

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0007329
Insp Area: 1

Site Address: 2000 O ST SAC
Parcel No: 007-0246-002 SUITE 120

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

CONTRACTOR
BUZZ OATES
8615 ELDER CREEK RD
SACRAMENTO, CA 95828

OWNER
FIVE STAR PROPERTIES PARTNERSHIP
8401 JACKSON RD
SACRAMENTO CA 95826

ARCHITECT

Nature of Work: OFFICE REMODEL 5895 SQ FT

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 C-36 License Number 7020221 Date 8-9-00 Contractor Signature Michael Schaefer

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 8-9-00 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.

na 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 COMP INS FUND (CA) Policy Number 1579398-00 Exp Date 03/01/2001

_____, (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 8-9-00 Applicant Signature Michael Schaefer

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.

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 2000 - O ST #120 Permit No. 00-07329
Building Use: OFFICE Occupancy: B
Building Owner: FIVE STAR Construction Type: III-N
Owner Address: 8615 ELDER CREEK RD SAC Sprinkled? Yes No
Portion of Building Occupied: SUITE 120 Area: _____ Sq. Ft.

2/6/01

Willie Harris

Date

By:Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finaled By:GD,JZB,WJR,CP]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE

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 # 0007329	Insp. Area IC
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2000 C ST. Suite 120
 PARCEL # 007-0246-012

<p style="text-align: center;">CONTACT</p> <p>Name <u>Mike Schaefer</u> Street Address <u>8615 Elder Creek Rd</u> City/State/Zip <u>Sacramento, CA 95828</u> Phone <u>916-381-3600</u> FAX <u>916-381-7826</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>702621</u></p> <p>Name <u>Buzz Outlets Ent.</u> Address <u>8615 Elder Creek Rd.</u> City/State/Zip <u>Sacramento, CA 95828</u> Phone <u>916-381-3600</u> FAX <u>916-381-7826</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Carol Vock</u> Address <u>8615 Elder Creek Rd.</u> City/State/Zip <u>Sacramento, CA 95828</u> Phone <u>381-3600</u> FAX <u>381-7826</u> E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>Five STAR</u> Address <u>8615 Elder Creek Rd.</u> City/State/Zip <u>Sacramento, CA 95828</u> Phone <u>381-3600</u> FAX <u>381-7826</u> E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: Noack and Dean
 → WORKER'S COMPENSATION POLICY # 1579398-00 EXPIRATION DATE: 3-1-01

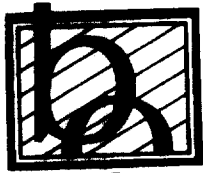
NATURE OF WORK IN DETAIL: Tenant Improvement Remodel of 5,895 sq. ft. office

OCCUPANT/TENANT: Fair Employment + Housing VALUATION: \$ 117,900.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI ()	REM (X)	SW	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	SITE		<input checked="" type="checkbox"/> FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req (Y/N)		Fed Code	Vio. File	
		<u>5895</u>		<u>B</u>	<u>III-N</u>	<input checked="" type="checkbox"/> SPR	<input checked="" type="checkbox"/> ALARM	<u>15</u>	[H]	[Quad]
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	S		D	PW	UTIL

COMMENTS: Need: more sprink. info, remove RA's from rated corridor per KAW

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed



BUZZ OATES
AIR CONDITIONING, INC.

JOB NO. _____
SECTION _____ PAGE _____

FAN & OUTLET TEST DATA

LOCATION Fair Employment & Housing - 2000 O Street SYSTEM AH 1

MOTOR NAMEPLATE DATA

MFG _____ FR _____
HP _____ V _____ FLA _____
PH _____ SF _____ RPM _____

SHEAVE DATA:

DIA _____ SHAFT _____
ADJ _____ FIXED _____

FAN NAMEPLATE DATA

MFG _____
MODEL BHCG020DCY042
TYPE _____
SIZE _____

SHEAVE DATA:

DIA _____ SHAFT _____ HUB _____
BELTS _____
STARTER _____ SIZE _____
HEATERS _____

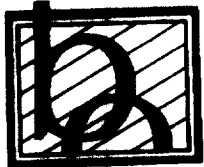
DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS			
AMPS			
BHP			
FAN RPM			
SP -			
SP +			
TSP ESP			
FILTER SP			
CFM TOTAL	1400		
CFM RA	1220		
CFM OA	180		

FAN DESIGN DATA

CFM 1400 TSP _____ ESP _____ RPM _____ BHP _____

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	1	S				350		280		320		
	2	S				350		320		320		
	3	S				300		290		320		
	4	S				400		320		370		
						1400						
	1	R				595		470		570		
	2	R				270		200		250		
	3	R				355		350				

REMARKS: _____



BUZZ OATES
AIR CONDITIONING, INC.

JOB NO. _____
SECTION _____ PAGE _____

FAN & OUTLET TEST DATA

LOCATION Fair Employment & Housing - 2000 O Street SYSTEM AH 4

MOTOR NAMEPLATE DATA

MFG _____ FR _____
HP _____ V _____ FLA _____
PH _____ SF _____ RPM _____

SHEAVE DATA:

DIA _____ SHAFT _____
ADJ _____ FIXED _____

FAN NAMEPLATE DATA

MFG _____
MODEL BYMD030/036
TYPE _____
SIZE _____
SHEAVE DATA:
DIA _____ SHAFT _____ HUB _____
BELTS _____
STARTER _____ SIZE _____
HEATERS _____

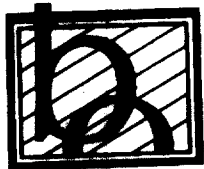
DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS			
AMPS			
BHP			
FAN RPM			
SP -			
SP +			
TSP ESP			
FILTER SP			
CFM TOTAL	1215		
CFM RA	690		
CFM OA	275		

FAN DESIGN DATA

TSP _____
CFM _____ ESP _____ RPM _____ BHP _____

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	1	S				100		100				
	2	S				110		90		100		
	3	S				100		100		100		
	4	S				180		150		150		
	5	S				125		95		120		
	6	S				125		140		120		
	7	S				150		160		130		
	8	S				100		80		90		
	1	R				90		110		90		
	2	R				80		40		70		
	3	R				120		110		110		
	4	R				160		140		145		
	5	R				100		90		90		
	6	R				140		120		120		

REMARKS: _____



BUZZ OATES
AIR CONDITIONING, INC.

JOB NO. _____
SECTION _____ PAGE _____

FAN & OUTLET TEST DATA

LOCATION Fair Employment & Housing - 2000 O Street SYSTEM AH 5

MOTOR NAMEPLATE DATA

MFG _____ FR _____
HP _____ V _____ FLA _____
PH _____ SF _____ RPM _____

SHEAVE DATA:

DIA _____ SHAFT _____
ADJ _____ FIXED _____

FAN NAMEPLATE DATA

MFG _____
MODEL BYMD030/036

TYPE _____
SIZE _____

SHEAVE DATA:

DIA _____ SHAFT _____ HUB _____

BELTS _____
STARTER _____ SIZE _____
HEATERS _____

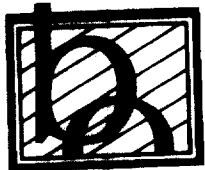
DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS			
AMPS			
BHP			
FAN RPM			
SP -			
SP +			
TSP ESP			
FILTER SP			
CFM TOTAL	1250		
CFM RA	1000		
CFM OA	250		

FAN DESIGN DATA

TSP _____
CFM _____ ESP _____ RPM _____ BHP _____

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	1	S				100		60		90		
	2	S				110		195		110		
	3	S				110		180		110		
	4	S				570		580		570		
	5	S				110		60		110		
	6	S				250		260		240		
	1	R				500		490				
	2	R				90		90				
	3	R				90		90				
	4	R				90		80				
	5	R				90		90				
	6					140		140				

REMARKS: _____



BUZZ OATES
AIR CONDITIONING, INC.

JOB NO. _____
SECTION _____ PAGE _____

FAN & OUTLET TEST DATA

LOCATION Fair Employment & Housing -2000 O Street SYSTEM AH 6

MOTOR NAMEPLATE DATA

MFG _____ FR _____
HP _____ V _____ FLA _____
PH _____ SF _____ RPM _____

SHEAVE DATA:

DIA _____ SHAFT _____
ADJ _____ FIXED _____

FAN NAMEPLATE DATA

MFG _____
MODEL BYMD030/036
TYPE _____
SIZE _____

SHEAVE DATA:

DIA _____ SHAFT _____ HUB _____
BELTS _____
STARTER _____ SIZE _____
HEATERS _____

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS			
AMPS			
BHP			
FAN RPM			
SP -			
SP +			
TSP ESP			
FILTER SP			
CFM TOTAL	1300		
CFM RA	1210		
CFM OA	90		

FAN DESIGN DATA

TSP _____
CFM _____ ESP _____ RPM _____ BHP _____

ROOM	OPENING			FACTOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	1	S				300	260	280				
	2	S				300	230	280				
	3	S				180	400	190				
	4	S				290	230	280				
	5	S				230	230	240				
	1	R				275	160	260				
	2	R				285	190	270				
	3	R				165	130	140				
	4	R				275	180	260				
	5	R				210	130	200				

REMARKS: _____

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 1-18-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2000 'O' STREET

Has been conducted by Inspector

C. PACE

On

1-17-01

00-07329-200
Permit Number 207
194

5895
Square Footage

OH SPC EXT + Renewal
Type of Inspection

They system is acceptable by this department.

R. Woodman
By: Ross L. Woodman,
Fire Prevention Officer II

00-260
F.D. Reference Number



CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 2000 - O ST #120 Permit No. 00-07329

Building Use: OFFICE Occupancy: B

Building Owner: FIVE STAR Construction Type: III-N

Owner Address: 8615 ELDER CREEK RD SAC Sprinkled? Yes No

Portion of Building Occupied: SUITE 120 Area: _____ Sq. Ft.

2/6/01

Willie Harris

Date

By:Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finaled By:GD,JZB,WJR,CP]

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