

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0103776
Insp Area: 1

Site Address: 1107 9TH ST SAC
Parcel No: 006-0102-001 8TH FLR

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

CONTRACTOR
SUNDT CONST.
3940 INDUSTRIAL BLVD SUITE 100D
WEST SACRAMENTO CA 95691

OWNER
FORUM BUILDING LTD
1610 ARDEN WAY STE #242
SACRAMENTO CA 95815-4028

ARCHITECT

Nature of Work: 8TH FLR OFFICE REMODEL 2090 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 AG License Number 571371 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 improvements to be constructed do 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 3/20 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 ST PAUL FIRE & MARINE Policy Number WVK 8300313 Exp Date 10/01/2001

____ (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 3/20 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

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

ACTIVITY #	Insp. Area
0103776	IC

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1107 9th St Sac Suite 87th FLR
 PARCEL # 0060102001

<p align="center">CONTACT</p> Name <u>Steve Goodwin</u> Street Address _____ City/State/Zip <u>Sacramento</u> Phone _____ FAX _____ E-mail: _____		<p align="center">LICENSED CONTRACTOR Lic No. #<u>AB 511371</u></p> Name <u>Sundt Construction Co</u> Address <u>3940 Industrial Blvd</u> City/State/Zip <u>W. Sac, Ca 95811</u> Phone <u>371-4100</u> FAX <u>371-2468</u> E-mail: _____	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>Techspace</u> Address <u>1765 Challenge Way</u> City/State/Zip <u>Sac, Ca. 95815</u> Phone <u>565-0888</u> FAX <u>565-0480</u> E-mail: _____		<p align="center">OWNER</p> Name <u>Forum Building Ltd</u> Address <u>1610 Arden Way</u> City/State/Zip <u>Sac, Ca 95815</u> Phone <u>930-0200</u> FAX _____ E-mail: _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: St. Paul Fire & Marine
 → WORKER'S COMPENSATION POLICY # WYK 8300201 EXPIRATION DATE: 10.1.01

NATURE OF WORK IN DETAIL: interior tenant improvement

OCCUPANT/TENANT: SAN FRANCISCO UNIFIED School VALUATION: \$ 30,000

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 Red	Fed Code	Vio. File			
9	2090			B	1ER	(Y/N) (SPR) ALARM	15	[H] [Quad]			
(B) NONE	(D) 13 yr	(M) K.W	(E) T.L.M.B	(F) 10013	S	(D) 8.E.B.		PW	UTIL		

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

#1

Carter Pierce Mechanical Services
PO Box 5530
Auburn Ca. 95604.5530

Fan And Outlet Test Sheet

Date 04/30/2001
Job Name Forum
Job # 2100
Unit 8th FLOOR
Page

Area Served Forum Building 8th floor 8-FC-1

Motor Name Plate Data		Unit Name Plate Data:	
MFG:	<u>Carrier</u>	MFG:	<u>Carrier</u>
FR:	_____	Model:	<u>42 DA 010</u>
HP:	_____	Type:	<u>furred in ceiling model</u>
Volts	_____	Serial	<u>8-FC-1</u>
PH:	_____		
RPM:	_____		

Sheave Data		Fan Design Data:	
DIA:	<u>Direct Drive</u>	CFM:	<u>1420</u>
Shaft:	_____	SP:	<u>0.5</u>
Belt(S):	_____	RPM:	<u>1075</u>
		BHP:	<u>1/4</u>
		MIN O/A	<u>10%</u>

Data Item	Test 1	Test 2	Test 3
Volts	277	277	
Amps	1.35	1.35	
BHP	1/4	0.25	
RPM	1075	1075	
SP -	0.2	0.2	
SP +	0.65	0.65	
TSP	0.85	0.85	
Filter SP	inc	inc	
Total CFM		960	
R/A CFM		805	
OSA CFM		155	

Opening	Design	TEST #1	Test #2
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ROOM	NO.	Type	Size	Factor	FPM	CFM	Fpm	CFM	Fpm	CFM
Office TI	1					250		290		
Office TI	2					250		265		
Office TI	3					250		250		
OSA			6"		622	140	640	155		
Totals						890		960		

#3

Carter Pierce Mechanical Services
PO Box 5530
Auburn Co. 95604.5530

Fan And Outlet Test Sheet

Date 10/11/2000
Job Name Forum
Job # 2100
Unit 8th FLOOR
Page

Area Served Forum Building 8th floor 8-FC-3

Motor Name Plate Data

MFG: Carrier
FR: _____
HP: _____
Volts _____
PH: _____
RPM: _____

Unit Name Plate Data:

MFG: Carrier
Model: 42 DA 010
Type: furred in ceiling model
Serial 8-FC-3

Fan Design Data:

CFM: 1420
SP: 0.5
RPM: 1075
BHP: 1/4
MIN O/A 10%

Sheave Data

DIA: Direct Drive
Shaft: _____
Belt(S): _____

Data Item	Test 1	Test 2	Test 3
Volts	277	277	
Amps	1.35	1.35	
BHP	1/4	0.25	
RPM	1075	1075	
SP -	0.3	0.3	
SP +	0.45	0.45	
TSP	0.75	0.75	
Filter SP	inc	inc	
Total CFM		1310	
R/A CFM		1170	
OSA CFM		140	

Opening

Design

TEST #1

Test #2

ROOM	NO.	Type	Size	Factor	FPM	CFM	Fpm	CFM	Fpm	CFM
Office Tl	1					250		240		
Office Tl	2					250		265		
copy rm	3					125		150		
prvite off	4					175		165		
restroom	5					50		50		
hallway	6					125		150		
hallway	7					125		150		
OSA	8		6"		622	140		140		
Totals						1240		1310		

#4

Carter Pierce Mechanical Services
PO Box 5530
Auburn Ca. 95604-5530

Fan And Outlet Test Sheet

Date 04/30/2001
Job Name Forum
Job # 2100
Unit 8th FLOOR
Page

Area Served Forum Building 8th floor 8-FC-4

Motor Name Plate Data

MFG: Carrier
FR: _____
HP: _____
Volts _____
PH: _____
RPM: _____

Unit Name Plate Data:

MFG: Carrier
Model: 42 DA 010
Type: furred in ceiling model
Serial 8-FC-4

Fan Design Data:

CFM: 1420
SP: 0.5
RPM: 1075
BHP: 1/4
MIN O/A 10%

Sheave Data

DIA: Direct Drive
Shaft: _____
Belt(S): _____

Data Item	Test 1	Test 2	Test 3
Volts	277	277	
Amps	1.35	1.35	
BHP	1/4	1/4	
RPM	1075	1075	
SP -	0.2	0.15	
SP +	0.65	0.65	
TSP	0.85	0.8	
Filter SP	inc	inc	
Total CFM		978	
R/A CFM		843	
OSA CFM		135	

Opening

Design

TEST #1

Test #2

ROOM	NO.	Type	Size	Factor	FPM	CFM	Fpm	CFM	Fpm	CFM
Office TI	1					400		218		
Office TI	2					200		215		
Office TI	3					200		410		
OSA			6"		622	140	600	135		
Totals						940		978		



