

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0008996
Insp Area: 4

Site Address: 2450 DEL PASO RD SAC
Parcel No: 225-0070-072

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

CONTRACTOR
KLEEMAN ROEBBELEN
1241 HAWKS FLIGHT CT
F1 DORADO HILLS 95762

OWNER
OATES MARVIN L
8615 ELDER CREEK RD 100
SACRAMENTO CA 95828

ARCHITECT

Nature of Work: ADD BACH UP GENERATOR (EXTERIOR) AND REMODEL ROOM TO UPS RM

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 Proc - Bell 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 License Number 737502 Date 11-20-00 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 11-20-00 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 ARGONAUT INS CO Policy Number WC63612211688 Exp Date 07/01/2001

(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 11-20-00 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.



KLEINFELDER

February 22, 2001

File: 23-484565

Mr. Jeff Halsdale
Kleeman Roebbelen Construction
1241 Hawks Flight Court
El Dorado Hills, CA 95762

**Subject: Final Report
Construction Materials Testing and Special Inspection Services
Pacific Bell – Del Paso Blvd.
2450 Del Paso Blvd.
Sacramento, CA
City of Sacramento Permit No. 00-12543 (Refer to 00-08996)**

Sir:

During construction of the subject project, personnel of our firm have provided special inspection services in general conformance with Section 1701 of the Uniform Building Code. These construction observation services were performed from November 30th, 2000 through January 8th, 2001. The scope of our services consisted of testing and observation of the following items:

- Cast-in-Place Concrete
- Reinforcing Steel

Based on the construction observations and testing of our representatives, it is our opinion the work observed requiring special inspection was, to the best of our inspector's knowledge, in conformance with the approved plans and specifications. Our services did not include architectural detailing observations such as dimensioning, color, fit, or finish.

We have performed our services in a manner consistent with the level of care and skill ordinarily exercised by inspection firms practicing in the same locality under similar conditions. No other representation, expressed or implied, and no warranty or guarantee is included or intended. Our services have been completed within the responsibilities, authority, and legal protection of an agency Deputy Inspector.

If you have any questions regarding the contents of this report or require additional information, please contact this office.

Sincerely,

KLEINFELDER, INC.

Theodore J. Oien
Project Manager

23-484565/2311KL105
Copyright 2001 Kleinfelder, Inc.



NEIGHBORHOODS,
PLANNING AND DEVELOPMENT
SERVICES DEPARTMENT

CITY OF SACRAMENTO
CALIFORNIA

PLANNING DIVISION
1231 I STREET, RM 200
SACRAMENTO, CA 95814
(916) 264-5698 Phone
(916) 264-5543 Fax

**MEMORANDUM OF UNDERSTANDING RELATED TO
MITIGATION MEASURE, PLANNING CONDITIONS,
ZONING ORDINANCE PROVISIONS AND/OR SIGN ORDINANCE PROVISIONS**

In order to proceed with construction/occupancy of the project located at _____

2450 Del Paso Rd (225-0070-081) _____, Plan Check/Permit No.

0008996 _____, I agree that the following Mitigation Measures/Planning

Conditions/Zoning Ordinance/Sign Ordinance Provisions associated with project 700-114 _____

(File No.)

will be fully implemented to the satisfaction of the City of Sacramento.

LIST OF MEASURE/CONDITIONS/PROVISIONS

1. The proposed site modifications shall be as shown on the plans submitted. If plans are revised, then a copy shall be given to the Planning Staff.
2. The applicant shall obtain all necessary building permits prior to commencement of construction.
3. Any future modifications or revisions shall require Planning review and approval.

The above language shall not be deemed a waiver by the City of Sacramento of any Mitigation Measure Measures/Planning Conditions/Zoning Ordinance/Sign Ordinance Provisions applicable to the project whether or not the measure, condition or provision is listed above.

Signature Carl Kimura _____ Date: 8/31/00 _____

Name & Title: Carl Kimura Project Architect _____

Address: 7311 Greenhaven Dr Suite 190 _____

Phone Number: 421-2031 _____

Reviewed by: Dennis Teicher _____ Date: 8/31/00 _____

MESSAGE CONFIRMATION

09/07/2000 14:16
ID=CITY OF SACRAMENTO

DATE	S,R-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
09/07	04'58"	9164212053	CALLING	006	OK 0000

09/07/2000 14:11 CITY OF SACRAMENTO → 94211706 NO.539 0001

REVIEW NO. 1 **PC#** 0008996 **Sht.** 1 **of** 1
JOB ADDRESS: 2450 Del Paso Road **Date:** 09-06-00 **Reviewed by:** Yang Lim
DISCIPLINE: Life Safety/ Structure

MAKE CORRECTIONS NOTED BELOW, REVIEW AND INCLUDE WITH NEXT SUBMITTAL:

- APPROVED AS NOTED**
- Make corrections, review and include with next submittal
- See notes on sheets _____, revise and include with next submittal.
- Complete plan check cannot be done without the information requested below. Include this information with your next submittal.

IMPORTANT NOTE:
RETURN CHECK SET OF PLANS WITH NEXT SUBMITTAL!
 Cloud, delta and date **ALL** revisions with next submittal of plans. Indicate detail and sheet number in last column where correction was made on the plans.

ITEM #	COMMENTS	Sht/Det. No
1	Provide one hour full height wall construction detail and section. Wall bottom track bolting and top track anchorage shall specify on the details. If the studs are	

REVIEW NO. 1

PC# 0008996

Sht. 1 of 1

JOB ADDRESS: 2450 Del Paso Road

Date: 09-06-00

Reviewed by: Yang Lim

DISCIPLINE: Life Safety/ Structure

MAKE CORRECTIONS NOTED BELOW, REVIEW AND INCLUDE WITH NEXT SUBMITTAL:

- () **APPROVED AS NOTED**
- () Make corrections, review and include with next submittal
- () See notes on sheets _____, revise and include with next submittal.
- () Complete plan check cannot be done without the information requested below. Include this information with your next submittal.

IMPORTANT NOTE:
RETURN CHECK SET OF PLANS WITH NEXT SUBMITTAL!
 Cloud, delta and date **ALL** revisions with next submittal of plans. Indicate detail and sheet number in last column where correction was made on the plans.

ITEM #	COMMENTS	Sh/Det. No.
1	Provide one hour full height wall construction detail and section. Wall bottom track bolting and top track anchorage shall specify on the details. If the studs are metal studs, the flex track shall be used and called out on the plan.	
2	All the openings and doors on the one hour wall of the UPS room shall be 60 min label with self- closure.	
3	Complete the City special inspection form for the anchor bolts epoxy grout.	

6 9-7 FAX 921-1706
 Carl Kimura
 66.
 FAX # _____

REVIEW NO. 1

PC# 0008996

Sht. 1 of 1

JOB ADDRESS: 2450 Del Paso Rd.

Date: 9/7/00

Reviewed by: James Tedford

DISCIPLINE: Mechanical/Plumbing

Phone: 264-7562

- APPROVED AS NOTED
- Make corrections, review and include with next submittal
- See notes on sheet(s) indicated, revise and include with next submittal.
- Complete plan check cannot be done without the information requested below. Include this information with your next submittal.

IMPORTANT NOTE:
RETURN CHECK SET OF PLANS WITH NEXT SUBMITTAL!
Cloud, delta and date ALL revisions with next submittal of plans. Indicate detail and sheet number in last column where correction was made on the plans.

ITEM #	COMMENTS	Sht/Det. No.
1	Provide mechanical plans showing new HVAC systems that will be provided in the new UPS room with Title 24 calculations and documentation as appropriate.	
2	Provide installation instructions from the battery manufacturer for batteries being installed in the new UPS room. Ventilation systems shall be designed in accordance with the installation instructions or as indicated below, whichever is more stringent. Ventilation systems shall maintain hydrogen concentrations below 25% of the lower explosive limit with a hydrogen generation rate of 0.000269 ft ³ /min per charging ampere per cell in accordance with IEEE standards for lead-acid battery installations. Provide manufacturer's data indicating number of cells per battery, charging amperes and ventilation calculations as appropriate.	

REVIEW NO. 1

PC# 0008996

Sht. 1 of 2

JOB ADDRESS: 2450 Del Paso Rd. Date: 9-2-00 Reviewed by: G. McDowell

DISCIPLINE: Electrical

MAKE CORRECTIONS NOTED BELOW, REVIEW AND INCLUDE WITH NEXT SUBMITTAL:

- APPROVED AS NOTED**
- Make corrections, review and include with next submittal
- See notes on sheets _____, revise and include with next submittal.
- Complete plan check cannot be done without the information requested below. Include this information with your next submittal.

IMPORTANT NOTE:
RETURN CHECK SET OF PLANS WITH NEXT SUBMITTAL!
Cloud, delta and date **ALL** revisions with next submittal of plans. Indicate detail and sheet number in last column where correction was made on the plans.

ITEM #	COMMENTS	Sht/Det. No.
1.	A minimum of 30 inches of clear space required all around generator of 42 inches required at Control Sections.	E-1.1
2.	Lighting with a minimum of 30 foot-candles and equipped with battery back-up required at generator location.	E-1.1
3.	Heating equipment required for generators located outdoors.	E-1.1
4.	Note on plan says to see enlargement of the Electrical Room on 3/E4.0. Should that be 4/E3.0 ?	E-2.0
5.	Note says for East Electrical Room see 4/E4.0. Should that be 3/E3.0 ?	E-2.1
6.	Provide information from Battery manufacturer on the amount of ventilation required for the amount of batteries at this location, include the maximum amount of hydrogen that will be produced.	E-3.0
7.	Provide information on the amount of ventilation in the Battery Room.	E-3.0
8.	Provide size of grounding electrode conductor for transformer T-EM.	E-4.0
9.	Feeder Schedule #7 shows a grounding conductor from MSB to generator frame. Since a 4 pole transfer switch is to be used, how will generator neutral be grounded ?	E-4.0

REVIEW NO. 1

PC# 0008996

Sht. 2 of 2

JOB ADDRESS: 2450 Del Paso Rd. Date: 9-2-00 Reviewed by: G. McDowell

DISCIPLINE: Electrical

ITEM #	COMMENTS	Sht/Det. No.
10.	Provide load of each individual feeder from EDB.	E-4.0
11.	What is the purpose of the 125 Amp feeder for Generator Module Panel Feeder ? Is this a separate panel for the generator accessories (charger, heater, etc.) ? Please provide information.	E-4.0

P.C. # 00-~~08896~~⁸⁹⁹⁶ Address 2450 Del Paso Rd Date 9-5-2000 Sht 1 of 1

Review # 1 Discipline FIRE Reviewer EHC Phone (916) 264-7619

Contractor _____ Phone _____ Fax _____
 Owner _____ Phone _____ Fax _____
 Arch/Engr _____ Phone _____ Fax _____

MAKE CORRECTIONS NOTED BELOW, REVIEW AND INCLUDE WITH NEXT SUBMITTAL:

- (x) Make corrections, review and include with next submittal
- () See notes on sheets _____, revise and include with next submittal.
- () Complete plan check cannot be done without the information requested below. Include this information with your next submittal.

IMPORTANT NOTE:
RETURN CHECK SET OF PLANS WITH NEXT SUBMITTAL!
 Cloud, delta and date ALL revisions with next submittal of plans. Indicate detail and sheet number in last column where correction was made on the plans.

ITEM #	COMMENTS	Sht/Det. No.
1	What is the type of fuel in the 3,000 fuel tank? Is it a double contained tank? Provide manufacture's information for the tank.	
2	Are there any fueling lines that go into the building? If so, provide details.	
3		
4		
5		
6		
7		
8		



NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES
DEPARTMENT

**CITY OF SACRAMENTO
CALIFORNIA**

1231 I STREET, #200
SACRAMENTO, CA
95814-2997
916-264-7619
FAX: 916-264-7046

DEVELOPMENT SERVICES DIVISION

September 7, 2000

CARL KIMURA
7311 GREENHAVEN DR #190
SACRAMENTO CA 95828

Property at: 2450 DEL PASO RD
Activity #: 0008996

Date Submitted: 08/04/2000
Cycle #: 1

Nature of Work: ADD BACH UP GENERATOR (EXTERIOR) AND REMODEL ROOM TO UPS RM

Please find attached plan review comments pertaining to your project in the City of Sacramento. *The current review is not complete in all areas and further comments may develop.* You may proceed in preparing to respond to these issues but **do not re-submit revisions until advised to do so by this office.**

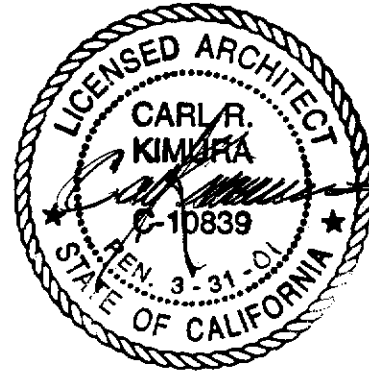
When re-submitting plans and supporting information, identify all changes by such means as; clouds, deltas, highlighting, and where possible, detailed transmittal letters clarifying how you have responded to all plan review comments. Only submit replacement plan sheets for those that have been revised/changed. If you have checked out plans, return them intact. Do not insert replacement sheets into previously reviewed plans. Your re-submittal package will track with the original sets and, when approved, be merged by this office. **Please note that under normal circumstances we require complete response to all comments prior to accepting follow-up submittals for further review. For ease of processing, please return a copy of this letter with your resubmittal package.**

STATUS REPORT

DISCIPLINE	APPROVED	COMMENTS	PLAN CHECKER
Residential			*****
Structural		09/06/2000	Yang Lim
Live Safety		09/06/2000	Yang Lim
Plumbing		09/07/2000	Jim Tedford
Mechanical		09/07/2000	Jim Tedford
Electrical		09/02/2000	Gary McDowell
Fire		09/05/2000	Lisa Beaver
Site			Gary Spross
Utilities			
Public Works			*****
Processing			Staff

NOTE: Discipline not assigned if "Plan Checker" space blank / not applicable if "Plan Checker" space "*****"

**TAKATA
SUGIOKA
KIMURA**



STRUCTURAL CALCULATIONS

FOR

ROOF TOP CONDENSING UNIT SUPPORT

FOR

**PACIFIC BELL
SPECIAL SERVICES GROUP
EMERGENCY GENERATOR AND UPS T.I.**

**2450 DEL PASO ROAD
SACRAMENTO, CALIFORNIA**

September 26, 2000

PAC BELL SPECIAL SERVICES
2450 DEL PASO ROAD

1155

STRUCTURAL CALCULATION FOR
VERIFICATION OF NEW ROOFTOP
CONDENSING UNIT SUPPORT

CONDENSING UNIT DATA

SIZE = 10'-8" X 10'-8" = 113 SF

WEIGHT = 800 LBS

EXISTING ROOF STRUCTURE

(SEE DETAIL 6/A3.1)

1/2" PLYWOOD DECK

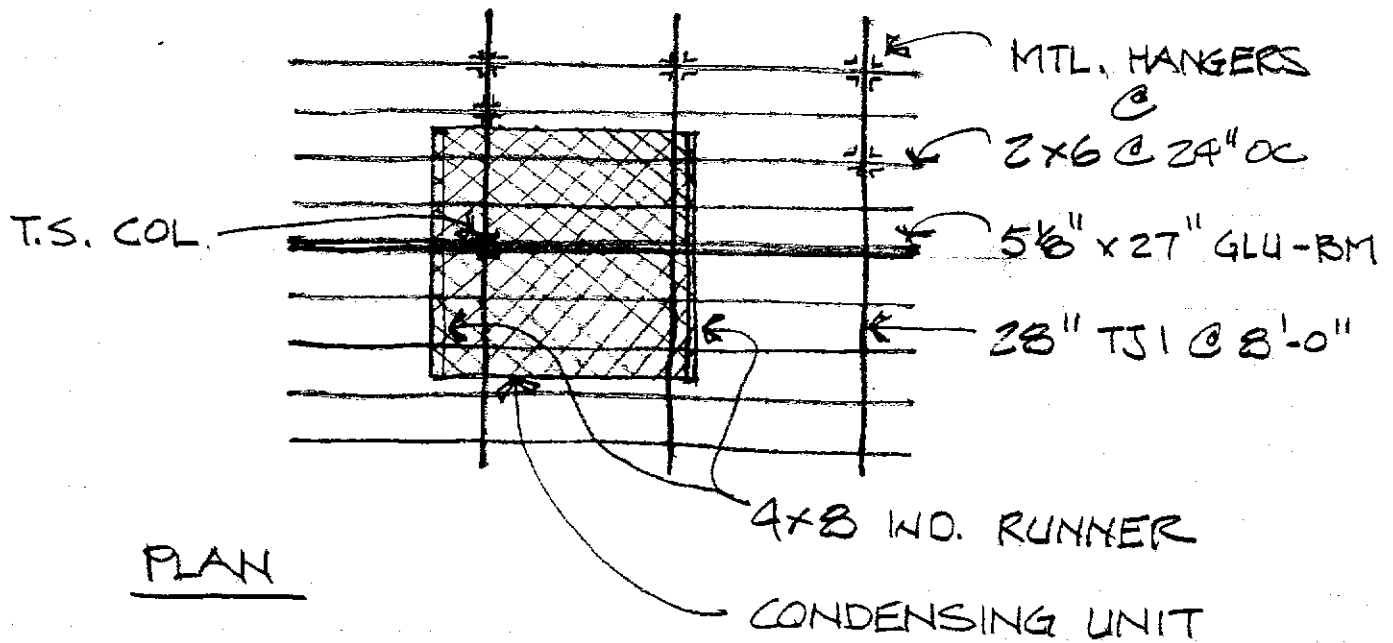
2x6 ROOF JOISTS @ 24" OC

28" TJI @ 8'-0" O.C.

5/8" X 27" GLU-LAM BM

TUBE STEEL PIPE COLUMNS

UNIT LOCATION OVER T.S. COL. AND GLU-LAM BM.



EXISTING ROOF:

FLAT ROOF DESIGNED FOR 20 PSF LIVE LOAD

20 PSF DEAD LOAD

40 PSF

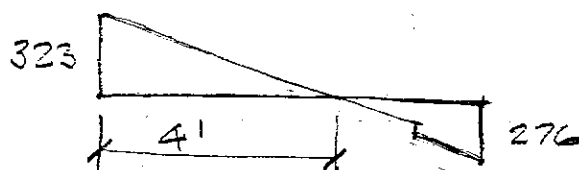
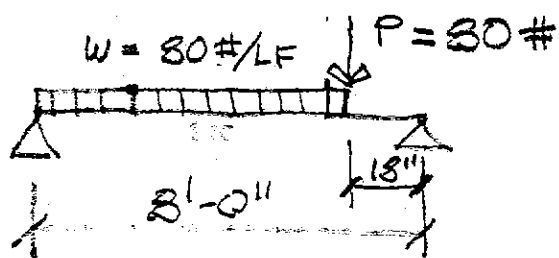
□ CALCULATION OF SUPPORT

EQUIVALENT LOAD OF UNIT OVER AREA
 $800\# / 113\text{ SF} = 7.08\text{ LBS/SF}$

$$7.08 < 20\text{ PSF} \rightarrow \underline{\underline{\text{OK}}}$$

□ VERIFY LOAD ON 2x6 @ 24" O.C.

$$P = 800 / 2 / 5 = 80\#$$



$$W = (80 \times 6.5) + 80 = 600\#$$

$$R_L = \frac{520 \times 4.75}{8} + \frac{80 \times 1.5}{8} = 323.75\#$$

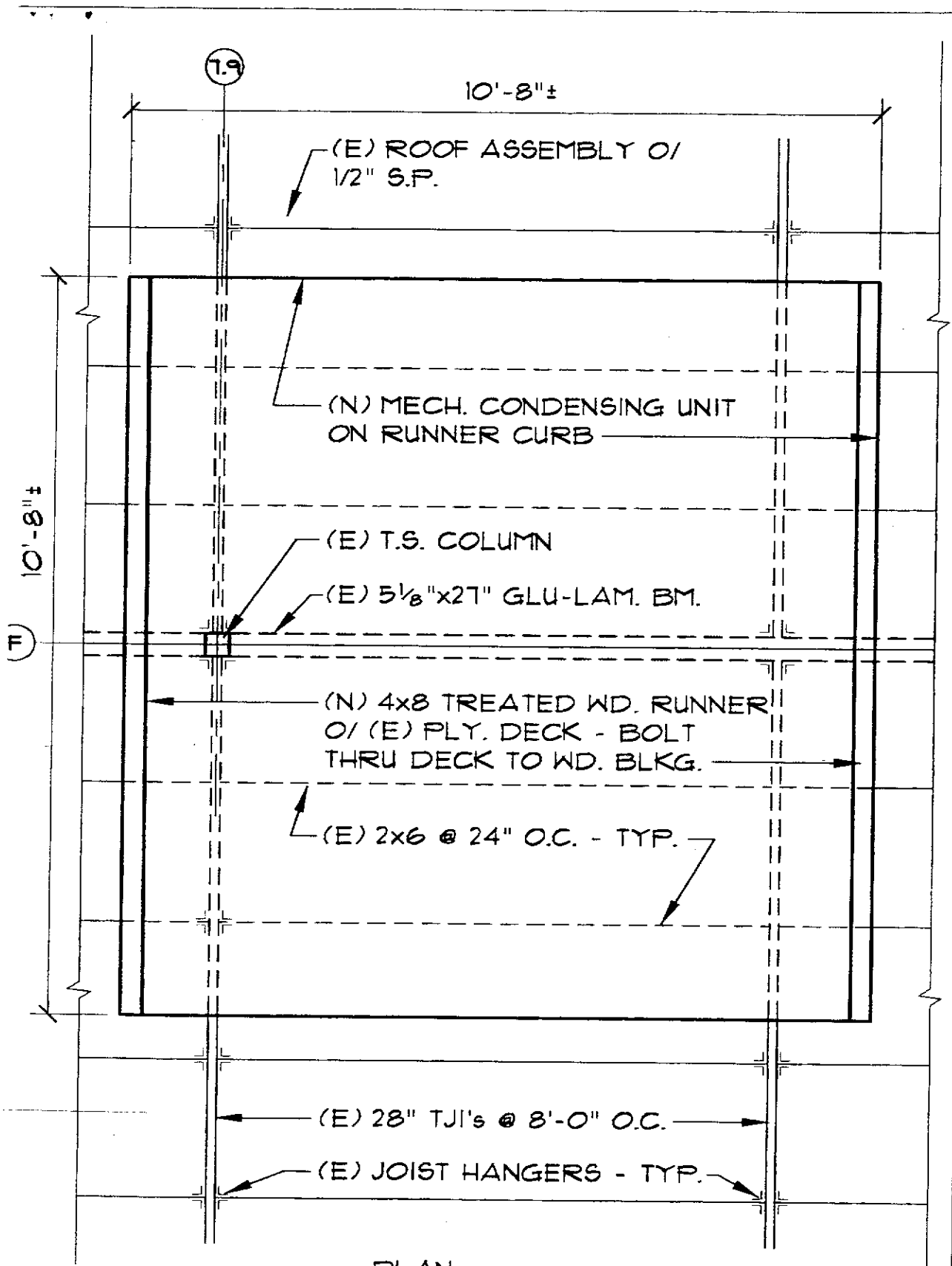
$$R_R = \frac{520 \times 3.25}{8} + \frac{80 \times 6.5}{8} = 276.25\#$$

$$\begin{aligned} M_m &= (323.75 \times 4) - (80 \times 4) \times (4/2) \\ &= 1295 - 640 \\ &= 655\text{ FT-LBS} \end{aligned}$$

$$S_{req} = \frac{655 \times 12}{1450} = 5.42\text{ in}^3$$

$$2 \times 6 = 7.56\text{ in}^3 > 5.42 \rightarrow \underline{\underline{\text{OK}}}$$

EXISTING 2x6 ROOF FRAMING OVER
 COLUMN IS STRUCTURALLY ADEQUATE



PLAN:

NOTE: SEE MECHANICAL DRAWINGS FOR RUNNER CONNECTION DETAIL



FRAMING AT ROOFTOP CONDENSER

**TAKATA
SUGIOKA
KIMURA**

FAX TRANSMITTAL

Date: February 2, 2001

To: **JEFF HOWELL, PROJECT MANAGER**
Kleeman Roebbelen

Fax Number: (916) 419-1243

Architect's Project No: 00-01-1155

Project Description: **SPECIAL SERVICES**
DEL PASO ROAD
SACRAMENTO, CA

Regarding: **REVISED ACHOR BOLT CALC**

Comments: Jeff,

Per our telephone conversation this morning, the attached is a revised anchor bolt calc using the HILTI "HSLG-RM 12/25" anchor bolt.

From: Carl Kimura, AIA

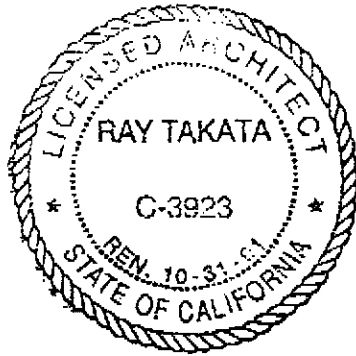
Number of pages in this transmission including this page: 3

If all pages are not properly received, please inform us as soon as possible.

TAKATA SUGIOKA KIMURA o **ARCHITECTURE & PLANNING**
7311 Greenhaven Dr, Suite 190 o Sacramento, California 95831 o (916) 421-2053 Fax (916) 421-1706

P 2/2

PAC BELL UPS &
EMERGENCY GEN.
PAC BELL SPECIAL SERV.
2450 DEL PASO RD.
SAC, CA.



② LATERAL :

EARTHQUAKE! (NON BUILDING STRUCTURES) 1998 CBC 1084A

$Z = 0$
 $C_a = 0.33$

$V = 0.7 C_a I W$
 $V = 0.7 \times 0.33 \times 1 \times 74,500 = 17,209 \#$

SHEAR PER FOOT = $17,209 / 10 = 1,721 \#$

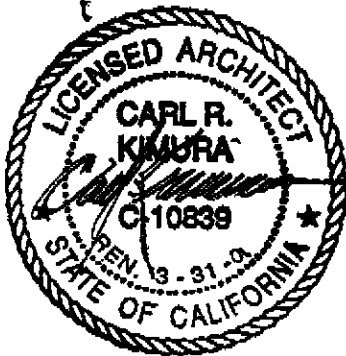
Substitute:
HILTI "HSLG-RM 12/25"
al shear per 12 mm $\phi = 5420 \#$
w/ 80 mm Emb. @ $11 \frac{5}{8}$ " edge
OK
02/02/01

al shear per $7 \frac{3}{8} \phi$ A307 = $5,925 \#$ (Simpson #7)
w/ $7 \frac{3}{8}$ " Emb. @ $11 \frac{5}{8}$ " edge. (OK)

$M_o = 17,209 \times 6 \uparrow + 5300 \times 6 =$
 $-103,254 + 318,000 = +214,746$

(NO UPLIFT NOT REQ.)

al $T' = 10,900 \#$ bond strength,
for $7 \frac{3}{8} \phi$ AD.

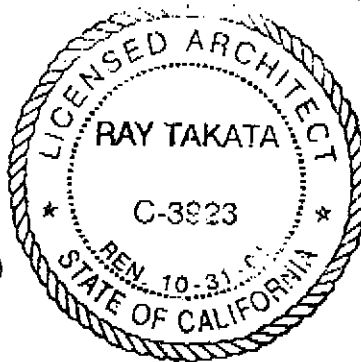


SLIDING

$V \leq C(U_w + C_{con})$

$17,209 < 32,103$ (OK NO SLIDING)

sec p 2/2



PAC BELL : UPS &
EMERGENCY GEN.
PAC BELL SPECIAL USE
12450 DEL PASO RD.
SAC, CA.

7-31-00

SKID BASE MTD GENERATOR
SET, QS T30 (750 KW)

① FOUNDATION :

$$Sp = 149,911 / (14 \times 27) = 397 \text{ pcf.}$$

$$\text{al } Sp = 1000 > 397 \text{ (OK)}$$

LOADS

UNIT WT. = 53,000 lb,
FUEL WT. = 21,500 lb,

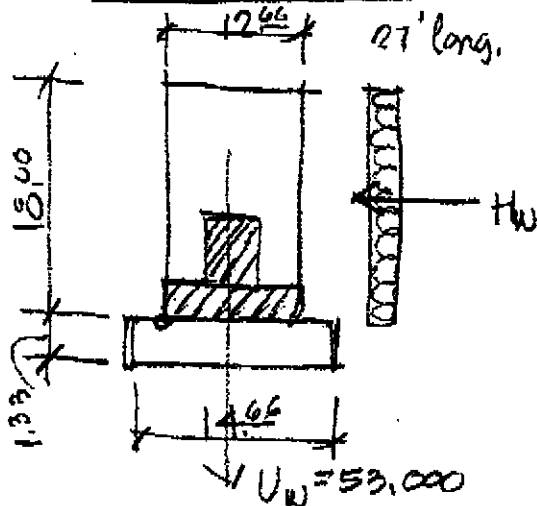
TOTAL UNIT = 74,500 lb

CONC WT = 1.33' x 14' x 27' x 150 pcf
= 75,411 lb.

TOTAL = 149,911 lb

② LATERAL :

WIND LOADS



min. wind speed = 80 MPH
exposure 'C'

$$P_w = C_e C_q q_s I_w = 1.13 \times 1.3 \times 16.4 \times 1$$

$$= 24.1 \text{ pSF.}$$

$$H_w = 18 \times 27 \times 24.1 = 11,713 \#$$

$$M_o = 11,713 \times 18 \times 0.5 + 53,000 \times 12.66$$

$$= -105,417 + 335,190$$

$$= +230,073 \text{ (NO H.O. REQ.)}$$

SLIDING

$$H_w \leq C(U_w + \text{Conc})$$

$$= .25 (53,000 + 75,411) = 32,103$$

$$11,713 < 32,103 \text{ (OK NO SLIDING)}$$

CARTER AIR BALANCE COMPANY
1130 FIRST STREET, SUITE 210
NAPA, CA 94559
Phone (707)252-4859 Fax (707)252-8351

TEST AND BALANCE ANALYSIS REPORT

JOB: UPS Room, Special Services, Pacific Bell - 2450 Del Paso Rd.
CONTRACTOR: Custom Aire Mechanical, Inc.
ENGINEER: KC Engineering
ARCHITECT: Takata, Sugioka, Kimura Architects

DATE: April 5, 2001

TECHNICIAN: Larry Lee

APPROVED BY: Jeff Carter

CARTER AIR BALANCE COMPANY

DIFFUSER & GRILLE TEST SHEET

DATE: 4-5-01

SHEET NO: 1

AREA SERVED

UPS Room

UNIT NO. (E) HP

ROOM NO.	OUTLET NO.	CODE	SIZE	EFFECTIVE AREA	REQUIRED		TEST RESULTS			
					F.P.M.	C.F.M.	F.P.M.	C.F.M.		
HEAT PUMP		3 TON								
UPS	1	CD	1224	FH	FH	600	FH	635		
UPS	2	CD	1224	FH	FH	600	FH	610		
		HP-3	Supply	Air	Total	1200		1245		
UPS	3	RG	1624	FH	FH	1000	FH	1025		
		HP-3	Return	Air	Total	1000		1025		
UPS	4	HP-3	Outside	Air		200		220		
HEAT PUMP		2.5 TON								
UPS	1	CD	1024	FH	FH	330	FH	340		
UPS	2	CD	1024	FH	FH	330	FH	350		
UPS	3	CD	1024	FH	FH	340	FH	340		
		HP-2.5	Supply	Air	Total	1000		1030		
UPS	4	RG	1624	FH	FH	800	FH	760		
		HP-2.5	Return	Air	Total	800		760		
UPS	5	HP-2.5	Outside	Air		200		270		
REMARKS:										

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 # 0008996	Insp. Area AC
------------------------------	-------------------------

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2450 Del Paso Road Suite _____
 PARCEL # ~~2450 Del Paso Road~~ 225-0070-081

CONTACT

Name Cathy Carl Kimura
 Street Address _____
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

LICENSED CONTRACTOR Lic No. # _____

Name Kleeman Robbellen Const
 Address 1241 Hawks Flight Ct #100
 City/State/Zip El Dorado Hills, CA 95762
 Phone (916) 939-0500 FAX 939-4037
 E-mail: _____

ARCHITECT/ENGINEER

Name Carl Kimura - Takata Susuda Kimura
 Address 7311 Greenhaven Dr. Ste 190
 City/State/Zip Sacramento, CA 95831
 Phone (916) 421-2081 FAX 421-1706
 E-mail: crkimura@pacbell.net

OWNER

Name Cathy Rendon - Pac Bell
 Address 3707 Kings Way, B-15
 City/State/Zip Sacramento, CA 95851
 Phone (916) 972-4643 FAX 971-9670
 E-mail: clrendo@msg.pacbell.com

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

NATURE OF WORK IN DETAIL: Provide new emergency generator on site (750 KW) and new UPS room in existing building (400 KW). Recirculating existing wiring for new UPS service

OCCUPANT/TENANT: Pac Bell VALUATION: \$ 1.2 million

FLOOD STATUS:				S.C.A.T.							
JOB DESCRIPTION			<input checked="" type="checkbox"/> BLDG	<input type="checkbox"/> SHELL	<input type="checkbox"/> APT	<input type="checkbox"/> TI ()	<input checked="" 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 type="checkbox"/> MECH	<input type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" 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 [H] [Quad]			
<input checked="" type="checkbox"/> B	L	P	M	<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> Y	15				
				<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S	D	PW	UTIL		

COMMENTS: requires minor zoning modification

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

Date of Request: _____

By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

X Project Address: ~~2045~~ 2450 Del Paso Road

Assessor's Parcel Number: 225-0070-081

Previous Use: ~~Commercial~~ office bldg

X Description of Request/Proposed Use: Provide new Emergency

Generator on site and new UPS service

in existing building. (Eliminating 4 plg spaces + re locating two trees.)

Is This a Change of Use? No

Zoning Designation: EC 65-PUD

Prior Applications for Project Site(P#, Z#, DRPB#): P99-158; Z99-023; P95-096

Comments: Applicant may submit plans at risk to plan check. Do not issue until/unless project approval. At that time, make sure plans match planning approval set.

Are There Any Planning Issues?: (circle one) YES NO

* Staff Site Plan Check Required? (Circle one) YES NO

* Field Inspection Required? (Circle one) YES NO

* Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: M May 8-4-00

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

Approved

per 200-114
MICROFILM AFTER FINAL

meet conditions
of 2 file

S. Yape 18 Oct 00