

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9904504
Insp Area: 1

Site Address: 2264 FAIR OAKS BL SAC
Parcel No: 295-0381-002

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

CONTRACTOR
DAY CONSTRUCTION CO
1188 AIRWAY AV STE C
COSTA MESA CA 92626

OWNER
GIANULIAS FAMILY TRUST
7700 COLLEGE TOWN DR #120
SACRAMENTO CA 97126

ARCHITECT

Nature of Work: ADDITION TO EXISTING OFFICE BUILDING

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 610643 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 _____ 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 6/30/99 Applicant/Agent Signature Day Construction By William J. Finkle

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 1222808 Exp Date 03/01/2000

(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 6/30/99 Applicant Signature By William J. Finkle Day Construction

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.



Gianulias Property Management

September 29, 1999

Brad Boehmn, P.E.
Chief Building Official
City of Sacramento
1231 I Street, Room 200
Sacramento, CA 95814

Re: Temporary Certificate of Occupancy
2264 Fair Oaks Boulevard, Suite 100, Sacramento, CA 95825

Dear Chief Building Official:

We request that a Temporary Certificate of Occupancy be issued at the above noted business location to be in effect on September 29, 1999 and expire at 12:00 p.m. on October 28, 1999.

The purpose for the Temporary Certificate of Occupancy is so we can move our offices.

The portion of the building to be occupied is the entire 2,400 square feet of building.


We acknowledge that only the following items will not be completed at the time of Temporary C of O: Roof access ladder and the air balance for the HVAC.

Prior to the expiration of the Temporary Certificate of Occupancy, we will schedule inspections to insure that all issues as stated in the above list are resolved to the full satisfaction of both the development services Division and Fire department. It is hereby acknowledged that upon the expiration of the Temporary Certificate of Occupancy, if a permanent Certificate of Occupancy has not been obtained, the continued occupancy of the subject premises shall constitute a violation of applicable Building, Housing and Dangerous Building Codes, subject to criminal sanctions, civil penalties, and/or administrative penalties pursuant to such Codes.

The undersigned certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.


Gloria Wright
Business Owner
Gianulias Property Management

1700 COLLEGE TOWN DRIVE, SUITE 109
SACRAMENTO, CA 95826-2397
TEL (916) 386-8086 FAX (916) 383-9405


William J. Fimple
Project Superintendent
Day Construction
916/417-2613

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO:

BLDG PERMIT NO: *City*

GENERAL INFORMATION

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

DEPT 26 41461.00
 TEAM 390319 06/02/99
 RECEIPT 701688 031 41461.00

251945 6.2.99
 THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION	RESIDENTIAL	SF	<input type="checkbox"/>	MF	<input type="checkbox"/>
GSD-1	COMMERCIAL USE				UNITS
SRCD					
CONSTRUCTION					
IN-LIEU					
TOTAL FEE					1481.00

APN: *295-0381-002*

DESCRIPTION/
 SUBDIVISION *Campus Commons 01* LOT:

PROPERTY ADDRESS *2264 Fair Oaks Bl.*

OWNER *Gus C. & Julie M. Stimulias Prouvable Family Trust*

MAILING ADDRESS *7700 College Town Dr #109*

CITY-STATE-ZIP *SACRAMENTO CA 95826* PHONE *333-2511*

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *Julie M. Stimulias*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

BILLING COPY

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 9904504 Insp. Area C

Applicant MUST complete ALL Unshaded areas

ADDRESS 2264 FAIROAKS BLVD SACRAMENTO CA Suite -

PARCEL # 295-0381-002

CONTACT		LICENSED CONTRACTOR Lic No. # _____	
Name <u>Jim KAUFMANN</u>		Name <u>DAY CONSTRUCTION CO</u>	
Address <u>1808 Q STREET # B SMO</u>		Address <u>3188-C AIRWAY AVE ^{COSTA} MESA CA</u>	
Phone <u>916 446 2558</u> FAX _____		Phone <u>714 8858950</u> FAX <u>714 8858965</u>	
E-mail _____		E-mail _____	
ARCHITECT/ENGINEER		OWNER	
Name <u>JAMES KAUFFMANN</u>		Name <u>GUS C. GIANULIAS</u>	
Address <u>1808 Q ST # B</u>		Address <u>7700 COLLEGE TOWN #109 SA</u>	
Phone <u>916 446 2558</u> FAX _____		Phone <u>916 383 2511</u> FAX _____	
E-mail _____		E-mail _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____

→ WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: ADDITION AND TENANT IMPROVEMENT.
to existing bldg

added sprinklers. 158,136.00
~~# 147,766.00~~

OCCUPANT/TENANT: _____ VALUATION: \$ 100,000

FLOOD STATUS: _____				S.C.A.T. <u>X 200 X 201 X 101</u>					
JOB DESCRIPTION		<input checked="" type="checkbox"/> BLDG	<input type="checkbox"/> SHELL	<input type="checkbox"/> APT	<input type="checkbox"/> TI ()	<input type="checkbox"/> REM ()	<input type="checkbox"/> SW	<input checked="" type="checkbox"/> FIRE (ADD)	<input type="checkbox"/> OTH
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input type="checkbox"/> SITE	<input type="checkbox"/> FIRE		
# Stories	1st flr Area <u>2400</u>	Total Area <u>14494</u>	Use Zone	Occp Group <u>B</u>	Const type <u>VN</u>	Fire Req. <u>Y/N</u>	Fed Code <u>15</u>	Vio. File	
						SPR <u>Y</u>	ALARM	[H]	[Quad]
<input checked="" type="checkbox"/> B	<input type="checkbox"/> L	<input type="checkbox"/> P	<input type="checkbox"/> M	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> S	D	PW	UTIL
							<u>13B7</u>	NONE	<u>RT None</u>

COMMENTS: BJ see Ross on this please
1201 K Renaissance Tower, & former bldg has this
type application

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided NEED Faxed

MESSAGE CONFIRMATION

05/07/99 13:55
ID=DEVELOPMENT SERVICES

NO.	MODE	BOX	GROUP
443	TX		

DATE/TIME	TIME	DISTANT STATION ID	PAGES	RESULT	ERROR PAGES	S. CODE
05/07 13:55	00'28"	9168756253	001/001	OK		0000



Customer Service Group # 9904504
PWA Water Quality Engineering for
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

REQUEST FOR SEWER FEE QUOTE

DATE		5-7-99		NUMBER OF PAGES	
FROM	City of	REQUESTOR	Steve Gorman	FAX	PHONE
	Sacto				264 8951
TO	SRCSD Customer Service	RESPONDER	Delores Ross	FAX	PHONE
				875-6253	

URGENT -- Applicant is in office or ready to pay permit

If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.
Press zero to speak to the operator.

Sometime soon - plans in plansheet

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME	PHONE
	GUS C. GIANULIAS	916 383 2511
Property	ASSESSOR'S PARCEL NUMBER	PROPERTY ADDRESS
	295 0381-002	2264 FAIRBANKS BLVD. SACRAMENTO, CA.



REQUEST FOR SEWER FEE QUOTE

DATE	5-7-99			NUMBER OF PAGES	
FROM	City of	REQUESTOR	FAX	PHONE	
	Sacto	Steve Gorman		264 8951	
TO	SRCSO Customer Service	RESPONDER	FAX	PHONE	
		Delores Ross	875-6253		

URGENT -- Applicant is in office or ready to pay permit

If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.
 Press zero to speak to the operator.

Sometime soon - plans in planshock

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME	PHONE
	GUS C. GIANULIAS	916 383 2511
Property	ASSESSOR'S PARCEL NUMBER(S)	PROPERTY ADDRESS
	295 0381-002	2264 FAIRDAKES BLVD. SACRAMENTO, CA.
Project	PLAN CHECK # BUILDING PERMIT NO	(mark all that apply)
	9904504	New construction <input checked="" type="checkbox"/> Remodel <input type="checkbox"/> Change in use <input type="checkbox"/>
	USE	CURRENT // PREVIOUS PLANNED
	OFFICE / Bank	OFFICE
SQUARE FOOTAGE	CURRENT // PREVIOUS PLANNED	
12094	14,494	

JUN-09-1999 13:03 SACRAMENTO-UTILITIES

WATER SUPPLY TEST - DEPT. OF UTILITIES		TEST NO: 99-43	FILE NO: R99-0043
1395 35TH AVENUE		REQUEST DATE: 5-27-99	
SACRAMENTO, CA. 95822		COMPLETE DATE: 6-9-99	
PHONE: 916 / 264-1430		ANALYSIS FEE: 500.00	DATE PAID: 5-27-99
FAX: 916 / 264-1497		FIELD TEST FEE: 500.00	DATE PAID: 5-27-99
CONTACT PERSON: Gloria Wright	PHONE NO: 916/386-8086	FAX NO: 383-9405	
COMPANY: GPM	CELL PHONE NO: 505-8088		
COMPANY ADDRESS: 7700 College Town Dr #109 Sacramento, CA 95826	STREET ADDRESS OF TEST: 2264 Fair Oaks Boulevard		
PURPOSE OF TEST:	ASSESSOR'S PARCEL NUMBER: 295-0381-002		

- The undersigned agrees to the following items and conditions:
- (1) The street address shown above is correct.
 - (2) Water supply data is developed from several sources of information which may include water supply test data, pipe network computer models, and continuous pressure recording stations. The design water supply data given below is to be used for design purposes.
 - (3) Although the water supply data reported herein is believed to be accurate, the City makes no warranty, guaranty, certification or other representation of any kind that such data is accurate or correct, or that the pressures and/or flow rates reported herein can or will be maintained. The undersigned agrees that the City, its officers and employees shall not be liable for any damages of any kind resulting from the use of or reliance upon the water supply data reported herein by the undersigned or by any third party.
 - (4) If the undersigned desires to witness the water supply test performed by the City, please check the box below:
 - I want to witness this water supply test, which will be scheduled at the convenience of the Department of Utilities.
 - (5) If the undersigned elects to hire a licensed engineer, at the undersigned's sole expense, to witness and certify the water supply test performed by the City, please check the box below:
 - At my expense, I will arrange for a licensed engineer to witness and certify this water supply test, which will be scheduled at the convenience of the Department of Utilities.

Print Name: **Gloria Wright** Signature:  Date: **5/24/99**

ENGINEERING REQUEST DATE: **5-27-99** DATE OF TEST: **6-2-99** TIME OF TEST: **9:40 AM**

WATER MAIN SIZE: **6-8"** TEST CONDUCTED BY: **Calzanti SteelLine**

	HYDRANT NO.	MAP PAGE	STATIC PRES. (PSI)	RESIDUAL PRES. (PSI)	PILOT PRES. (PSI)	OUTLET DIA. (IN.)	COEFFICIENT		CALC. FLOW @ PRES. (G.P.M.)	FLOW @ 20 PSI (G.P.M.)
							C	C		
RESIDUAL	1	5NE	52	46						
FLOWED	5	5NE			10	4.5	0.90	0.83	1427	
FLOWED	2	5NE			25	2.5	0.90	1	839	
FLOWED									2266	

* THE WATER SUPPLY TEST DATA IS NOT TO BE USED FOR THE DESIGN OF DOMESTIC WATER SYSTEMS.
 * (STATIC PRES. - RESIDUAL PRES.) / (STATIC PRES. + 20 PSI) IS LESS THAN 25%. THEREFORE, THESE RESULTS ARE ONLY VALID FOR FLOWS NOT EXCEEDING _____ G.P.M.

$$Q = 29.83 C_1 C_2 D^{0.54} \sqrt{P_{pilot}}$$

$$Q_{20} = Q_F \left(\frac{P_s - 20}{P_s - P_r} \right)^{0.54}$$

	ACTUAL	DESIGN (U)
STATIC PRES.	52 PSI	44 - PSI
RESIDUAL PRES.	46 PSI	38 - PSI
7' O.C. FLOW @ RESIDUAL PRES.	2300 GPM	2300 - GPM
TOTAL FLOW @ 20 PSI	2300 GPM	2300 - GPM

(1) The Design Water Supply Data reflects fluctuations and future demands on the water distribution system. It is to be used for design purposes.

TOTAL 0.02

City of Sacramento Development Services Division
Planning and Zoning Information Request

Project Address: 2204 FAIROAKS BLVD SACRAMENTO CA

Assessor's Parcel Number: 295-0381-002

PREVIOUS USE Bank Bldg

Current Land Use: same

Description of Request/Proposed Use:

Remove drive - then add
floor area

IS THIS A CHANGE OF USE?

Zoning Designation: OB-R

Prior Applications for Project Site(P#,Z#,DRPB#): 99-021, DR99-039

Comments: THIS ADDITION IS BEING CONSTRUCTED IN THE
DRIVE THRU AREA AT THIS ADDRESS - THERE IS AN
EXISTING 2 STORY BUILDING ON THIS SITE -

See conditions of
PR 99-039, 99-021

1910
25

Are There Any Planning Issues?: (Circle One) YES NO

STAFF Site Plan Check Required? (Circle One) YES NO

FIELD INSPECTION REQUIRED (CIRCLE ONE) YES NO

Design Review/ Preservation Required?: (Circle One) YES NO

Planning Review by/Date: WJ BOYR 5/7/99

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICHAEL...

2941 Sunrise Boulevard, Suite 105
Rancho Cordova, CA 95742
Phone: 916-859-7300
Fax: 916-859-7304
E-mail: ATMENG@aol.com

Timothy W. McPartland, SE3826
Amy Dale McPartland, CE46742

September 10, 1999

Jim Bob Kaufmann
Kaufmann Architects
1808 Q Street #B
Sacramento, CA 95814

Re: Shearwall duct openings

Dear Jim:

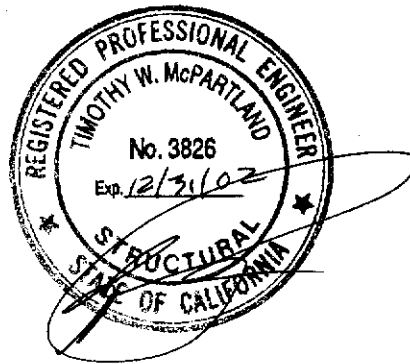
I am writing to confirm that it is OK to locate two square duct openings that fit between the studs on the shearwall type "A" on the line east of grid A provided that the edge nailing for the entire wall is increased from 6" on center to 3" on center.

Please call if there are any additional questions.

Sincerely,



Tim McPartland, SE



ATM ENGINEERING

LETTER

2941 Sunrise Boulevard, Suite 105
Rancho Cordova, CA 95742
CE46742
Phone: 916-859-7300
Fax: 916-859-7304
E-mail: ATMENG@aol.com

Timothy W. McPartland, SE3826
Amy Dale McPartland,

August 23, 1999

Jim Bob Kaufmann
Kaufmann Architects
1808 Q Street #B
Sacramento, CA 95814

ISSUED

AUG 26 1999

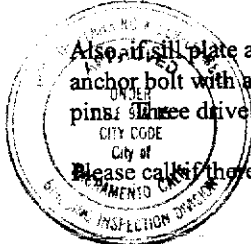
Re: Shearwall tie-down locations

Sacramento Building Division

Dear Jim:

I am writing to confirm that it is OK to locate the shearwall tie-down anchors as shown on the structural drawings. The tie-down does not need to extend to the edge of the window opening if the window is for Architectural reasons.

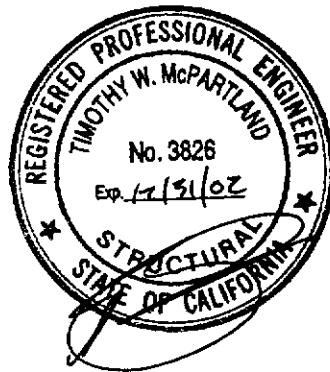
Also, if sill plate anchor bolts are missing, they may be replaced with an expansion bolt of the same diameter as the anchor bolt with a minimum 3" embedment. Sill plates which occur under windows may be anchored with 3" long drive pins. Three drive pins may be used in lieu of one anchor bolt in these locations.



Please call if there are any approval questions. Our specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

Sincerely,

Tim McPartland, SE



Permit No. 9904504C

Address : 2264 Fairoaks BLV

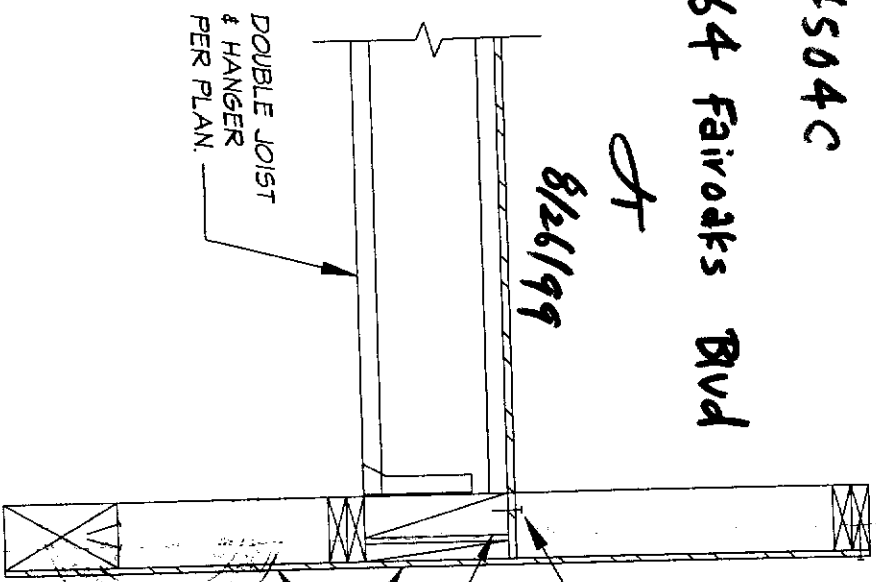
J

8/26/99

Permit No. 9904504C

Address: 2264 Fair Oaks Blvd

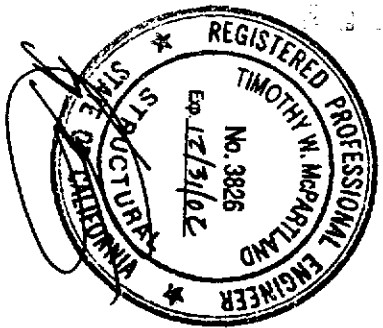
J
8/26/99



ISSUED
AUG 26 1999

NOTE: SEE B/S3.1 FOR INFO NOT SHOWN

G
53.2
 DETAIL AT ADDED JOIST
 SECTION
 SCALE: 3/4"=1'-0"



HOME FEDERAL

JOB: HOME FEDERAL	
TITLE: DETAIL AT ADDED JOIST	REVISION: DETAIL AT ADDED JOIST
CAD FILE: 315326_BXII.DWG	JOB NO.: 99031
DRAWN: RGL	DATE: 16AUG99
SCALE: AS SHOWN	

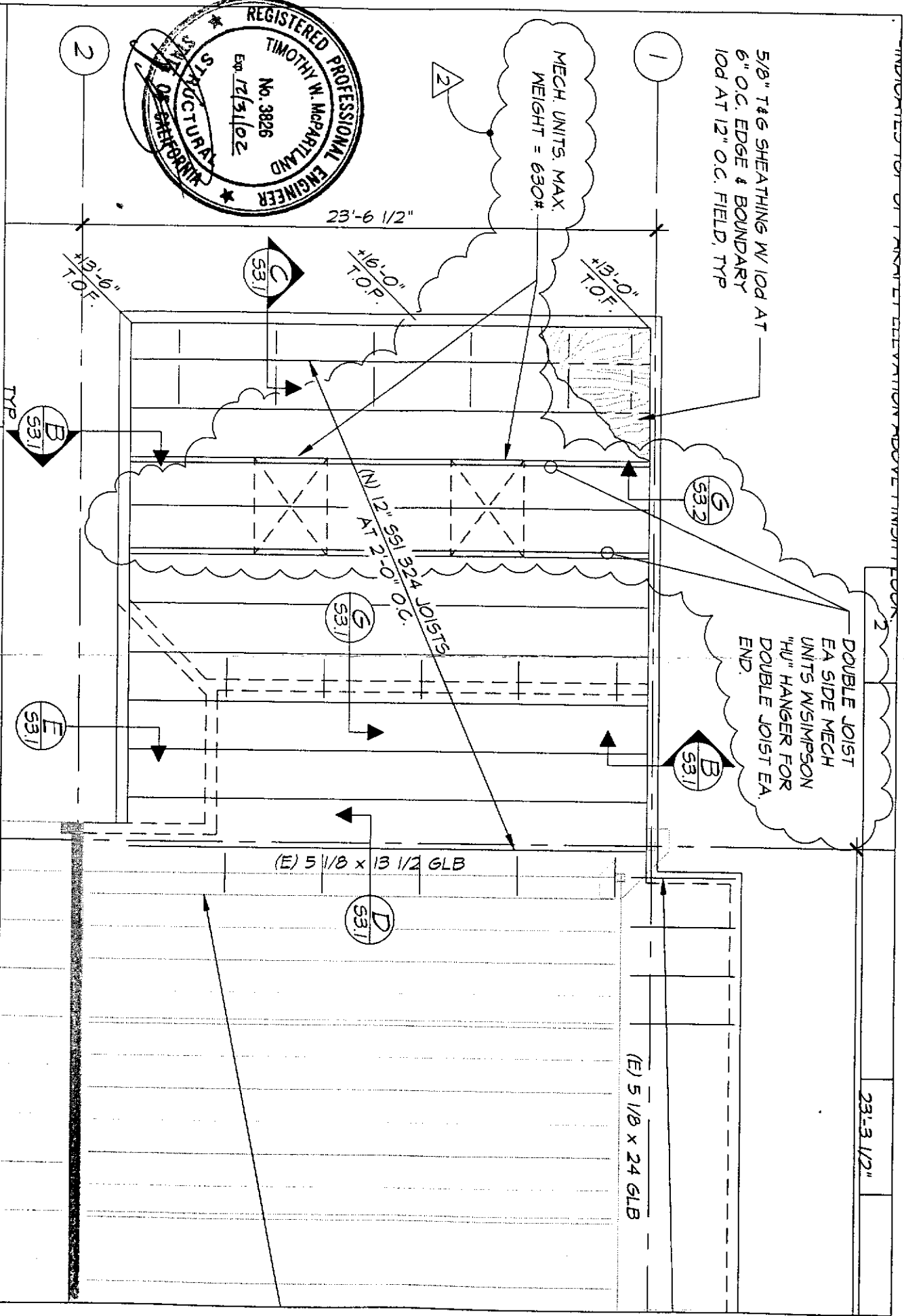
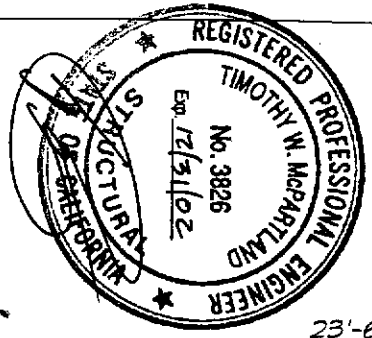
ATM ENGINEERING

INDICATED TOP OF TRIMMELE ELEVATION ABOVE FINISH FLOOR

5/8" T&G SHEATHING W/ 10d AT 6" O.C. EDGE & BOUNDARY 10d AT 12" O.C. FIELD, TYP

MECH. UNITS, MAX. WEIGHT = 630#

DOUBLE JOIST EA SIDE MECH UNITS W/SIMPSON "HJ" HANGER FOR DOUBLE JOIST EA END.



ATM ENGINEERING

JOB:	HOME FEDERAL
TITLE:	REVISION: ADDED MECH. UNIT SUPPORT
CAD FILE:	31522_BX11.DWG
DRAWN:	RGL
DATE:	16AUG99
JOB NO.:	99031
SCALE:	AS SHOWN

2941 SUNRISE BLVD SUITE 105 RANCHO CORDOVA • CALIFORNIA 95742 • (916) 859-7300 • FAX (916) 859-7304 • E-MAIL: ATMENGG@AOL.COM

San Juan Union

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

(Print or Type)

PART I TO BE COMPLETED BY APPLICANT

PROPERTY OWNER'S NAME Gus C. Gianulias
OWNER'S ADDRESS 7700 College Town Drive Suite 109, Sacramento, CA 95826
PROJECT ADDRESS 2264 Fair Oaks Boulevard, Sacramento, CA 95825
PARCEL NO. 295-0381-002 LOT NO. _____
SUBDIVISION NAME _____
NUMBER OF UNITS A single two-story building
APPLICANT'S SIGNATURE _____
TITLE OF APPLICANT Owner's Representative
DATE 5/19/99 TELEPHONE NUMBER 916/386-8086

PART II TO BE COMPLETED BY BUILDING DEPARTMENT

PLAN IDENTIFICATION NO. 99045011
BUILDING TYPE (CHECK ONE)
RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
SQUARE FEET OF CHARGEABLE BUILDING AREA 2400
SIGNATURE _____
TITLE Field Inspector DATE 5-2-99

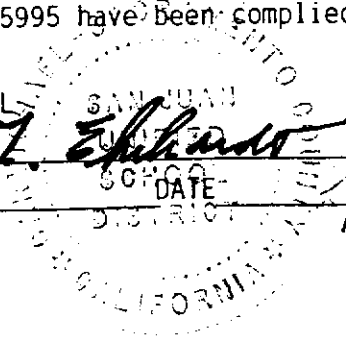
PART III TO BE COMPLETED BY SCHOOL DISTRICT

SCHOOL DISTRICT SAN JUAN UNIFIED SCHOOL DISTRICT
DISTRICT CERTIFICATION NO. _____
FEES COLLECTED 117 2400 19-724 / 755
RESIDENTIAL _____ SQ.FT X \$ _____ = \$ _____
APARTMENT/CONDOMINIUM _____ SQ.FT X \$ _____ = \$ _____
COMMERCIAL/INDUSTRIAL 2400 SQ.FT X \$ _____ = \$ 744.00

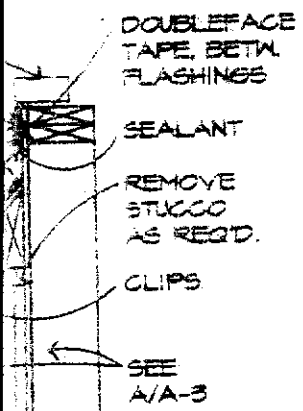
This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL _____
SIGNATURE Richard J. Edwards
TITLE _____
DATE 5/19/99

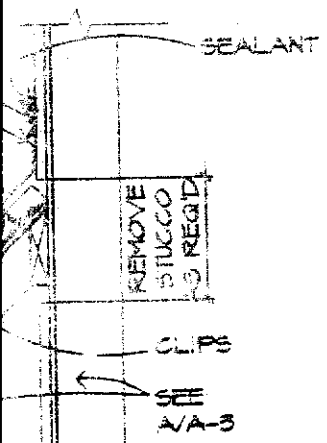


- Original: School District
- 1st Copy: School District
- 2nd Copy: Building Department
- 3rd Copy: Applicant



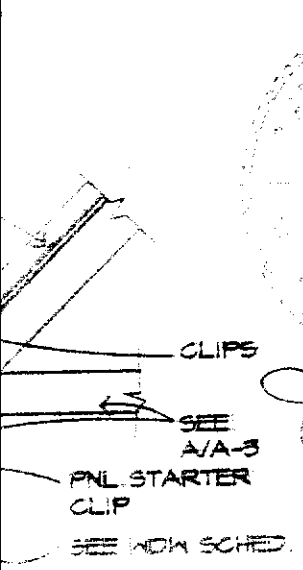
MANUFACTURER'S

W DWS



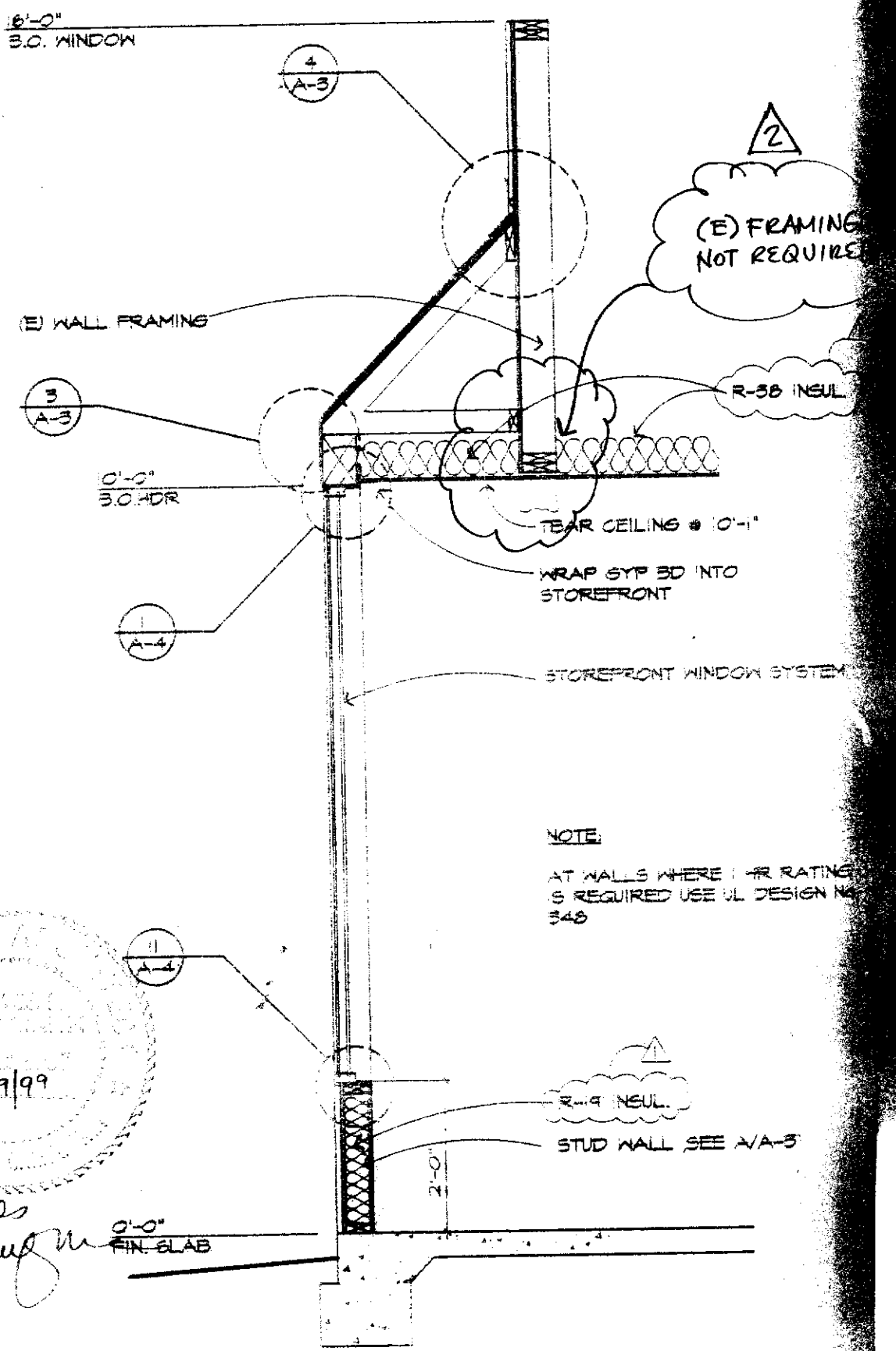
MANUF. RECOMMENDATIONS.

W WALL



MANUF. RECOMMENDATIONS.

W DWP & DWP



James Kauffman

B WALL SECTION

1/2" = 1'-0"

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 9-27-99

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2264 FAIR OAKS BLVD.

has been conducted by Inspector BODICK

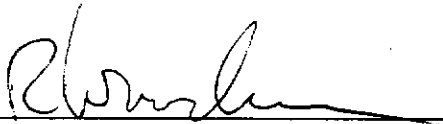
on 9-24-99

99-04504
Permit Number

2,400
Square Footage

REMODEL
Type of Inspection

The system is acceptable by this department.


By: Ross L. Woodman,
Fire Prevention Officer II

TI-391
F. D. Reference Number