

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0604834

Insp Area: 3

Thos Bros: 297H7

Site Address: 2521 STOCKTON BL SAC

Sub-Type: REM

Parcel No: 011-0183-015

UC DAVIS MEDICAL FACILITY CLINIC

Housing (Y/N):

N

CITY OF SACRAMENTO

CONTRACTOR

ELI-JAMES CO  
8153  
ELK GROVE 95758

OWNER

GLASSROCK PARTNERSHIP SEP 15 2006 ARCHITECT  
7700 COLLEGE TOWN DR  
SACRAMENTO, CA

NEIGHBORHOODS PLANNING  
AND DEVELOPMENT SERVICES

Nature of Work: INTERIOR TI (REMODEL) INCLUDES PLMG, HVAC, ELEC, FIRE SPRIN, DRYWALL--REARRANGING MEDICAL OFFICE

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 621769

Date 9-15-06

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

Ower 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 9-15-06

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.

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

Policy Number

Exp Date

8/1/07

(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 9-15-06

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.



**Airco Mechanical, Inc.**  
5720 Alder Avenue  
Sacramento, CA 95828  
Lic. # 311454

0604834

Date: 03-05-07  
Number of pages including cover sheet: 5

2521 Stockton

**FAX**

Regarding: FACIAL PLACSTICS  
Airco Job No: \_\_\_\_\_

**To:** Jeff Moore

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax phone: 457-8214

**From:** Erik Tickler


Airco Mechanical

Phone: (916) 381-4523 ext127

Fax phone: (916) 381-1749

REMARKS:  Urgent  For your review  Reply ASAP  Please comment

Air Balance Reports for Facial Plastics

 # 0604834  
STOCKTON BL.



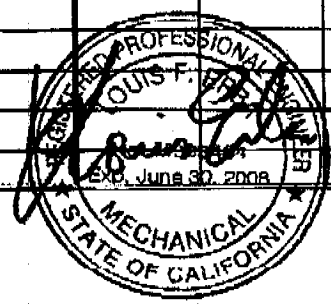
**AIRCO MECHANICAL,  
CONTRACTORS & ENGINEERS**  
5720 Alder Avenue, Sacramento, CA 95828  
Contractors License Number 311454  
p. 916-381-4523 f. 916-381-1749

# Air Outlet Test Report

Project: Facial Plastics  
Job Number: 05-0350-00  
System: Existing AHU

Test Date: 01/16/07  
Readings By: Lyle J  
Test Apparatus: Flowhood TE-191

VAV	No	Type	Area	Supply			Return			Total	Total		
				CFM	CFM	CFM	CFM	CFM	CFM				
VAV 6-9	1	S1	10			200	210	180			200		
	2	S1	10			335	280	305			325		
	3	S1	10			230	300	210			230		
	4	S1	10			230	210	215			235		
	5	S1	10			230	220	225			225		
	6	S1	10			230	275	215			235		
	Total	Supply		440	325	1455	1495	1350		455	330	1450	
VAV 6-10	1	S1	14			300	150	700			300	155	700
VAV 6-11	1	S1	14			760	540	680					745
	2	S1	10			355	530	390					350
	3	S1	12			600	600	600					610
	4	S1	12			550	565	600					560
	5	S1	12			575	650	630					575
	Total	Supply		855	580	2840	2885	2900		860	585		2840
VAV 6-15	1	S2	6			125	0	70	115				130
	2	S2	6			100	95	95	75				100
	3	S2	6			110	110	120	95				110
	4	S1	8			115	115	110	95				115
	5	S1	8			115	115	110	95				115
	6	S2	8			160	210	205	170				170
	7	S2	8			175	205	215	155				175
	8	S2	6			100	100	115	165				100
	Total	Supply			230	1000	950	1040	965				1015



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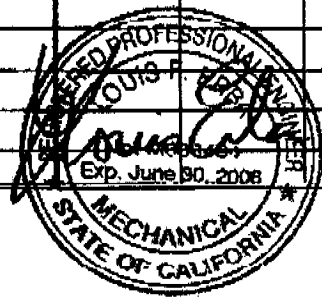
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Contractors License Number 311454  
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# Air Outlet Test Report

Project: Facial Plastics  
Job Number: 05-0350-00  
System: Existing AHU / EF-1

Test Date: 12/13/06  
Readings By: Lyle J  
Test Apparatus: Flowhood TE-191

System	No.	Type	Area	Supply			Return			Total
				CFM	CFM	CFM	CFM	CFM	CFM	
VAV 6-16	1	S1	8			125	145	125		125
	2	S1	6			70	65	70		70
	3	S1	10			370	255	320		375
	4	S1	8			135	200	140		130
	5	S1	6			70	105	65		70
		Total	Supply			360	230	770	770	720
VAV 6-17	1	S1	8			135	250			145
	2	S1	10			265	385			280
	3	S2	6			100	150			110
	4	S2	10			375	200			360
	5	S2	8			160	375			175
		Total	Supply			730	1035	1360		215
EF-1	1	E-1				100	325	180		110





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# Air Outlet Test Report

**Project:** Facial Plastics

**Test Date:** 09/21/06

**Job Number:** 05-0350-00

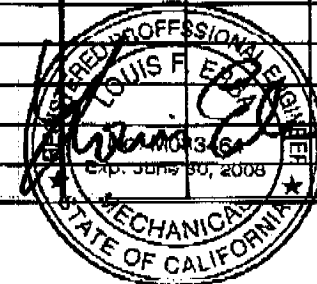
**Readings By:** Lyle J

**System:** Existing EF-1

**Test Apparatus:** TE-191 & ADM-860

Location	Equipment	Area (sq ft)	FPM	Reading 1	Reading 2	Reading 3	Reading 4	Notes
EH-1	Hood	62.25x18	7.78	128.5	1000			103 801①
Rm 207								
Rm 212	FG	8"		175				220
Rm 212	NA	NA		75				NA
			112	112	107	113	105	112
			106	102	88	95	87	100

**NOTES:** Fume hood has been set @ 103FPM across the face





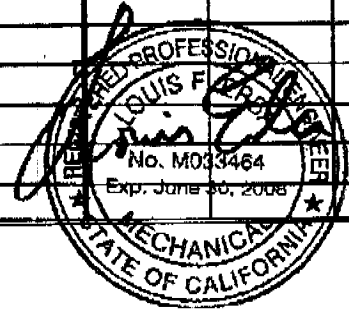
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# Air Outlet Test Report

**Project:** Facial Plastics  
**Job Number:** 05-0350-00  
**System:** Existing EF-1

**Test Date:** 09/25/06  
**Readings By:** Lyle J  
**Test Apparatus:** TE-191 & ADM 860

Room No.	Object	Area	Design			Test			CFM	Notes
			Area	FPM	CFM	CFM	CFM	CFM		
Eh-1	Hood	62.25x18	7.78	128.5	1000				103	801
Rm 207										
Rm 212	EG	8			175					220
Rmn 212	NA	NA			75					NA



**NOTES:** Readings taken after 6th flr Demo. EF ducts had been capped as per plans.  
 EF-1 was adjusted to reset the 2nd floor to original readings

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