing with Section 7000) of Division	8 of the Business and P	rofessions Code) o	or that he or she is exempt	therefrom and
asis for the alleged exemption A	any violation of Section 7031.5 by	any applicant for a perm	it subjects the ann	licant to a civil negative of a	of more than
undred dollars (\$500.00);) apprount tot a betti	յասլսան անար	nomine to a pirm penning Of t	, or more thall
11					
//////////////////////////////////////	y, or my employees with wages as	their sole compensation	will do the work	and the structure is not inter	nded or offered
de (Sec. 7044 Rusiness and Prof.	essional Code: The Contractors Li	cence I am does not comb	vin uo me work, è	roparty who builds or i	ovec thoses
he does such work himself or her	rself or through his/her own employ	was provided that make	y io an owner of p	noperty who outlus or impro	oves mereuri,
a building as improvement is sole	within one year of completion, th	yees, provided that such i	inprovements are	not intended of offered for	Saic. II, Howe
ne purpose of sale.)	i within one year or completion, in	e owner-ounder win have	the ourten of pro	ving that ne/she that not but	nd or improve
7 0.1					
i, as owner of the property,	am exclusively contracting with li	censed contractors to con	struct the project	(Sec. 7044, Business and F	rofessions Co
censed pursuant to the Contractors	not apply to an owner of property	who bunds or improves th	nereon, and who co	ontracts for such projects w	ith a contracto
·					7
I am exempt under Sec	B & PC for this re	eason:			
7/8/20	0 0	W/Mul-1	HHH		
ate	Owner Signature	1/1/201/	MANAGE	<u> </u>	
d lecting the bill bing i	DEDBATE Also and Esset			C.1 1:	
135UEVG THIS BUILDING	PERMIT, the applicant represents	s, and the city relies on the	ie representation c	t the applicant, that the app	plicant verified
	n on the application or accompany issible or prohibited locations for s				
	private agreement relating to locat		outuing permit of	ioes not authorize any meg	ai location of
iprovement of the violation of any	private agreement relating to locat	ion of improvements.			3
ertify that I have read this applica	ation and state that all information i	s correct. I agree to com	oly with all city an	d county ordinances and sta	ite laws relatin
ilding construction and herby aut	horize representative(s) of this city	to enter upon the abovem	entioned property:	for inspection purposes.	
ate 7/8/02	A1:	John Stewart	1 L Still	4	and the same of th
ite	Applicant/Agent S	Signature Mary	Z villen	D	
ORKER'S COMPENSATI	ON DECLARATION: 1 hereb	ov affirm under penalty of	periury one of the	following declarations:	
I have and will maintain a c	ertificate of consent to self-insure	for workers' compensation	n as provided for	by Section 3700 of the Lal	or Code, for
rformance of work for which the		· ·			
	Section 2		*		
I have and will maintain wo	rkers' compensation insurance, as r	required by Section 3700	of the Labor Code	e, for the performance of the	- U
is permit is issued. My workers' c		noticy number are:			ne work for wh
Corrier	compensation insurance carrier and			garden service	ne work for wh
Carrier	compensation insurance carrier and	YARATE -	:	Pro Pro State Company	ne work for wh
	compensation in the carrier and		· ·	Exp Date	ne work for wh
(This section need not be con	Fill a S	Policy Number	nerformance of 1		
(This section need not be con	mpleted if the permit is for \$100 or	Policy Number	performance of th	e work for which this perm	it is issued. [s]
ot employ any person in any mann	mpleted if the permit is for \$100 or	Policy Number less) I certify that in the vorkers' compensation lav	vs of California an	e work for which this perm d agree that if I should beco	it is issued. [s]
ot employ any person in any mann	npleted if the permit is for \$100 or her so as to become subject to the v f Section \$100 till the listing Code, I	Policy Number less). I certify that in the vorkers' compensation law shall thruly with comply w	vs of California an	e work for which this perm d agree that if I should beco	it is issued. (sh
ot employ any person in any mann orkers' compensation provisions of	mpleted if the permit is for \$100 or	Policy Number less). I certify that in the vorkers' compensation law shall forthwith comply w	vs of California an	e work for which this perm d agree that if I should beco	it is issued. (sh
ot employ any person in any mann orkers' compensation provisions of ate 7/8/02	mpleted if the permit is for \$100 or ser so as to become subject to the f Section \$100 of the permit is to \$100 or f Section \$100 of the permit is to \$100 or f Section \$100 o	Policy Number Less I certify that in the vorkers' compensation law shall forthwith comply we have the comply we have the comply we have the complete the complet	ys of California an ith those provision	e work for which this perm d agree that if I should becomes.	it is issued, [shome subject to
ot employ any person in any mann orkers' compensation provisions of ate	npleted if the permit is for \$100 or ser so as to become subject to the vertical file of the section of the sec	Policy Number Less I certify that in the vorkers' compensation law shall forthwith comply we have the comply we have the comply we have the complete the complet	ys of California an ith those provision	e work for which this perm d agree that if I should becomes.	it is issued, [shome subject to
ot employ any person in any mannorkers' compensation provisions of ate 7/8/02 (ARNING: FAILURE TO SECTEMENTAL PENALTIES AND CO	mpleted if the permit is for \$100 or ser so as to become subject to the f Section \$100 of the permit is to \$100 or f Section \$100 of the permit is to \$100 or f Section \$100 o	Policy Number Hess) I certify that in the workers' compensation law (shall torthwith comply were lon coverage is under thousand in the policy of the policy	vs of California an ith those provision IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	e work for which this perm d agree that if I should become is.	it is issued, [shome subject to EMPLOYER THE COST (

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

Permit No: 0209055

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOP	SACRAM MENT SERVICES SE	VICES DIV	ISION	ACI	ACTIVITY # Insp. Area . 6209055 //C					
1231 I Street, I			AX 264-7046	Ø	Applicant	MUST complet	e <u>ALL Uns</u>	haded å	<u>ireas</u>	
	579 T		•	mento "	15315		Suite			
CONTACT					LICENSED CONTRACTOR Lic No. #					
Name Jeff Nittka Street Address 1023 J Street, Suite 200					NameAddress					
City/State/Zip Sacramento, CA. 95814					-					
	-				-		FAX			
E-mail: jnittka @city of sacramento.org					E-mail:					
ARCHITECT/ENGINEER						OWN	ER			
Vame <u>Rex</u>	Moore -	Flectrical	Engineers	ed Contractor	ame <u>Cit</u>	, of Sacran	neuto, Parks	& Reco	ration	
Address 5601 Parkway Place					Address 915 I Street Suite 200					
	West Sacts.					Sacramento				
•	1800	FAX_	372- 354		Phone 244-8529 FAX 264-8266					
E-mail:				Į E	-mail:					
-	tee have any <u>et</u> 'S COMPENS			No 🔼 Yes →	INSURANC	CE CO:EXPIRAT	TON DATE:		············	
		···-								
NATURE OI	F WORK IN I	DETAIL: <u>E</u>)	ectrical Pe	rmita to	r Boost	er Pump & F	ump stav	ter		
OCCUPANT	/TENANT:	No			and the second s	VALUATION:	:\$ 9500			
FLOOD STA	TUS: //									
JOB DESCR	PTION 🛬	BLDG	SHELL A	APT TI() I	REM() SW	FIRE	ADD	ОТН	
INSPECTION	N DISCIPLIN	TES	BLDG	месн	PLUMB	ELEC	SITE	· FI	RE	
# Stories	Ist firArea.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N	Fed Code	Vio	File	
			÷.	NoNo	-	SPR ALARM	20	(H)	[Quad]	
В	L	P	M	E	F	S	D	PW	UTIL	
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COMMENTS:					(6-11-11-5) 1-50-08-08-08-08-08-08-08-08-08-08-08-08-08					
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RECION	AL SANITA			⊠ No	HEAT	TH DEPARTM	ENT? IV	. \ \	Vo	
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dssu/forms/commercialapp, [rev. 03/28/00]