

CITY OF SACRAMENTO

Permit No: 9807774

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 1206 C ST SAC

Sub-Type: ACOM

Parcel No: 0020082002

Housing (Y/N): N

CONTRACTOR

ACTION HVAC
1222 C ST
SACRAMENTO CA 95814

OWNER

SULLIVAN HOWARD F JR
1537 49TH ST
SACRAMENTO CA 95819

ARCHITECT

Nature of Work: NEW HVAC ON ROOF

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-5 License Number 553081 Date 8-14-98 Contractor Signature Dave Hoffman

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 8-14-98 Applicant/Agent Signature Dave Hoffman

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

(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 8-14-98 Applicant Signature Dave Hoffman

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 [REDACTED] BUILDING PERMIT**

9807774

**DEVELOPMENT SERVICES DIVISION**  
**PERMIT SERVICES SECTION**  
 1231 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

**PLAN CHECK #** \_\_\_\_\_ **Insp. Area** \_\_\_\_\_

**Applicant MUST complete ALL Unshaded areas this page only**

**ADDRESS** 206 C ST **Suite** \_\_\_\_\_  
**PARCEL #** 002-0082-002

<b>CONTACT</b>	<b>LICENSED CONTRACTOR</b> Lic No. # <u>0553081</u>
Name _____	Name <u>Dave B. Hoffman</u>
Address _____	Address <u>2308 Tyrollea Way</u>
_____ Zip _____	<u>Sac. CA</u> Zip <u>95821</u>
Phone _____ FAX _____	Phone <u>448-1760</u> FAX <u>993-1141</u>
<b>ARCHITECT/ENGINEER</b>	<b>OWNER</b> [REDACTED]
Name _____	Name <u>Tom Dougherty</u>
Address _____	Address <u>1654 Street</u>
_____ Zip _____	<u>Sac. CA</u> Zip <u>95814</u>
Phone _____ FAX _____	Phone <u>442-7688</u> FAX <u>442-7680</u>

→ 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: Install AC

DBA: GENERAL TIRE VALUATION: 3700<sup>00</sup>

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 fl Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File	
						Spr	Alarm	<u>18</u>		
<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>13</u>	<u>13</u>	<u>13</u>	<u>NonC</u>					

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

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No



**City of Sacramento Development Services Division  
Planning and Zoning Information Request**

Project Address: 1266 Cst.

Assessor's Parcel Number: 002 - 0082 - 002

Description of Request: \_\_\_\_\_

Roof mount HVAC  
on pitched roof.

Zoning Designation: M-1

Prior Applications for Project Site(P#,Z#,DRPB#): \_\_\_\_\_

Comments: Requires preservation  
board staff approval

Are There Any Planning Issues?: (Circle One)  YES  NO

Planning Review Required? (Circle One)  YES  NO

Design Review/ Preservation Required? (Circle One) YES NO

Planning Review by/Date: W. J. Gour 8/14/98

For a list of items that must be reviewed by Planning, please see reverse side of this form.



# SIERRA CONSULTING

P.O. Box 7267 \* Auburn \* CA 95604 \* (916) 477-5783 \* FAX (916) 477-5983

August 14, 1998

ACTION HVAC, INC.  
P.O. Box 214261  
Sacramento, CA 95821

Re: HVAC Equipment Placement

Attn: Dave;

Thank you for allowing Sierra Consulting the opportunity to provide professional engineering consulting services. As you have requested we have visited the site and have determined that the placement of the HVAC unit shall be acceptable under the condition that follow.

The package HVAC unit shall be placed over the existing (E) roof truss. We suggest that the unit be placed to straddled the (E) truss. The air distribution system, supply and return air plenums, will placed on opposite sides of the truss. Placement of the HVAC unit in this manner will allow for adequate roof support.

Should you have questions regarding this matter please feel free to contact Mr. Luft or myself at any time.

Allen J. Mahncke, P.E.

Randy D. Luft, P.E.

cc: Project file

← 12<sup>TH</sup>

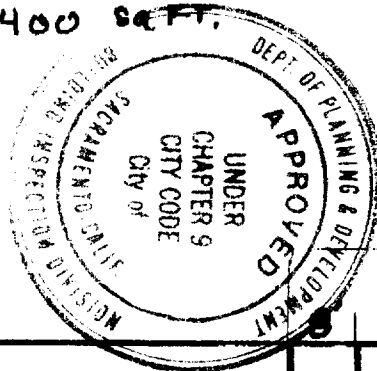
1206 C St  
General Tire  
Tom Dougherty

80'

80'

LOT  
6400 SFT.

NURS  
GARDEN

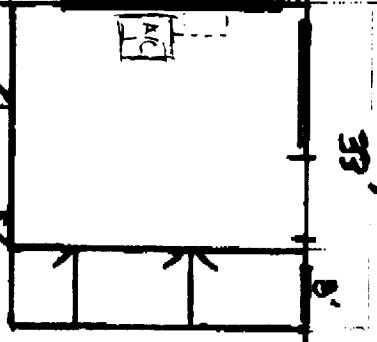


36'-  
36'-  
DRAIN LINE TO GROUND

This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve if violator of any of the Ordinance of State is

BUILDING  
6400 SFT.



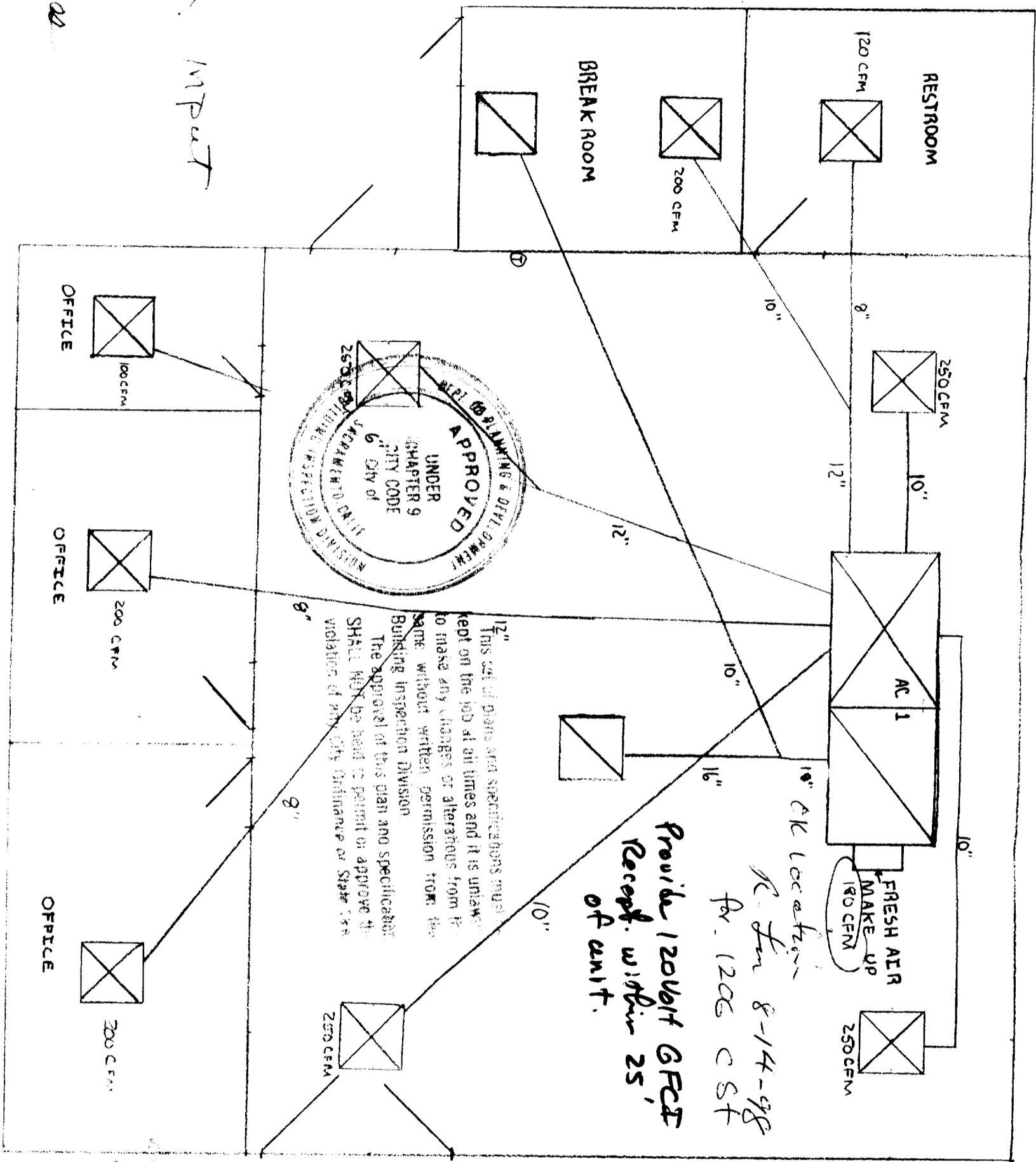
GAS METER

80'  
ELECTRICAL PANEL

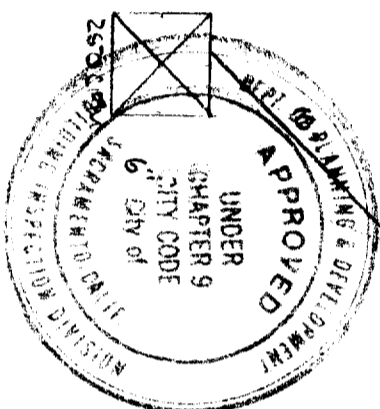
1206 C ST  
# 2201774

# 207774C  
1206 CST

12,000 BTU Input  
100 FT.  
Final 11 900



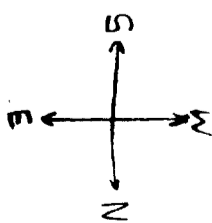
NOTE: #1 ONE INCH UNDER CUT DOORS FOR RETURN AIR.



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Provide 120VOLT GFCI Receipt within 25' of unit.

AC location for 1206 CST Rec'd 8-14-98



**LEGEND**  
AC#1  
FRIGIDAIRE PACKAGE  
Gas/ELECTRIC 10SEER  
MODEL # R5A060K120C  
230 VOLT SINGLE PHASE  
1820 CFM  
DIM: 47 1/2" x 55 1/2"  
WEIGHT: 490 lbs

8-14-98

1/4" = 1'

ACTION HVAC  
GENERAL TIRE