

**CITY OF SACRAMENTO**

**Permit No: 0307968**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 4**

**Thos Bros: 276 J7**

**Site Address: 2837 RIVER PLAZA DR SAC**

**Parcel No: 274-0030-065**

**Sub-Type: REP**

**Housing (Y/N): N**

**CONTRACTOR**

**OWNER**

**ARCHITECT**

STONESFAIR MANAGEMENT  
800 AIRPORT BLVD STE502  
BURLINGAME CA 94010

**Nature of Work: REPAIR OR REPLACE EXISTING STAIRS AS NEEDED**

**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 \_\_\_\_\_ Date \_\_\_\_\_ 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 6-4-2003 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 6-4-2003 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 1619331-02 Exp Date Feb. 1, 2004

\_\_\_\_\_, (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 \_\_\_\_\_ 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.**

# 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 # <span style="font-size: 1.5em; font-family: cursive;">0307968</span>	Insp. Area <span style="font-size: 1.5em; font-family: cursive;">4</span>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2837 River Plaza Dr. Suite 12

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>Greg Defehr</u>                  Street Address <u>1175 Lake Blvd.</u>                  City/State/Zip <u>Davis, CA 95616</u>                  Phone <u>(530) 400-0842</u> FAX <u>(530) 756-5689</u>                  E-mail: _____</p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>	<p style="text-align: center;"><b>OWNER</b></p> <p>Name <u>Stanesfair Management</u>                  Address <u>800 Airport Blvd. Suite 502</u>                  City/State/Zip <u>Burlingame, CA 94010</u>                  Phone <u>(650) 406-3810</u> FAX <u>(650) 302-0836</u>                  E-mail: _____</p>

Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: State Fund  
 WORKER'S COMPENSATION POLICY # 1619331-02 EXPIRATION DATE: Feb. 1, 2004

NATURE OF WORK IN DETAIL: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

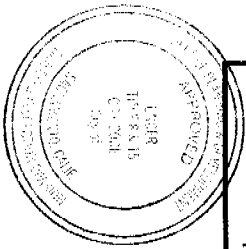
OCCUPANT/TENANT: \_\_\_\_\_ VALUATION: \$3,885.07

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

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.  
 The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



**Stair Detail**  
 Also see page 2

Replace:  
 (Existing)  
 4 x 4's @ 32" O.C.  
 2 x 4's @ 32" O.C.  
 DBL 2 x 4 Top R/L

Replace  
 (Existing)  
 2 x 14 ledger  
 replace  
 4 x 14 stringer

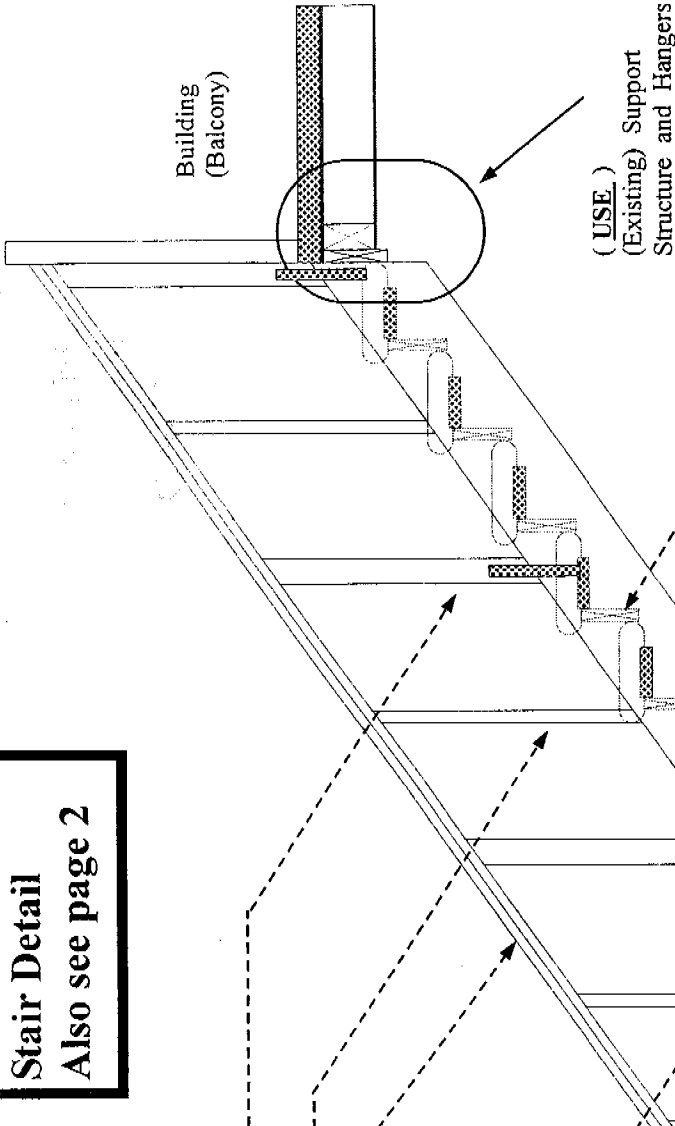
Reuse  
 (Existing) Pre-Cast  
 Concrete Treads

Provide:  
 Simpson ST12 @ 3x4's when  
 plywood sheathing is not used.

**O.T.C. REVIEW**  
 x THO 6-4-03  
**THESE PLANS SUBJECT TO FIELD APPROVALS**

( USE )  
 (Existing) Pad  
 and anchors

Approved  
 B Nakashima



2 x 8's nailed between  
 the 2 x 14 ledger.

**Note: Job Scope**

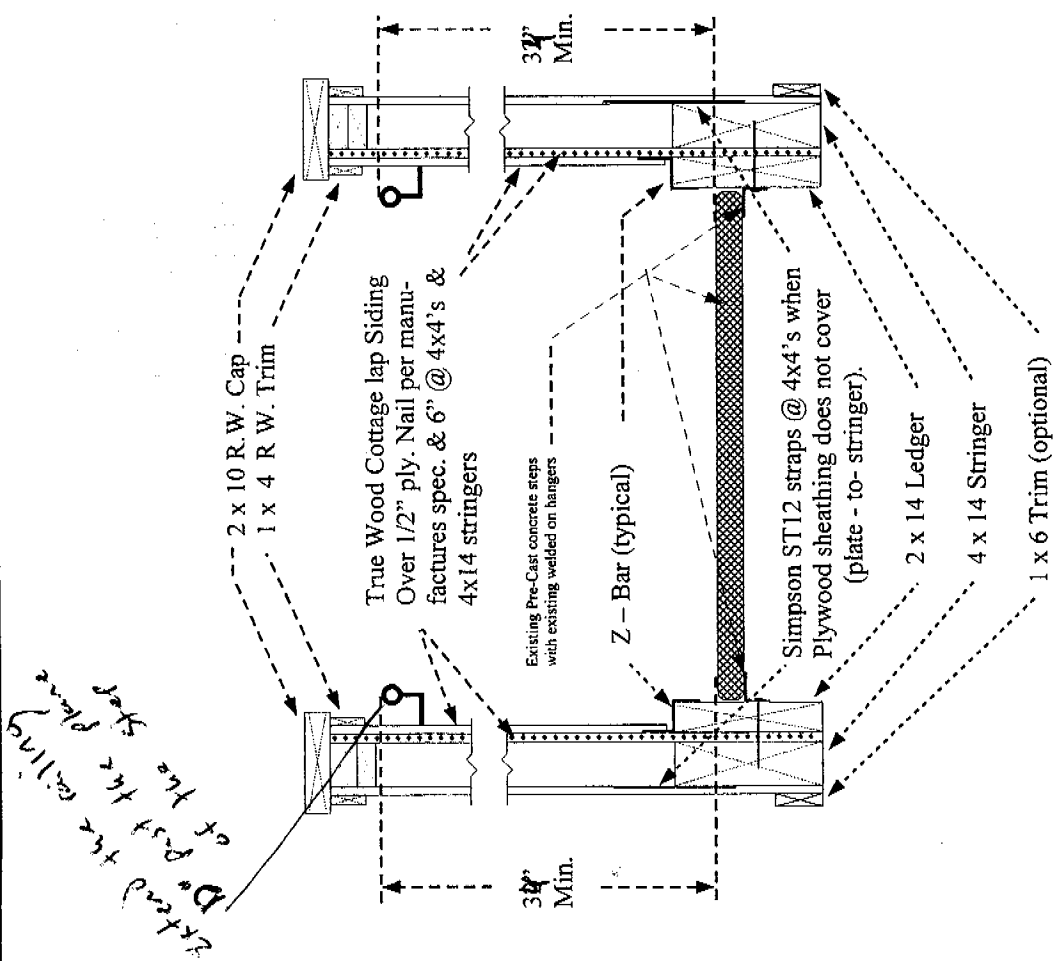
Repair or replace existing stairs with materials equal to or greater than existing. Use *existing* ,concrete pad(s), support beam(s) @ building(s) and existing anchors & hangers @ pad(s) and support beams. Were required replace siding over building paper, use galvanized nails where exposed to weather or moisture.

Fasteners used to attach wood to hangers must meet manufactures recommended specifications. Refer to and ( Use ) manufactures specifications unless they conflict with local codes.

Rise 7"  
 Run 10 1/2"

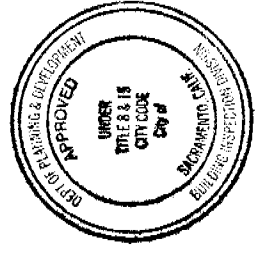
Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Job address: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Contact # \_\_\_\_\_

**CITY COPY**

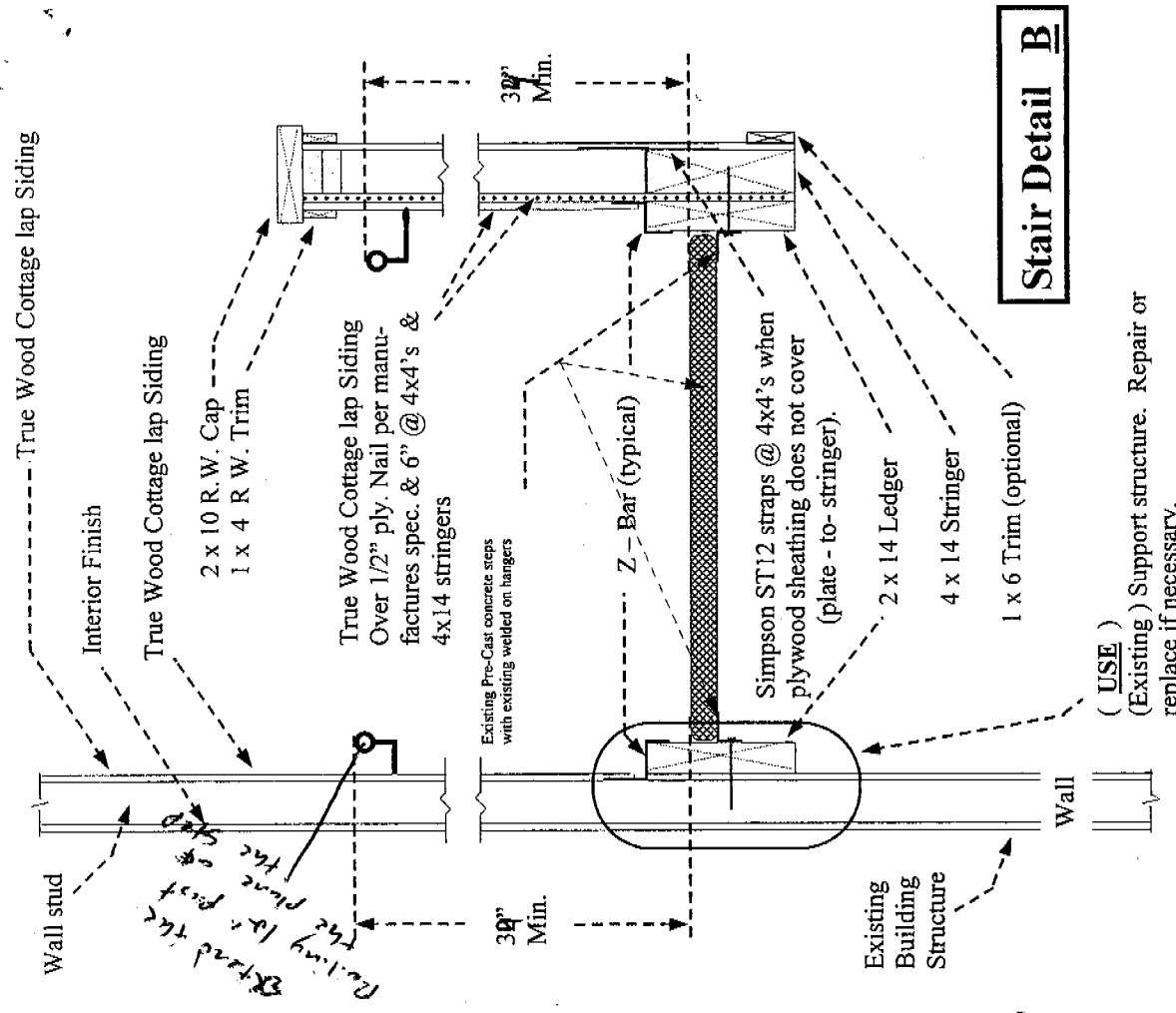


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**Stair Detail A**



**Stair Detail B**

( USE )  
(Existing) Support structure. Repair or replace if necessary.

Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Job address: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Contact # \_\_\_\_\_

# STONESFAIR MANAGEMENT, LLC

February 12, 2003

Sacramento City Building Permit Department  
City and County of Sacramento

Dear Sir or Madam:

This letter serves as confirmation that the following employee, Greg DeFehr is employed with our Company. Greg DeFehr is our designated Project Manager responsible for bids, contracts, capital improvements and deferred maintenance to all of our Sacramento properties. Mr. DeFehr has full authorization in requesting for permits within the Stonesfair Management portfolio. Please do not hesitate to call if you need further information.

Sincerely,



Maryann Fair  
Vice President



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