

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

Permit No: **0406658**

Insp Area: **1**

Thos Bros: **297D4**

Site Address: **1415 L ST SAC**

Parcel No: **006-0116-013**

Sub-Type: **REM**

Housing (Y/N): **N**

**CONTRACTOR**

DPR CONSTRUCTION  
2480 NATOMAS PARK DR SUITE 100  
SACRAMENTO CA 95833

**OWNER**

ALLEN GROUP  
1415 L ST SUITE 250  
SACRAMENTO CA 95814

**ARCHITECT**

ELLERBE BECKET, INC  
1001 G ST NW SUITE 1000  
WASHINGTON DC, 20007

**Nature of Work:** OFFICE REMODEL, 11TH FLOOR STE 1150, INTERIOR ONLY, 5057 SF

**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 \_\_\_\_\_ License Number **599846** Date **8/16/04** Contractor 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: **AUG 16 2004**

Date \_\_\_\_\_ Owner Signature \_\_\_\_\_

**PAID**  
**CITY OF SACRAMENTO**  
**AUG 16 2004**  
**NORTH PERMIT CENTER**

**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 **8/16/04** 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.

\_\_\_\_\_, 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 **LUMBERMENS MUTUAL CASUALTY CO** Policy Number **5BA15998801** Exp Date **02/01/2005**

\_\_\_\_\_, (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 **8/16/04** Applicant 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.**



4220 Douglas Blvd., Suite 5, Granite Bay, CA 95746  
TEL (916) 784-0777 FAX (916) 784-0707  
CA License No. 793419

OUR PERFORMANCE BUILDS RELATIONSHIPS®

TRANSMITTAL

Date: 29 SEPT 04 Fax No: 568-3442 Pages: 6  
Attn: ~~Jessica Wentz~~ Company: DPR Via: FAX  
Re:

COPIES	DESCRIPTION
1	Balance Report / Final AIB Balance

For Approval  Respond In Writing  Be Advised  Call

Jessica?

Please Forward to Steve Foster

*[Handwritten signature]*

*[Handwritten signature]*

Copies To:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FRANK M. BOOTH DESIGN BUILD CO.

BY: *[Handwritten signature]*



FINAL AIR BALANCE CO., INC.

13020 PIPER HILL DR.  
PENN VALLEY, CA 95946

FRANK M. BOOTH  
DESIGN BUILD CO.  
GRANITE BAY, CA 95748

Attn: Reis Appel

Fax Cover Sheet

SEP 28 2004  
RECEIVED

TO

FROM

Company:

DPR

Final Air Balance Co., Inc

Attn:

Steve Fassler

Phone: (530) 432-2226

Fax: (530) 432-2901

License# 777985

Phone number:

Fax number: (916) 568-3442

FAXED

As Requested

For Review

Please Comment

Please Reply

Date sent: 9-28-04

Time sent: 7:30 A.M.

Number of pages including cover page: 5

Message:

Subject: Altria T.I. @ Meridian PLAZA

Steve,

The following sheets are the preliminary air balance report.

Art DeLeon

DPR  
 Fax (916) 568-3442

 **FINAL AIR BALANCE COMPANY, INC.**

Cell # (916) 826-9988

Date: 9-27-04

Sheet no: 1

Steve FASLER  
**VAV TEST SHEET**

JOB NAME: ALTRIA

SYSTEM: VAV 11-9 THROUGH 11-12



Room No.	Terminal No.	Terminal		Effective Area	Max Design		Max Final		Minimum CFM		Notes
		Type	Size		FPM	CFM	FPM	CFM	Design	Final	
	VAV 11-9		6"								
105	9-1	CR	8x8	FH	FH	100	FH (100)				
			Factor = 0.780			616	(100)			30	(35)
	VAV 11-10		6"								
107	10-1	CR	8x8	FH	FH	100	FH (105)				
			Factor = 0.780			616	(100)			30	(35)
	VAV 11-11		8"								
106	11-1	CR	10x10	FH	FH	235	FH 240				
↓	11-2	↓	↓	↓	↓	235	↓ 235				
			Factor = 0.628			(470)	(475)			140	(145)
						HEAT (145)	(145)				
	VAV 11-12		8"								
105	12-1	CR	8x8	FH	FH	200	FH 195				
↓	12-2	↓	↓	↓	↓	200	↓ 205				
			Factor = 0.611			(400)	(400)			120	(130)
						HEAT (120)	(130)				

FH = Direct read with flow hood  
 Factor = Calibration Factor

Remarks:

- REVIEWED - NO EXCEPTIONS TAKEN
- INCORPORATE COMMENTS IN CONSTRUCTION
- REVISE AS NOTED AND RESUBMIT

Submittal was reviewed only for its conformance with the Intent of the Design Development & Contract Documents.

Date: 9/29 By:   
 **FRANK M. BOOTH**  
 Design Build Co.  
 Our Performance Builds Relationships®



**FINAL AIR BALANCE COMPANY, INC.**

Date: 9-27

Sheet no: 2

**VAV TEST SHEET**

JOB NAME: ALTRIA  
 SYSTEM: VAV 11-13 THROUGH 11-15

Room No.	Terminal No.	Terminal		Effective Area	Max Design		Max Final		Minimum CFM		Notes
		Type	Size		FPM	CFM	FPM	CFM	Design	Final	
	VAV 11-13		6"								
104	13-1	CR	8x8	FH	FH	140	FH	140			
↓	13-2	↓	↓	↓	↓	140	↓	135			
				Factor: 0.558	COOL (280)		✓ (275)		85	85	
					HEAT (85)		✓ (85)				
	VAV 11-14		8"								
103	14-1	CR	8x8	FH	FH	200	FH	210			
↓	14-2	↓	↓	↓	↓	200	↓	195			
				Factor: 0.654	COOL (400)		✓ (405)		120	125	
					HEAT (120)		✓ (125)				
	VAV 11-15		8"								
102	15-1	CR	10x10	FH	FH	230	FH	230			
↓	15-2	↓	↓	↓	↓	230	↓	240			
				Factor: 0.634	COOL (460)		✓ (470)		140	150	
					HEAT (145)		✓ (150)				

FH = Direct read with flow hood  
 Factor = Calibration Factor.

Remarks:

- REVIEWED - NO EXCEPTIONS TAKEN
- INCORPORATE COMMENTS IN CONSTRUCTION
- REVISE AS NOTED AND RESUBMIT

Submittal was reviewed and found in accordance with the intent of the Design Documents and Specifications.

Date: 9/29/04  
  
 Frank M. Booth  
 Design Engineer



Our Performance Builds Relationships



**FINAL AIR BALANCE COMPANY, INC.**

Date: 9-27

Sheet no: 3

**VAV TEST SHEET**

JOB NAME: Altira


SYSTEM: VAV 11-16 THROUGH 11-18

Room No.	Terminal No.	Terminal		Effective Area	Max Design		Max Final		Minimum CFM		Notes
		Type	Size		FPM	CFM	FPM	CFM	Design	Final	
	VAV 11-16		8"								
115	16-1	CR	8x8	FH	FH	130	FH	195			(1)
	16-2					90		65			
	16-3					130		125			
	16-4					130		125			
	16-5					90		60			
				Factor = 0.650	Cold	(570)		(580)	(205)	(215)	
	VAV 11-17		12"								
101	17-1	CR	12x12	FH	FH	260	FH	255			
	17-2							260			
	17-3							265			
	17-4							255			
	17-5							260			
				Factor = 0.681	Cold	(1300)		(1295)	(430)	(440)	
					HEAT	(430)		(445)			
	VAV 11-18		6"								
100	18-1	CR	8x8	FH	FH	105	FH	100			
	18-2					105		105			
	18-3					105		105			
				Factor = 0.650	Cold	(315)		(310)	(95)	(100)	

FH = Direct read with flow hood  
 Factor = Calibration Factor.  
 Remarks: (1) No Access to M.V.D.

- REVIEWED - NO EXCEPTIONS TAKEN
- INCORPORATE COMMENTS IN CONSTRUCTION
- REVISE AS NOTED AND RESUBMIT

Submittal was reviewed only for conformance with the intent of the Design Development & Contract Documents.

Date: 9/28 By: [Signature]  
 **Frank M. Booth**  
 Down Build Co.  
 Our Performance Builds Relationships®



**FINAL AIR BALANCE COMPANY, INC.**

Date: 9-27

Sheet no: 4

**VAV TEST SHEET**

JOB NAME: Altria  
 SYSTEM: VAV 11-19 / WSHR-1

Room No.	Terminal No.	Terminal		Effective Area	Max Design		Max Final		Minimum CFM		Notes
		Type	Size		FPM	CFM	FPM	CFM	Design	Final	
	VAV 11-19		12"								
119	19-1	CD	10x10	FH	FH	230	FH	240			
↓	19-2		↓	↓	↓	230	↓	240			
	19-3		8x8	↓	↓	50	↓	50			
118	19-4		10x10	↓	↓	225	↓	220			
↓	19-5	✓	↓	↓	↓	225	↓	220			
			Factor	0.672	616	(960)	✓	970	(290)	(300)	
	WSHR-1										
Column	1	SWR	10x8	0.34	441	150	1044	355			

FH = Direct read with flow hood  
 Factor = Calibration Factor  
 Remarks:

- REVIEWED - NO EXCEPTIONS TAKEN
- INCORPORATE COMMENTS IN CONSTRUCTION
- REVISE AS NOTED AND RESUBMIT

Submittal was reviewed only for its conformance with the information on Design Development & Contract Documents.

Date: 9/27  
  
**Frank M. Booth**  
 Delta Blue Co.

