

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0400101
Insp Area: 4
Thos Bros: 277 C6

Site Address: 1583 WEST EL CAMINO AV SAC
Parcel No: 225-0960-012

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

CONTRACTOR
DELGADO CONSTRUCTION
3449 CALIFORNIA AVENUE
CARMICHAEL, CA 95608

OWNER
FRANK TOFANELLI (LEESSEE)
545 W SILVER EAGLE RD
SAC CA 95834

ARCHITECT

Nature of Work: CONVERT 3000 SF OF A 5000 SF PETCO TO COUNTRY WAFFLES RESTAURANT.

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 4B License Number 769291 Date 3/9/07 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 3 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
MAR 09 2004
BUILDING PERMIT

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 3/9/07 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 _____ Policy Number _____ Exp Date _____

____ (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 3-9-07 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.

CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 2 PAGE 1
 DATE 3-1-04

FAN & OUTLET TEST SHEET

AREA SERVED KITCHEN HOOD UNIT REF-1

MOTOR NAMEPLATE DATA

MFG MARATHON FR 482
 HP .50 V 115 FLA 7.2
 PH 1 SF 1.25 RPM 1725

SHEAVE DATA:

DIA VL 34 SHAFT 1/2"
 ADJ % MID FIXED —

FAN NAMEPLATE DATA

MFG COOK
 MODEL # 16SVSB
 TYPE UPBLAST
 SIZE —

SHEAVE DATA:

DIA AK-44 SHAFT 3/4"
 BELTS AP-20

DATA	TEST 1	TEST 2	TEST 3
VOLTS	119		
AMPS	6.8		
B.H.P.	.472		
R.P.M.	1108		
S.P. -	0.44		
S.P. +	OPEN		
T.S.P.	0.44		
FILTER S.P.	—		
CFM TOTAL	2516		
CFM R.A.	—		
CFM O.A.	—		

FAN DESIGN DATA

CFM 2400 SP .625 RPM 1290 BHP DNK
 MIN O.A. —

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
108	1	HOOD	137" X 135"	12.84	188	2400						
						EXHAUST	2400					
108	1	GF	18" X 13.5"	1.68	204	343	215	361				
	2						222	373				
	3						261	438				
	4						235	395				
	5						193	324				
	6						190	319				
	7						182	306				
						EXHAUST	2400	2516			105%	

REMARKS: ① GF. GREASE FILTER



CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 3 PAGE 2
 DATE 5-1-04

FAN & OUTLET TEST SHEET

AREA SERVED DISH WASHER UNIT REF. 2

MOTOR NAMEPLATE DATA

MFG BROAN FR DNL
 HP DNL V 120 FLA 2.2
 PH 1 SF DNL RPM DNL

SHEAVE DATA:

DIA D. DRIVE SHAFT -
 ADJ% - FIXED -

FAN NAMEPLATE DATA

MFG BROAN
 MODEL # L 500 L
 TYPE DIRECT DRIVE
 SIZE -

SHEAVE DATA:

DIA D. DRIVE SHAFT -
 BELTS -

DATA	TEST 1	TEST 2	TEST 3
VOLTS	<u>119</u>		
AMPS	<u>1.9</u>		
B.H.P.	<u>-</u>		
R.P.M.	<u>D. DRIVE</u>		
S.P. -	<u>0.11</u>		
S.P. +	<u>0.02</u>		
T.S.P.	<u>0.13</u>		
FILTER S.P.	<u>-</u>		
CFM TOTAL	<u>537</u>		
CFM R.A.	<u>-</u>		
CFM O.A.	<u>-</u>		

FAN DESIGN DATA

CFM 500 SP .50 RPM DNL BHP DNL
 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>110</u>	<u>1</u>	<u>HOOD</u>	<u>12" Ø</u>	<u>.786</u>	<u>636</u>	<u>500</u>	<u>683</u>	<u>537</u>				
				<u>EXHAUST</u>		<u>500</u>		<u>537</u>				

REMARKS: _____

CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 2 PAGE 1
 DATE 5-1-04

FAN & OUTLET TEST SHEET

AREA SERVED KITCHEN/ PREP AREA UNIT MUA-1

MOTOR NAMEPLATE DATA

MFG EMERSON
 HP 1/3 V 115 FLA 5.5
 PH 1 SF 1.0 RPM 1725

SHEAVE DATA:

DIA VP 325 SHAFT 1/2"
 ADJ % MAX FIXED -

FAN NAMEPLATE DATA

MFG ESSICK AIR
 MODEL # ECA 3701
 TYPE -
 SIZE -

SHEAVE DATA:

DIA 8.0" SHAFT 5/8"
 BELTS 4L-960

DATA	TEST 1	TEST 2	TEST 3
VOLTS	119	119	
AMPS	4.9	5.2	
B.H.P.	-	-	
R.P.M.	575	655	
S.P. -	0.11	0.13	
S.P. +	0.16	0.19	
T.S.P.	0.27	0.32	
FILTER S.P.	0.05	0.06	
CFM TOTAL	1590	1760	
CFM R.A.	-	-	
CFM O.A.	-	-	

FAN DESIGN DATA

CFM 1710 SP .50 RPM DNL BHP DNL
 MIN. O.A. -

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
108	1	CD	24x24	1.0		428		330		370		
	2							400		430		
110	2							440		480		
	4							420		460		
					Supply	1712		1590		1760		
								98%		<u>103%</u>		

REMARKS: _____



CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 2 PAGE 1
 DATE 5-3-04

FAN & OUTLET TEST SHEET

AREA SERVED WAITING / DINING UNIT (E)AC-1

MOTOR NAMEPLATE DATA

MFG GE FR DNL
 HP 50 V 208 FLA 7.80
 PH 1 SF 1.0 RPM 1075

SHEAVE DATA

DIA D. DRIVE SHAFT -
 ADJ % - FIXED -

FAN NAMEPLATE DATA

MFG CARRIER
 MODEL # 48L3D005520
 TYPE PACKAGE UNIT
 SIZE -

SHEAVE DATA

DIA D. DRIVE SHAFT -
 BELTS -

DATA	TEST 1	TEST 2	TEST 3
VOLTS	209	210	
AMPS	3.3	3.4	
B.H.P.	-	-	
SPO. SET	High	High	
R.P.M.	D. DRIVE	D. DRIVE	
S.P. -	-	0.32	
S.P. +	-	0.30	
T.S.P.	-	0.52	
FILTER S.P.	-	0.06	
CFM TOTAL	1355	1390	
CFM R.A.	1250	800	
CFM O.A.	105	510	

FAN DESIGN DATA

CFM DNL SP DNL RPM DNL BHP DNL
 MIN. O.A. 470

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
107	1	CD	24x24	1.0		100	50		90			
101	2					300	240		260			
	3						270		250			
102	4						310		290			
	5						245		240			
	6						240		260			
					Supply	1600	1355		1390			
101	R-1	CD	24x24	1.0		1130	1250		800			
					RETURN	1130	1250		800			

REMARKS: _____



CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 2 PAGE 2
 DATE 5-3-04

FAN & OUTLET TEST SHEET

AREA SERVED DINING UNIT (C) AC-2

MOTOR NAMEPLATE DATA

MFG GE FR DNL
 HP 50 V 208 FLA 3.80
 PH 1 SF 1.0 RPM 1075
 SHEAVE DATA:
 DIA 0 DRIVE SHAFT -
 ADJ % - FIXED -

FAN NAMEPLATE DATA

MFG CARRIER
 MODEL # 48L30005520
 TYPE PACKAGE UNIT
 SIZE -
 SHEAVE DATA:
 DIA DIRECT 0 SHAFT -
 BELTS -

DATA	TEST 1	TEST 2	TEST 3
VOLTS	210	210	
AMPS	3.4	3.4	
B.H.P.	-	-	
SPEED SET	High	High	
R.P.M.	0 DRIVE	0 DRIVE	
S.P. -	-	0.34	
S.P. +	-	0.19	
T.S.P.	-	0.52	
FILTER S.P.	-	0.06	
CFM TOTAL	1405	1420	
CFM R.A.	1250	940	
CFM O.A.	155	480	

FAN DESIGN DATA

CFM DNL SP DNL RPM DNL BHP DNL
 MIN. O.A. 470

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
102	7	CD	24X24	1.0		265	255	240				
	8						260	230				
	9						200	220				
	10						230	240				
	11						250	240				
	12						210	250				
					Supply	1590	1405	1420				
102	R-2	CD	24X24	1.0		1120	1250	940				
					RETURN	1120	1250	940				

REMARKS: _____



CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 2 PAGE 3
 DATE 5-3-04

FAN & OUTLET TEST SHEET

AREA SERVED DINING UNIT (E) AC-3

MOTOR NAMEPLATE DATA

MFG GE FR DNL
 HP .50 V 208 FLA 3.0
 PH 2 SF 1.0 RPM 1075

SHEAVE DATA:

DIA D. DRIVE SHAFT -
 ADJ % - FIXED -

FAN NAMEPLATE DATA

MFG CARRIER
 MODEL # 48L3 D005520
 TYPE PACKAGE UNIT
 SIZE -

SHEAVE DATA:

DIA D. DRIVE SHAFT -
 BELTS -

DATA	TEST 1	TEST 2	TEST 3
VOLTS	209	209	
AMPS	3.3	3.3	
B.H.P.	-	-	
SP SET	High	High	
R.P.M.	D. DRIVE	D. DRIVE	
S.P. -	-	0.28	
S.P. +	-	0.22	
T.S.P.	-	0.50	
FILTER S.P.	-	0.06	
CFM TOTAL	1305	1320	
CFM R.A.	1220	820	
CFM O.A.	85	500	

FAN DESIGN DATA

CFM DNL SP DNL RPM DNL BHP DNL
 MIN. O.A. 470

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
104	13	CO	12X8	1.0	120	90	90	90				
103	14					90	90					
102	15		24X24		270	210	220					
	16					240	240					
	17					220	220					
	18					240	240					
	19					210	220					
				SUPPLY	1590	1305	1320					
102	R-3	CO	24X24	1.0	1120	1220	820					
				RETURN	1120	1220	820					

REMARKS: _____



CIRCO System Balance, Inc.

SB JOB# 9152
 SECTION 3 PAGE 3
 DATE 5-3-04

FAN & OUTLET TEST SHEET

AREA SERVED MENS REST RM UNIT CEF-1

MOTOR NAMEPLATE DATA

MFG McMillan FR DNL
 HP 1/20 V 115 FLA 0.6
 PH 1 SF - RPM 1100

SHEAVE DATA:

DIA DIRECT D. SHAFT -
 ADJ % - FIXED -

FAN NAMEPLATE DATA

MFG PENN
 MODEL # Z-6
 TYPE CEILING FAN
 SIZE -

SHEAVE DATA:

DIA D. DRIVE SHAFT -
 BELTS -

DATA	TEST 1	TEST 2	TEST 3
VOLTS	<u>119</u>		
AMPS	<u>0.5</u>		
B.H.P.	<u>-</u>		
R.P.M.	<u>D. DRIVE</u>		
S.P. -	<u>0.04</u>		
S.P. +	<u>-</u>		
T.S.P.	<u>0.04</u>		
FILTER S.P.	<u>-</u>		
CFM TOTAL	<u>105</u>		
CFM R.A.	<u>-</u>		
CFM O.A.	<u>-</u>		

FAN DESIGN DATA

CFM 110 SP DNL RPM DNL BHP DNL
 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>105</u>	<u>1</u>	<u>CE</u>	<u>12X10</u>	<u>1.0</u>		<u>110</u>		<u>105</u>				
				<u>EXHAUST</u>		<u>110</u>		<u>105</u>				

REMARKS: _____



CIRCO System Balance, Inc.

SB JOB# 9132
 SECTION 2 PAGE 4
 DATE 5-3-04

FAN & OUTLET TEST SHEET

AREA SERVED WOMANS REST RM UNIT CEF-2

MOTOR NAMEPLATE DATA

MFG McMILLAN FR DLK
 HP 1/2 V 115 FLA 0.6
 PH 1 SF - RPM 1100

SHEAVE DATA:

DIA DIRECT D. SHAFT -
 ADJ % - FIXED -

FAN NAMEPLATE DATA

MFG PENN
 MODEL # 7-6
 TYPE Ceiling FAN
 SIZE -

SHEAVE DATA:

DIA O. DRIVE SHAFT -
 BELTS -

DATA	TEST 1	TEST 2	TEST 3
VOLTS	<u>118</u>		
AMPS	<u>0.5</u>		
B.H.P.	<u>-</u>		
R.P.M.	<u>O. DRIVE</u>		
S.P. -	<u>0.04</u>		
S.P. +	<u>-</u>		
T.S.P.	<u>0.04</u>		
FILTER S.P.	<u>-</u>		
CFM TOTAL	<u>100</u>		
CFM R.A.	<u>-</u>		
CFM O.A.	<u>-</u>		

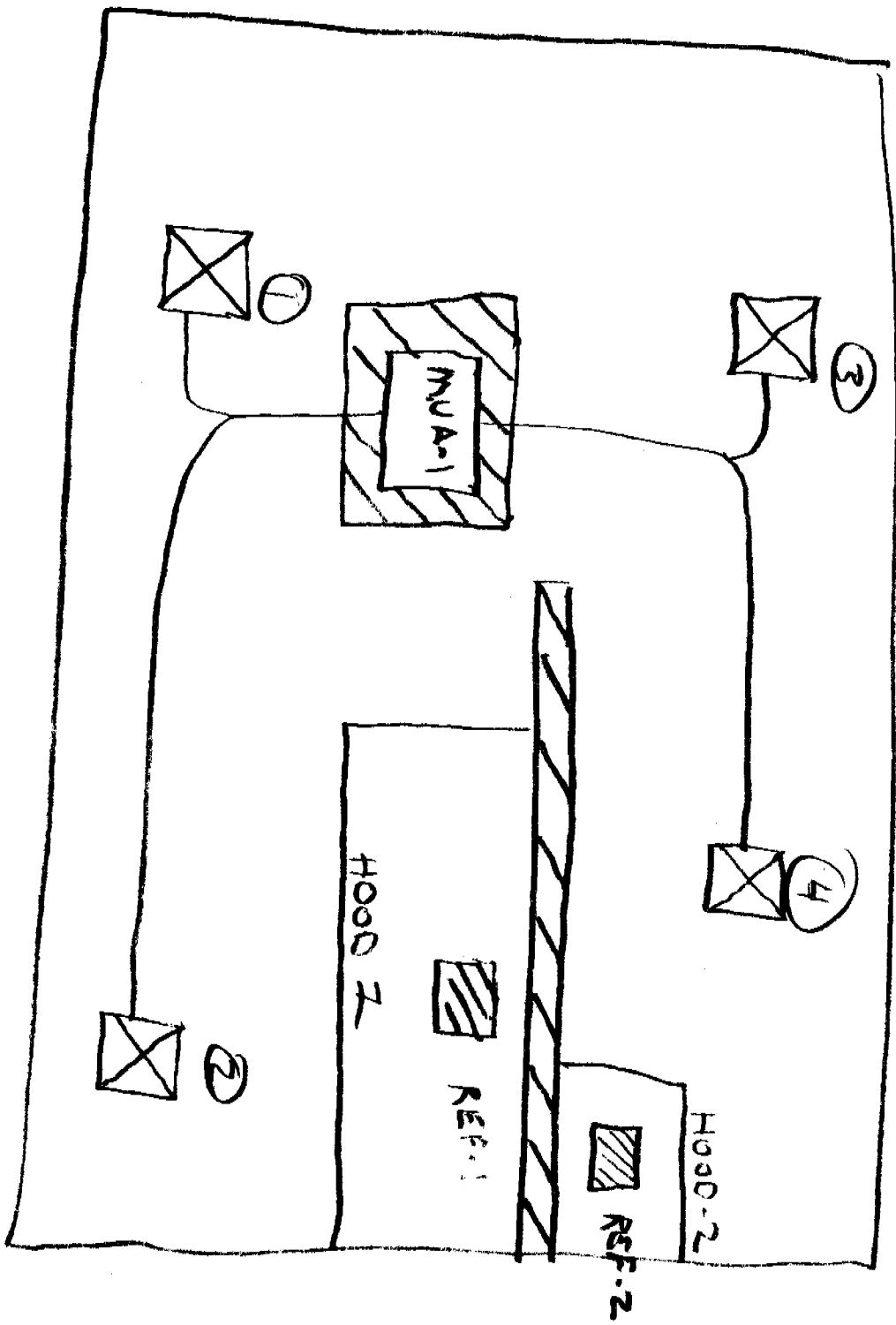
FAN DESIGN DATA

CFM 110 SP DLK RPM DLK BHP DLK
 MIN. O.A. DLK

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
<u>104</u>	<u>1</u>	<u>CE</u>	<u>12X10</u>	<u>1.0</u>		<u>110</u>		<u>100</u>				
			<u>EXHAUST</u>			<u>110</u>		<u>100</u>				

REMARKS: _____





APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
 1231 I Street, Suite 200 or 2101 Arena Bl., 200
 Sacramento, CA 95814 Sacramento, CA 95834
 (916) 264-5656, 1-866 EZ PERMIT or www.cityofsacramento.org

ACTIVITY # 0400101	Insp. Area 4
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Applicant to complete all areas down to valuation

ADDRESS 1583^{West} E1 Camino Ave Suite _____
PARCEL # 225-0960-012

cell 628-3665 CONTACT CONTACT Name <u>Frank To Fanelli</u> Street Address <u>545 W Silver Eagle Rd</u> City/State/Zip <u>Sac 95834</u> Phone <u>921-5440</u> FAX <u>921-5463</u> E-mail: <u>ftofanelle@juno.com</u>	LICENSED CONTRACTOR Lic No. # _____ Name <u>TBD</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
ARCHITECT/ENGINEER Name <u>Lee Gage</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	OWNER Name <u>Frank To Fanelli</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ 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: Converting 3000 sq Ft of a 5000 sq Ft Petco to a Restaurant

OCCUPANT/TENANT: _____ **VALUATION: \$** 175,000

FLOOD STATUS						S.C.A.T.											
JOB DESCRIPTION						BLDG <input type="checkbox"/> SHELL <input type="checkbox"/> APT <input type="checkbox"/> TI() <input type="checkbox"/> REM() <input type="checkbox"/> SW <input type="checkbox"/> FIRE <input type="checkbox"/> ADD <input type="checkbox"/> OTHER <input type="checkbox"/>											
INSPECTION DISCIPLINES						BLDG		MECH		PLUMB		ELEC		SITE		FIRE	
# Stories	1 st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code		Vio. File							
						SPR	ALARM										
<u>B-1</u>	<u>L</u>	<u>P2</u>	<u>M</u>	<u>E3</u>	<u>F4</u>	<u>S</u>	<u>S</u>	<u>D</u>		<u>PW</u>		<u>UTIL</u>					

COMMENTS:
Fire Sprinkler Req'd in Drawings

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

OFF SITE - to Main Ave
On Site - Civil Setback

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 1583 West El Camino Ave	APN: 225-0960-012
DRPB AREA / PUD / SPD: Stone Creek PUD	ZONING: SC-PUD
EXISTING LAND USE: Stone Creek Shopping Center	
PROPOSED USE: Country Waffles Restaurant to occupy approx 3000 sq.ft. vacant retail space (86 seats)	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input checked="" type="checkbox"/>	Application(s) COMPLETED: IR03-050 parking study Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input checked="" type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: See parking study for shopping center, IR03-050 (table attached) Applicant has provided copy of reciprocal ingress/egress parking agreement for shopping center joint use of parking areas across property lines, recorded document Book 910917 Page 0739 of Official Records. Seating proposed is 86; requires 29 spaces. Applicant expects to lose one parking space through creation of new handicap space. Note that existing restaurants in shopping center (Mtn Mike's and Chang's Mandarin) constitute only 10% of total area of shopping center and are parked at retail ratio; only parking for new Country Waffles must be based on seating count.	
DATE: 01/05/04	BY: Phil Reed

To Fire

Our building at 1583 West
El Camino has never had a
Fire sprinkler system. We are
converting this Petco into
a Country Waffles. Thank you

Frank Dyballa

SRCD

Sacramento Regional County Sanitation District
10545 Armstrong Avenue, Suite 101
Mather, California 95655

827. → H
ST

February 26, 2004
Receiving FAX: 916-921-5463
Sending FAX: 916-876-6161

TO: **TO WHOM IT MAY CONCERN**
Frank Tofanelli Ph:921-5440

FROM: **Fred R. Wingfield**
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

RE: **SEWER FACILITY IMPACT FEES** **APN: 225-0960-012**
1583 West El Camino Avenue **CASE: SWD2004-00145**

The SRCSD Sewer Facility Impact Fees due for a new restaurant (3,000 sq. ft.) at the above mentioned address and parcel, are as follows:

SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT (INFILL)

Restaurant = 3,000 sq. ft. x 1.9 ESDs/1000 sq. ft. = 5.70 ESDs
Retail Credits = 3,000 sq. ft. x .1 ESDs/1000 sq. ft. = -.30 ESDs
TOTAL SRCSD ESDs = 5.40 ESDs

TOTAL SRCSD SEWER IMPACT FEES DUE= 5.40 ESDs x \$2,314/ESD = \$12,496

If you have any questions regarding the above, please feel free to call me at 876-6073.



Fees are subject to adjustment if the data supplied is changed.

www.srcsd.com / www.csd-1.com

e-mail: wingfieldf@SacCounty.NET

COUNTY SANITATION DISTRICT 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

FRW
 2/26/04

SEWER IMPACT FEE
 PERMIT AND CALCULATION

APPLICATION NO: _____ BLDG PERMIT NO. SWD 2004-00145

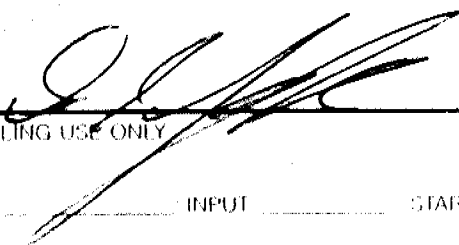
GENERAL INFORMATION
 CITY OF SACRAMENTO

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER
 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"/>
CSD-1		COMMERCIAL USE	
SRCSD	<u>\$2,314</u>	<u>RESTAURANT</u>	
CONSTRUCTION	<u>\$12,496</u>	<u>3,000 S.F.</u>	
IN-LIEU		<u>X 1.9 ESDS = 5.70 ESDS</u>	
		<u>RETAIL CENTER = .30 ESDS</u>	
		<u>ESDS DUE = 5.40 ESDS</u>	
TOTAL FEE	\$12,496		

APN: 225-0960-012
 DESCRIPTION/SUBDIVISION: Country Waffle, 101
 PROPERTY ADDRESS: 1583 West El Camino Ave
 OWNER: FRANK TOFANELLI
 MAILING ADDRESS: _____
 CITY-STATE-ZIP: _____ PHONE: 916-921-5440

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

APPLICANT SIGNATURE: 
 CONSOLIDATED UTILITY BILLING USE ONLY
 ACCT _____ INPUT _____ START _____

SRCSD

Sacramento Regional County Sanitation District
10545 Armstrong Avenue, Suite 101
Mather, California 95655

November 6, 2003

Receiving FAX: 916-921-5463

Sending FAX: 916-876-6161

TO: **TO WHOM IT MAY CONCERN**
Frank Tofanelli Ph:921-5440

FROM: **Fred R. Wingfield**
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

RE: **SEWER FACILITY IMPACT FEES**
1583 West El Camino Avenue

APN: 225-0960-012
CASE:

The SRCSD Sewer Facility Impact Fees due for a new restaurant (3,000 sq. ft.) at the above mentioned address and parcel, are as follows:

SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT (INFILL)

Restaurant = 3,000 sq. ft. x 1.9 ESDs/1000 sq. ft. = 5.70 ESDs
Retail Credits = 3,000 sq. ft. x .1 ESDs/1000 sq. ft. = - .30 ESDs
TOTAL SRCSD ESDs = 5.40 ESDs

TOTAL SRCSD SEWER IMPACT FEES DUE = 5.40 ESDs x \$2,314/ESD = \$12,496

If you have any questions regarding the above, please feel free to call me at 876-6073.



Fees are subject to adjustment if the data supplied is changed
www.srcsd.com / www.csd-1.com
e-mail: wingfield@SacCounty.NET