

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0106059  
Insp Area: 1

Site Address: 723 56TH ST SAC  
Parcel No: 004-0344-012

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

CONTRACTOR

OWNER

ARCHITECT

NESTOR OR DAWN CLAVILLO  
SACRAMENTO CA  
95819

Nature of Work: ADDING NEW OFFICE AND TYPE I HOOD TO EXISTING DELI.

**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, C.V.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 \_\_\_\_\_ 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 05/16/01 \_\_\_\_\_ 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 above-mentioned property for inspection purposes.

Date 05/16/01 \_\_\_\_\_ 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 \_\_\_\_\_ 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 05/16/01 \_\_\_\_\_ 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.**

# APPLICATION FOR COMMERCIAL BUILDING PERMIT

**CITY OF SACRAMENTO**  
**DEVELOPMENT SERVICES DIVISION**  
**PERMIT SERVICES SECTION**

1211 Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <b>0106059</b>	Insp. Area <b>1C</b>
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**Applicant MUST complete ALL Unshaded areas**

ADDRESS 773 50th St Suite \_\_\_\_\_  
 PARCEL # \_\_\_\_\_

<p style="text-align: center;"><b>CONTACT</b></p> Name <u>Vestor Jr. Dawn Klomp</u> Street Address <u>773 50th St</u> City/State/Zip <u>Sacramento CA 95819</u> Phone <u>916/457683958</u> FAX _____ E-mail: _____	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> Name <u>Michael J Riedinger</u> Address <u>321 Norma St. #202</u> City/State/Zip <u>Folsom CA 95632</u> Phone <u>916/608-4400</u> FAX <u>916/608-4403</u> E-mail: _____	<p style="text-align: center;"><b>OWNER</b></p> Name _____ 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: DELI ONLY CHANGE TO EXISTING DELI IS INSTALLING A TYPE I HOOD/ANIT  
APPLC FOR CEILING AND NEW BOILER ROOM WALLS

OCCUPANT/TENANT: \_\_\_\_\_ VALUATION: \$ 437718

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM( )	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		[H]	[Quad]
B	L	P	M	E	F	S		D	PW	UTIL
	17	17	B	13				18		

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

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) YES

2. I (have/have not) 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 \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No \_\_\_\_\_

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 [Signature]

Job Address 723 467th st

Permit No: 01566-9

# CIRCO System Balance, Inc.

Contractor License #624117

AIR • HYDRONIC • TEMPERATURE • SOUND • SYSTEM SURVEY

4100 Florin-Perkins Road • Sacramento, California 95826-4819 • Phone (916) 387-5100 • Fax (916) 387-5101

10/24/2001

PROJECT TLO DELI  
723 56th STREET  
SACRAMENTO, CALIFORNIA

DESCRIPTION AIR BALANCE KITCHEN EXHAUST HOOD  
AND ASSOCIATED MAKE-UP AIR UNIT

## REMARKS

THE TOTAL AIR DELIVERY OF EACH FAN WAS DETERMINED BY OUTLET/INLET TOTAL

MAKE-UP AIRFLOW QUANTITIES WERE DETERMINED BY OUTLET TOTAL AIR DELIVERY WAS MEASURED USING AN ALNOF FLOW HOOD

EXHAUST AIRFLOW QUANTITIES WERE DETERMINED BY MULTI-POINT TRAVERSE TAKEN ACROSS THE FACE OF EXHAUST HOOD FILTER BANK INLET. MEASUREMENTS WERE PERFORMED USING A DAVIS INSTRUMENTS #6000 SERIES DIGITAL ROTATING VANE ANEMOMETER.

FEET PER MINUTE (FPM) VALUES SHOWN ARE THE AVERAGE OF MULTI-POINT TRAVERSE MEASUREMENTS.

TESTS PERFORMED BY

Matt Murphy

MATT MURPHY

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. 7796  
 SECTION 1 PAGE 1  
 DATE 7-24-01

## FAN & OUTLET TEST SHEET

AREA SERVED Kitchen Hood Exhaust UNIT EF-1

### MOTOR NAMEPLATE DATA

MFG A Smith FR 56  
 HP 1/2 FLA 9.0  
 PH 1 SF 1.25 RPM 1725

SHEAVE DATA  
 DIA \_\_\_\_\_ SHAFT 1/2"  
 ADJ 0% MID FIXED \_\_\_\_\_

### FAN NAMEPLATE DATA

MFG Capture Air e  
 MODEL CN4150KG  
 TYPE SWSZ, Cont  
 SIZE \_\_\_\_\_

SHEAVE DATA  
 DIA AK40 SHAFT 5/8"  
 BELTS AX-25

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS	<u>115</u>	<u>115</u>	
AMPS	<u>7.2</u>	<u>5.8</u>	
BHP	<u>0.40</u>	<u>0.32</u>	
RPM	<u>1190</u>		
SP -	<u>0.95</u>	<u>0.72</u>	
SP -			
TSP	<u>0.95</u>	<u>0.72</u>	
FILTER SP			
CFM TOTAL	<u>1865</u>	<u>1539</u>	
CFM RA			
CFM OA			

### FAN DESIGN DATA

CFM 1500 SP 0.875" RPM 1194 BHP \_\_\_\_\_

ROOM	OPENING		FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO	TYPE SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
<u>Kitchen</u>	<u>Filter</u> <u>Banks</u>	<u>67x</u> <u>14 1/2"</u>	<u>0.75</u>	<u>222</u>	<u>1500</u>	<u>275</u>	<u>1865</u>	<u>228</u>	<u>1539</u>		

Exhaust

2-16x16 #20 -20x16 Grease Filters

REMARKS Design Airflow taken from project drawings.

# CIRCO SYSTEM BALANCE, INC.

SB JOB NO. 7796  
SECTION 1 PAGE 2  
DATE 7-24-61

### FAN & OUTLET TEST SHEET

AREA SERVED Kitchen Hood Make-Up Air UNIT MUA-1

MOTOR NAMEPLATE DATA

MFG Asmith FR 40  
HP 1/2 V 115 FLA 6.3  
PH 1 SF 60 RPM 1725

SHEAVE DATA  
DIA 1 1/4 SHAFT 1/2"  
ADJ X % MID FIXED

FAN NAMEPLATE DATA

MFG Champion  
MODEL 3000 SM  
TYPE DWNT, Cent  
SIZE

SHEAVE DATA  
DIA AKT4 SHAFT 3/4  
BELTS -4L450

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS	<u>115</u>	<u>115</u>	
AMPS	<u>6.8</u>	<u>5.8</u>	
BHP	<u>0.54</u>	<u>0.46</u>	
RPM	<u>710</u>	<u>520</u>	
SP -	<u>0.25</u>	<u>0.20</u>	
SP -	<u>0.14</u>	<u>0.10</u>	
TSP	<u>0.39</u>	<u>0.30</u>	
FILTER SP	<u>-</u>	<u>-</u>	
CFM TOTAL	<u>1890</u>	<u>1385</u>	
CFM RA	<u>-</u>	<u>-</u>	
CFM OA	<u>100%</u>	<u>100%</u>	

FAN DESIGN DATA

CFM 1350 SP 0.4 RPM \_\_\_\_\_ BHP \_\_\_\_\_

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
<u>SUPPLY</u>												
Kitchen	<u>1</u>	<u>CD</u>	<u>14x14</u>	<u>1.0</u>		<u>1350</u>		<u>1890</u>		<u>1385</u>		

REMARKS Design Airflow taken from project drawings.