

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0108969
Insp Area: 4

Site Address: 1901 DEL PASO BL SAC
Parcel No: 275-0035-017 FRONT SUITE

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

CONTRACTOR
ALLIANCE ELECTRIC
3250 MONIER CR #B
RANCHO CORDOVA CA 95742

OWNER
DAN ECKES
3250 MONIER CIR
RANCHO CORDOVA, CA 95670

ARCHITECT

Nature of Work: TI FRONT SUITE, NEW RESTROOMS

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 C10 License Number 461047 Date _____ 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 3 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).

oh 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 above-mentioned property for inspection purposes.

Date July 25, 2001 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.

[Signature] 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 692-00-UNIT 0002139 Exp Date 10/01/2001

(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 July 25, 2001 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 # <i>0108969</i>	Insp. Area <i>4C</i>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1901 Del PASO BLV Suite FRONT
 PARCEL # _____

<p style="text-align: center;">CONTACT</p> <p>Name <u>DAN Eckes</u> Street Address <u>3250 MONIER Cir</u> City/State/Zip <u>Rancho CORDOVA</u> Phone <u>366-1499</u> FAX <u>638-0217</u> E-mail <u>*638-4430</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>461047</u></p> <p>Name <u>ALLIANCE Electrical</u> Address <u>3250 Monier Cir</u> City/State/Zip <u>Rancho CORDOVA, CA</u> Phone <u>638-4430</u> FAX <u>638-0217</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>DAN ECKES</u> Address <u>3250 Monier Cir</u> City/State/Zip <u>Rancho CORDOVA</u> Phone <u>638-4430</u> FAX <u>638-0217</u> E-mail: _____</p>

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

NATURE OF WORK IN DETAIL: New RESTROOMS AND WAREHOUSE
II

OCCUPANT/TENANT: _____ VALUATION: \$ 24,630.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(<input checked="" type="checkbox"/>)	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 firArea.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y <input checked="" type="checkbox"/> N		Fed Code	Vio. File	
				<i>M</i>		SPR	ALARM	<i>18</i>	[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: _____

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

RIVER CITY

Heating & Air Conditioning

HVAC AIR BALANCE REPORT

PROJECT NAME: NADEAU

PROJECT LOCATION: 1901 DEL PASO BLVD., SACRAMENTO, CA

MECHANICAL CONTRACTOR: RIVER CITY HEATING & A/C

GENERAL CONTRACTOR: ALLIANCE ELECTRIC



BACKPRESSURE COMPENSATED
AIR BALANCE SYSTEM

ELECTRONIC CFM-88

FOR AIR FLOW ONLY

- FAST, ACCURATE, EASY
- AUTO RANGE AND ZERO
- 25 TO 2500 CFM RANGE
- SUPPLY AND EXHAUST
- ELIMINATES A_K FACTORS
- DENSITY CORRECTED
FOR BAROMETRIC
PRESSURE



Featuring the
AIRDATA™ FlowMeter
Electronic Micromanometer

- DIRECT DIGITAL READOUT IN ENGLISH AND METRIC UNITS •



Shortridge Instruments, Inc.

7855 EAST REDFIELD ROAD / SCOTTSDALE, ARIZONA 85260
TELEPHONE (602) 991-6744 / FAX (602) 443-1267

GENERAL NOTES SHEET

All outside air dampers are set and marked.

A Shortridge Electronic Flowhood was used to measure all supply return/exhaust terminal units unless noted otherwise.

A Fluke multi meter was used to measure all voltages and amperages.

BALANCE REPORT ABBREVIATION

CD	CEILING DIFFUSER
CEG	CEILING EXHAUST GRILLE
CER	CEILING EXHAUST REGISTER
CRG	CEILING RETURN GRILLE
CSR	CEILING SUPPLY REGISTER
CRR	CEILING RETURN REGISTER
DNA	DATA NOT AVAILABLE
DNL	DATA NOT LISTED
FEG	FLOOR EXHAUST GRILLE
FRR	FLOOR RETURN REGISTER
FSR	FLOOR SUPPLY REGISTER
NA	NON ACCESSIBLE
NI	NOT INSTALLED
NT	NOT TAKEN DUE TO IRREGULAR READINGS
NVL	NO VALID LOCATION FOR TESTING
OPEN	NO TERMINAL, DUCT OPEN
WEG	WALL EXHAUST GRILLE
WRG	WALL RETURN GRILLE
WSR	WALL SUPPLY REGISTER
LSD	LINEAR SUPPLY DIFFUSER
LRR	LINEAR RETURN REGISTER
LER	LINEAR EXHAUST REGISTER

CO ID: 14511

AIRDATA MULTIMETER/FLOWMETER CERTIFICATE OF CALIBRATION

S/N: M99983

Customer: River City Heating + Air Conditioning State: CA Order #: 992452
Model #: 58-1.02 PO #: Calibration Due Date: QA Code: 10CFR21:

Procedure used: Calibration Procedure for AirData Multimeters Revision: 05 Dated: 05/18/99
Pressure Standard: Heise #1 S/N: 41739/42449 Calibration Date: 11/25/98 Calibration Due Date: 11/2000 Test 1 Test 2 Test 3
Pressure Standard: Heise #3 S/N: 41738/42448 Calibration Date: 11/25/98 Calibration Due Date: 11/2000 Test 1 Test 2 Test 3
Pressure Standard: Heise #5 S/N: 41740/42450 Calibration Date: 11/25/98 Calibration Due Date: 11/2000 Test 1 Test 2 Test 3
Heise used for 0.05 in wc Differential Pressure Set Point Rated Accuracy: 0.07% fs (0.000175 in wc) Uncertainty: 0.00035

Pressure Standard: AirData Multimeter S/N: M99420 Calibration Date: 09/18/99 Calibration Due Date: 09/2000 Test 1 Test 2 Test 3
Pressure Standard: AirData Multimeter S/N: M96455 Calibration Date: 09/18/99 Calibration Due Date: 09/2000 Test 1 Test 2 Test 3
Pressure Standard: AirData Multimeter S/N: M96100 Calibration Date: 09/18/99 Calibration Due Date: 09/2000 Test 1 Test 2 Test 3
Rated Accuracy: Absolute Pressure ± 0.5 % ± .02 in Hg; Differential Pressure: ± 0.5 % ± 0.0001 in wc Uncertainty: As stated at test points.

Temperature Standards: Rated Accuracy: Thermometer .023° F / Thermistor .018° F Total Temperature System Uncertainty: 0.039° F
Thermometer S/N 92143/Thermistor S/N 871513 Calibration Dates: 02/24/99;02/01/99 Cal Due Date: 02/2001 Set Point: 35° F 95° F 155° F
Thermometer S/N 8A089/Thermistor S/N 881708 Calibration Dates: 10/09/98;10/28/98 Cal Due Date: 10/2000 Set Point: 35° F 95° F 155° F
Thermometer S/N 92142/Thermistor S/N 850104 Calibration Dates: 02/16/99;02/01/99 Cal Due Date: 02/2001 Set Point: 35° F 95° F 155° F

Vel/Flow Standard: AirData Multimeter S/N: M99420 Calibration Date: 09/18/99 Calibration Due Date: 09/2000 Test 1 Test 2 Test 3
Vel/Flow Standard: AirData Multimeter S/N: M96455 Calibration Date: 09/18/99 Calibration Due Date: 09/2000 Test 1 Test 2 Test 3
Vel/Flow Standard: AirData Multimeter S/N: M96100 Calibration Date: 09/18/99 Calibration Due Date: 09/2000 Test 1 Test 2 Test 3
Rated Accuracy: Velocity ± 2.0 % ± 3 fpm; Flow ± 2.0 % ± 3 cfm Uncertainty: See Uncertainty Table

METER ACCURACY TESTS

Final Test By [Signature] Date 12-28-99 Rh 1029 Ambient Temperature 77 Within spec YES NO

Test By _____ Date _____ Rh _____ Ambient Temperature _____ Within spec YES NO

Test By _____ Date _____ Rh _____ Ambient Temperature _____ Within spec YES NO

TEMPERATURE TEST (° F) TOLERANCE = ± 0.2° F

Approx Set Point	Master Meter	Test Meter	Diff	Master Meter	Test Meter	Diff	Master Meter	Test Meter	Diff
35°	35.0	35.1	+ .1						
95°	95.0	95.1	+ .1						
155°	155.0	155.0	0						

ABSOLUTE PRESSURE TEST (in Hg) TOLERANCE = ± 2.0 % ± .1 in Hg

Approx Set Point	Master Meter	Test Meter	% Diff	Master Meter	Test Meter	% Diff	Master Meter	Test Meter	% Diff
14.0	14.37	14.4	.21						
28.4	28.63	28.8	.59						
40.0	40.65	40.9	.62						

DIFFERENTIAL PRESSURE TEST (in wc) TOLERANCE = ± 2.0 % ± 0.001 in wc

Approx Set Pt	Master Meter	Test Meter	% Diff	Master Meter	Test Meter	% Diff	Master Meter	Test Meter	% Diff
.0500	.0506	.0506	0						
.1250	.1244	.1248	.32						
.2250	.2239	.2244	.22						
.2700	.2721	.2729	.29						
2.000	2.036	2.041	.25						
3.600	3.614	3.619	.14						
4.400	4.460	4.461	.02						
27.00	27.10	27.14	.15						
50.00	50.04	50.08	.08						
Overrange	✓	✓							

Shortridge Instruments, Inc.
7855 E. Redfield Rd Scottsdale, AZ 85260

LOW VELOCITY/FLOW CONFIRMATION (AIRFOIL/FLOW MODE)
TEST METER TOLERANCE = ± 3.0% ± 7 FPM/CFM

Approx Set Point	Master Meter	Test Meter	Diff	Master Meter	Test Meter	Diff	Master Meter	Test Meter	Diff
100	129.1	130	+ .9						
500	535.9	535	- .9						

ADM-870 and ADM-860 AirData Multimeters are read in AirFoil Mode. ADM-850 and CFM-88 meters are read in air flow.

UNCERTAINTY TABLE (All AirData Multimeter Calibration Standards)

Mode	Differential Pressure (in wc)								Absolute Pressure (in Hg)			Velocity/Flow	
	.1250	.2250	.2700	2.000	3.600	4.400	27.00	50.00	14.0	28.4	40.0	100.0	500.0
2 X U _{max}	< .00022	< .00023	< .00031	< .0005	< .0015	< .0023	< .006	< .007	< .02	< .02	< .02	< 3.99	< 1.82

All Uncertainties are expressed in expanded terms (twice the calculated uncertainty). Uncertainties shown for Low Velocity/Flow Confirmation represent Uncertainty of the Transfer Standard Meter exposed to the pressure source only.

NOTES: _____

This instrument has been calibrated using Calibration Standards which are traceable to NIST (National Institute of Standards and Technology). Quality Assurance Program and calibration procedures meet the requirements for 10CFR50 Appendix B; ANSI/N45.2; ANSI/NCSL Z540-1-1994; MIL-STD 45662A and manufacturers specifications. Calibration accuracy is certified when meters are used with properly functioning accessories only. This report shall not be reproduced, except in full, without the written approval of Shortridge Instruments, Inc. Results relate only to the item calibrated.

Calibration Technician(s): Jon J. Wanyard Calibration Date: 12-28-99
 Calibration Approved by: [Signature] Title: Prod. MGR Date: 12-28-99

Shortridge Instruments, Inc.
7855 E. Redfield Rd Scottsdale, AZ 85260
(480) 991-6744 Fax (480) 443-1267

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. NADEAU
 SECTION _____ PAGE 1
 DATE 9/4/01

FAN & OUTLET TEST SHEET

AREA SERVED OPEN Sales Floor

UNIT FCU-1

MOTOR NAMEPLATE DATA

MFG Ac Smith FR
 HP 1 V 115 FLA 11.2
 PH 1 SFTH RPM 1075

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG Armstrong
 MODEL G1N80AT100D20C

SERIAL# _____
 SIZE 5 ton

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS			<u>115</u>
AMPS			<u>10.8</u>
BHP			<u>DNL</u>
RPM			<u>High</u>
SP-			<u>140</u>
SP+			<u>150</u>
TSP			<u>190</u>
FILTER SP			<u>103</u>
CFM TOTAL			<u>1852</u>
CFM RA			<u>1260</u>
CFM OA			<u>592</u>

FAN DESIGN DATA

CFM 1852 SP 150 RPM High BHP D.N.L

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	1	SA	12"			500	392		490		497	
	2	SA	12"			460	430		465		455	
	3	SA	12"			460	450		445		450	
	4	SA	12"			460	550		460		450	
	Supply Air Total =					1880	1892		1860		1852	
	5	RA	16x30			1290	1710		1405		1260	
	RETURN Air Total =					1290	1710		1405		1260	
	Design CSA =					590	112		455		592	

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. NADEAU
 SECTION _____ PAGE 2
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FAN & OUTLET TEST SHEET

AREA SERVED OPEN SALES AREA

UNIT FCU-2

MOTOR NAMEPLATE DATA

MFG HO SMITH FR _____
 HP 1 V 115 FLA 11.2
 PH 1 SF TH RPM 1075

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ % FIXED X

FAN NAMEPLATE DATA

MFG Armstrong
 MODEL G1NBOAT100D20C

SERIAL#

SIZE 5 Ton

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>115</u>	
AMPS		<u>10.7</u>	
BHP		<u>D.N.B.</u>	
RPM		<u>High</u>	
SP -		<u>.35</u>	
SP +		<u>.55</u>	
TSP		<u>.90</u>	
FILTER SP		<u>.03</u>	
CFM TOTAL		<u>1885</u>	
CFM RA		<u>1305</u>	
CFM OA		<u>580</u>	

FAN DESIGN DATA

CFM 1885 SP .55 RPM High BHP D.N.B.

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	<u>1</u>	<u>SA</u>	<u>12"</u>					<u>405</u>		<u>495</u>		
	<u>2</u>	<u>SA</u>	<u>12"</u>			<u>460</u>		<u>480</u>		<u>455</u>		
	<u>3</u>	<u>SA</u>	<u>12"</u>			<u>460</u>		<u>475</u>		<u>465</u>		
	<u>4</u>	<u>SA</u>	<u>12"</u>			<u>460</u>		<u>545</u>		<u>470</u>		
	<u>Supply Air Total =</u>					<u>1880</u>		<u>1905</u>		<u>1885</u>		
	<u>5</u>	<u>RA</u>	<u>16x30</u>			<u>1290</u>		<u>1480</u>		<u>1305</u>		
	<u>RETURN Air total =</u>					<u>1290</u>		<u>1480</u>		<u>1305</u>		
	<u>Design oSA =</u>					<u>590</u>		<u>425</u>		<u>580</u>		

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. NADEAU

SECTION _____ PAGE 3

DATE 9/4/01

FAN & OUTLET TEST SHEET

AREA SERVED OPEN Sales AREA

UNIT FCU-3

MOTOR NAMEPLATE DATA

MFG AO SMITH FR _____
 HP 1 V 115 FLA 11.2
 PH 1 SF TH RPM 1075

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG Armstrong
 MODEL G180ATI00D20C

SERIAL#

SIZE 5 ton

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>115</u>	
AMPS		<u>10.7</u>	
BHP		<u>D.N.L.</u>	
RPM		<u>High</u>	
SP -		<u>140</u>	
SP +		<u>155</u>	
TSP		<u>195</u>	
FILTER SP		<u>103</u>	
CFM TOTAL		<u>1875</u>	
CFM RA		<u>1310</u>	
CFM OA		<u>565</u>	

FAN DESIGN DATA

CFM 1875 SP 155 RPM High BHP D.N.L.

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	1	SA	12"			500	470		495			
	2	SA	12"			460	455		465			
	3	SA	12"			460	475		450			
	4	SA	12"			460	510		465			
	Supply Air Total =					1880	1910		1875			
	5	RA	16x20			1290	1485		1310			
	Return Air Total =					1290	1485		1310			
	Design OSA =					590	425		565			

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. NADEAU

SECTION _____ PAGE 4

DATE 9/4/01

FAN & OUTLET TEST SHEET

AREA SERVED OPEN SALES AREA

UNIT FCU-4

MOTOR NAMEPLATE DATA

MFG AO SMITH FR _____
 HP 1 V 115 FLA 11.2
 PH 1 SF TH RPM 1075

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG Armstrong
 MODEL G1N80AT100D20C
 SERIAL# _____

SIZE 5 ton Furnace

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>115</u>	
AMPS		<u>10.6</u>	
BHP		<u>D.N.L.</u>	
RPM		<u>High</u>	
SP -		<u>144</u>	
SP +		<u>150</u>	
TSP		<u>194</u>	
FILTER SP		<u>103</u>	
CFM TOTAL		<u>1875</u>	
CFM RA		<u>1305</u>	
CFM OA		<u>570</u>	

FAN DESIGN DATA

CFM 1875 SP 150 RPM High BHP D.N.L.

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
	<u>1</u>	<u>SA</u>	<u>12"</u>		<u>500</u>		<u>430</u>		<u>505</u>			
	<u>2</u>	<u>SA</u>	<u>12"</u>		<u>460</u>		<u>445</u>		<u>455</u>			
	<u>3</u>	<u>SA</u>	<u>12"</u>		<u>460</u>		<u>488</u>		<u>450</u>			
	<u>4</u>	<u>SA</u>	<u>12"</u>		<u>460</u>		<u>545</u>		<u>465</u>			
Supply Air	Total	=			<u>1880</u>		<u>1908</u>		<u>1875</u>			
	<u>5</u>	<u>RA</u>	<u>16x30</u>		<u>1290</u>		<u>1510</u>		<u>1305</u>			
Return Air	Total	=			<u>1290</u>		<u>1510</u>		<u>1305</u>			
Design	OSA	=			<u>590</u>		<u>398</u>		<u>570</u>			

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. NADEAU

SECTION _____ PAGE 5

DATE 9/4/01

FAN & OUTLET TEST SHEET

AREA SERVED MEN'S + WOMAN'S Restroom

UNIT EF-1 + EF-1

MOTOR NAMEPLATE DATA

MFG Biran FR -
 HP D.M.L. V - FLA -
 PH 1 SF - RPM 1700

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG Biran
 MODEL #684

SERIAL#

SIZE 80 CFM Exhaust Fan

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS	<u>115</u>		
AMPS	<u>18</u>		
BHP	<u>D.M.L.</u>		
RPM	<u>1700</u>		
SP -	<u>125</u>		
SP +	<u>-</u>		
TSP	<u>-</u>		
FILTER SP	<u>-</u>		
CFM TOTAL	<u>76, 74</u>		
CFM RA	<u>-</u>		
CFM OA	<u>-</u>		

FAN DESIGN DATA

CFM 76, 74 SP 125 RPM 1700 BHP D.M.L.

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
<u>MENS</u>	<u>1</u>	<u>EX</u>	<u>8x8</u>		<u>80</u>		<u>76</u>					
<u>Woman</u>	<u>2</u>	<u>EX</u>	<u>8x8</u>		<u>80</u>		<u>74</u>					

REMARKS:

