

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0009760**  
**Insp Area: 1**

**Site Address: 2015 J ST SAC**  
Parcel No. 007-0016-019 STE 100

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

CONTRACTOR

OWNER  
KRAMBS MICHAEL  
2115 J ST STE 210  
SAC CA 95816

ARCHITECT

**Nature of Work: FIRST TIME T I - INTERIOR WALLS, DOORS, ELECTRICAL, PLUMBING, T BAR CEILING, FIRE SP**

**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 \_\_\_\_\_ License Number \_\_\_\_\_ Date \_\_\_\_\_ 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 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).

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 provided services 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 8/21/00 Owner Signature *Ted John*

**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 8/21/00 Applicant/Agent Signature *Ted John*

**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 \_\_\_\_\_ Policy Number \_\_\_\_\_ Exp Date \_\_\_\_\_

(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 8/21/00 Applicant Signature *Ted John*

**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 # 0009760 C Insp. Area

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2015 J STREET Suite 100  
 PARCEL # 007-0016-019

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>TED JOHNS</u>                  Street Address <u>2115 J. St. Ste 210</u>                  City/State/Zip <u>SAC CA 95816</u>                  Phone <u>444-0599</u> FAX <u>444-9070</u>                  E-mail: <u>ted@act</u></p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> <p>Name _____                  Address <u>O/B</u>                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>	<p style="text-align: center;"><b>OWNER</b></p> <p>Name <u>MICHAEL KRAMBS</u>                  Address <u>2115 J. St. Ste 210</u>                  City/State/Zip <u>SAC CA 95816</u>                  Phone <u>444-0599</u> FAX <u>444-9070</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: Interior walls doors electrical, plumbing T Bar ceiling

OCCUPANT/TENANT: Blue Cross, Wellpoint VALUATION: \$ 20,000

FLOOD STATUS:				S.C.A.T.							
JOB DESCRIPTION		<input checked="" type="checkbox"/> BLDG	<input type="checkbox"/> SHELL	<input type="checkbox"/> APT	<input checked="" type="checkbox"/> TI(X)	<input type="checkbox"/> REM( )	<input type="checkbox"/> SW	<input type="checkbox"/> FIRE	<input type="checkbox"/> ADD	<input type="checkbox"/> OTH	
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input type="checkbox"/> 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>383A</u>		<u>E</u>	<u>V-N</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N		<u>15</u>	[H] [Quad]		
						<input checked="" type="checkbox"/> SPR	<input type="checkbox"/> ALARM				
<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	<input type="checkbox"/> S		<input checked="" type="checkbox"/> D	<input type="checkbox"/> PW	<input type="checkbox"/> UTIL	
<u>13 ft</u>	<u>13 ft</u>	<u>13 JMT</u>	<u>13 JMT</u>	<u>13 JMT</u>	<u>13 BS</u>						

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: RUUD  
 MODEL URNAA030JK04E  
 TYPE:  
 SIZE:  
 SERIAL #: 1R5535ADA AF449912557

**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			6-Oct-00
RETURN AIR CFM			<b>PROJECT:</b> RK DEVELOPMENT 2115 J st. Sac., CA. 95816
OUTSIDE AIR CFM			
FAN RPM			
STATIC PRESSURE+			
STATIC PRESSURE-			
TOTAL PRESSURE			<b>READINGS BY:</b> RUSS B.
FILTER PRESSURE			
MOTOR			<b>JOB NO.</b>
AMPS			
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 / 2	FINAL CFM
	SUPPLY					
	1			480	475	475
	2			480	475	475
	RETURN					
	1			760	750	750

REMARKS:

# HVAC SYSTEM REPORT

**FAN NAMEPLATE DATA:**

MANUFACTURER: RHEEM/ RUUD  
 MODEL URMAA030SK04E  
 TYPE  
 SIZE:

SERIAL #: 1R5535ADAAF449912560

**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			6-Oct-00
RETURN AIR CFM			
OUTSIDE AIR CFM			
FAN RPM			<b>PROJECT:</b> RK DEVELOPMENT 2115 J st. Sac., CA. 95816
STATIC PRESSURE+			
STATIC PRESSURE-			<b>READINGS BY:</b> RUSS B.
TOTAL PRESSURE			
FILTER PRESSURE			
<b>MOTOR</b>			<b>JOB NO.</b>
AMPS			
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 1/2	FINAL CFM
	<b>SUPPLY</b>					
	1			400	390	401
	2			280	270	279
	3			280	100	271
	<b>RETURN</b>					
	1			360		354
	2			400		406

REMARKS:

# HVAC SYSTEM REPORT

**FAN NAMEPLATE DATA:**

MANUFACTURER: RUUD  
 MODEL: URMAA030SK04E  
 TYPE:  
 SIZE:  
 SERIAL #: 1R5535ADAAF449912565

**FAN SHEAVE DATA:**

DIAMETER:  
 SHAFT:  
 ADJUSTABLE/FIXED:

**MOTOR NAMEPLATE DATA:**

MANUFACTURER:  
 VOLTS/PHASE:  
 HORSEPOWER:  
 FULL LOAD AMPS:  
 RPM:

**MOTOR SHEAVE DATA:**

DIAMETER:  
 SHAFT:  
 ADJUSTABLE/FIXED:  
 BELT SIZE:

**CONDENSING UNIT DATA:**

MANUFACTURER:  
 MODEL:  
 TONNAGE:  
 SERIAL NUMBER:

FAN	DESIGN	ACTUAL	DATE:
TOTAL CFM			6-Oct-00
RETURN AIR CFM			
OUTSIDE AIR CFM			
FAN RPM			
STATIC PRESSURE+			
STATIC PRESSURE-			PROJECT:
TOTAL PRESSURE			RK DEVELOPMENT
FILTER PRESSURE			2115 J st.
<b>MOTOR</b>			Sac., CA. 95816
AMPS			READINGS BY:
VOLTS			RUSS B.
HORSEPOWER			JOB NO.
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 / 2	FINAL CFM
	SUPPLY					
	1			340	380	340
	2			340	300	338
	3			280	271	279
	RETURN					
	1			740	742	742

REMARKS:

# HVAC SYSTEM REPORT

### FAN NAMEPLATE DATA:

MANUFACTURER: RUUD  
 MODEL: URMAA024JK04E  
 TYPE:  
 SIZE:  
 SERIAL #: IR5534ADAAF449912575

### 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			6-Oct-00
RETURN AIR CFM			
OUTSIDE AIR CFM			
FAN RPM			PROJECT:
STATIC PRESSURE+			RK DEVELOPMENT
STATIC PRESSURE-			2115 J st.
TOTAL PRESSURE			Sac., CA. 95816
FILTER PRESSURE			READINGS BY:
<b>MOTOR</b>			RUSS B.
AMPS			
VOLTS			JOB NO.
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 1/2	FINAL CFM
	SUPPLY					
	1			280	252	281
	2			280	255	279
	3			220	198	220
	RETURN					
	1			630	597	631

REMARKS:

# HVAC SYSTEM REPORT

**FAN NAMEPLATE DATA:**  
 MANUFACTURER: RUUD  
 MODEL: URMAA024SK04E  
 TYPE:  
 SIZE:  
 SERIAL #: IR5534EDA4F449912574

**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			6-Oct-00
RETURN AIR CFM			
OUTSIDE AIR CFM			
FAN RPM			<b>PROJECT:</b> RK DEVELOPMENT 2115 J st. Sac., CA. 95816
STATIC PRESSURE+			
STATIC PRESSURE-			<b>READINGS BY:</b> RUSS B.
TOTAL PRESSURE			
FILTER PRESSURE			
<b>MOTOR</b>			<b>JOB NO.</b>
AMPS			
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 1/2	FINAL CFM
	SUPPLY					
	1			390	370	370
	2			390	410	410
	RETURN					
	1			537	530	530

REMARKS:

**MEMORANDUM**

**SACRAMENTO FIRE DEPARTMENT**

**TO:** BUILDING DEPARTMENT

**DATE:** 3 OCT 00

**FROM:** Troy Malaspino  
Fire Marshal

**SUBJECT: FIRE SYSTEM INSPECTION**

A final inspection of the newly installed fire system at:

2015 J ST. #100

Has been conducted by Inspector

R ROBLES

On


3 OCT 00

000 9760 194  
Permit Number

—  
Square Footage

REMODEL  
Type of Inspection

They system is acceptable by this department.

  
By: Ross L. Woodman,  
Fire Prevention Officer II

00 278  
F.D. Reference Number



CITY OF SACRAMENTO

**CERTIFICATE OF OCCUPANCY**

For Information Contact (916) 264-5716

Building Address: 2015 J ST #100 Permit No. 0009760

Building Use: OFFICE Occupancy: B

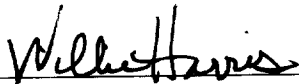
Building Owner: MICHAEL KRAMBS Construction Type: \_\_\_\_\_

Owner Address: 2115 J ST #210 SACRAMENTO Sprinkled? []Yes [ ]No

Portion of Building Occupied: SUITE 100 Area: \_\_\_\_\_ Sq. Ft.

05/23/01

Date



By:Print

Sign

**DENNIS RICHARDSON**

CITY BUILDING OFFICIAL

[ Finaled By:GTD,MJS,RVL,RR]

*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**