

City and County of San Francisco  
DEPARTMENT OF BUILDING INSPECTION

# J O B C A R D

To schedule inspections, go to  
[www.sfdbi.org](http://www.sfdbi.org)  
Navigate to Inspections  
Click on Inspection Scheduling  
For assistance, call (415) 558-6222



OFFICE HOURS: THE BUILDING INSPECTION IS OPEN DAILY, MONDAY THRU FRIDAY,  
FROM 8:00 a.m. TO 5:00 p.m. DISTRICT BUILDING INSPECTORS KEEP OFFICE HOURS DAILY,  
MONDAY THRU FRIDAY, FROM 8:00 a.m. TO 8:30 a.m. AND FROM 3:00 p.m. TO 4:00 p.m.

REQUESTS FOR INSPECTIONS ARE TAKEN 24 HOURS A DAY/7DAYS A WEEK  
BY CALLING (415) 575-6955

APPLICATION NO. 2018-0411-6076 ISSUED JUL 13 2018  
JOB ADDRESS: 116 TAYLOR ST. BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_  
NATURE OF WORK: \_\_\_\_\_

WORK PERMITTED UNDER AUTHORITY OF THIS BUILDING PERMIT NUMBER MUST BE COMPLETED  
PRIOR TO EXPIRATION DATE OF 7-8-2019.

EXTENSION OF TIME TO COMPLETE WORK UNDER THIS BUILDING PERMIT NUMBER MAY BE GRANTED UPON  
WRITTEN REQUEST PRIOR TO THE DATES NOTED ABOVE.

For informations on the Permit Process, Building Plans Review, Access Issues, etc., please see page 4 of this  
JOB CARD for useful and appropriate telephone numbers.

*\* ELECTRICAL & PLUMBING WORK MUST HAVE PERMITS SEPARATE FROM A BUILDING PERMIT. \**

**KEEP THIS CARD POSTED IN A CONSPICUOUS PLACE ON THE JOB SITE AT ALL TIMES.  
PLANS AND PERMIT DOCUMENTS SHALL BE ON THE JOB SITE  
AT ALL TIMES WHEN WORK IS IN PROGRESS.  
AFTER COMPLETION OF WORK, RETAIN THIS CARD FOR YOUR RECORDS.**



APPROVED  
Dept. of Building Insp.  
- San Francisco

JUL 12 2018

**FIRE**

APPROVED  
Dept. of Building Insp.  
- San Francisco

JUL 13 2018

SFFD INSP.  
FEES RLVN

**FIRE**

TOM C. HUI, S.E.  
DIRECTOR  
DEPT. OF BUILDING INSPECTION

APPROVED FOR ISSUANCE

BLDG. FORM 3/8

APPLICATION NUMBER  
2080416076

OSHA APPROVAL REQ'D  
APPROVAL NUMBER

APPLICATION FOR BUILDING PERMIT  
ADDITIONS, ALTERATIONS OR REPAIRS

CITY AND COUNTY OF SAN FRANCISCO  
DEPARTMENT OF BUILDING INSPECTION

APPLICATION IS HEREBY MADE TO THE DEPARTMENT OF BUILDING INSPECTION OF SAN FRANCISCO FOR PERMISSION TO BUILD IN ACCORDANCE WITH THE PLANS AND SPECIFICATIONS SUBMITTED HERewith AND ACCORDING TO THE DESCRIPTION AND FOR THE PURPOSE HEREINAFTER SET FORTH.

FORM 3  OTHER AGENCIES REVIEW REQUIRED  
FORM 8  OVER-THE-COUNTER ISSUANCE

NUMBER OF PLAN SETS

DO NOT WRITE ABOVE THIS LINE

|            |                        |                            |                                  |
|------------|------------------------|----------------------------|----------------------------------|
| DATE FILED | FILING FEE RECEIPT NO. | (1) STREET ADDRESS OF JOB  | BLOCK & LOT                      |
|            |                        | 1161 Taylor                | 0340/010                         |
| PERMIT NO. | ISSUED                 | (2A) ESTIMATED COST OF JOB | (2B) REVISED COST:               |
| 146808     | JUL 13 2018            |                            | BY: [Signature] SL DATE: 6/19/18 |

INFORMATION TO BE FURNISHED BY ALL APPLICANTS

LEGAL DESCRIPTION OF EXISTING BUILDING

|   |                                  |                                   |                              |                   |                            |
|---|----------------------------------|-----------------------------------|------------------------------|-------------------|----------------------------|
| (4A) TYPE OF CONSTR.                              | (5A) NO. OF STORIES OF OCCUPANCY | (6A) NO. OF BASEMENTS AND CELLARS | (7A) PRESENT USE             | (8A) OCCUP. CLASS | (9A) NO. OF DWELLING UNITS |
| III   | 4                                | 1                                 | COMMERCIAL HOTEL             | R110 DM           | 23 RESIDENTIAL 25 TOURIST  |
| DESCRIPTION OF BUILDING AFTER PROPOSED ALTERATION |                                  |                                   |                              |                   |                            |
| (4) TYPE OF CONSTR.                               | (5) NO. OF STORIES OF OCCUPANCY  | (6) NO. OF BASEMENTS AND CELLARS  | (7) PROPOSED USE (LEGAL USE) | (8) OCCUP. CLASS  | (9) NO. OF DWELLING UNITS  |
| III   | 4                                | 1                                 | GALLERY                      | R2                | 23 RESIDENTIAL 25 TOURIST  |

|   |   |   |   |                                       |   |                                     |   |
|---|---|---|---|---------------------------------------|---|-------------------------------------|---|
| (10) IS AUTO RUNWAY TO BE CONSTRUCTED OR ALTERED? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (11) WILL STREET SPACE BE USED DURING CONSTRUCTION? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (12) ELECTRICAL WORK TO BE PERFORMED? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (13) PLUMBING WORK TO BE PERFORMED? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| (14) GENERAL CONTRACTOR                           | ADDRESS   | ZIP   | PHONE   | CALIF. LIC. NO.                       | EXPIRATION DATE   |                                     |   |
| B-SIDE  | NA 940 Union St   | 94607   | 415-559-8337  | 871091                                |   |                                     |   |
| (15) OWNER - LESSEE (CROSS OUT ONE)               | ADDRESS   | ZIP   | BTRC#   | PHONE (FOR CONTACT BY DEPT.)          |   |                                     |   |
| OWNER   | 93 BOTHERS, INC. 48 - 5th St., SE                                   | 94103   |   | 415 260 1991                          |   |                                     |   |

(16) WRITE IN DESCRIPTION OF ALL WORK TO BE PERFORMED UNDER THIS APPLICATION (REFERENCE TO PLANS IS NOT SUFFICIENT)

NO WORK TO BE PERFORMED. FROM COMMERCIAL TO GALLERY. NO MIXING UNITS AFFECTED.

This building is a Residential Hotel. Residential Units may not be converted, demolished or have their use changed without complying with Chpt 41, SF Admin. Code.

ADDITIONAL INFORMATION

|   |   |   |   |  |   |   |   |         |
|---|---|---|---|--|---|---|---|---------|
| (17) DOES THIS ALTERATION CREATE ADDITIONAL HEIGHT OR STORY TO BUILDING?                          | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (18) IF (17) IS YES, STATE NEW HEIGHT AT CENTER LINE OF FRONT | NA  | (19) DOES THIS ALTERATION CREATE DECK OR HORIZ. EXTENSION TO BUILDING? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (20) IF (19) IS YES, STATE NEW GROUND FLOOR AREA            | NA  | SQ. FT. |
| (21) WILL SIDEWALK OVER SUB-SIDEWALK SPACE BE REPAIRED OR ALTERED?                                | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (22) WILL BUILDING EXTEND BEYOND PROPERTY LINE?               | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (23) ANY OTHER EXISTING BLDG. ON LOT? (IF YES, SHOW ON PLOT PLAN)      | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | (24) DOES THIS ALTERATION CONSTITUTE A CHANGE OF OCCUPANCY? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |         |
| (25) ARCHITECT OR ENGINEER (DESIGN <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> | ADDRESS   | NA  |   | CALIF. CERTIFICATE NO.   |   |   |   |         |

(26) CONSTRUCTION LENDER (ENTER NAME AND BRANCH DESIGNATION IF ANY. IF THERE IS NO KNOWN CONSTRUCTION LENDER, ENTER "UNKNOWN")

NA

IMPORTANT NOTICES

No change shall be made in the character of the occupancy or use without first obtaining a Building Permit authorizing such change. See San Francisco Building Code and San Francisco Housing Code.

No portion of building or structure or scaffolding used during construction is to be closer than 6'0" to any wire containing more than 750 volts. See Sec 385, California Penal Code.

Pursuant to San Francisco Building Code, the building permit shall be posted on the job. The owner is responsible for approved plans and application being kept at building site.

Grade lines as shown on drawings accompanying this application are assumed to be correct. If actual grade lines are not the same as shown, revised drawings showing correct grade lines, cuts and fills, and complete details of retaining walls and wall footings must be submitted to this department for approval.

ANY STIPULATION REQUIRED HEREIN OR BY CODE MAY BE APPEALED.

BUILDING NOT TO BE OCCUPIED UNTIL CERTIFICATE OF FINAL COMPLETION IS POSTED ON THE BUILDING OR PERMIT OF OCCUPANCY GRANTED, WHEN REQUIRED.

APPROVAL OF THIS APPLICATION DOES NOT CONSTITUTE AN APPROVAL FOR THE ELECTRICAL WIRING OR PLUMBING INSTALLATIONS. A SEPARATE PERMIT FOR THE WIRING AND PLUMBING MUST BE OBTAINED. SEPARATE PERMITS ARE REQUIRED IF ANSWER IS "YES" TO ANY OF ABOVE QUESTIONS (10) (11) (12) (13) (22) OR (24).

THIS IS NOT A BUILDING PERMIT. NO WORK SHALL BE STARTED UNTIL A BUILDING PERMIT IS ISSUED.

In dwellings, all insulating materials must have a clearance of not less than two inches from all electrical wires or equipment.

CHECK APPROPRIATE BOX

|   |                                    |
|---|------------------------------------|
| <input checked="" type="checkbox"/> OWNER | <input type="checkbox"/> ARCHITECT |
| <input type="checkbox"/> LESSEE           | <input type="checkbox"/> AGENT     |
| <input type="checkbox"/> CONTRACTOR       | <input type="checkbox"/> ENGINEER  |

APPLICANT'S CERTIFICATION

I HEREBY CERTIFY AND AGREE THAT IF A PERMIT IS ISSUED FOR THE CONSTRUCTION DESCRIBED IN THIS APPLICATION, ALL THE PROVISIONS OF THE PERMIT AND ALL LAWS AND ORDINANCES THERETO WILL BE COMPLIED WITH.

NOTICE TO APPLICANT

**HOLD HARMLESS CLAUSE.** The permittee(s) by acceptance of the permit, agree(s) to indemnify and hold harmless the City and County of San Francisco from and against any and all claims, demands and actions for damages resulting from operations under this permit, regardless of negligence of the City and County of San Francisco, and to assume the defense of the City and County of San Francisco against all such claims, demands or actions.

In conformity with the provisions of Section 3800 of the Labor Code of the State of California, the applicant shall have worker's compensation coverage under (I) or (II) designated below, or shall indicate item (III), (IV), or (V), whichever is applicable. If however item (V) is checked, item (IV) must be checked as well. Mark the appropriate method of compliance below.

I hereby affirm under penalty of perjury one of the following declarations:

( ) I. I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

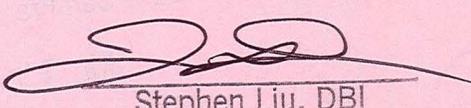
( ) II. I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:  
Carrier: [Signature] Engineers Casualty Company  
Policy Number: 9805-10-00143104

( ) III. The cost of the work to be done is \$100 or less.

( ) IV. 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 worker's compensation laws of California. I further acknowledge that I understand that in the event that I should become subject to the worker's compensation provisions of the Labor Code of California and fail to comply forthwith with the provisions of Section 3800 of the Labor Code, that the permit herein applied for shall be deemed revoked.

( ) V. I certify as the owner (or the agent for the owner) that in the performance of the work for which this permit is issued, I will employ a contractor who complies with the worker's compensation laws of California and who, prior to the commencement of any work, will file a completed copy of this form with the Central Permit Bureau.

**CONDITIONS AND STIPULATIONS**

|                                     |  |  |
|-------------------------------------|--|--|
| REFER TO:                           | APPROVED: <br>Stephen Liu, DBI<br>JUN 18 2018<br>BUILDING INSPECTOR, DEPT. OF BLDG. INSP.   | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input type="checkbox"/>            | APPROVED: <i>Not a change of use per the Planning Code 209.3</i><br><i>Not a frank Retail</i> <span style="float: right;"><i>4/11/18</i></span><br>DEPARTMENT OF CITY PLANNING   | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input checked="" type="checkbox"/> | APPROVED: <i>Kathleen [Signature]</i><br>FIRE INSPECTOR<br>BUREAU OF FIRE PREVENTION & PUBLIC SAFETY<br>PLEASE NOTIFY DISTRICT FIRE INSPECTOR AT THE START OF WORK. 554-8921<br>PLEASE NOTIFY DISTRICT FIRE INSPECTOR AT THE START OF WORK. 554-8921<br>PLEASE NOTIFY DISTRICT FIRE INSPECTOR AT THE START OF WORK. 554-8921 | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input type="checkbox"/>            | APPROVED: <i>PLEASE NOTIFY DISTRICT FIRE INSPECTOR AT THE START OF WORK. 554-8921</i><br>MECHANICAL ENGINEER, DEPT. OF BLDG. INSPECTION  | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input type="checkbox"/>            | APPROVED: _____<br>CIVIL ENGINEER, DEPT. OF BLDG. INSPECTION   | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input type="checkbox"/>            | APPROVED: _____<br>BUREAU OF ENGINEERING   | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input type="checkbox"/>            | APPROVED: _____<br>DEPARTMENT OF PUBLIC HEALTH   | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input type="checkbox"/>            | APPROVED: _____<br>REDEVELOPMENT AGENCY  | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |
| <input checked="" type="checkbox"/> | APPROVED: <i>Legal use per CFC # 8303654</i><br><i>1DW</i><br>No. of Units <i>25 TOURIST</i> Floors of Occ. <i>3</i><br><i>38 RESIDENTIAL GRMS</i><br>HOUSING INSPECTION DIVISION <i>mat lutor 4/11/18</i>   | DATE: _____<br>REASON: _____<br>NOTIFIED MR. _____ |

HOLD SECTION - NOTE DATES AND NAMES OF ALL PERSONS NOTIFIED DURING PROCESSING

I agree to comply with all conditions or stipulations of the various bureaus or departments noted on this application, and attached statements of conditions or stipulations, which are hereby made a part of this application.

Number of attachments

OWNER'S AUTHORIZED AGENT