

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0110273

Insp Area: 1
Thos Bros: 297B4

Site Address: 1717 2ND ST SAC

Parcel No: 006-0245-009

IST FLR & 2ND FLR STAIRWAY Housing (Y/N): N

Sub-Type: REM

CONTRACTOR

OTTO JOHN F
1717 2ND ST
SACRAMENTO CA 95814

OWNER

JOHN F. OTTO
1722 3RD ST
SACRAMENTO CA 95814

ARCHITECT

Nature of Work: interior office remodel 1st flr & srairwell to 2nd story & NEW HVAC ON ROOF.

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 178809 _____ Date _____ 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: _____

Date 8/31/01 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 8/31/01 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 MAJESTIC INSURANCE Policy Number C200002519-01 Exp Date 07/01/2001

(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 8/31/01 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.

PLANNING AND ZONING REVIEW

..... to be filled out by Planning staff

ADDRESS: 1717 2nd ST

APN: 006-0245-009

ZONING: OB

DESIGN REVIEW AREA: CENTRAL CITY

PREVIOUS FILES RELATED TO SITE: _____

EXISTING LAND USE: COMMERCIAL

PROPOSED USE: _____

COMMENTS: HVAC UNITS ON ROOF
NOT VISIBLE FROM STREET

DATE: 8-30-01 BY: MSY

DOES IT APPEAR THAT THE PROJECT WILL REQUIRE A PLANNING APPLICATION?

YES

NO

(If yes, circle applications needed below)

.....Staff.....ZA.....Planning Commission.....Design Review.....Preservation Review.....

CONCLUSION: _____

DATE: 8-30-01 BY: MSY

August 31, 2001

City of Sacramento
Building Department
1231 I Street
Sacramento, CA 95814

Gentlemen:

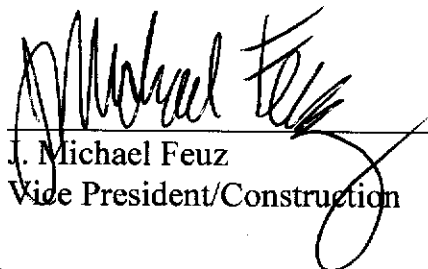
This letter authorizes Ali Malaekah to sign for building permits on behalf of John F. Otto, Inc.

Thank you for your assistance.

Sincerely,

JOHN F. OTTO, INC.

By:



J. Michael Feuz
Vice President/Construction

JMF:rs

John F. Otto, Inc.

P.O. Box 2858
Sacramento, CA 95812-2858
(916) 441-6870
FAX (916) 441-6138
E-mail: mail@ottoconstruction.com
www.ottoconstruction.com

License #178809

U:\My Documents\cro\authorization.permit.wpd

 Recycled Paper

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) _____
2. I (have/have not) _____ signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name JOHN F OTTO Address 1717 2nd ST
City SAC Telephone 916-441-6870
Contractors License No. 178809

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work

Signed 

Job Address 1717 2nd ST

Permit No: 0110273

CIRCO System Balance, Inc.

4100 Florin-Perkins Rd. • Sacramento Ca. 95826 • Phone (916) 387-5100 • Fax (916) 387-5101

Facsimile Transmittal

To: DAVE A. Fax #: 456-0517

Firm: Luppen & Hawley Date: 12-21

Re: John E. Otto

From: John Chevante Pages: 8

For Review Please Comment Urgent Please Reply

Field copies of report.

John Chevante



AMBC CHARTER MEMBER OF ASSOCIATED AIR BALANCE COUNCIL

828-1329

CIRCO System Balance, Inc.

SB JOB# 7873
 SECTION _____ PAGE _____
 DATE 12-10-01

FAN & OUTLET TEST SHEET

AREA SERVED 1st floor Lunch room UNIT AC-2

MOTOR NAMEPLATE DATA

MFG - FR -
 HP - V 208 FLA 3.6
 PH 1 SF - RPM -

SHEAVE DATA:

DIA Direct Drive SHAFT -
 ADJ % _____ FIXED -

FAN NAMEPLATE DATA

MFG Carrier
 MODEL # 486X-036
 TYPE Package
 SIZE _____

SHEAVE DATA:

DIA _____ SHAFT -
 BELTS _____

DATA	TEST 1	TEST 2	TEST 3
VOLTS	211	212	
AMPS	1.8	2.4	
B.H.P.			
R.P.M.	Low	Low	
S.P. -	.16	.12	
S.P. +	.30	.19	
T.S.P.	.46	.31	
FILTER S.P.	.06	.06	
CFM TOTAL	815	435	
CFM R.A.	520	385	
CFM O.A.	295	50	

FAN DESIGN DATA

CFM 450 SP _____ RPM _____ BHP _____
 MIN. O.A. 45

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3		
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM	
					<u>SUPPLY</u>								
	7	CD	6x8	1.0		150		295	(295)		150		
	8	↓	6x8	↓		150		310	(300)		155		
	9	↓	10x10	↓		50		85	(80)		45		
	10	↓	10x10	↓		100		125	(115)		85		
								815		435			
						450			(181%)				
					<u>RETURN</u>								
	R2	CR	11x35	1.0		405		520		385			

REMARKS: _____

10-80%

CIRCO System Balance, Inc.

SB JOB# 7873
 SECTION _____ PAGE _____
 DATE 12-10-01

OUTLET TEST SHEET

AREA SERVED Rost rooms 1st floor UNIT CEFS

MOTOR NAMEPLATE DATA

MFG _____ FR _____
 HP _____ V _____ FLA _____
 PH _____ SF _____ RPM _____

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ % _____ FIXED _____

FAN NAMEPLATE DATA

MFG _____
 MODEL # _____
 TYPE _____
 SIZE _____

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS _____

DATA	TEST 1	TEST 2	TEST 3
VOLTS			
AMPS			
B.H.P.			
R.P.M.			
S.P.			
S.P. +			
T.S.P.			
FILTER S.P.			
CFM TOTAL			
CFM R.A.			
CFM O.A.			

FAN DESIGN DATA

CFM _____ SP _____ RPM _____ BHP _____
 MIN. O.A. _____

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
					<u>CEFS.1</u>							
Mens	CE1	CE	10x8	1.0			60		185			
					<u>CEFS.2</u>							
Women	CE2	CE	10x8	1.0			195					

REMARKS: _____

3A