

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0507871

Insp Area: 4

Thos Bros: 277G7

Site Address: 2170 ACOMA ST SAC

Parcel No: 275-0112-017

Sub-Type: NOTHR

Housing (Y/N): N

CONTRACTOR
PRECISION ELECTRIC
121 FARGO WAY
FOLSOM CA 95608

OWNER
CARTER DALE L
2170 ACOMA ST
SACRAMENTO, CA 95815

ARCHITECT

Nature of Work: NEW 200AMP SERVICE PANEL & SUB PANEL

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 C-10 License Number 785623 Date 7-8-05 Contractor Signature Kevin Sereda

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 7-8-05 Owner Signature Kevin Sereda

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 of 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.

PAID
CITY OF SACRAMENTO

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 _____ Applicant Signature _____

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

KMS 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.

KMS 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 1596672-02 Exp Date 09/01/2005

KMS (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 7-8-05 Applicant Signature Kevin Sereda

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 # _____	Insp. Area _____
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Applicant **MUST** complete ALL Unshaded Areas

ADDRESS: 2170 Acoma DR Suite: _____

PARCEL #: _____

<p style="text-align: center;">CONTACT</p> <p>Name: <u>Kevin Sereda</u> Street Address: <u>121 FARGO WY</u> City/State/Zip: <u>Folsom CA 95630</u> Phone: <u>3436054</u> E-Mail: _____</p>	<p>LICENSED CONTRACTOR Lic No. # <u>785623</u></p> <p>Name: <u>Kevin Sereda</u> Street Address: <u>121 FARGO WY</u> City/State/Zip: <u>Folsom CA 95630</u> Phone: <u>3436054</u> E-Mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name: _____ Street Address: _____ City/State/Zip: _____ Phone: _____ E-Mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name: _____ Street Address: _____ City/State/Zip: _____ Phone: _____ E-Mail: _____</p>

⇒ Will permittee have any employees on the jobsite? No Yes ⇒ Insurance Co.: _____

⇒ WORKER'S COMPANSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: Service Change 400 to 2003pt
240 E Lite E Pkgs

OCCUPANT/TENANT: _____ VALUATION: 4000

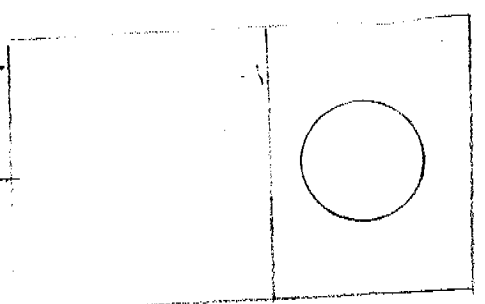
FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION	BLDG	SHELL	APT	II ()	REM ()	SW	FIRE	ADD	OTH	
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	EIBC		SHE	FIRE		
# Stories	1 st Flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Reg. Y / N		Fed Code	Viol. [H]	File [Quad]
						SPR	ALARM			
B	L	P	M	E	F	S		D	PW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

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT: Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

MIN AT C 23,700 @ 5MVA

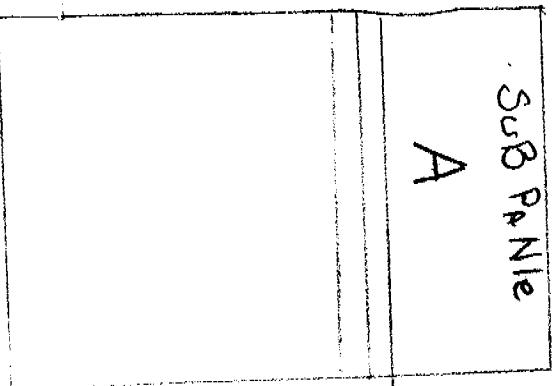


ISSUED

JUL 08 2005

Sacramento Building Division

200 AMP 240V 3PH 4 wire MAIN
Test By Boss MAIN Breaker
Overhead Feed Surface mount



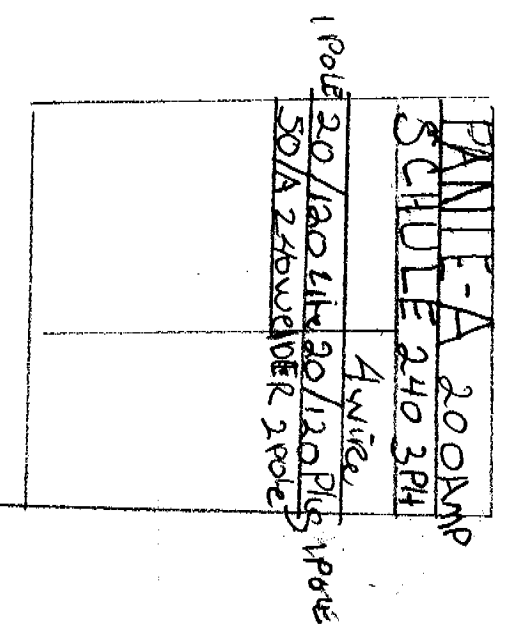
200 A
240/v 3PH 4 wire
42 SPACE

CITY COPY

All electrical work
subjected to field inspection.

Revision E/ETW
List# 785623

2700 ADMIN
Del PR 50 WKS



APPROVED PER 1999
NATIONAL ELECTRICAL CODE
AND CITY OF SACRAMENTO
AMENDMENTS
[Signature]
7/08/05
ELECTRICAL DIVISION

SOA
240V
SUB PANIE
A

20A
120V Dupler

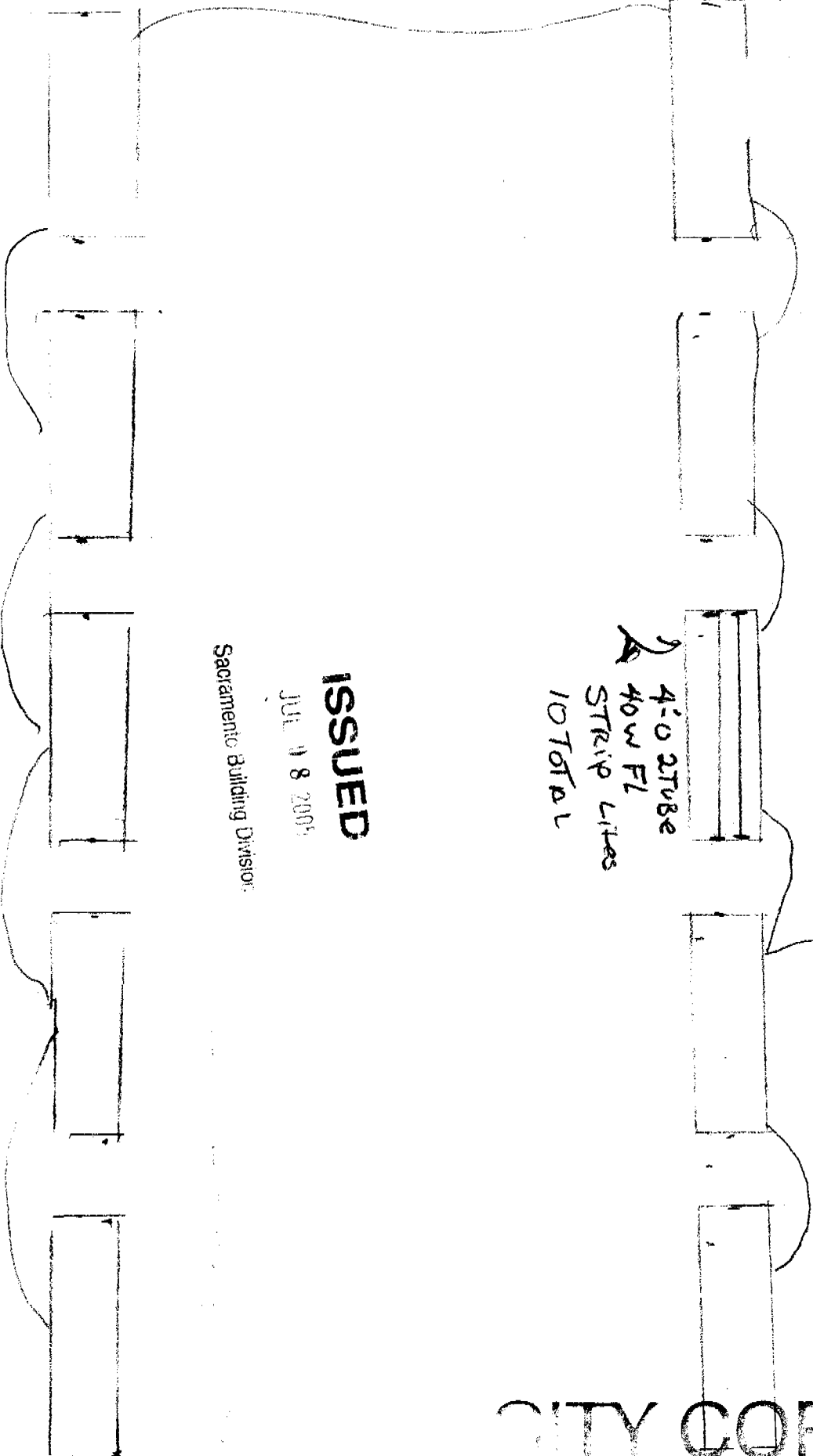
4'-0" 2TUBE
40W FL
STRIP LITES
10 TOTAL

CITY COPY

ISSUED

JUL 08 2005

Sacramento Building Division



Precision Electric
Lic # 785623
2170 ACOMA DR DEL RASO HTS

The approval of all Electrical work
is subjected to field inspections

KJA 7/08/05



SACRAMENTO MUNICIPAL UTILITY DISTRICT P.O. Box 15890, Sacramento, CA 95852-1830. (916) 732-5700
AN ELECTRIC SYSTEM SERVING THE HEART OF CALIFORNIA

6/13/2005

JOHN ODBERT
PERCISION ELECTRIC
3732 T ST

SUBJECT: 2170 ACOMA ST Notification # 30132964

SMUD's service point for the above subject address is as follows:

TRANSFORMER POLE N/ALLEY

A maximum fault current of 23,700 amps, symmetrical, is based on the largest transformer that could be needed to serve the Single [X] Combined [] main sizes of 200 amps.

This information is based on a service configuration of a 120/240 volt, THREE phase, 4 wire, DELTA, OH service and the following assumptions:

1. The largest transformer that could be needed is 150 kVA with 2.0 % impedance,
2. A primary system impedance of zero ohms,
3. No motor contributions to the fault, and
4. Zero ohms fault impedance.

Any changes to the above information will require a new Service Commitment Letter from SMUD.

Please feel free to contact me at (916) 732-7073 if you have any questions regarding this information.

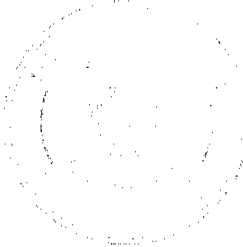
Regards,

JOHN STOCKTON
Engineering Designer, Distribution Services
Sacramento Municipal Utility District

CITY COPY

Sacramento Building Division

ISSUED
JUL 08 2005



The system of all Electrical work
is subject to field inspection