

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0309703
Insp Area: 4
Thos Bros: 277 A5

Site Address: 2880 GATEWAY OAKS DR SAC St: #220
Parcel No: 225-1420-004 STE 220

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

CONTRACTOR
BROWNING CONSTRUCTION INC
9050 RANCHVIEW CT
SACRAMENTO CA 95624

OWNER
BTV CROWN EQUITIES
2870 GATEWAY OAKS DR #110
SACRAMENTO CA 95833

ARCHITECT

Nature of Work: INTERIOR REMODEL FOR STE 220

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 461321 Date 8-4-03 Contractor Signature Daniel Browning

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 _____

PAID
CITY OF SACRAMENTO
AUG 11 8 2003
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 8-4-03 Applicant/Agent Signature Daniel Browning

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.

X 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 713016444 Exp Date 10/01/2003

(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 8-4-03 Applicant Signature Daniel Browning


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.

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 2880 GATEWAY OAKS DR #220 Permit No.: 0309703
Building Use: OFFICE DBA: AM INSTITUTE FOR RESEARCH Occupancy: B
Building Owner: BTV CROWN EQUITIES Construction Type: II-1HR
Owner Address: SACRAMENTO, CA Sprinkled? Yes No
Portion of Building Occupied: SUITE 220 Area: 8463 Sq. Ft.
9/29/03
Date By:  Sign DENNIS RICHARDSON
CHIEF BUILDING OFFICIAL

[Finaled By: DPB,MSK,AWC,FJ]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

AIRCO MECHANICAL, INC.
 720 Alder Avenue
 Sacramento, California 95828

AIR OUTLET
 TEST REPORT

PROJECT: American Institute of Research JOB NUMBER: 03-0708-00-03 SYSTEM: VAV

OUTLET MANUFACTURER: Titus TEST APPARATUS: FLOW HOOD

AREA SERVED	OUTLET			DESIGN		TEST				FINAL	
	NO.	TYPE	SIZE	HTG/MIN CFM	CLG/MAX CFM	CFM	CFM	CFM	CFM	MIN CFM	MAX CFM
2-19	1	SI	10"	120/85	400	365					410
2-21	1	SI	8"	95/45	195	145	230	190			190
2-22	1	SI	10"		340	245	280	340	260		350
	2	SI	12"		460	405	465	600	430		460
				240/120	800	650	745	940	690		810
2-23	1	SI	8"		180	160	175				175
	2	SI	10"		270	230	270				270
				135/70	450	390	445				445
2-24	1	SI	12"	135/70	450	390	435	435			435
2-25	1	SI	10"		320	340	350	350			350
	2	SI	10"		210	270	170	200			200
	3	SI	10"		295	220	270	270			270
	4	SI	8"		200	225	215	205			205
	5	SI	10"		200	245	215	205			205
				365/185	1225	1300	1220	1230			1230

Test Date 9-10-03

Readings By ED SWISHER, ERNIE LOOMIS, TODD BUCK

AIRCO MECHANICAL, INC.
 5720 Alder Avenue
 Sacramento, California 95828

AIR OUTLET
 TEST REPORT

PROJECT: Amer Inst of Research

JOB NUMBER: 03-0708-00-03

SYSTEM: VAV

OUTLET MANUFACTURER: Titus

TEST APPARATUS: _____

AREA SERVED	OUTLET			DESIGN		TEST				FINAL	
	NO.	TYPE	SIZE	HTG/MIN CFM	CLG/MAX CFM	CFM	CFM	CFM	CFM	MIN CFM	MAX CFM
2-26	1	SI	6"		100	100	180	120			180
	2		8"		170	260	300	175			175
	3		8"		230	240	315	235			235
	4		6		120	100	120	120			120
	5		6		120	110	130	130			130
	6		8		160	70	90	150			150
	7		6		100	0	40	95			195
	8		6		100	0	40	100			100
	9		6		100	50	40	100			100
	10		6		100	100	60	110			100
				-/270	1300	1070	1315	1325			1325
2-27	1	SI	10"		295	260	275	295			
	2		8		205	205	235	200			
	3		8		205	170	190	200			
					210/110	705	635				
2-28	1	SI	8"		270	140	175	145	250		260
	2		6		45	80	110	100	40		45
	3		10		215	200	250	210	210		210
	4		10		345	340	415	340	340		340
	5		8		205	210	260	200	210		210
	6		8		205	190	240	170	205		205
	7		8		205	200	240	170	205		205
	8		8		205	190	230	170	205		205
	9		8		205	190	240	215	205		205
				-/360	1,900	1740	2160	1740			1895

Test Date _____

Readings By _____

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
 TEST REPORT**

PROJECT: American Inst of Research

JOB NUMBER: 03-0708-00

SYSTEM: VAV

OUTLET MANUFACTURER: Titus

TEST APPARATUS: _____

AREA SERVED	OUTLET			DESIGN		TEST				FINAL	
	NO.	TYPE	SIZE	HTG/MIN CFM	CLG/MAX CFM	CFM	CFM	CFM	CFM	MIN CFM	MAX CFM
2-29	1	SI	8"		190	180	180				180
	2	SI	10"		330	330	330				330
	3	SI	8"		190	170	170				170
	4	SI	8"		190	180	180				180
				270/240	900	870	870				870
EF-1	1	EI	10"		250	500	400				400
<p>NOTE: WILL INSTALL BALANCE DAMPER FOR EF-1</p>											

Test Date _____

Readings By _____

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

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

ADDRESS 2870 Gateway Oaks

PERMIT # _____

ACTIVITY # <u>0309703</u>	Insp. Area _____
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Applicant **MUST** complete ALL Unshaded areas

Suite 210

<p style="text-align: center;">CONTACT</p> <p>Name <u>Darrell Browning</u></p> <p>Street Address <u>9050 Ranchview Ct.</u></p> <p>City/State/Zip <u>Elk Grove, CA 95624</u></p> <p>Phone <u>423-1105</u> FAX <u>685-5835</u></p> <p>E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>461321</u></p> <p>Name <u>Browning Construction Inc.</u></p> <p>Address <u>9050 Ranchview Ct.</u></p> <p>City/State/Zip <u>Elk Grove, CA 95624</u></p> <p>Phone <u>423-1105</u> FAX <u>685-5835</u></p> <p>E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Melsen and Associates</u></p> <p>Address <u>550 Howe Ave</u></p> <p>City/State/Zip <u>Sacramento, CA 95825</u></p> <p>Phone <u>925-0333</u> FAX _____</p> <p>E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>RTV Crown Equities</u></p> <p>Address <u>2870 Gateway Oaks Dr. #110</u></p> <p>City/State/Zip <u>Sacramento, CA 95833</u></p> <p>Phone <u>569-1900</u> FAX <u>569-1911</u></p> <p>E-mail: _____</p>

Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Compensation
 WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: 10-03

NATURE OF WORK IN DETAIL: Interior Remodel 8463 sq ft

OCCUPANT/TENANT: AM. INSTITUTE FOR RESEARCH VALUATION: \$ 145,000

FLOOD STATUS: _____		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHELL	APT	TIC ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES	BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
Stories <u>3</u>	1st flr Area.	Total Area <u>8463</u>	Use Zone	Occp Group <u>B</u>	Const type <u>II-1HR</u>	Fire Req. <u>Y</u> <input checked="" type="checkbox"/> <u>N</u> <input type="checkbox"/>	Fed Code <u>15</u>	Vio. File	
						<input checked="" type="checkbox"/> SPR <input type="checkbox"/> ALARM		[H] [Quad]	
	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