

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0106809

Insp Area: 4

Thos Bros: 278B7

Site Address: 1689 ARDEN WY SAC

Parcel No: 277-0160-071 STE 1096

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

HARDESTY & ASSOCIATES, INC.
1991 VILLAGE PARK WY, SUITE 203
ENCINITAS, CA 92024

OWNER

ARDEN FAIR ASSOCIATES
1689 ARDEN WAY #1167
SACRAMENTO CA 95815

ARCHITECT

Nature of Work: INTERIOR REMODEL OF A RETAIL SPACE

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 634021 Date 8/20/01 Contractor Signature Dennis Stashuk

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 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 8/20/01 Applicant/Agent Signature Dennis Stashuk

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.

DS-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 CLARENDON NATIONAL INSURANCE Policy Number 01KR-0025-370 Exp Date 01/01/2002

(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 8/20/01 Applicant Signature Dennis Stashuk

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 # 0106809

Insp. Area 4C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1689 ARDEN WAY Suite 1096
 PARCEL # 277.0160.071

CONTACT
 Name TRISHA PATEL / EXPRESS PERMITS
 Street Address 1327 POST AVE STE H
 City/State/Zip TORRANCE, CA 90501
 Phone 310.328.6300 FAX 310.328.7142
 E-mail: K101

LICENSED CONTRACTOR Lic No. # _____
 Name _____
 Address _____
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

ARCHITECT/ENGINEER
 Name JEROME ROUBERGER / EXPRESS PERMITS
 Address 1327 POST AVE STE H
 City/State/Zip TORRANCE, CA 90501
 Phone 310.328.6300 FAX 310.328.7142
 E-mail: _____

OWNER
 Name M. NERICCH
 Address 2795 FORD HILL ROAD
 City/State/Zip COUR'DALE, ID 83814
 Phone 208.666.9946 FAX _____
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: COMMERCIAL TENANT IMPROVEMENT #1,644
FOR KAY JEWELERS / ILC; INT. DEMO OF PARTITIONS,
FINISHES, FIXTURES, R. ROOM; REPLACE, RESTORE, AND IMPROVE
FINISHES, FIXTURES, PARTITIONS, R. ROOM; POWER, LIG, PLUMBING, MECH

OCCUPANT/TENANT: KAY JEWELERS VALUATION: \$ 56,750.00

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 Req (Y) N	Fed Code	Vio. File		
2		1644		M	11-N	SPR ALARM	18	[H] [Quad]		
B	L	P	M	E	F	S	D	PW	UTIL	

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

HVAC SYSTEM REPORT

FAN NAMEPLATE DATA:

MANUFACTURER:

MODEL:

TYPE:

SIZE:

SERIAL NUMBER:

FAN SHEAVE DATA:

DIAMETER:

SHAFT:

ADJUSTABLE/FIXED:

MOTOR NAMEPLATE DATA:

MANUFACTURER:

VOLTS/PHASE:

HORSEPOWER:

FULL LOAD AMPS:

RPM:

SERVICE FACTOR:

MOTOR SHEAVE DATA:

DIAMETER:

SHAFT:

ADJUSTABLE/FIXED:

BELT SIZE:

CONDENSING UNIT DATA:

MANUFACTURER:

MODEL:

TONNAGE:

SERIAL NUMBER:

FAN	DESIGN	ACTUAL	DATE:
TOTAL CFM	1700		26-Oct-01
RETURN AIR CFM			PROJECT: Kay Jewetres
OUTSIDE AIR CFM			
FAN RPM			
STATIC PRESSURE+			
STATIC PRESSURE-			READINGS BY: Jeff Edwards
TOTAL PRESSURE			
FILTER PRESSURE			
MOTOR			SYSTEM:
AMPS			JOB NO. 1E5036
VOLTS			
HORSEPOWER			
RPM			

FIELD FORMS AVAILABLE:

- _____ DUCT TRAVERSE REPORT
- _____ SYSTEM DIAGRAM
- _____ EXHAUST FAN REPORT
- _____ PULLEY CALCULATIONS
- TEMPERATURE IN _____
- TEMPERATURE OUT _____
- DROP / RISE _____

CLARKE & RUSH MECHANICAL

DIFFUSERS AND GRILLS						
ROOM #	OUTLET#	CODE	SIZE	REQ. CFM	Test 1	FINAL CFM
	1	VAV1		200	278	190
	2	VAV1		200	246	236
	3	VAV1		200	292	197
	4	VAV1		200	222	210
	5	VAV1		200	230	207
	6	VAV2		100	212	106
	7	VAV2		200	276	201
	8	VAV2		200	241	192
	9	VAV2		200	292	210
TOTAL				1700	2289	1749
REMARKS:						