

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0100479
Insp Area: 4

Site Address: 1545 RIVER PARK DR SAC
Parcel No: 277-0286-029 204

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

CONTRACTOR
CIMORELLI CONSTRUCTION
11333 SUNCO DR #103
RANCHO CORDOVA, CA 95742

OWNER
SPIEKER PROPERTIES
1610 ARDEN WY
SAC CA. 95825

ARCHITECT

Nature of Work: REMODEL INTERIOR. # 204

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 575704 Date 1-16-1 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 Professions 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: RENTED
Date _____ Owner Signature [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 1-16-1 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 AMERICAN INTERSTATE INSURANCE Policy Number 00WCCA152704 Exp Date 07/01/2001

(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 1-16-1 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.

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 # <u>0100479</u>	Insp. Area <u>4C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1545 RIVER PARK DR. # 204 Suite 204
 PARCEL # 277-0286-029

CONTACT Name <u>JOE CIMORELLI</u> Street Address <u>SEE CONTRACTOR →</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	LICENSED CONTRACTOR Lic No. <u># B 525704</u> Name <u>CIMORELLI CONST. CO.</u> Address <u>11333 SUNCO DR. #103</u> City/State/Zip <u>RANCHO CORDON, CA 95742</u> Phone <u>635-4440</u> FAX <u>635-7084</u> E-mail: _____
ARCHITECT/ENGINEER Name <u>NIELSEN + ASSO C.</u> Address <u>550 HOWE AVE.</u> City/State/Zip <u>SAC, CA 95825</u> Phone <u>925-0333</u> FAX <u>N/A</u> E-mail: _____	OWNER Name <u>SPIEKER PROPERTIES</u> Address <u>1610 ARDEN WT. # 298</u> City/State/Zip <u>SAC, CA 95825</u> Phone <u>921-5600</u> FAX <u>921-5655</u> E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: AMERICAN INTERSTATE INS. CO.
 → WORKER'S COMPENSATION POLICY # DDWCCA152704 EXPIRATION DATE: 7-01

NATURE OF WORK IN DETAIL: INT. ALT. OFFICE → OFFICE

OCCUPANT/TENANT: SPEC'S VALUATION: \$ 38,863

FLOOD STATUS		S.C.A.T.									
JOB DESCRIPTION		REMI SV FIRE ADD 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 checked="" type="checkbox"/> FIRE									
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N		Fed Code	Vio. File		
<u>3</u>	<u>1000</u>	<u>2863</u>	<u>MS</u>	<u>B</u>	<u>II</u>	<u>SPR</u>	<u>ALARM</u>	<u>15</u>	<u>[H]</u>	<u>[Quad]</u>	
<u>3</u>	<u>1</u>	<u>1</u>	<u>MS</u>	<u>E</u>	<u>D</u>	<u>S</u>	<u>D</u>	<u>PW</u>	<u>UTIL</u>		

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No



AIRCO Commercial Services, Inc.
 5700 Alder Avenue, Sacramento, CA 95828
 Sacramento: 916/381-4526
 Santa Rosa: 707/576-7644
 San Jose: 408/436-7770

Fax: 916/381-1629
 License #: 572243

AIR OUTLET TEST REPORT

PROJECT P154 / 1505 ~~1505~~ 15204 SYSTEM LAU #1 / Fan Box / Prim. HW / ext
 OUTLET MANUFACTURER _____ TEST APPARATUS Flo hood

AREA SERVED	OUTLET				DESIGN CFM		PRELIMINARY		FINAL CFM		REMARKS
	NO.	TYPE	SIZE	AK	MAX	MIN	VEL OR CFM	VEL OR CFM	MAX	MIN	
VAV 2-16	1	R.A.	8"		160		239	159	157	φ	
	2	"	8"		160		125	161	161	φ	
	3	"	8"		160		105	160	160	φ	
	4	"	8"		160		129	151	157	φ	
	5	"	8"		160		103	158	159	φ	
VAV 2-17	1	P.F.	8"		140		392	139	139	φ	
	2	P.F.	8"		140		124	136	136	φ	
VAV 2-18	1	P.F.	6"		140		215	174	141	φ	
	2	P.F.	6"		140		158	134	139	φ	
VAV 2-19	1				150		127	190	158	157	157 104%
	2				150		256	159	125	153	153 101%
	3				140		179	192	155	147	147 106%
VAV 2-20	1				220		278	179		175	81%
	2				220		177	177		177	82%
	3				220		235	179		179	81%
	4				340		209	252		259	94%
	5				220		189	174		175	80%
	6				220		131	174		175	80%
VAV 2-21				140		1219					

REMARKS: 1 230 187 261 261
 2 230 193 255 255

TEST DATE 2/14/01 READINGS BY [Signature]