

**CITY OF SACRAMENTO**

**Permit No: 9806962**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 4**

**Site Address: 4100 NORTHGATE BL SAC**

**Sub-Type: ACOM**

**Parcel No: 2370031023**

**Housing (Y/N): N**

**CONTRACTOR**

WESTERNAIR MECHANICAL  
11300 SANDERS DR  
RANCHO CORDOVA

**OWNER**

NORTHGATE MARKETPLACE JOINT VE  
282 SOUTH ANITA DR  
ORANGE CA

**ARCHITECT**

95670

92668

**Nature of Work: HVAC CHANGE OUT 16 SMALL UNITS TO 7 LARGE UNITS**

**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 20 License Number 65419 Date 7-23-98 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 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 7-23-98 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.

\_\_\_\_ 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 A-CORD Policy Number 01KR5044204

\_\_\_\_ (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 7-23-98 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.**

**CITY OF SACRAMENTO  
APPLICATION FOR BUILDING PERMIT**

**DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES DIVISION**

1231 I Street, Rm. 200  
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

→ Applicant must complete ALL Unshaded areas ←

PC #	AREA #
------	--------

ADDRESS 7102 NORTHGATE BL Suite \_\_\_\_\_  
PARCEL # \_\_\_\_\_

<p align="center"><b>CONTACT</b></p> Name _____ Address _____ _____ Zip _____ Phone _____ FAX _____		<p align="center"><b>LICENCED CONTRACTOR</b> Lic No. # _____</p> Name _____ Address _____ _____ Zip _____ Phone _____ FAX _____	
<p align="center"><b>ARCHITECT/ENGINEER</b></p> Name _____ Address _____ _____ Zip _____ Phone _____ FAX _____		<p align="center"><b>OWNER/TENANT</b></p> Name _____ Address _____ _____ Zip _____ Phone _____ FAX _____	

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

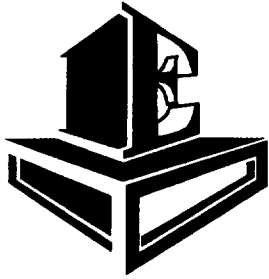
NAME OF INSURANCE COMPANY: \_\_\_\_\_

NATURE OF WORK IN DETAIL: HVAC CHANGEOUT 16 SMALL UNITS TO 7 LARGE UNITS

DBA:				VALUATION:						
FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI( )	REM( )	SW	FIRE	ADD	OTH
INSP. 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	
						Spr	Alarm			
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>R</u>	
<u>GYL 13</u>	<u>NONE</u>		<u>BD 13</u>	<u>BD 13</u>						

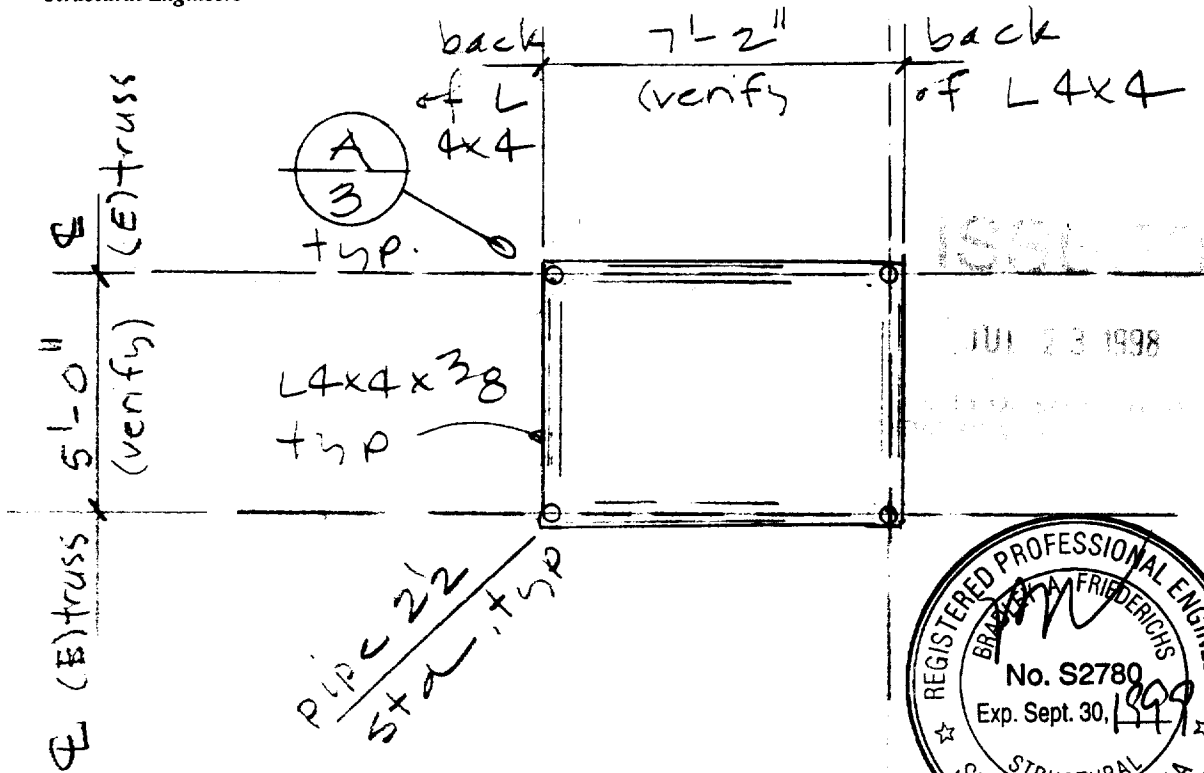
COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No



VE SOLUTIONS  
Structural Engineers

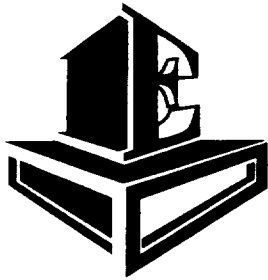
PROJECT: Fry's HVAC Upgrade NO: 98057  
DATE: 7/10/98 BY: BF SHEET 1 OF 3



Plan for 12.5 Ton Unit

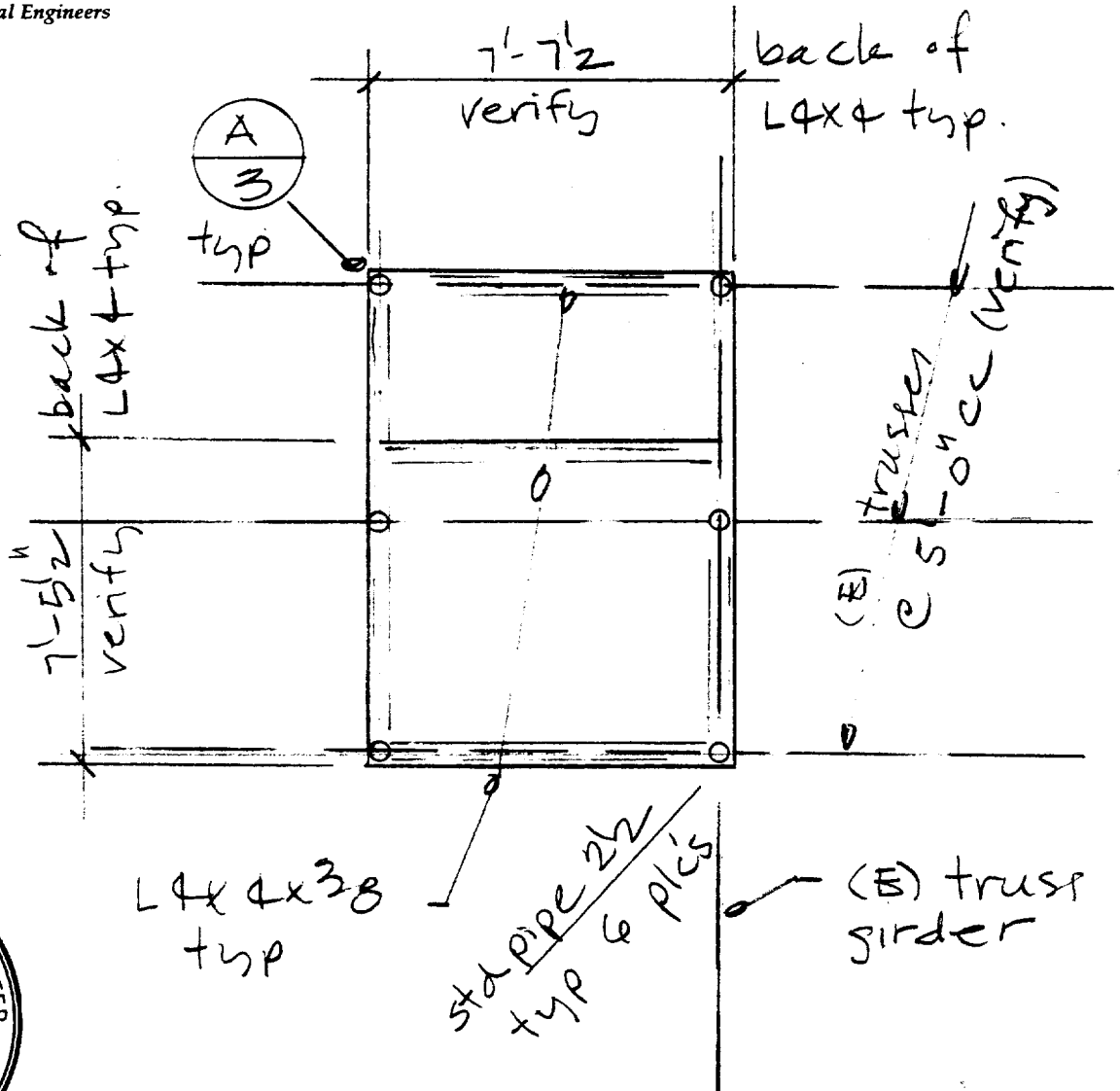
14' = 15'-0"

Verify layout prior to fab



VE SOLUTIONS  
Structural Engineers

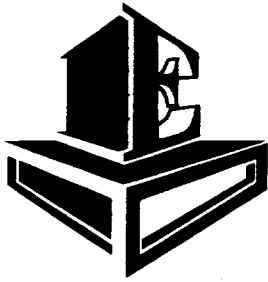
PROJECT: Frij's HVAC Upgrade NO: 98057  
DATE: 7/10/98 BY: BF SHEET 2 OF 3



Plan @ 20 Ton Unit

1/4" = 1'-0"

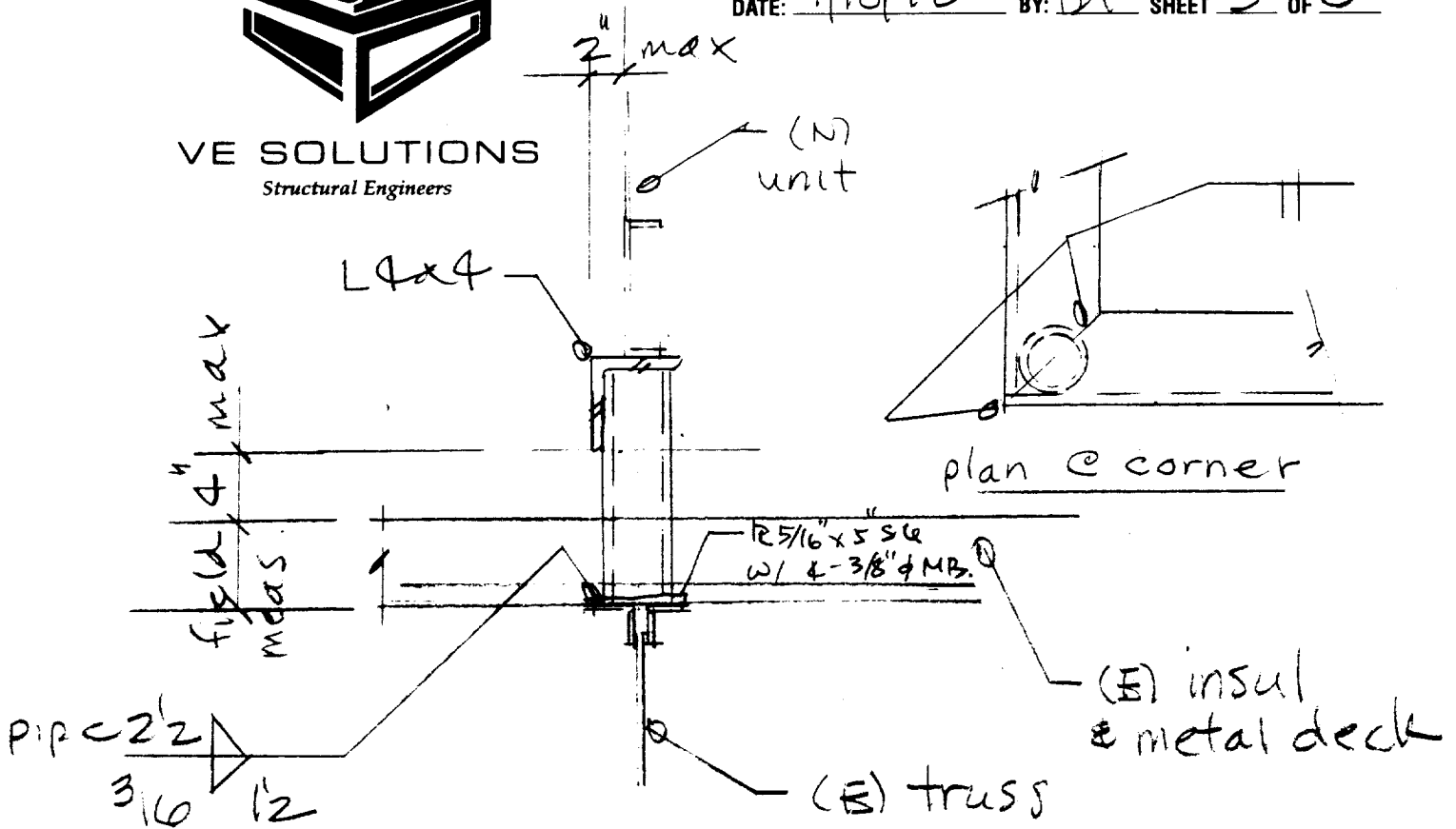
verify layout prior to fab



**VE SOLUTIONS**  
Structural Engineers

PROJECT: Fry's HVAC Upgrade NO: 98057

DATE: 7/10/98 BY: BF SHEET 3 OF 3



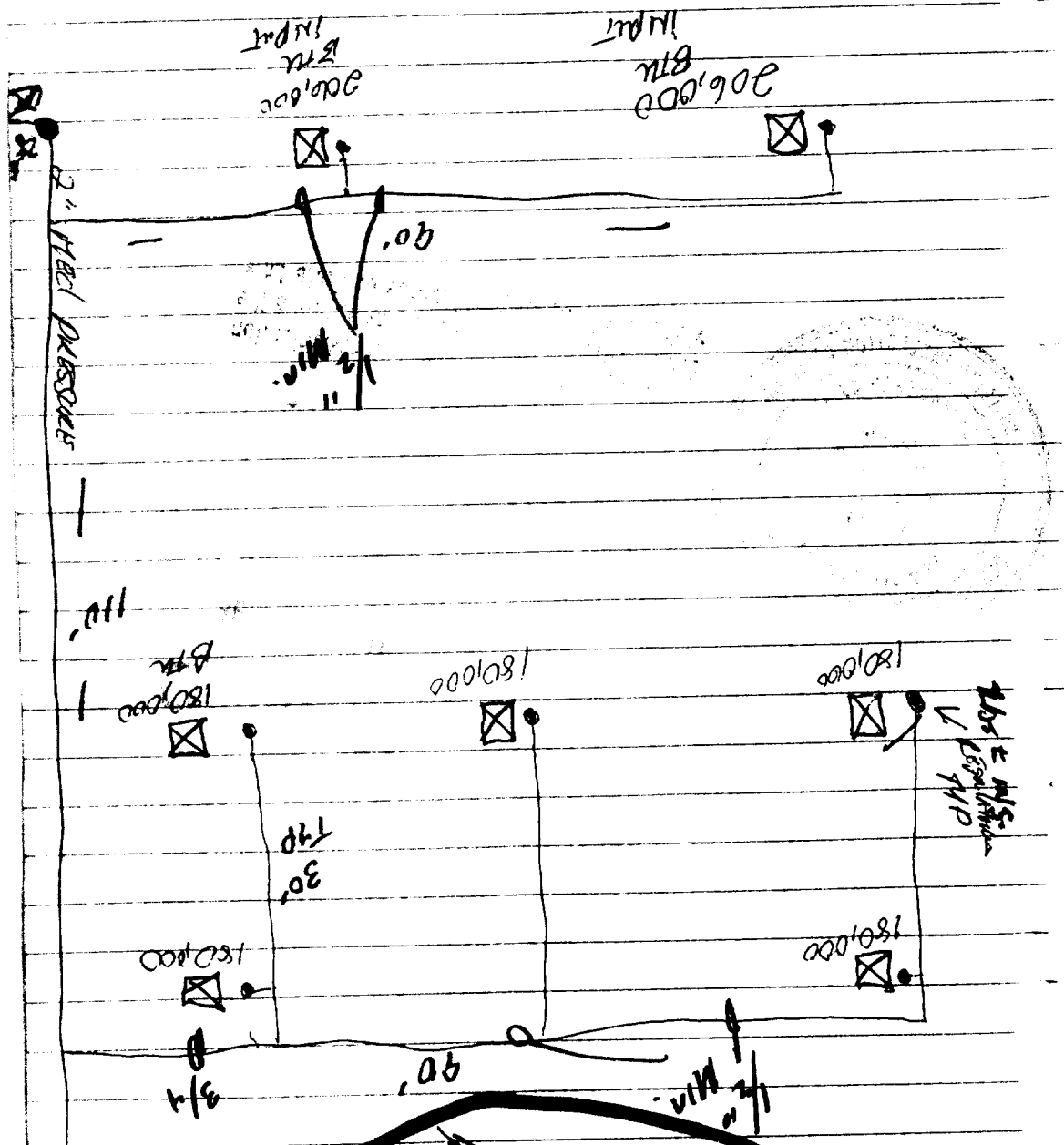
(A)  
3

Post Detail @ 12.5 Ton Unit  
 $1\frac{1}{2}'' = 1'-0''$

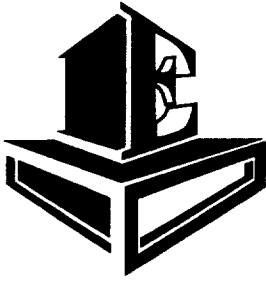


The approval of all  
 Plumbing and Mechanical work  
 is subject to field inspection

Always  
 1800 BTU  
 1800 BTU  
 1800 BTU



NEED  
 UNITS  
 TERRY  
 BTUS  
 1800 BTU



VE SOLUTIONS  
Structural Engineers

PROJECT: Frijs HVAC Upgrade NO: 99057

DATE: 7/10/98 BY: BF SHEET 1 OF 7

ISSUED

JUL 23 1998

Roof Loads

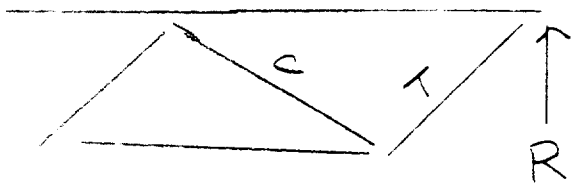
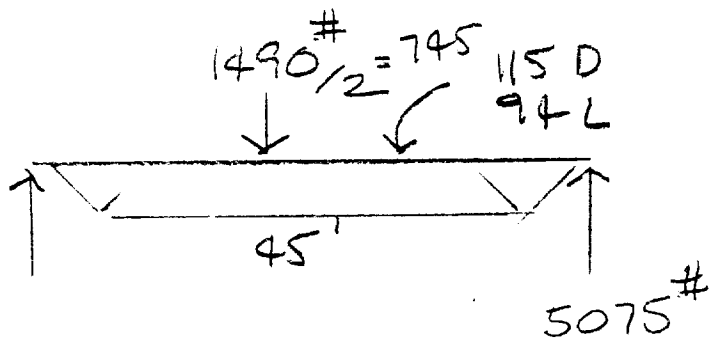
single ply	6.0 psf	}
insul	2	
joists	3	
metal d.	2	
mech	8	
clg	2	
	<u>23 psf</u>	
LL	20	

loading per  
Hunt & Joiner  
blg calc  
11/3/94

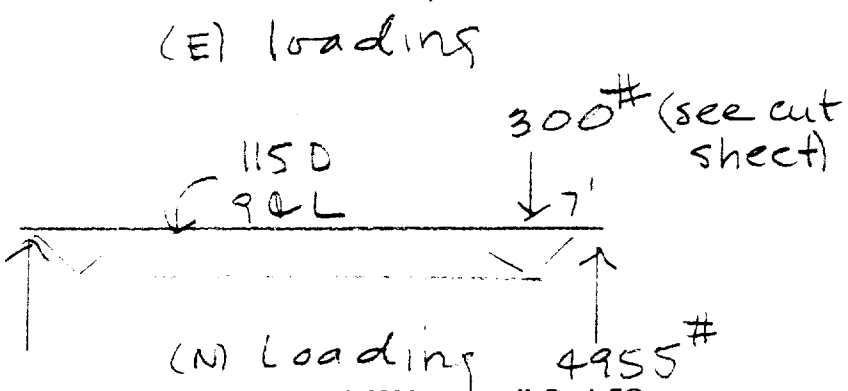


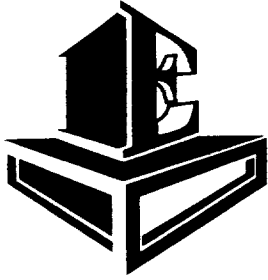
check 28 KSP joist (span = 45')

red = 6<sup>9</sup>/<sub>16</sub>  
 $W = 5' (23 + 20 \times 94)$   
 $= 115 DL \ 94 LL$   
 1490# unit is to be removed



$\therefore$  since R is less than (E) C & T forces are less than (E)



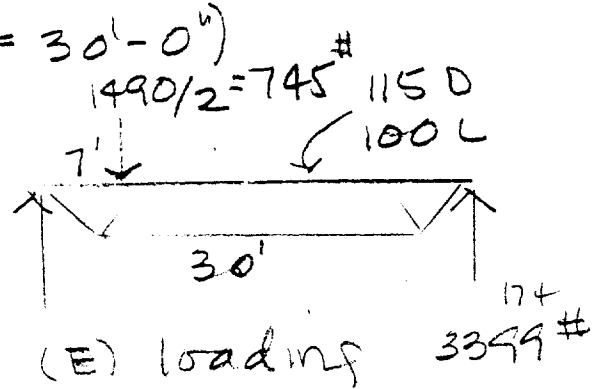


VE SOLUTIONS  
Structural Engineers

PROJECT: Fry's HVAC Upgrade 98057 NO: 98057  
DATE: 7/10/98 BY: BF SHEET 2 OF 7

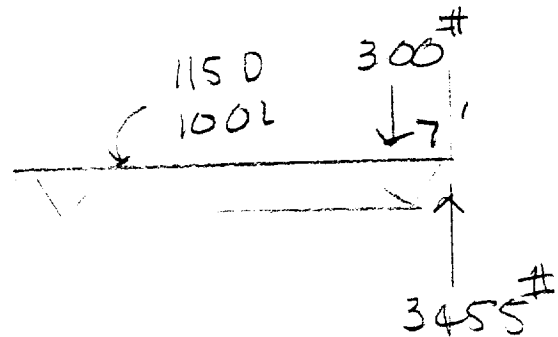
check 20kSP (span = 30'-0")

no LL red  
1490# unit to be removed.  
% change in  
reaction



$$\frac{3455}{3399} = 1.5\% \text{ ok by inspection}$$

truss girders are  
already designed with  
extra added load (see (E) plan)

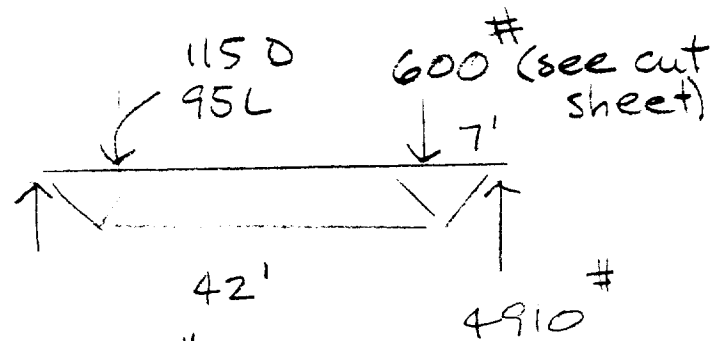


check 28k9 span = 42'

% red 5 2700# unit

$$\text{equiv } w = \frac{4910 \times 2}{42} =$$

(if 600# ea end)

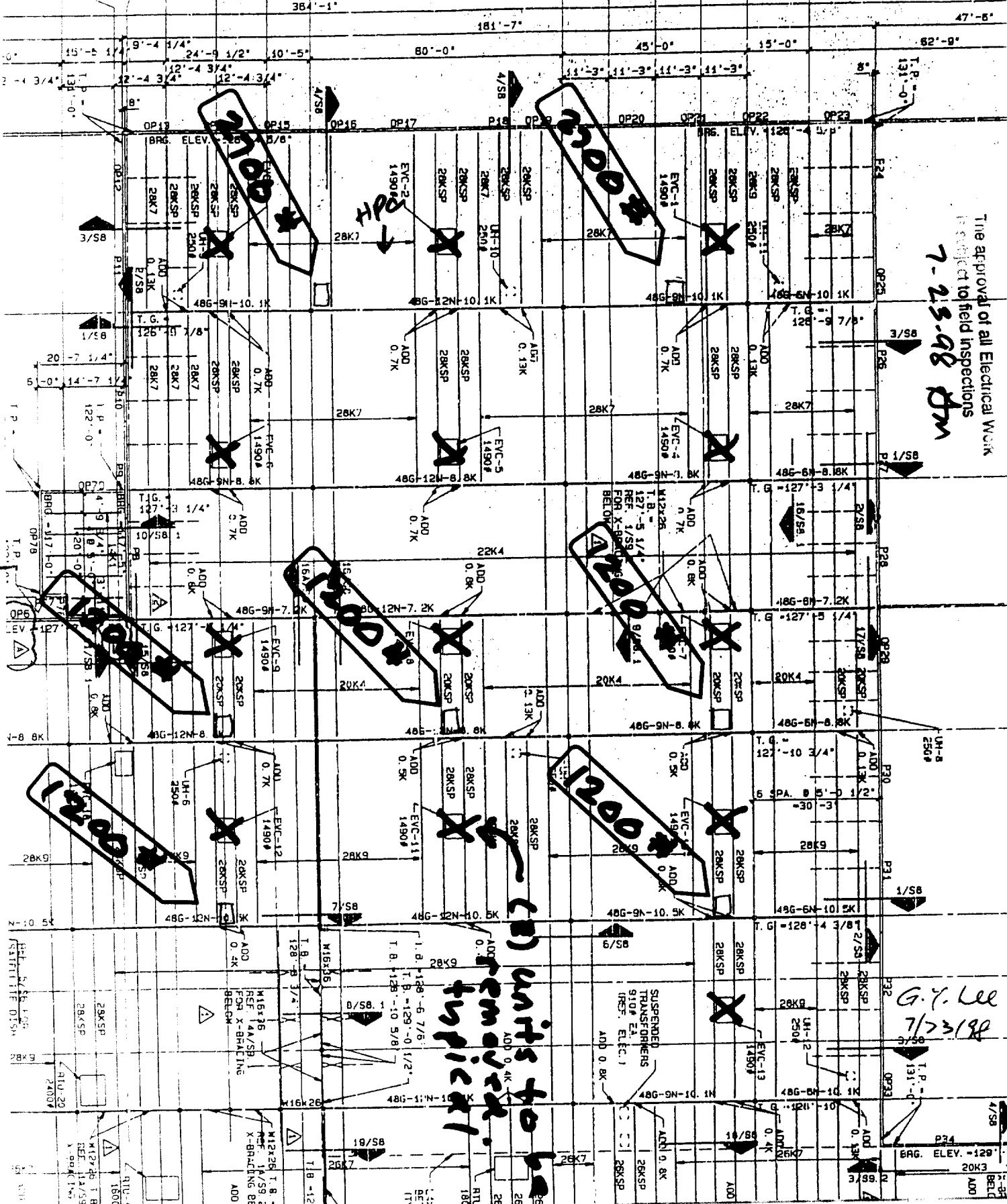


$$= 234\# / 1 < 324\# \text{ provided by 28k9}$$



Replacing 16 units with 7 new units  
 TO panels HPC & HPD.

C 2A C 2B C 2C C 6 C 8 D E E 2 E 5 E 7 E 8 E



The approval of all Electrical Work  
 is subject to field inspections  
 7-23-98 dm

HPD

(3) units to be  
 typical!

G.Y. Lee  
 7/23/98

SUSPENDED  
 TRANSFORMERS  
 910# E.A.  
 (REF. E.L.C.1)

**Project Name: FRY'S SACRAMENTO**  
**Prepared by : Edward B. Ward Co.**

7/8/98  
 6:01:07 PM

**Project Name: FRY'S SACRAMENTO**  
**Tag Name: 12.5 TON ROOFTOP**  
**Unit Name: 48TJD014**

ARI EER	9.00
Base Unit Weight	1050 lb
Base Unit Dimensions:	
Length	87.4 in
Width	57.8 in
Height	49.3 in
Unit Voltage-Phase-Hertz	460-3-60
Air Discharge	Vertical
Fan Drive Type	Belt
Actual Airflow	4500 CFM
Site Altitude	0 ft
Condenser Entering Air DB	95.0 °F
Evaporator Entering Air DB	80.0 °F
Evaporator Entering Air WB	67.0 °F
Entering Air Enthalpy	31.44 BTU/lb
Evaporator Leaving Air DB	57.1 °F
Evaporator Leaving Air WB	56.1 °F
Leaving Air Enthalpy	23.86 BTU/lb
Gross Cooling Capacity	153.50 MBH
Gross Sensible Capacity	111.10 MBH
Compressor Power Input	12.89 kW
Coil Bypass Factor	0.090
Max. Available Gas Heating Output Capacity	179.20 MBH
External Static Pressure	0.75 in wg
Fan RPM	998
Fan Power	3.0 BHP
<b>Electrical Data:</b>	
Minimum Voltage	414
Maximum Voltage	508
Compressor #1 RLA	10.4
Compressor #1 LRA	72
Outdoor Fan Motor HP (ea)	1/4
Outdoor Fan FLA (ea)	.7
Indoor Fan Motor Type	Standard
Indoor Fan Motor FLA	4.8
Combustion Fan Motor FLA (ea)	.3
Power Supply MCA	29.6
Power Supply MOCP (Fuse or HACR)	40
Min. Unit Disconnect FLA	31
Min. Unit Disconnect LRA	190
<b>Acoustics:</b>	
Sound Rating	8.8 Bels
A-Weighted	86.4
Sound Power Levels, dB re 10E-12 Watts	
Discharge * Inlet * Outdoor Fan	
63	
hz	89.0    84.0    83.7
125	
hz	84.0    80.0    87.2
250	
hz	81.0    77.0    83.4
500	
hz	80.0    72.0    82.8
1000	
hz	78.0    66.0    83.0
2000	
hz	73.0    60.0    77.7
4000	
hz	69.0    56.0    71.8
8000	
hz	72.0    54.0    67.0

*#8 cu.  
 Block conduit  
 min. ea 4ft.  
 on roof.*

# Base unit dimensions — 48TJ008-014

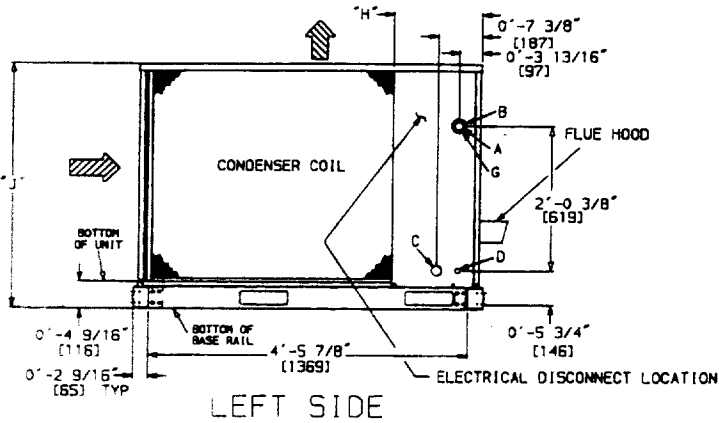


UNIT 48TJ	CORNER WEIGHT*								DIMENSIONS							
	A		B		C		D		"H"		"J"		"K"		"L"	
	lb	kg	lb	kg	lb	kg	lb	kg	ft-in.	mm	ft-in.	mm	ft-in.	mm	ft-in.	mm
D/E/F008	189	86	161	73	239	109	280	127	1-2/8	378	3-5/16	1050	2-9/16	856	2-2/16	672
D/E/F009	191	87	163	74	242	110	284	129	3-3/8	1013	3-5/16	1050	2-9/16	856	2-2/16	672
D/E/F012	225	102	192	87	285	129	333	151	2-5/8	759	4-1/16	1253	3-0/8	924	2-10/16	875
D/E014	228	103	195	88	289	131	338	153	1-2/8	378	4-1/16	1253	3-0/8	924	2-10/16	875

CONNECTION SIZES	
A	1 1/8" Dia [35] Field Power Supply Hole
B	2 1/2" Dia [64] Power Supply Knockout
C	1 3/4" Dia [44] Charging Port Hole
D	1/2" Dia [22] Field Control Wiring Hole
E	3/4" — 14 NPT Condensate Drain
F	1/2" — 14 NPT Gas Connection 48TJD008 & 009
G	3/4" — 14 NPT Gas Connection 48TJE/F008 & 009; 48TJD/E012, 014, 48TJF012
H	2" Dia [51] Power Supply Knockout

\*Weights are for units only (aluminum plate fins) and do not include options or crating.

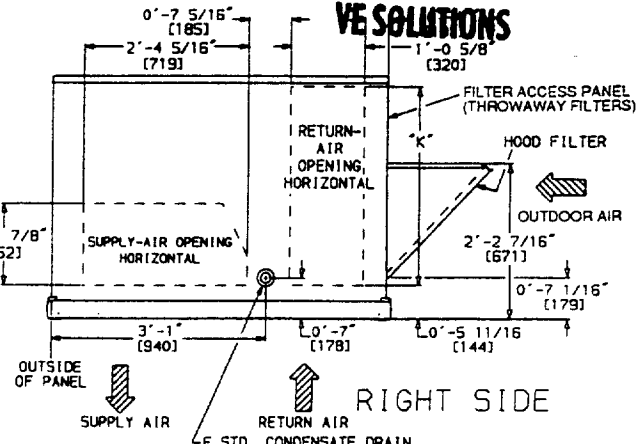
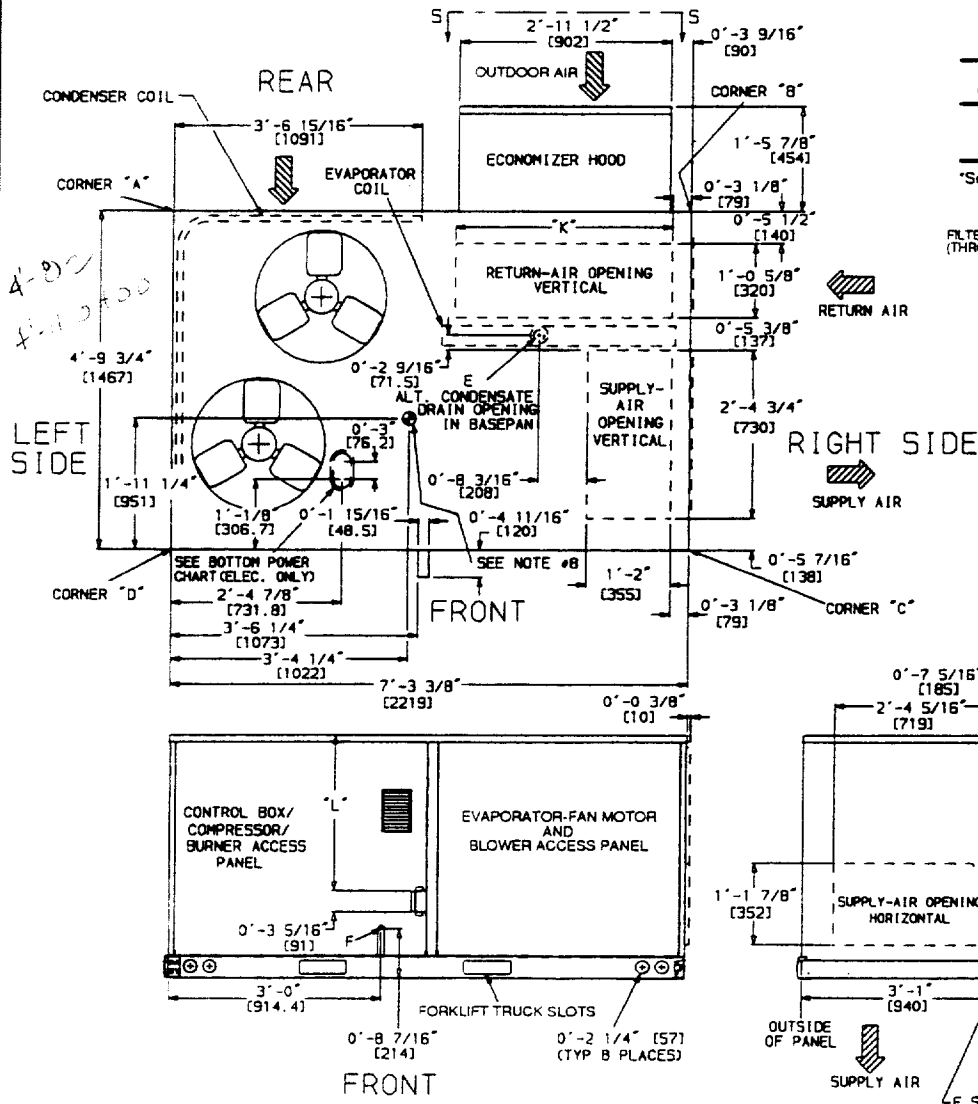
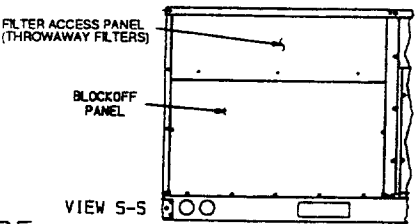
- NOTES:
- Dimensions in [ ] are in millimeters.
  - Center of gravity.
  - Direction of airflow.
  - On vertical discharge units, ductwork to be attached to accessory roof curb only. For horizontal discharge units field-supplied flanges should be attached to horizontal discharge openings, and all ductwork should be attached to the flanges.
  - Minimum clearance (local codes or jurisdiction may prevail):
    - Between unit (flue side) and combustible surfaces, 48 inches.
    - Bottom of unit to combustible surfaces (when not using curb) 1 inch.
    - Bottom of base rail to combustible surfaces (when not using curb) 0 inches.
    - Condenser coil, for proper airflow, 38 in. on one side, 12 in. on the other. The side getting the greater clearance is optional.
    - Overhead, 60 in. to assure proper condenser fan operation.
    - Between units, control box side, 42 in. per NEC (National Electrical Code).
    - Between unit and ungrounded surfaces, control box side, 36 in. per NEC.
    - Between unit and block or concrete walls and other grounded surfaces, control box side, 42 in. per NEC.
    - Horizontal supply and return end, 0 inches.
  - With the exception of the clearance for the condenser coil and combustion side as stated in Notes 5a, b, and c, a removable fence or barricade requires no clearance.
  - Units may be installed on combustible floors made from wood or Class A, B, or C roof covering material if set on base rail.
  - The vertical center of gravity is 1'-7" [483] up from the bottom of the base rail. Horizontal center of gravity is shown.



BOTTOM POWER CHART, THESE HOLES REQUIRED FOR USE WITH ACCESSORY PACKAGES — CRBTMPWR001A00 (1/2", 3/4") OR CRBTMPWR002A00 (1/2", 1/4")

THREADED CONDUIT SIZE	WIRE SIZE	REQUIRED HOLE SIZES (MAX)
1/2"	24 V Power*	7/8" [22.2]
3/4"	Power*	1 1/8" [28.4]
1 1/4"	Power*	1 3/4" [44.4]

\*Select either 3/4" or 1/4" for power, depending on wire size.



RECEIVED  
JUL 10 1998  
VE SOLUTIONS

**Rooftop Packaged Units Program Performance Summary**

6

**Project Name: FRY'S SACRAMENTO**

**Prepared by : Edward B. Ward Co.**

7/8/98

5:58:59 PM

**Project Name: FRY'S SACRAMENTO**

**Tag Name: 20 TON ROOFTOP**

**Unit Name: 48TJD024**

ARI EER	8.60
Base Unit Weight	2200 lb
Base Unit Dimensions:	
Length	86.1 in
Width	83.5 in
Height	47.3 in
Unit Voltage-Phase-Hertz	460-3-60
Air Discharge	Vertical
Fan Drive Type	Belt
Actual Airflow	8000 CFM
Site Altitude	0 ft
Condenser Entering Air DB	95.0 °F
Evaporator Entering Air DB	80.0 °F
Evaporator Entering Air WB	67.0 °F
Entering Air Enthalpy	31.44 BTU/lb
Evaporator Leaving Air DB	59.3 °F
Evaporator Leaving Air WB	57.7 °F
Leaving Air Enthalpy	24.83 BTU/lb
Gross Cooling Capacity	238.00 MBH
Gross Sensible Capacity	178.80 MBH
Compressor Power Input	19.90 kW
Coil Bypass Factor	0.080
Max. Available Gas Heating Output Capacity	223.00 MBH
External Static Pressure	1.00 in wg
Options / Accessories Static Pressure:	
Economizer	0.10 in wg
Total External Static	1.10 in wg
Fan RPM	1281
Fan Power	5.9 BHP
<b>NOTE: Field Supplied Drive Required.</b>	

**Electrical Data:**

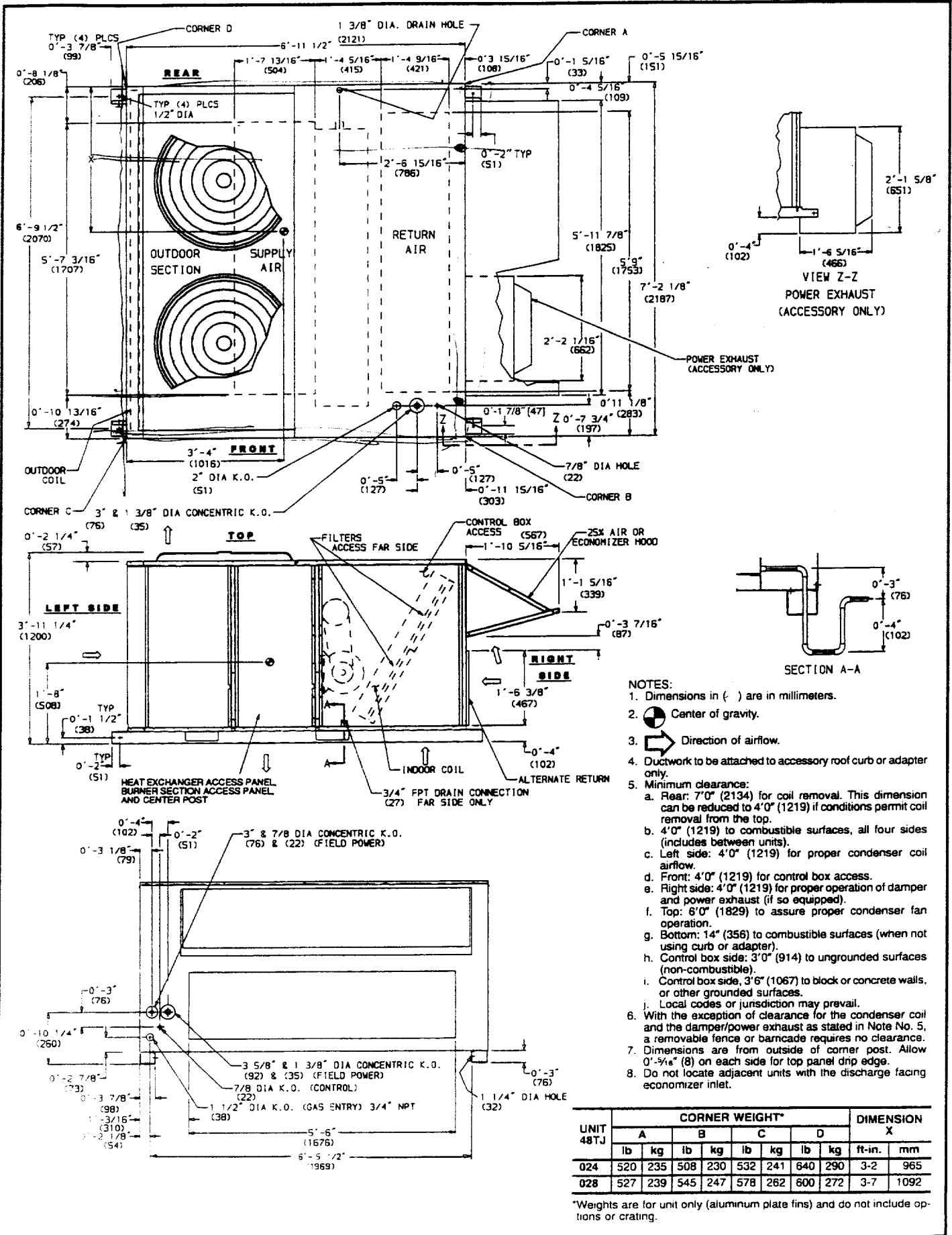
Minimum Voltage	414
Maximum Voltage	508
Compressor #1 RLA	17.8
Compressor #1 LRA	99
Compressor #2 RLA	17.8
Compressor #2 LRA	99
Outdoor Fan Motor Qty	2
Outdoor Fan FLA (ea)	2.8
Outdoor Fan Motor LRA (ea)	10.8
Indoor Fan Motor HP	7.5
Indoor Fan Motor FLA	13
Indoor Fan Motor LRA	66
Combustion Fan Motor FLA (ea)	.3
Power Supply MCA	59
Power Supply MOCP (Fuse or HACR)	70
Min. Unit Disconnect FLA	53
Min. Unit Disconnect LRA	286

*# 4 cu.*

# Base unit dimensions — 48TJ024,028



7



- NOTES:**
- Dimensions in ( ) are in millimeters.
  - Center of gravity.
  - Direction of airflow.
  - Ductwork to be attached to accessory roof curb or adapter only.
  - Minimum clearance:
    - Rear: 7'0" (2134) for coil removal. This dimension can be reduced to 4'0" (1219) if conditions permit coil removal from the top.
    - 4'0" (1219) to combustible surfaces, all four sides (includes between units).
    - Left side: 4'0" (1219) for proper condenser coil airflow.
    - Front: 4'0" (1219) for control box access.
    - Right side: 4'0" (1219) for proper operation of damper and power exhaust (if so equipped).
    - Top: 6'0" (1829) to assure proper condenser fan operation.
    - Bottom: 14" (356) to combustible surfaces (when not using curb or adapter).
    - Control box side: 3'0" (914) to ungrounded surfaces (non-combustible).
    - Control box side, 3'6" (1067) to block or concrete walls, or other grounded surfaces.
    - Local codes or jurisdiction may prevail.
  - With the exception of clearance for the condenser coil and the damper/power exhaust as stated in Note No. 5, a removable fence or barricade requires no clearance.
  - Dimensions are from outside of corner post. Allow 0'-3/16" (8) on each side for top panel drip edge.
  - Do not locate adjacent units with the discharge facing economizer inlet.

UNIT	CORNER WEIGHT*								DIMENSION	
	A		B		C		D		X	
48TJ	lb	kg	lb	kg	lb	kg	lb	kg	ft.-in.	mm
024	520	235	508	230	532	241	640	290	3-2	965
028	527	239	545	247	578	262	600	272	3-7	1092

\*Weights are for unit only (aluminum plate fins) and do not include options or crating.

**CITY OF SACRAMENTO  
APPLICATION FOR BUILDING PERMIT**

**DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES DIVISION**  
1231 I Street, Rm. 200  
Sacramento, CA 95814

(916) 264-7619 FAX 264-7046

→ Applicant must complete ALL Unshaded areas ←

PC #	AREA #
------	--------

ADDRESS \_\_\_\_\_ Suite \_\_\_\_\_

PARCEL # \_\_\_\_\_

<b>CONTACT</b>	<b>LICENCED CONTRACTOR</b> Lic No. # <u>675212</u>
Name _____	Name <u>ACCELERATED General &amp; Electrical</u>
Address _____	Address <u>1500 W. EL CAMINO #18-160</u>
Zip _____	<u>SACRAMENTO</u> Zip <u>95833</u>
Phone _____ FAX _____	Phone <u>648-9155</u> FAX <u>648-3031</u>
<b>ARCHITECT/ENGINEER</b>	<b>OWNER/TENANT</b>
Name _____	Name <u>FRY'S ELECTRONICS</u>
Address _____	Address <u>4100 North Gate Blvd</u>
Zip _____	<u>SACRAMENTO</u> Zip _____
Phone _____ FAX _____	Phone _____ FAX _____

→ Will the permittee have any employees on the jobsite?  Yes  No

→ If yes, WORKER'S COMPENSATION POLICY # \_\_\_\_\_ Exempt EXPIRATION DATE: \_\_\_\_\_

NAME OF INSURANCE COMPANY: \_\_\_\_\_

NATURE OF WORK IN DETAIL: install 2 plugs on existing circuits

DBA: FRY ELECTRONICS VALUATION: \_\_\_\_\_

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI( )	REM(X)	SW	FIRE	ADD	OTH
INSP. 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	
						Spr	Alarm			
B	L	P	M	E	F	S	D	R		

COMMENTS: \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No