

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9811510

Insp Area: 4

Site Address: 2025 WEST EL CAMINO AV SAC
Parcel No: 225-0910-001 POOL AREA

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

CONTRACTOR

OWNER

ARCHITECT

LINCOLN DISCOVERY PARK ASSOCIATES
2025 WEST EL CAMINO AV
SACRAMENTO CA 95833

Nature of Work: NEW EXERCISE/CONFERENCE BUILDING

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 4-8-99 Owner Signature Lewis Williams

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 4-8-99 Applicant/Agent Signature Lewis Williams

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

Policy Number

Exp Date

(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 4-8-99 Applicant Signature Lewis Williams

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.

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

APPLICATION NO: ~~2001~~
 GENERAL INFORMATION
 EXERCISE ROOM

BIDG PERMIT NO: *CITY*
 THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER
 250893 4-8-99

26 SEWERTREATMENT
 FROM 002691 04/08/99
 THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL	COMMERCIAL USE
CSD-1	188	SF <input type="checkbox"/>	MF <input type="checkbox"/>
SRCSD	954		UNITS
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	1142		

APN: 225-0910-001

DESCRIPTION/
 SUBDIVISION

PROPERTY ADDRESS 2025 EL CAMINO AVE

OWNER TRAMMELL CROOK RES.

MAILING ADDRESS 2025 W. EL CAMINO AVE.

CITY-STATE-ZIP SACRAMENTO, CA. 95833 PHONE 916-923-5893

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *X. James Williams*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____
 INSPECTOR'S COPY

Natomas Unified School District
 1515 Sports Drive, #1 • Sacramento, CA 95834-1905
 Phone 916/641-3300 • Fax 916/928-1629

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

*George Adams
 10/3/99*

PART I: TO BE COMPLETED BY APPLICANT

Property Owner's Name	TRAMMELL (DAW RES)		
Owner's Address	2025 WEST EL CAMINO		
Project Address	2025 West El Camino		
Parcel Number	275-0710-001		
Subdivision Name	TAMARON RANCH		
Number of Units			
Print Applicant's Name	LEWIS WILLIAMS	Applicant's Signature	<i>Lewis Williams</i>
Title of Applicant	PROJECT MANAGER		
Date	APRIL 5, 1999	Telephone Number	916-923-5893

PART II: TO BE COMPLETED BY BUILDING DEPARTMENT

Plan Identification Number			
Building Type (Check One)	<input type="checkbox"/> Residential <input type="checkbox"/> Apartment/Condominium <input checked="" type="checkbox"/> Commercial/Industrial		
Square Feet of Chargeable Building Area	2,034 S.F.		
Signature	<i>David Beach</i>		
Title	County Manager	Date	4.5.99

PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT

District Certification Number	44-321		
Fees Collected:			
Residential:	Sq. Ft. X \$		= \$
Apartment/Condominium:	Sq. Ft. X \$		= \$
Commercial/Industrial:	2,034 Sq. Ft. X \$.21		= \$ 427.14

NOTICE TO APPLICANT: Pursuant to government code section 66020 (d), this will serve to notify you that the 90-day approval period in which you may protest the fees, or other payment identified above, will begin to run on the date in which the building or installation permit for this project is issued, or on which they are paid to the District, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.

Applicant Signature: *Lewis Williams* Date: APRIL 5, 1999

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: *David Beach* DATE: 4/5/99
 TITLE: County Manager



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 same if it is in violation of any Ordinance or State Law.

City of Sacramento Development Services Division Planning and Zoning Information Request

Project Address: 2025 West El Camino

Assessor's Parcel Number: ~~225-0910-001~~ 225-0910-001

Current Land Use: APARTMENTS - Discovery Park Apts.

Description of Request/Proposed Use: _____

Renovation of LEASING/RECREATION Building
NEW CONSTRUCTION OF RESTAURANT BLDG
NEW CONSTRUCTION OF EXERCISE BLDG

Zoning Designation: R-2-B

Prior Applications for Project Site(P#,Z#,DRPB#): CONTACT LEWIS SANCHEZ
CITY OF SACRAMENTO
PLANNING DEPT.

Comments: ER 98-045
USE OK NO PLANNING RESULTS.
OK FOR submittal
(Design Review Process to be detail.)

Are There Any Planning Issues?: (Circle One) YES NO

Site Plan Check Required? (Circle One) YES NO

Design Review/ Preservation Required?: (Circle One) YES NO

Planning Review by/Date: W J Gour 11/18/98

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

APPLICATION FOR BUILDING PERMIT

#981510
EXERCISE BLDG

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK Insp. Area

Applicant MUST complete ALL Unshaded areas this page only

ADDRESS 2025 West El Camino Ave., Sacramento 95833 Suite
PARCEL # 225 - 0910-001

CONTACT Name STEVE HESTER / Lewis Williams Address 2025 West 91 Camino Ave Sacramento, CA Zip 95833 Phone (916) 923-5893 FAX (916) 923-5895		LICENSED CONTRACTOR Lic No. # Name TO BE DETERMINED Address OWNER / BUILDER Phone FAX	
ARCHITECT/ENGINEER Name EGLD ARCHITECTURE Address 1191 Second Ave, Suite 1650 Seattle, WA Zip 98101-2916 Phone 206 467-5828 FAX 206 467 0627		OWNER Name DISCOVERY PARK #4700 % TRAVELL Address 2001 SW RIVER DRIVE PORTLAND, OR Zip 97201 Phone 503 241 2989 FAX 503 241 3462	

Will the permittee have any employees on the jobsite? Yes No

If yes, WORKER'S COMPENSATION POLICY # WA0207611 EXPIRATION DATE: 02/05/99

NAME OF INSURANCE COMPANY: ST PAUL FIRE + MARINE

NATURE OF WORK IN DETAIL: New Construction
Exercise Building in connection with:
760 SF of Restroom NEW EXERCISE/CONFERENCE BUILDING -
Restroom RESTROOM OFFICE } SEE OTHER APPLICATIONS
 RESTRICTION of Restroom Bldg

DBA:	VALUATION: \$128,407.00								
FLOOD STATUS: <u>Zone X</u> S.C.A.T.									
JOB DESCRIPTION	BEDG	SHEL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSP. DISCIPLINES	BEDG	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	
	1371			A-3	V-N	Y N	02		
B	L	P	M	E	F	S	D	R	

COMMENTS: See David's set of plans for 2 permits

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

BLDGFRM. (REV 05/98) WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS Yes No

FROM B. LARSEN
2 (NEW) BLDGS.

WATER SUPPLY TEST - DEPT. OF UTILITIES
 1395 35TH AVENUE
 SACRAMENTO, CA. 95822
 PHONE: 916 / 264-1430
 FAX: 916 / 264-1497

TEST NO: _____ FILE NO: _____
 REQUEST DATE: 11/24/98
 COMPLETE DATE: _____
 ANALYSIS FEE: 70.00 DATE PAID: 11/18/98
 FIELD TEST FEE: _____ DATE PAID: _____

CONTACT PERSON: LEWIS WILLIAMS PHONE NO: 923-5893 FAX NO: 923-5895
 COMPANY: TRAMMELL CROW P&E CELL PHONE NO: 712-0415
 COMPANY ADDRESS: 2025 WEST 91 CARIND STREET ADDRESS OF TEST: 2025 WEST 91 CARIND
 PURPOSE OF TEST: (N) RESTROOM BLDG + EXCE ASSESSOR'S PARCEL NUMBER: 225-0910-001

The undersigned agrees to the following items and conditions:

(1) The street address shown above is correct.

(2) Water supply data is developed from several sources of information which may include water supply test data, pipe network computer models, and continuous pressure recording stations. The design water supply data given below is to be used for design purposes.

(3) Although the water supply data reported herein is believed to be accurate, the City makes no warranty, guaranty, certification or other representation of any kind that such data is accurate or correct, or that the pressures and/or flow rates reported herein can or will be maintained. The undersigned agrees that the City, its officers and employees shall not be liable for any damages of any kind resulting from the use of or reliance upon the water supply data reported herein by the undersigned or by any third party.

(4) If the undersigned desires to witness the water supply test performed by the City, please check the box below:
 I want to witness this water supply test, which will be scheduled at the convenience of the Department of Utilities.

(5) If the undersigned elects to hire a licensed engineer, at the undersigned's sole expense, to witness and certify the water supply test performed by the City, please check the box below:
 At my expense, I will arrange for a licensed engineer to witness and certify this water supply test, which will be scheduled at the convenience of the Department of Utilities.

USE BLDG PC # 1509 and PC 1510

Print Name: STEVEN J. HESTER Signature: *[Signature]* Date: 11/18/98

ENGINEERING REQUEST DATE: _____ DATE OF TEST: _____ TIME OF TEST: _____

WATER MAIN SIZE: _____ TEST CONDUCTED BY: _____

	HYDRANT NO.	MAINT. PLAN APPROVED	STATIC PRES.	RESIDUAL PRES.	PITOT	OUTLET	COEFFICIENT	CALC. FLOW @ PRES. (G.P.M.)	FLOW @ 20 PSI (G.P.M.)
RESIDUAL									
FLOWED									
FLOWED									
FLOWED									
FLOWED									

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.

- THE WATER SUPPLY TEST DATA IS NOT TO BE USED FOR THE DESIGN OF DOMESTIC WATER SYSTEMS.
- (STATIC PRES. - RESIDUAL PRES.) / (STATIC PRES. - 20 PSI) IS LESS THAN 25%. THEREFORE, THESE RESULTS ARE ONLY VALID FOR FLOWS NOT EXCEEDING _____ G.P.M.

$$Q = 29.83 C_1 C_2 D^2 \sqrt{P_{pitot}}$$

$$Q_{20} = Q_F \left(\frac{P_s - 20}{P_s - P_r} \right)^{0.54}$$

	ACTUAL	DESIGN (1)
STATIC PRES.	PSI	PSI
RESIDUAL PRES.	PSI	PSI
TOTAL FLOW @ RESIDUAL PRES.	G.P.M.	G.P.M.
TOTAL FLOW @ 20 PSI	G.P.M.	G.P.M.

(1) The Design Water Supply Data reflects fluctuations and future demands on the water distribution system. It is to be used for design purposes. 7/18/98

ADD FEES TO
Computer

City of Sacramento
Water and Sewer Service Quotation

Date: 12-02-1998 Time: 10:44 hrs Building Permit No.: B98-98 Plan Check No.: 1509 1510 1498
Address: 2025 W. EL CAMINO AVE Parcel No.: 225-0910-001
Description: EXCERSIZE BLDG & RESTROOM
 DISCOVERY PARK
Subdivision Map: UNKNOWN Water Plan No.: NONE
Estimate by: DAN LEB Bldg. Insp. Reviewer: UNKNOWN
Engineering Firm: GGLO ARCHITECT
Sewer Jurisdiction:

Comment No. 1 - NO DEVELOPMENT FEES REQUIRED - NO NEW SERVICE REQUESTED

TOTAL WATER DEV. FEES: \$0.00 TOTAL ON-SITE GRADING
TOTAL SEWER DEV. FEES: \$0.00 AND DRAINAGE REVIEW FEE: \$300.00 ✓

Water Services Quotations

Main Service Tap Meter Tot. Tap Dev.
Size Size Description Qty Fee-ea. Fee-ea. Cost Fees

Total for Water: \$0.00

Parcel Area: 0 acres Acreage Charge: \$0.00

Sewer Services Quotations

Main Service St. MH Tap Total Dev.
Size Size Description Qty (ft) Fee/ea. Fee/ft. Cost Fees

NOTE: TOT. COST=QNTY X ST/2 X TAP FEE + MH FEE Total for Sewer: \$0.00

Water Main Construction Charge: \$0.00
Total for Address: \$0.00

WATER DEVELOPMENT FEES ARE BASED ON THE SIZE OF DOMESTIC SERVICE.

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: TAMARON RANCH APTS. Phone: 916-923-5893
 Site Address: 2025 W. EL CAMINO AVE. Suite: 103
 Business Owner/Representative: LEWIS WILLIAMS (Street) (Zip) Phone: 916-923-5893
 Nature of Business: LEASEING OFFICE
 Property Owner: TRAMMELL CROW RES. Phone: 916-923-5893
 Address: 2025 W. EL CAMINO AVE. Suite: 103
SACRAMENTO (City) CALIF. (State) 95833 (Zip)

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

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

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 X
 6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No X
 7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No X

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 X

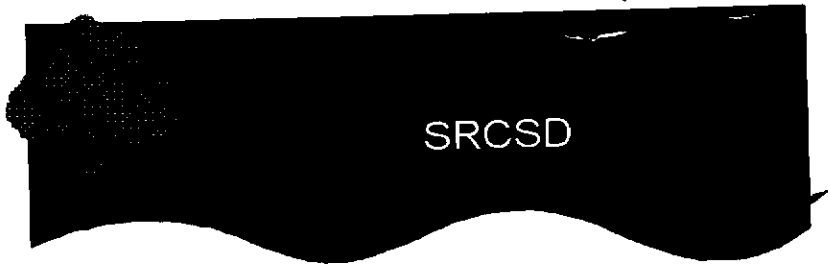
IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

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: LEWIS WILLIAMS
Lewis Williams (Print) 4-8-99 (Date)
 (Signature)

BID Use Only: Plan Ck# _____	Permit # <u>9811570</u>
OK to issue prmt? Y <u>4-8-99</u> init date	F.D. Appr Req'd? <u>(No)</u>
Hold on Certificate of Occupancy? Yes <u>(No)</u>	
Fire Dept. Use Only:	
OK to issue permit? init _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	



April 5, 1999
 RECEIVING FAX : 264-7046
 SENDING FAX : 875-6253

TO: **DAVID BROCK**
 CITY OF SACRAMENTO

FROM: **DOLORES ROSS**
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

PHONE NUMBER: 875-6679

RE: **SEWER FACILITY IMPACT FEES**
2025 EL CAMINO AVE.

APN: **225-0910-001**
Plan Check # 98-11498

The Sewer Facility Impact Fees due for a 1,371 sq. ft. exercise room on the above parcel are as follows:

Impact to County Sanitation District-1	\$188
Impact to Sac. Regional County San. District	\$954
	<u>\$1,142</u>

Dolores

*This fee is due and payable at 827 Seventh Street, Room 105.
 This fee is also subject to adjustment if the data supplied is changed.*

e-mail: rossd@pwa.co.sacramento.ca.us

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

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.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no) _____

2. I ~~have~~ have not) _____ signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name TBA Address _____

City _____ Telephone _____

Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name TBA Address _____

City _____ Telephone _____

Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work
------	---------	-------	--------------

<u>TBA</u>			
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--	--	--	--

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--	--	--	--

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Signed Luis Williams

Job Address 2025 W. EL CAMINO AVE. Date 4-8-99

Permit No.: 9811510

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 11-19-99

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2025 W. FEL CAMINO - Pool Area

has been conducted by Inspector S. Bodick

on 11-18-99

98-11510
Permit Number

1371
Square Footage

Revised
Type of Inspection

The system is acceptable by this department.

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

TL-448
F. D. Reference Number