

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0309685

Insp Area: 1

Thos Bros: 297 E4

Site Address: 1608 I ST SAC

Parcel No: 006-0064-003

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

W & F CONTRACTORS INC.
1300 S ST
SACRAMENTO CA. 95814

OWNER

SACRAMENTO CONVENTION VISITORS BUREAU, INC
2707 K STREET, STE 3
SACRAMENTO CA 95828

ARCHITECT

**Nature of Work: REMODEL EXISTING 2 STORY BUILDING DEMO SKYLIGHTS,
PARTITIONS WALLS AND PUT UP NEW. ADD APPROX 400 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 B License Number 797348 Date _____ 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 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
488 2 1 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 8/21/03 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.

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 INS Policy Number 1625516-2002 Exp Date 03/06/2004

_____, (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 these provisions.

Date 8/21/03 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.

CITY OF SACRAMENTO

30 DAY TEMPORARY
Certificate of Occupancy
For Information Contact (916) 264-5716

Building Address: 1608 I ST Permit No.: 0309685
Building Use: OFFICE Occupancy: B
Building Owner: SACRAMENTO CONVENTION VISITORS BUREAU, INC Construction Type: VN
Owner Address: SACRAMENTO, CA Sprinkled? [] Yes [X] No
Portion of Building Occupied: REMODEL Area: 400 Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

1/30/04
Date By: (Print) Dennis Richardson Sign DENNIS RICHARDSON
CHIEF BUILDING OFFICIAL

[TCO approvals::PWC,MSK,KR,JI,GRS]

CBC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

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

ACTIVITY # 0309685 Insp. Area

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1608 I Street Suite _____

PARCEL # _____

CONTACT
 Name DAPHNE FAULKNER
 Street Address 1300 S Street
 City/State/Zip Sacramento, CA 95814
 Phone (916) 447-5550 FAX (916) 447-2434
 E-mail: dfaulkner@walshforster.com

LICENSED CONTRACTOR Lic No. # 777348 B
 Name Walsh Forster, Inc.
 Address 1300 S Street
 City/State/Zip Sacramento, CA 95814
 Phone (916) 447-5550 FAX (916) 447-2434
 E-mail: _____

ARCHITECT/ENGINEER
 Name Techspace
 Address 1765 Challenge Way Ste. 3
 City/State/Zip Sacramento, CA, 95815
 Phone (916) 565-0888 FAX (916) 565-0480
 E-mail: sudesh@Techspacedesign.com

OWNER
 Name Sacramento Convention Visitors Bureau, Inc.
 Address 2707 K Street, Ste. 3
 City/State/Zip Sacramento, CA 95816
 Phone (916) 446-7211 FAX (916) 446-7847
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Comp Insurance Fund
 → WORKER'S COMPENSATION POLICY # 1625516-03 EXPIRATION DATE: 3/06/04

NATURE OF WORK IN DETAIL: R remodel of 2 story Building including new walls, flooring, ceiling, M, E, P, and millwork.

None exterior work on this permit

OCCUPANT/TENANT: Offices VALUATION: \$ 410,000

| | | | | | | | | | |
|------------------------|--------------|------------|----------|------------|------------|---------------|-------|------------|-----------|
| FLOOD STATUS: | | | | S.C.A.T. | | | | | |
| JOB DESCRIPTION | | BLDG | SHELL | APT | TI () | REM (X) | SW | FIRE (ADD) | OTH |
| INSPECTION DISCIPLINES | | BLDG | MECH | PLUMB | ELEC | SITE | FIRE | | |
| # Stories | 1st flr Area | Total Area | Use Zone | Occp Group | Const type | Fire Req. Y/N | | Fed Code | Vio. File |
| | | | | | | SPR | ALARM | | |
| (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



A Service of Beutler Corporation

www.beutler.com
Contractor Lic. #162634

FAX COVER PAGE

To: Bob Montgomery

From: Ron Moss

Company: Walsh & Forster

Date: 1/26/04

Fax: 916-447-2434

Pages (including cover page): 6

Urgent

For Review

Please Comment

Please Reply

No Reply Necessary

Comments/Remarks

Bob,

Attached are the air balance reports for Sacramento Visitors Bureau. Please give me a call if you have any questions.

Thank you, Ron Moss

916-646-5757; Cell 916-870-3195

If you do not receive all pages, please call Beutler at the number below:

Corporate/Sacramento 4700 Lang Avenue · McClellan, CA 95652 · Tel 916.646.2225 · Fax 916.646.2263

Note: The information contained in this facsimile document is confidential and may also be Attorney-Client privileged. The information is intended only for the use of the individual or entity to whom it is addressed. If you are not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any use, dissemination, distribution, or copying of this communication is strictly prohibited. If you have received the facsimile in error, please immediately notify us by telephone, and return the original message to us at the above address via the U.S. Postal Service. Thank you.

DATE: 1-23-04

PROJECT NAME: VISITORS BUREAU

JOB NUMBER: _____

TECHS NAME: JEREMY J | GORDON D.

UNIT: EG-1

| OUTLETS | | | DESIGN CFM | % | TEST 1 | REVISED DESIGN CFM | TEST 2 | TEST 3 | FINAL CFM |
|---------|----------|-------|------------|---|--------|--------------------|--------|--------|-----------|
| SA/RA | REGISTER | DUCT | | | | | | | |
| 1 | 12x12 | 10" | 345 | | 320 | | 320 | | |
| 2 | 16x16 | 14 | 690 | | 700 | | 700 | | |
| 3 | 12x12 | 10 | 345 | | 310 | | 315 | | |
| 4 | 10x10 | 8 | 185 | | 200 | | 200 | | |
| 5 | 10x10 | 8 | 160 | | 170 | | 170 | | |
| 6 | 8x8 | 6 | 85 | | 90 | | 90 | | |
| 7 | 8x8 | 6 | 85 | | 90 | | 90 | | |
| 8 | 10x10 | 8 | 210 | | 190 | | 190 | | |
| | | TOTAL | 2105 | | | TOTAL | 2065 | | |
| 1 | 8" | 8" | 185 | | 180 | | 180 | | |
| 2 | 6" | 6" | 70 | | 80 | | 65 | | |
| 3 | 6" | 6" | 70 | | 65 | | 65 | | |
| 4 | 8" | 8" | 155 | | 145 | | 135 | | |
| 5 | 8" | 8" | 100 | | 100 | | 100 | | |
| 6 | 14" | 14" | 620 | | 300 | | 420 | | |
| 7 | 14" | 14" | 640 | | 300 | | 440 | | |
| | | | 1840 | | | OSA | 305 | | |
| | | | | | | TOTAL | 1840 | | |

COMMENTS:

There

DATE: 1-23-04

PROJECT NAME: VISITORS BUREAU

JOB NUMBER: _____

TECHS NAME: JEREMY J. GORDON P.

UNIT: FC-2

| OUTLETS | | | DESIGN CFM | % | TEST 1 | REVISED DESIGN CFM | TEST 2 | TEST 3 | FINAL CFM |
|---------|----------|-------|------------|---|--------|--------------------|--------|--------|-----------|
| SA/RA | REGISTER | DUCT | | | | | | | |
| 1 | 10x10 | 8" | 170 | | 160 | | 175 | | |
| 2 | 10x10 | 8" | 125 | | 120 | | 130 | | |
| 3 | 8x8 | 6" | 70 | | 110 | | 75 | | |
| 4 | 8x8 | 6" | 70 | | 105 | | 75 | | |
| 5 | 8x8 | 6" | 75 | | 80 | | 80 | | |
| 6 | 8x8 | 6" | 75 | | 80 | | 80 | | |
| 7 | 8x8 | 6" | 75 | | 75 | | 80 | | |
| 8 | 8x8 | 6" | 75 | | 70 | | 80 | | |
| 9 | 12x12 | 10" | 275 | | 400 | | 290 | | |
| 10 | 12x12 | 10" | 275 | | 400 | | 290 | | |
| | | TOTAL | 1185 | | | TOTAL | 1215 | | |
| 1 | 8" | 8" | 145 | | 140 | | 140 | | |
| 2 | 12" | 12" | 500 | | 450 | | 450 | | |
| 3 | 6" | 6" | 110 | | 100 | | 100 | | |
| 4 | 6" | 6" | 60 | | 65 | | 65 | | |
| 5 | 6" | 6" | 60 | | 65 | | 65 | | |
| 6 | 6" | 6" | 60 | | 65 | | 65 | | |
| 7 | 6" | 6" | 60 | | 60 | | 60 | | |
| | | TOTAL | 995 | | | TOTAL | 945 | | |

COMMENTS: TOTAL W/OSA-1450 TOTAL 1400

LOCATED DAMPERS FOR SA/3+4 and SA/9+10

PROJECT NAME: BUREAU OF VISITORS

DATE: 1/16/03

JOB NUMBER: _____

2nd Floor

TECHS NAME: GORDON

UNIT: A/C #3

| OUTLETS | | | DESIGN CFM | % | TEST 1 | REVISED DESIGN CFM | TEST 2 | TEST 3 | FINAL CFM |
|-------------|----------|------|-------------------|---|-------------------|--------------------|--------|--------------|-------------|
| SA/RA | REGISTER | DUCT | | | | | | | |
| 1 | 14 x 14 | 12" | 440 | | 430 | | | | 430 |
| 2 | 12 x 12 | 12" | 280 | | 275 | | | | 275 |
| 3 | 14 x 14 | 12" | 380 | | 400 | | | | 400 |
| | | | | | | | | <u>total</u> | <u>1105</u> |
| | | | <u>total</u> 1100 | | <u>total</u> 1105 | | | | |
| <u>RA</u> 1 | 12 x 12 | 12" | 410 | | 400 | | | | 400 |
| 2 | 12 x 12 | 10" | 250 | | 260 | | | | 260 |
| 3 | 12" | 12" | 350 | | 350 | | | | 350 |
| | | | | | | | | <u>total</u> | <u>1010</u> |
| | | | <u>total</u> 1010 | | 1010 | | | | |
| <u>OSA</u> | | 65 | | | 65 | | | | |

COMMENTS:

DATE: 1/16/04

PROJECT NAME: Visitors Bureau

JOB NUMBER: _____

TECHS NAME: Gurson

UNIT: A/#5

| OUTLETS | | | DESIGN CFM | % | TEST 1 | REVISED DESIGN CFM | TEST 2 | TEST 3 | FINAL CFM |
|---------|----------|------------------|-----------------|---|-------------------|--------------------|--------|--------------|-----------------|
| SA/RA | REGISTER | DUCT | | | | | | | |
| 1 | 8x8 | 6" | 80 | | 80 | | | | 80 |
| 2 | 8x8 | 6" | 80 | | 90 | | | | 90 |
| 3 | 8x8 | 6" | 80 | | 85 | | | | 85 |
| 4 | 14x14 | 12" | 480 | | 465 | | | | 465 |
| 5 | 14x14 | 12" | 340 | | 335 | | | | 335 |
| 6 | 14x14 | 12" | 340 | | 335 | | | | 335 |
| 7 | 12x12 | 10" | 335 | | 325 | | | | 325 |
| 8 | 8x8 | 6" | 80 | | 90 | | | | 90 |
| 9 | 8x8 | 6" | 80 | | 80 | | | | 80 |
| | | <u>Total</u> | <u>1905</u> | | <u>Total 1885</u> | | | <u>Total</u> | <u>1885</u> |
| R/A | | | | | | | | | |
| 1 | 6x6 | 6" | 65 | | 65 | | | | 65 |
| 2 | 6x6 | 6" | 65 | | 70 | | | | 70 |
| 3 | 14x14 | 12" | 465 | | 455 | | | | 455 |
| 4 | 14x14 | 12" | 325 | | 330 | | | | 330 |
| 5 | 14x14 | 12" | 325 | | 340 | | | | 340 |
| 6 | 6x6 | 6" | 65 | | 70 | | | | 70 |
| 7 | 6x6 | 6" | 65 | | 70 | | | | 70 |
| 8 | 12x12 | 10" | 305 | | 295 | | | | 295 |
| | | Total | 1680 | | Total | | | <u>Total</u> | <u>1625 CFM</u> |
| | | <u>Total</u> | <u>1680</u> | | <u>Total 1625</u> | | | | |

COMMENTS:

OSA - 310

PROJECT NAME: VISITORS BUREAU

DATE: _____

JOB NUMBER: _____

TECHS NAME: Jeremy + Gordon

UNIT: AC-4

| OUTLETS | | | DESIGN CFM | % | TEST 1 | REVISED DESIGN CFM | TEST 2 | TEST 3 | FINAL CFM |
|---------|----------|------|------------|---|--------|--------------------|--------|--------|-----------|
| SA/RA | REGISTER | DUCT | | | | | | | |
| 1 | 8x8 | 6" | 80 | | 85 | | | | |
| 2 | 8x8 | 6" | 80 | | 80 | | | | |
| 3 | 8x8 | 6" | 80 | | 80 | | | | |
| 4 | 8x8 | 6" | 80 | | 85 | | | | |
| 5 | 8x8 | 6" | 80 | | 85 | | | | |
| 6 | 14x14 | 12" | 365 | | 350 | | | | |
| 7 | 14x14 | 12" | 365 | | 350 | | | | |
| 8 | 10x10 | 8" | 125 | | 120 | | | | |
| 9 | 8x8 | 6" | 80 | | 80 | | | | |
| 10 | 8x8 | 6" | 80 | | 85 | | | | |
| 11 | 8x8 | 6" | 80 | | 80 | | | | |
| 12 | 8x8 | 6" | 80 | | 80 | | | | |
| 13 | 8x8 | 6" | 80 | | 80 | | | | |
| | | | | | | TOTAL 1660 | | | |
| 1 | 6"~ | 6" | 65 | | 75 | | | | |
| 2 | 14"~ | 14" | *550 + | | 550 | | | | |
| 3 | 6"~ | 6" | 65 | | 75 | | | | |
| 4 | 6"~ | 6" | 65 | | 75 | | | | |
| 5 | 6"~ | 6" | 65 | | 70 | | | | |
| 6 | 6"~ | 6" | 65 | | 75 | | | | |
| 7 | 6"~ | 6" | 65 | | 70 | | | | |
| 8 | 10"~ | 6" | 95 | | 100 | | | | |
| 9 | 6"~ | 6" | 65 | | 70 | | | | |
| 10 | 6"~ | 6" | 65 | | 70 | | | | |
| 11 | 6"~ | 6" | 65 | | 75 | | | | |

COMMENTS:

Unit is in HlGH speed.

(1230) (1205)

* On RA-2 there is no design CFM - I have 550 being returned.

OSA - 435

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

| | | | |
|-------------------------------|---|--------------------------|---|
| Building Address: | <u>1608 I ST</u> | Permit No.: | <u>0309685</u> |
| Building Use: | <u>OFFICE</u> | Occupancy: | <u>B</u> |
| Building Owner: | <u>SACRAMENTO CONVENTION VISTORS BUREAU, INC</u> | Construction Type: | <u>VN</u> |
| Owner Address: | <u>SACRAMENTO, CA</u> | Sprinkled? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Portion of Building Occupied: | <u>REMODEL</u> | Area: | <u>400</u> Sq. Ft. |
| 3/25/04 |  | DENNIS RICHARDSON | |
| Date | By: (Print) | Sign | CHIEF BUILDING OFFICIAL |

[Finaled By: PWC,MJS,KR,JI ,GRS]

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