

CITY OF SACRAMENTO

Permit No: 0507875

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 4160 NORTHGATE BL SAC St: STE 3

Thos Bros:

Parcel No: 237-0031-044 SUITE# 3

Sub-Type: TI

Housing (Y/N): N

CONTRACTOR
PERSPECTIVE CONST.
5002 KEANE DR
CARMICHAEL CA 95608

OWNER
NORTHGATE MARKET PLACE JOINT VENTURE
1540 S LEWIS ST
ANAHEIM CA 92805

ARCHITECT
VIEIRA DESIGNS
4039 MCDUGALD BLVD
STOCKTON CA 95206

Nature of Work: FIRST TIME TI FOR SUBWAY SUITE# 3

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 B License Number: 691087 Date 8/22/05 Contractor Signature _____

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor's 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 _____ Owner Signature _____

PAID
CITY OF SACRAMENTO
AUG 23 2005

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 above mentioned property for inspection purposes.

Date 8/22/05 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.

~~M-A~~ 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 713-001291 Exp Date 10/01/2005

(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 8/22/05 Applicant Signature _____

WARNING: FAILURE TO SECURE WORKERS' 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.

0507875

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
PLANNING & BUILDING DIVISION
PERMIT SERVICES SECTION
(916) 808-2534 FAX: (916) 808-7046

ACTIVITY # 050 7875	Insp. Area 4
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Applicant **MUST** complete ALL Unshaded Areas

ADDRESS: 4160 Northgate Blvd. #C Suite: #C
Sac, CA, 95834

PARCEL #: 237-0091-044

<p>CONTACT</p> <p>Name: <u>Morteza Ahmadi</u> Street Address: <u>5002 Keene dr.</u> City/State/Zip: <u>Carmichael, CA, 95608</u> Phone: <u>402-0700</u> E-Mail: <u>Ahmadimoe@aol.com</u></p>	<p>LICENSED CONTRACTOR Lic No. # <u>691087</u></p> <p>Name: <u>Morteza Ahmadi</u> Street Address: <u>5002 Keene dr.</u> City/State/Zip: <u>Carmichael, CA, 95608</u> Phone: <u>916-402-0700</u> E-Mail: <u>Ahmadimoe@aol.com</u></p>
<p>ARCHITECT/ENGINEER</p> <p>Name: <u>Vicira</u> Street Address: <u>4039 Macdonald Blvd.</u> City/State/Zip: <u>Stockton, CA, 95206</u> Phone: <u>209-234-3466</u> E-Mail: _____</p>	<p>OWNER</p> <p>Name: <u>Hartirath Kaur</u> Street Address: <u>4160 Northgate Blvd #C</u> City/State/Zip: <u>Sac, CA, 95834</u> Phone: <u>(916) 834-8932</u> E-Mail: _____</p>

⇒ Will permittee have any employees on the jobsite? No Yes ⇒ Insurance Co.: Power 3rd
State Compensation Ins Funds

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

NATURE OF WORK IN DETAIL: Tenant Improvement (No structural)
Framing - Electrical - Plumbing - Mechanical

OCCUPANT/TENANT: Hartirath Kaur VALUATION: \$140,000[±]

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

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT: Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 4160 Northgate Blvd	APN: 237-0031-044
DRPB AREA / PUD / SPD: Incredible Universe PUD	ZONING: M-1S-PUD
EXISTING LAND USE: New retail building (5608 sq. ft.: shell only) already with 1446' restaurant with 48 seats & Wendy's restaurant	
PROPOSED USE: 100' restaurant with 18 seats	
<p>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s): PC ZA IR ER DR PB</p> <p style="margin-left: 40px;">Required Planning application must be submitted <i>before</i> project can be submitted for plan check.</p> <p><input type="checkbox"/> Application(s) IN PROGRESS:</p> <p style="margin-left: 40px;">Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.</p> <p><input checked="" type="checkbox"/> Application(s) COMPLETED: P03-066 (Approved January 22, 2004)</p> <p style="margin-left: 40px;">Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.</p> <p><input checked="" type="checkbox"/> Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.</p> <p><input type="checkbox"/> Meets setback & lot coverage requirements as shown on site plan provided.</p> <p><input type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input checked="" type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>COMMENTS: Must meet the conditions in P03-066. (Approved on January 22, 2004.)</p> <p>63 parking spaces provided according to P file. Kenny Wan (Project Planner) determined that a parking study was not required due to the fact that one of the conditions of the TM was a reciprocal agreement with Frye's Electronics to share their parking. Kenny Wan stated that no parking study would be required even if all the tenant spaces became restaurant use.</p>	
DATE: 5-4-05	BY: Sally Shore

**RECEIPT
ENVIRONMENTAL MANAGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH**

10743

RECEIVED FROM: Montezza Alimadi DATE: 5/20/05
 ADDRESS: 5002 Keanu Dr. Laguna Hills CA 92653
 AMOUNT RECEIVED: \$ 1,292 CHECK NO.: 5606 CASH CREDIT CARD
 FACILITY NAME: Subway
 FACILITY ADDRESS: 4160 Northgate Dr. # 2
 CASE NO.: _____

IN FEE SUMMARY

REVENUE DESCRIPTION: (KEY 33)
 PLAN REVIEW FOOD
 PLAN REVIEW - NOISE
 PLAN REVIEW - POOLS
 PUBLIC POOL FEE (CONSTRUCTION INSPECTIONS)
 PLAN REVIEW - TENTATIVE PLOT APPROVAL

COST CTR.	REVENUE	ORDER #	AMOUNT
6206202304	96964301	E32142	\$ 1,292
6206202304	96964403	E32143	\$
6206202304	96964302	E32142	\$
6206202304	92929018	E32131	\$
6206202304	96964402	E32142	\$

SIGNATURE: Winnie Thai

REVISED 10/25/00
 W:\DATA\FORMS\EHDR\RECEIPT

White - Cashier

Yellow - Customer

Pink - Environmental Management Department

*** Customer Receipt ***
 Receipt #: 12065000000010743
 Transaction Date / Time: 5/20/2005 4:06:07PM
 Case #: AF52005-10520
 Fee Type: Fee Amount
 EMD Env Health Food
 Check: 1,292.00
 Total: Check: \$1,292.00
 Bank #: 11-35
 Check # / Acct #: 5606
 Received: In Person
 Confirm No:
 Amount Tendered: \$1,292.00

County of Sacramento
 Accounting & Fiscal Services

COUNTY SANITATION DISTRICT 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION

Handwritten: 2/27/05

APPLICATION NO: _____ BLDG PERMIT NO: *SD03 2005-10648*

GENERAL INFORMATION
City of Sacramento

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER
PAID
AUG 23 2005
 Per _____
 THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/> MF <input type="checkbox"/>	
CSD-1		COMMERCIAL USE	
SRCSD	<i>1050 sq ft \$4.725</i>		
CONSTRUCTION		<i>1050 sq ft</i>	
IN-LIEU		<i>Restaurant</i>	
TOTAL FEE	\$4.725		

APN: *237-0031-048*

DESCRIPTION/SUBDIVISION _____ LOT: _____
 PROPERTY ADDRESS *4160 Northgate Blvd*
 OWNER *TRK- CREDIT. Northgate LLC*
 MAILING ADDRESS *Northgate Blvd*
 CITY-STATE-ZIP *Sacramento, CA 95834* PHONE _____

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

APPLICANT SIGNATURE _____

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

RECEIPT

0507875

4160 NORTHGATE BL #3

CIRCO System Balance, Inc.

Contractor License #624117

AIR - HYDRONIC - TEMPERATURE - SOUND - SYSTEM SURVEY

4100 FLORIN-PERKINS RD.
387-5101

SACRAMENTO, CA. 95826

(916) 387-5100

FAX (916)

October 20, 2005

AIR BALANCE REPORT

CIRCO # 1076

PROJECT: Subway

LOCATION: Northgate Blvd/ Highway 80

SACRAMENTO, CALIFORNIA

Description: Air Balance Kitchen Exhaust Hood, Make-Up
Air Unit & A/C Unit

REMARKS

Ceiling Mounted Supply Outlet and Inlet Airflow Quantities were Measured using a
ALNOR Flowhood.

Sidewall Mounted Supply Outlet and Inlet Airflow Quantities were Measured Using
a DAVIS INSTRUMENTS 6000 SERIES Digital Rotating Vane Anemometer.

No Design Airflows or Mechanical Drawings were Provided.

Tests Performed by: Chris Ruch

Report Checked by: Matt Murphy

Matt Murphy T.B.E.



CIRCO System Balance, Inc.

SB JOB# **1076**
 SECTION **1** PAGE **1**
 DATE **November 1, 2005**

FAN & OUTLET TEST SHEET

AREA SERVED **SUBWAY-AIRFLOW BALANCE** UNIT **AC-1**

MOTOR NAMEPLATE DATA

MFG **GE** FR **56**
 HP **2.4** V **230** FLA **5.2**
 PH **3** SF **1.15** RPM **1725**

SHEAVE DATA:

DIA **VL44** SHAFT **5/8"**
 ADJ % **MAX**

FAN NAMEPLATE DATA

MFG **CARRIER**
 MODEL # **484ML006**
 TYPE **PACKAGE AC**

SHEAVE DATA:

DIA **AK59** SHAFT **5/8"**
 BELTS **A40**

DATA	TEST 1	TEST 2	TEST 3
VOLTS		215	215
AMPS		2.5/2.5/2.4	3.8/3.6/3.8
B.H.P.		.32	1.72
R.P.M.		1083	1204
S.P. -		0.5	0.74
S.P. +		0.5	0.80
T.S.P.		1.0	1.54
FILTER S.P.		0.08	0.14
CFM TOTAL		1445	1835
CFM R.A.		290	1450
CFM O.A.		1155	385

FAN DESIGN DATA

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
SUPPLY												
DINING	1	CD	14 X 14	1.00						240		290
DINING	2	CD	14 X 14	1.00						210		285
KITCHEN	3	CD	12 X 12	1.00						155		220
KITCHEN	4	CD	12 X 12	1.00						180		210
BACKROOM	5	CD	12 X 12	1.00						300		480
BACKROOM	6	CD	12 X 12	1.00						310		260
RESTROOM	7	CD	8 X 8	1.00						50		90
										---		---
										1445		1835
RETURN												
DINING	R1	CR	13 X 13	1.00						150		725
DINING	R2	CR	13 X 13	1.00						140		725
										---		---
										290		1450

REMARKS: **UNABLE TO THROTTLE #5 AIRFLOW, NO MANUAL VOLUME DAMPER.**



MEMBER OF ASSOCIATED AIR BALANCE COUNCIL

CIRCO System Balance, Inc.

SB JOB# **1076**
 SECTION **2** PAGE **2**
 DATE **November 1, 2005**

FAN & OUTLET TEST SHEET

AREA SERVED **SUBWAY-KITCHEN HOOD** UNIT **MUA-1**

MOTOR NAMEPLATE DATA

MFG **EMERSON** FR **48**
 HP **1/3** V **115** FLA **5.5**
 PH **1** SF **1.0** RPM **1725**

SHEAVE DATA:

DIA **VP 34** SHAFT **1/2"**
 ADJ % **MIN**

FAN NAMEPLATE DATA

MFG **ADOBE AIR**
 MODEL # **D30B**
 TYPE **DWDL, FC CENTRIFUGAL**

SHEAVE DATA:

DIA **7"** SHAFT **5/8"**
 BELTS **A42**

DATA	TEST 1	TEST 2	TEST 3
VOLTS	124		
AMPS	6.3		
B.H.P.	0.37		
R.P.M.	531	355	
CFM TOTAL	1000	675	
CFM O.A.	100%	100%	

FAN DESIGN DATA

CFM **630**

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
						SUPPLY						
KITCHEN	1	CD	14 X 14	1.00		630		1000		675		

REMARKS: _____
