

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

**Permit No: 0108998**  
**Insp Area: 1**

**Site Address: 1001 I ST SAC**  
Parcel No: 006-0043-001 4TH FLR

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

**CONTRACTOR**  
AIR CONDITIONING COMPANY, INC  
AKA: ACCO  
11375 SUNRISE PARK DRIVE, #600 95742

**OWNER**  
PARKING AUTHORITY OF CITY OF SACRAMENTO  
915 I ST RM 12 (ORG 11)  
SACRAMENTO CA 95814

**ARCHITECT**

**Nature of Work: NEW VAV/NEW ZONE**

**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 8 of the Business and Professions Code and my license is in full force and effect.

License Class C30 License Number 120696 Date 7/16/01 Contractor Signature A. Ferguson

**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 Professions 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 7/16/01 Applicant/Agent Signature A. Ferguson

**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 ZURICH AMERICAN INSURANCE CO Policy Number BYC200706-02 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 provisions of Section 3700 of the Labor Code, 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 7/16/01 Applicant Signature A. Ferguson

**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 # <span style="font-size: 1.5em; font-family: cursive;">0108998</span>	Insp. Area
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1001 I St Suite 120696  
 PARCEL # \_\_\_\_\_

<p style="text-align: center;"><b>CONTACT</b></p> Name _____ Street Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> Name <u>ACCO</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;"><b>OWNER</b></p> Name _____ Address _____ City/State/Zip _____ Phone _____ 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: change A/C zone / new VAV

OCCUPANT/TENANT: \_\_\_\_\_ VALUATION: \$ 5000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM( )	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	<u>MECH</u>	<u>PLUMB</u>	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>15</u>	[H]	[Quad]
B	L	P	M	E	F	S		D	PW	UTIL
				<u>171KAW</u>				<u>754</u>		

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

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

**PROJECT NAME:**

**Cal EPA Headquarters RM 403  
1001 I street**

**MECHANICAL TITLE 24 CERTIFICATION  
PRESCRIPTIVE APPROACH  
7/13/01**

**DOCUMENTATION AUTHOR**

**Stuart Haynes  
AIR CONDITIONING COMPANY, INC.  
(916) 852-5050**

*The rest of the document is illegible due to blurring.*

**ISSUED**

**JUL 16 2001**

**Sacramento Building Division**

# CERTIFICATE OF COMPLIANCE

(Part 1 of 2)

**MECH - 1**

PROJECT NAME <b>Cal EPA Headquarters RM 403</b>		DATE <b>7/13/01</b>
PROJECT ADDRESS <b>1001 I street</b>		BUILDING PERMIT # _____
PROJECT DESIGNER-MECHANICAL <b>AIR CONDITIONING COMPANY, INC.</b>	TELEPHONE <b>(916) 852-5050</b>	
DOCUMENTATION AUTHOR <b>Stuart Haynes</b>	TELEPHONE <b>(916) 852-5050</b>	CHECK BY/DATE Enforcement Agency Use

## GENERAL INFORMATION

DATE OF PLANS <b>7/13/01</b>	BUILDING CONDITIONED FLOOR AREA <b>256 SQ. FT.</b>	CLIMATE ZONE <b>Sacramento</b>		
BUILDING TYPE	<input checked="" type="checkbox"/> NONRESIDENTIAL	<input type="checkbox"/> HIGH RISE RESIDENTIAL	<input type="checkbox"/> HOTEL/MOTEL GUEST ROOM	
PHASE OF CONSTRUCTION	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> ADDITION	<input checked="" type="checkbox"/> ALTERATION	<input type="checkbox"/> UNCONDITIONED (file affidavit)
METHOD OF MECHANICAL COMPLIANCE	<input checked="" type="checkbox"/> PRESCRIPTIVE	<input type="checkbox"/> PERFORMANCE		
PROOF OF ENVELOPE COMPLIANCE	<input checked="" type="checkbox"/> PREVIOUS ENVELOPE PERMIT	<input type="checkbox"/> ENVELOPE COMPLIANCE ATTACHED		

## STATEMENT OF COMPLIANCE

This Certificate of Compliance lists the building features and performance specifications need to comply with Title 24, Parts 1 and 6 of the California Code of Regulations. This certificate applies only to buiding mechanical requirements.

The documentation preparer hereby certifies that the documentation is accurate and complete.

DOCUMENTATION AUTHOR <b>Stuart Haynes</b>	SIGNATURE	DATE <b>7/13/01</b>
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The Principal Mechanical Designer hereby certifies that the proposed building design represented in this set of construction documents is consistent with the other compliance forms and worksheets, with the specifications, and with any other calculations submitted with this permit application. The proposed buiding has been designed to meet the mechanical requirements contained in the applicable parts of Sections 110 through 115, 120 through 125, 140 through 142, 144, and 145

Please check one:

- I hereby affirm that I am eligible under the provisions of Division 3 of the Business and Professions Code to sign this document as the person responsible for its preparation; and that I am licensed in the State of California as a civil engineer or mechanical engineer, or I am a licensed architect.
- I affirm that I am eligible under the exemption to Division 3 of the business and Professions Code by Section 5537.2 or 6737.3 to sign this document as the person responsible for its preparation; and that I am a licensed contractor performing this work.
- I affirm that I am eligible under the exemption to Division 3 of the business and Professions Code to sign this document because it pertains to a structure or type of work described pursuant to business and Professions Code section 5537, 5538, and 6737.1.

(These sections of the Business and Professions Code are printed in full in the Nonresidential Manual)

PRINCIPAL MECHANICAL DESIGNER - NAME <b>Stuart Haynes</b>	SIGNATURE	DATE <b>7/13/01</b>	LIC. # <b>120696</b>
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## MECHANICAL MANDATORY MEASURES

Indicate location on plans of Note Block for Mandatory Measures

**T1.4**

## INSTRUCTIONS TO APPLICANT

For detailed instructions on the use of this and all Energy Efficiency Standards compliance forms, please refer to the Nonresidential Manual published by the California Energy Commission.

MECH-1: Required on plans for all submittals. Part 2 may be incorporated in schedules on plans.

MECH-2: Required for all submittals; but may be incorporated in schedules on plans.

MECH-3: Required for all submittals unless required ventilation rates and airflows are shown on plans, see Section 4.3.4.

MECH-4: Required for all prescriptive submittals.

MECH-5: Optional. Performance use only for mechanical distribution summary.

# CERTIFICATE OF COMPLIANCE

(Part 2 of 2)

**MECH - 1**

PROJECT NAME  
**Cal EPA Headquarters RM 403**

DATE  
**7/13/01**

## SYSTEM FEATURES

SYSTEM NAME	MECHANICAL SYSTEMS				NOTE TO FIELD Bldg. Dept. Use
	EXISTING	EXISTING	EXISTING	EXISTING	
TIME CONTROL	-				
SETBACK CONTROL	-				
ISOLATION ZONES	-				
HEAT PUMP THERMOSTAT?	-				
ELECTRIC HEAT?	-				
FAN CONTROL	-				
VAV MINIMUM POSITION CONTROL?	-				
SIMULTANEOUS HEAT / COOL?	-				
HEAT AND COOL SUPPLY RESET?	-				
VENTILATION	-				
OUTDOOR DAMPER CONTROL?	-				
ECONOMIZER TYPE	-				
DESIGN AIR CFM (MECH-3, COLUMN H)	<b>40</b>				
HEATING EQUIPMENT TYPE	-				
HIGH EFFICIENCY? IF YES ENTER EFF. #	-	-			
MAKE AND MODEL NUMBER	-				
COOLING EQUIPMENT TYPE	-				
HIGH EFFICIENCY? IF YES ENTER EFF. #	-				
MAKE AND MODEL NUMBER	-				
PIPE INSULATION REQUIRED?	<b>Y</b>				
PIPE/DUCT INSULATION PROTECTED?	<b>Y</b>				
HEATING DUCT LOCATION R-VALUE	<b>Plenum</b>	<b>4.2</b>			
COOLING DUCT LOCATION R-VALUE	<b>Roof</b>	<b>6.3</b>			
VERIFIED SEALED DUCTS IN CEILING/ROOF SPACE %FAN FLOW	<b>N/A</b>				

CODE TABLES: Enter code from table below into columns above.

HEAT PUMP THERMOSTAT?	Y: Yes N: No	TIME CONTROL	SETBACK CTRL.	ISOLATION ZONES	FAN CONTROL
ELECTRIC HEAT?		S: Prog. Switch O: Occupancy Sensor M: Manual Timer	H: Heating C: Cooling B: Both	Enter number of Isolation Zones.	I: Inlet Vanes P: Variable Pitch V: VFD O: Other C: Curve
VAV MINIMUM POSITION CONTROL?		VENTILATION	OUTDOOR DAMPER	ECONOMIZER	O.A. CFM
SIMULTANEOUS HEAT/COOL?		B: Air Balance C: Outside Air Cert. M: Out. Air Measure D: Demand Control N: Natural	A: Auto G: Gravity	A: Air W: Water N: Not Required	Enter design outdoor air CFM. Note: This shall be no less than Column H on MECH-3.
HEAT AND COOL SUPPLY RESET?					
HIGH EFFICIENCY?					
DUCT TAPE ALLOWED?					
PIPE INSULATION REQUIRED?					

# MECHANICAL VENTILATION

**MECH - 3**

PROJECT NAME

Cal EPA Headquarters RM 403

DATE

7/13/01

## MECHANICAL VENTILATION

A	B	C	D	E	F	G	H	I	J	K
ZONE/ SYSTEM	AREA BASIS			OCCUPANCY BASIS			REQ'D O.A. (MAX OF D OR G)	DESIGN OUTDOOR AIR CFM	VAV MIN. CFM	TRANSFER AIR CFM
	COND. AREA (SF)	CFM PER SF	MIN. CFM (B x C)	NO. OF PEOPLE	CFM PER PERSON	MIN. CFM (E x F)				
VAV 441	256	0.15	38	3	15	38	38	40	300	
<b>TOTALS (FOR MECH-4)</b>				<b>3</b>			<b>38</b>	<b>40</b>		

**C** Minimum Ventilation Rate per Section §121, Table 1-F.  
**E** Based on Expected Number of Occupants or at least 50% of Chapter 10 1997 UBC occupant density.  
**I** Must be greater than or equal to 'H', or use Transfer Air. Design outdoor air includes ventilation from supply air system & exhaust fans which operate at design conditions.  
**K** Must be less than or equal to (H-I), and, for VAV, greater than or equal to (H-J).



# air conditioning company, inc.

11375 Sunrise Park Drive, Suite 680 • Rancho Cordova, CA 95742 • 916-852-5058 • 916-852-5055

Contractor's License #120696

## DIFFUSER AND GRILLE TEST BALANCE REPORT

Job No. 631246  
Job Name Cal EPA 4th Floor

ZONE	ROOM	OUTLET	SIZE	TYPE	FREE AREA	REQUIRED		TEST RESULTS	
						CFM	FPM	CFM	FPM
Z-425N	422	1	12x12	2wc		300		310	
	421	2	12x12	4w		300		305	
	421A	3	12x12	4w		325		335	
Z-441N	403	1	10x10	4w		410		405	
	403	2	10x10	4w		410		410	

*Microbilm*

VISION 11 0 0 FIRE USE ZONE PHONE