

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: **0108578**
Insp Area: **4**

Site Address: **1545 RIVER PARK DR SAC**
Parcel No: **277-0286-029** #425

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

CONTRACTOR
BROWNING CONSTRUCTION INC
9050 RANCHVIEW CT
SACRAMENTO CA 95624

OWNER
SPEIEKER PROPERTIES
610 ARDEN WY
SAC CA

ARCHITECT

Nature of Work: OFFICE REMODEL DOWNSIZE SUITE # 425

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. Code)

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 461321 Date 7-6-01 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 Professions 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 & P 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 abovementioned property for inspection purposes.

Date 7-6-01 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 713-00-6444 Exp Date 10/01/2001

_____, (This section need not be completed if the permit is for **NEIGHBORHOOD PLANNING AND DEVELOPMENT SERVICES** shall not employ any person in any manner so as to become subject to the provisions of the Labor Code 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 7-6-01 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.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

1331 Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0108578	Insp. Area 4C
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1545 Kuro Park Dr Suite 425
 PARCEL # _____

<p align="center">CONTACT</p> Name <u>Dannell Dunning</u> Street Address <u>9050 Ranchview Ct</u> City/State/Zip <u>Elk Grove CA 95624</u> Phone <u>923-1105</u> FAX <u>695-5835</u> E-mail: _____		<p align="center">LICENSED CONTRACTOR Lic No. # <u>461321</u></p> Name <u>Browning Construction Firm</u> Address <u>9050 Ranchview Ct</u> City/State/Zip <u>Elk Grove CA 95624</u> Phone <u>923-1105</u> FAX <u>695-5835</u> E-mail: _____	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>N. Nelson + Associates</u> Address <u>550 Howe Ave</u> City/State/Zip <u>Sacto CA 95821</u> Phone <u>925-0337</u> FAX _____ E-mail: _____		<p align="center">OWNER</p> Name <u>Speker Properties</u> Address <u>1616 Arden Way</u> City/State/Zip <u>Sacto CA</u> Phone <u>921-5600</u> FAX _____ E-mail: _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Comp
 → WORKER'S COMPENSATION POLICY # 713 or 6444 EXPIRATION DATE: 10-21-01

NATURE OF WORK IN DETAIL: T.I. remodel, Reducing size of office

OCCUPANT/TENANT: COMBINED INSURANCE VALUATION: \$ 15,500⁰⁰

FLOOD STATUS:		S.C.A.T.									
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(/)	SW	FIRE	ADD	OTH	
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE				
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Fed Code	Vio. File			
		5911		B	II 14R	SPR	ALARM	15	[H]	[Quad]	
B	L	P	M	E	F	S	D	PW	UTIL		
	13 FT		13 RSB	13-T.L.A.	L.M.B			8.E.B.			

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed



AIRCO Commercial Services, Inc.
 5700 Alder Avenue, Sacramento, CA 95828
 Sacramento: 916/381-4526
 Santa Rosa: 707/576-7644
 San Jose: 408/436-7770

Fax: 916/381-1629
 License #: 572243

AIR OUTLET TEST REPORT

PROJECT Part West Comm 435 SYSTEM Fan Box VAV
 OUTLET MANUFACTURER 3 TEST APPARATUS FB hood

AREA SERVED	OUTLET				DESIGN CFM		PRELIMINARY				FINAL CFM		REMARKS
	NO.	TYPE	SIZE	AK	MAX	MIN	VEL OR CFM	VEL OR CFM			MAX	MIN	
VA - 2	1	PSS	12		400	435	338	381	431		431		
	2		10		310	285	399	395	281		281		
	3		10		310	285	315	311	287		287		
	4		12		450	415	401	393	413		413		
	5		12		450	415	372	369	419		419		
VAV - 2					PAO			1809					
	1		6		100	145	196	146					
	2		8		125	180	185	181					
	3		8		250	360	311	358					
					475		692						

REMARKS:

TEST DATE 7/16/01 READINGS BY [Signature]