

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0010256
Insp Area: 1

Site Address: 655 UNIVERSITY AV SAC
Parcel No: 295-0030-019

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

CONTRACTOR
BROWNING CONSTRUCTION INC
9050 RANCHVIEW CT
SACRAMENTO CA 95624

OWNER
SPEIKER PROPERTIES L P
575 UNIVERSITY AV #160
SACRAMENTO CA 95825

ARCHITECT

Nature of Work: INTERIOR REMODEL

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 2 License Number 461321 Date 9-1-00 Contractor Signature Samuel Branny

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 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 9-1-00 Applicant/Agent Signature Samuel Branny

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 CALIFORNIA INDEMNITY Policy Number N5045290B Exp Date 10/21/2000

_____, (This section need not be completed if the permit is for \$100,000 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 9-1-00 Applicant Signature Samuel Branny

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>00-10256</u>	Insp. Area <u>1C</u>
----------------------------	----------------------

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 655 University Ave Suite 119
 PARCEL # 295-0030-019

<p align="center">CONTACT</p> Name <u>Darrell Browning</u> Street Address <u>9050 Ranchview Ct</u> City/State/Zip <u>Elk Grove</u> Phone <u>423-1105</u> FAX <u>685-5835</u> E-mail: _____		<p align="center">LICENSED CONTRACTOR Lic No. # <u>461321</u></p> Name <u>Browning Construction Inc</u> Address <u>9050 Ranchview Ct</u> City/State/Zip <u>Elk Grove</u> Phone <u>423-1105</u> FAX <u>685-5835</u> E-mail: _____	
<p align="center">ARCHITECT/ENGINEER</p> Name <u>Nelson + Assoc.</u> Address <u>570 Howe Ave</u> City/State/Zip <u>Sacto</u> Phone <u>925-0333</u> FAX _____ E-mail: _____		<p align="center">OWNER</p> Name <u>Spieler Properties</u> Address <u>575 University Ave</u> City/State/Zip <u>Sacramento</u> Phone <u>646-6000</u> FAX _____ E-mail: _____	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: CAVE Indemnity Ins Co
 → WORKER'S COMPENSATION POLICY # NS065284 H EXPIRATION DATE: 10-21-99

NATURE OF WORK IN DETAIL: TI Removal

OCCUPANT/TENANT: Spieler Properties VALUATION: \$ 29,500⁰⁰

FLOOD STATUS:		S.C.A.T.									
JOB DESCRIPTION		<input checked="" type="checkbox"/> BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH	
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	PLUMB	<input checked="" type="checkbox"/> ELEC	SITE	FIRE				
# Stories	1st flrArea.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File		
<u>2</u>		<u>4147</u>		<u>B</u>	<u>VN</u>	SPR	ALARM	<u>15</u>	[H]	[Quad]	
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	S	D	PW	UTIL		
<u>NONE</u>	<u>13 Y</u>	<u>X</u>	<u>13 KW</u>	<u>13 gm</u>	<u>13 B</u>						

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed



AIRCO Needs a copy of this

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 655 University #119 SYSTEM VAU / Fan Box w Elec Heat
OUTLET MANUFACTURER ? TEST APPARATUS F10 Hood

AREA SERVED	OUTLET				DESIGN CFM		PRELIMINARY				FINAL CFM		REMARKS
	NO.	TYPE	SIZE	AK	MAX	MIN	VEL OR CFM	VEL OR CFM			MAX	MIN	
VAU 1-1	1	RFS	10		200		573	249			249		
	2		10		340		392	379			379		
VAU 1-2	1		10		220		283	179		221	221		
	2		10		220		243	181		223	223		
	3		8		180		109	143		183	183		
	4		8		180		113	146		186	186		
VAU 1-10	1		10		260		165		347	273	273		
	2		9		170		97		112	171	171		
	3		5		170		93		111	175	175		
VAU 1-3	1		9		150		301				301		
	2		9		130		285				285		
	3		5		130		279				279		
VAU 1-4	1		8		240		196				196		
	2		8		240		189				189		
VAU 1-5	1		9		255		309	347			347		
	2		9		255		190	343			343		
VAU 1-6	1		10		330		577				577		
	2		10		330		572				572		
VAU 1-7	1		12		440		467				467		
VAU 1-8	1		10		240		225		261	246	246		
	2		10		260		232		250	262	262		
VAU 1-9	1		10		375		221		379		379	379	
	2		10		375		232		381		381	381	

REMARKS: VAU 1-9 & 1-8 & 1-2 Found Blower wheels dirty
cleaned blowers & recheck balance / Fan powered
VAU have no filter for return air from rooms so
Blower wheels were dirty

TEST DATE 9/28 READINGS BY [Signature]