

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0000808**  
**Insp Area: 1**

**Site Address: 300 CAPITOL ML SAC**  
Parcel No: 006-0142-038 16TH AND 17TH FLOORS

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

CONTRACTOR  
ASI - ANTHONY & SONS  
1790 TERMINAL ST  
WEST SACRAMENTO CA 95691

OWNER  
CAPITOL COMMERCE PARTNERS  
180 NLA SALLE ST #3600  
CHICAGO IL 95814

ARCHITECT

**Nature of Work: INTERIOR OFFICE REMODEL**

**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 N/A 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 360117 Date 3/6/00 Contractor Signature [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 \_\_\_\_\_ 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 hereby authorize representative(s) of this city to enter upon the above-mentioned property for inspection purposes.

Date 3/6/00 Applicant/Agent Signature [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 713-98 UNIT 126 Exp Date 10/01/2000

\_\_\_\_ (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 3/6/00 Applicant Signature [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.**

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE 3-23-00

## TEST SHEET

SERVED AREA 16<sup>th</sup> floor Dept. of Insurance UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2 <sup>MAX</sup>		TEST 3 <sup>M.N</sup>		
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM	
					<u>VAV- 16-1</u>		<u>525/30</u>						
2	1	CD	15x15	1.0	525		500		530		70		
					<u>VAV 16-2</u>		<u>1315/200</u>						
	2	CD	2x12	1.0	350		20		365		360		
	3		12x12		350		20		425		350		
	4	↓	10x10	↓	265		10		50		270		
	5	↓	12x12	↓	350		20		300		350		
					1315		70		1149		1330	220	
					<u>VAV 16-3</u>		<u>860/30</u>						
	6	CD	12x12	1.0	320		200		325				
	7	↓	10x10	↓	220		220		220				
	8	↓	12x12	↓	320		270		330				
					860		690		875		140		
					<u>VAV 16-4</u>		<u>680/375</u>						
	9	CD	10x10	1.0	215		150		220				
	10		8x8		125		100		120				
	11		10x10	↓	215		160		220				
	12		8x8	↓	125		120		130				
					680		530		890		360		
					CONT.								

Remarks: Test conducted in past weeks,  
MAN AIR PAST RELAY NOT 20psi; 5psi min. flow. (INT =) GPS1 MAN AIR IN MAX

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE 3-28-00

## TEST SHEET

SERVED AREA 16<sup>th</sup> floor

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV 16-5</u>		<u>840/30</u>					
	13	CD	10x10	1.0	280		210		280			
	14	↓	10x10	↓	280		140		275			
	15	↓	10x10	↓	280		255		275			
					<u>840</u>		<u>605</u>		<u>830</u>		<u>150</u>	
					<u>VAV 16-6</u>		<u>580/90</u>					
	16	CD	12x12	1.0	340		300		340			
	17	CD	10x10	1.0	240		160		240			
					<u>580</u>		<u>460</u>		<u>580</u>		<u>100</u>	
					<u>VAV 16-7</u>		<u>1350/205</u>					
	18	CD	12x12	1.0	300		410		295			
	19	↓	↓	↓	300		380		300			
	20	↓	↓	↓	300		420		300			
	21	↓	10x10	↓	-		-		-			
	22	↓	10x10	↓	-		-		-			
					<u>900</u>		<u>1210</u>		<u>895</u>		<u>180</u>	
					<u>VAV 16-7A</u>							
	21	CD	10x10	1.0	225		415		230			
	22	CD	10x10	1.0	225		390		225			
					<u>450</u>		<u>805</u>		<u>455</u>		<u>90</u>	
					<u>VAV 16-8</u>		<u>410/65</u>					
	23	CD	12x12	1.0	410		310		415			80

±2)

Remarks: 2) Not on this box.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_

SECTION \_\_\_\_\_ PAGE \_\_\_\_\_

DATE 3-28-00

## TEST SHEET

SERVED AREA 16<sup>th</sup> Floor

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					VAV	16-9	1140/175					
24	CD	12x12	1.0			285		350		290		
25	↓	↓	↓			285		320		290		
26	↓	↓	↓			285		340		285		
27	↓	↓	↓			285		245		285		
						1140		1255		1150		190
					VAV	16-10	855/130					
28	CD	12x12	1.0			285		230		290		
29	↓	↓	↓			285		260		290		
30	↓	↓	↓			285		305		290		
						855		795		870		150
					VAV	16-11	1140/175					
31	CD	12x12	1.0			285		400	200	290		
32	↓	↓	↓			285		90	320	280		
33	↓	↓	↓			285		460	240	295		
34	↓	↓	↓			285		110	330	290		
						1140		1060		1155		180
					VAV	16-12	800/120			Deck 1 Deck 2		
35	CD	12x12	1.0			400		210		420		
36	CD	12x12	1.0			400		150		405		
						800		360		825		120
						Cont.						

Remarks: 1) Box wide open. Hot deck not control sig.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_

SECTION \_\_\_\_\_ PAGE \_\_\_\_\_

DATE \_\_\_\_\_

## TEST SHEET

SERVED AREA 16<sup>th</sup> floor

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		MAX TEST 2		MIN TEST 3		
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM	
					<u>VAV 16-13</u>		820/125						
	37	CD	10x10	1.0		215		170		210			
	38	CD	12x12	1.0		605		450		600			
						<u>820</u>		<u>580</u>		<u>810</u>		<u>130</u>	
					<u>VAV 16-14</u>		1270/320						
	39	CD	8x8	1.0		90		140		260		170	
	40	↓	8x8	↓		200		115		230		190	
	41	↓	8x8	↓		165		120		170		160	
	42	↓	8x8	↓		165		100		170		170	
	43	↓	10x10	↓		325		225		300		315	
	44	↓	10x10	↓		325		130		260		310	
						<u>1270</u>		<u>830</u>		<u>1315</u>		<u>340</u>	
					<u>VAV 16-16</u>		1525/385						
	48	CD		1.0		-		-		-		-	
	49	↓	10x10	↓		225		260		230			
	50	↓	10x10	↓		225		255		230			
	51	↓		↓		275		230		275			
	52	↓		↓		275		270		280			
	53	↓		↓		325		230		320			
	54	↓	8x8	↓		200		140		200			
						<u>1525</u>		<u>1385</u>		<u>1535</u>		<u>400</u>	
					Cont.								

Remarks: 1) Hot deck not control 49. No min flow.  
 2) Needs MVD installed.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_

SECTION \_\_\_\_\_ PAGE \_\_\_\_\_

DATE \_\_\_\_\_

## TEST SHEET

SERVED AREA \_\_\_\_\_ UNIT \_\_\_\_\_

ROOM	OPENING			FAC TCR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV 16-15</u>		855/215					
	45	CD	15x15	1.0		215		50		220		
	46	↓	15x15	↓		215		175		215		
	47	↓	12x12	↓		425		280		430		
						<u>855</u>		<u>505</u>		<u>865</u>		<u>220</u>
						<u>VAV 16-17</u>		1515/330				
	57	CD	8x8	1.0		115		50	130	100		
	58	↓	8x8	↓		240		40	180	200		
	59	↓	8x8	↓		240		60	200	205		
	60	↓	8x8	↓		180		60	210	170		
	61	↓	10x10	↓		270		80	220	230		
	62	↓	10x10	↓		270		100	260	235		
						<u>1315</u>		<u>390</u>	<u>200</u>	<u>1140</u>		<u>360</u>
						<u>VAV 16-18</u>		540/135				
	63	CD	10x10	1.0		270		600		285		
	64	CD	10x10	1.0		270		580		280		
						<u>540</u>		<u>1180</u>		<u>565</u>		<u>140</u>
						<u>VAV 16-22</u>		800/200				
	65	CD	12x12	1.0		315		680	1380	320		
	66	↓	↓	↓		315		560	340	320		
	67	↓	8x8	↓		170		180	200	175		
						<u>800</u>		<u>1420</u>	<u>815</u>	<u>220</u>		

Cont.

Remarks: D Box wide open.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE \_\_\_\_\_

## TEST SHEET

SERVED AREA 16<sup>th</sup> floor UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV 16-19</u>		<u>1110/280</u>					
68	CD	8x8	1.0		200		210		210			
69		↓			200		210		215			
70		15x15	↓		300		330		300			
71	↓	12x2			230		315		235			
72	↓	8x8	↓		180		170		175			
					<u>1110</u>		<u>1195</u>		<u>1135</u>		<u>300</u>	
					<u>VAV 16-23</u>							
73	CD	8x8	1.0		150		20		140			
74	CD	8x8	1.0		150		40		140			
					<u>300</u>		<u>60</u>		<u>280</u>		<u>100</u>	
					<u>VAV 16-20</u>		<u>1315/330</u>					
75	CD	12x12	1.0		230		310		250		220	
76		8x8			180		170		110		175	
77		8x8	↓		240		270		190		240	
78		10x10			215		140		75		105	
79		10x10			215		160		110		125	
80	↓	10x10	↓		235		200		140		140	
					<u>1315</u>		<u>855</u>		<u>1290</u>		<u>345</u>	

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE 4-5-00

## TEST SHEET

SERVED AREA 17th Floor Dept of Insurance UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		<del>TEST 2</del>		<del>TEST 3</del>	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV 17-1</u>	<u>625/95</u>						
	1	CD	10x10	1.0	275	205				280		
	2	CD	12x12	1.0	350	290				350		
					<u>625</u>	<u>495</u>				<u>630</u>		<u>100</u>
					<u>VAV 17-2</u>	<u>1400/210</u>						
	3	CD	12x12	1.0	350	270				350		
	4	↓	↓	↓	350	410				350		
	5	↓	↓	↓	350	400				355		
	6	↓	↓	↓	350	290				350		
					<u>1400</u>	<u>1370</u>				<u>1405</u>		<u>240</u>
					<u>VAV 17-3</u>	<u>500/75</u>						
	7	CD	10x10	1.0	250	260				260		
	8	CD	10x10	1.0	250	250				250		
					<u>500</u>	<u>510</u>				<u>510</u>		<u>80</u>
					<u>VAV 17-4</u>	<u>600/330</u>						
	9	CD	10x10	1.0	200	130				210		
	10		8x8	↓	100	200				110		
	11	↓	10x10	↓	200	130				200		
	12	↓	8x8	↓	100	140				105		
					<u>600</u>	<u>600</u>				<u>625</u>		<u>240</u>
					Cont.							

#1

Remarks: #1 WILL NOT STROKE ALL THE WAY TO MINIMUM



# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_

SECTION \_\_\_\_\_ PAGE \_\_\_\_\_

DATE 4-5-00

## TEST SHEET

SERVED AREA 17<sup>th</sup> Floor

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		<del>MAX</del> TEST 2		<del>MIN</del> TEST 3	
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV 17-5</u>		<u>1500/225</u>					
13	CD	12x12	1.0	300		450	310	310				
14	↓	↓	↓	300		435	200	310				
15	↓	↓	↓	300		270	205	300				
16	↓	↓	↓	300		460	190	300				
17	↓	↓	↓	300		250	190	300				
					<u>1500</u>		<u>1865</u>		<u>1520</u>		<u>240</u>	
					<u>VAV 17-6</u>		<u>900/135</u>					
18	CD	10x10	1.0	300		300	300	300				
19	↓	↓	↓	300		310	310	310				
20	↓	↓	↓	300		310	310	310				
					<u>900</u>		<u>920</u>		<u>920</u>		<u>145</u>	
					<u>VAV 17-7</u>		<u>400/60</u>					
21	CD	12x12	1.0	400		800	420	60				
					<u>VAV 17-8</u>		<u>1425/215</u>					
22	CD	12x12	1.0	285		315	285	285				
23	↓	↓	↓	285		450	290	290				
24	↓	↓	↓	285		380	290	285				
25	↓	↓	↓	285		400	285	285				
26	↓	↓	↓	285		420	235	235				
					<u>1425</u>		<u>1965</u>		<u>1435</u>		<u>230</u>	
					Cont.							

#1

#2

Remarks: #1 Will Not Control  
#2 Will Not Go To Minimum



CHARTER MEMBER OF ASSOCIATED AIR BALANCE COUNCIL

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE 4-5-00

## TEST SHEET

SERVED AREA 17<sup>th</sup> floor

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		<del>MAX</del> TEST 2		<del>MIN</del> TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV</u>	<u>17-9</u>	<u>1425/215</u>					
27	CD	12x12	1.0			285		170		290		
28	↓	↓	↓			285		300		290		
29	↓	↓	↓			285		285		295		
30	↓	↓	↓			285		365		295		
31	↓	↓	↓			285		350		290		
						<u>1425</u>		<u>1470</u>		<u>1460</u>		<u>225</u>
					<u>VAV</u>	<u>17-10</u>	<u>1275/195</u>					
32	CD	15x15	1.0			-		-		-		
33	↓	↓	↓			425		100		440		
34	↓	↓	↓			425		310		430		
						<u>850</u>		<u>410</u>		<u>870</u>		<u>200</u>
					<u>VAV</u>	<u>17-11</u>	<u>1005/255</u>					
35	CD	12x12	1.0			265		260		270		
36	↓	8x8	↓			110		110		120		
37	↓	10x10	↓			210		315		210		
38	↓	10x10	↓			210		160		310		
39	↓	10x10	↓			210		150		220		
						<u>1005</u>		<u>995</u>		<u>1030</u>		<u>270</u>

Remarks: 1) No. on this box on VAV-17-20.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE 4-5-00

## TEST SHEET

SERVED AREA 17TH Floor UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAU 17-12</u>		<u>1240/185</u>					
40	CD	10x10	1.0		230		285		240			
41	↓	12x12	↓		185	250	130		190			
42	↓	8x8	↓		195		-		-			
43	↓	12x12	↓		185		260		190			
44	↓	8x8	↓		85		-		-			
45	↓	10x10	↓		245	210	230		245			
46	↓	8x8	↓		115	25	235		120			
					<u>1240</u>		<u>1140</u>		<u>985</u>		<u>190</u>	
					<u>17-13</u>							
47	CD	10x10	1.0		270		335		290			
48	↓	10x10	↓		270		310		280			
49	↓	8x8	↓		30		150		80			
50	↓	10x10	↓		225		240		230			
48A	CD	07x10	1.0		165		320		175			
					<u>1010</u>		<u>1355</u>		<u>1055</u>		<u>260</u>	
					<u>17-14</u>		<u>605/155</u>					
51	CD	10x10	1.0		225		280		230			
52	CD	12x12	1.0		380		580		380			
					<u>605</u>		<u>860</u>		<u>610</u>		<u>160</u>	

Remarks: Not installed

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_  
 SECTION \_\_\_\_\_ PAGE \_\_\_\_\_  
 DATE 4-5-00

## TEST SHEET

SERVED AREA 17 TH FLOOR

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		<del>MAX</del> TEST 2		<del>MAX</del> TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>17-15</u>		<u>1325/335</u>					
53	CD	8x8	1.0		200		200		205			
54	↓	8x8	↓		200		230		200			
55	↓	8x8	↓		200		300		200			
56	↓	8x8	↓		200		250		205			
57	↓	8x8	↓		100		110		105			
58	↓	10x10	↓		235		450		235			
59	↓	10x10	↓		190		265		200			
					<u>1325</u>		<u>1805</u>			<u>1350</u>		<u>340</u>
					<u>17-1A</u>		<u>680/350</u>					
60	CD	8x12	1.0		340		100		350		180	
61	CD	12x12	1.0		340		100		340		175	
					<u>680</u>		<u>200</u>			<u>690</u>		<u>155</u>
					<u>17-16</u>		<u>980/145</u>					
62	CD	8x8	1.0		150		175		160			
63	↓	8x8	↓		190		280		200			
64	↓	8x8	↓		130		100		135			
65	↓	8x8	↓		190		230		200			
66	↓	8x8	↓		190		190		195			
67	↓	8x8	↓		130		110		135			
					<u>980</u>		<u>1085</u>			<u>1025</u>		<u>150</u>
					<u>VAV-17-20</u>		<u>425/65</u>					
68A	CD	15x15	1.0		425		780		430		60	

Remarks: DOX will not go to min. flow due to improper controller. Need new stat.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. \_\_\_\_\_

SECTION \_\_\_\_\_ PAGE \_\_\_\_\_

DATE 4-5-00

## TEST SHEET

SERVED AREA 17<sup>th</sup> Floor

UNIT (E) AHU

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>VAV</u>	<u>17-17</u>		<u>1200/300</u>				
	68	CD	12x12	1.0		340		375		350		
	69		12x12	↓		340		500		340		
	70			↓		130		160		110		
	71			↓		-		-		-		
	72			↓		125		170		130		
						<u>935</u>		<u>1145</u>		<u>960</u>		<u>320</u>

Remarks: D Not installed.

TO:

Department of Insurance 16<sup>th</sup> - 17<sup>th</sup> floors  
500 Capitol Mall

FROM:

**CIRCO System Balance, Inc.**  
4100 Florin-Perkins Road  
Sacramento, California 95826-4819  
Phone (916) 387-5100 • Fax (916) 387-5101

SUBJECT: VAV Boxes that need repair

DATE: 4-5-00

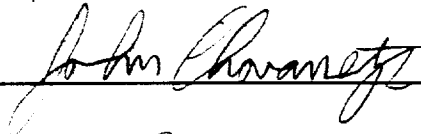
FOLD ↑

- 17<sup>th</sup> Floor = VAV 17-2 Will not go all the way down to Min Flow.  
 - VAV-17-5 Will not control  
 - VAV 17-7 Will not close all the way down to the Min Flow.  
 - VAV 17-13 BAD T-STAT or LEAK  
 - VAV 17-20 MAIN controller lines disconnected
- 16<sup>th</sup> Floor = VAV 16-14 ~~No Air to T-STAT~~ T-STAT out of calibration.  
 - VAV 16-10 No Air to T-STAT or LEAK = Reception Area ± 1600  
 - VAV 16-2 T-STAT controlling backwards  
 - VAV 16-13 BAD controllers - Air surging  
 - VAV 16-20 W" not go to min. flow.

Please FAX and CALL when ready! Thank you!

PLEASE REPLY TO →

SIGNED:



REPLY:

Corrected 4-7-00



DATE:

SIGNED:

**MEMORANDUM**

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 3-23-00

FROM: Troy Malaspino  
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

300 CAPITOL MALL

has been conducted by Inspector PACK

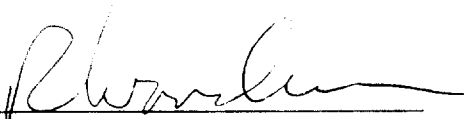
on 3-22-00

00-00808  
Permit Number

5,100  
Square Footage

REMODEL  
Type of Inspection

The system is acceptable by this department.



By: Ross L. Woodman,  
Fire Prevention Officer II

00-44  
F. D. Reference Number

Y ✓