

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0008752
Insp Area: 1

Site Address: 1201 J ST SAC
Parcel No: 006-0052-019

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

CONTRACTOR
ANTHONY & SONS
1790 TERMINAL ST
W SAC CA

OWNER
TOUCHDOWN PROPERTIES
SACRAMENTO CA
95819

ARCHITECT

Nature of Work: SHELL RENOVATION - P / M / E / F

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 (iv), C)

Lender's Name N/A 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 360117 Date 1/19/2001 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 1/19/2001 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 STATE FUND Policy Number 713-00 UNIT 0000126 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 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 1/19/2001 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.



AIRCO MECHANICAL
INC.

5720
Alder Avenue

Sacramento
California, 95828-1106

Telephone
(916) 381-4523

Facsimile
386-0350

James C. (Jim) Jones
Lic. No. 311454

000076-00

July 11, 2001

City of Sacramento
Building Inspections Division
1231 I Street, Room 200
Sacramento, CA

**RE: CALIFORNIA MEDICAL ASSOCIATION @ 1201 J STREET
RESPONSE TO CORRECTION NOTICE**

To Whom It May Concern:

Listed below are our responses (in bold) to your Correction Notice dated July 9, 2001 regarding the above referenced project.

1. Balance Report is to indicate compliance regarding minimum outside air intake.

Done.

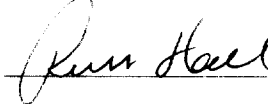
Airco Mechanical, Inc.



2. Correct discrepancies to airflow at VAV 2-8 and VAV 3-2.

VAV 2-8 Report has airflow numbers transposed - Report corrected.
VAV 3-2 Balance Report airflows are acceptable.

Airco Mechanical, Inc.



FILE
Site 4-2-2485
3-17-9746

with [unclear] document - Airco - vic [unclear]

City of Sacramento
Building Inspections Division

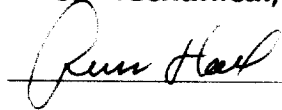
**RE: CALIFORNIA MEDICAL ASSOCIATION @ 1201 J STREET
RESPONSE TO CORRECTION NOTICE**

July 11, 2001
Page 2

5. Verify compliance of mechanical equipment, unit does not match specs on plans.

All mechanical equipment is approved for use as installed.

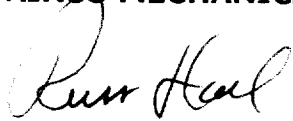
Airco Mechanical, Inc.



If you should have any questions or require further assistance, please do not hesitate to contact me.

Respectfully,

AIRCO MECHANICAL, INC.



Russ Hall
Project Engineer

RH/sdp

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	MIN CFM	COOLING MAX CFM	HEAT	CFM	CFM	CFM	COOLING MAX CFM	HEAT	
VAV 2-1	1	S1	14"		690		760	690	720	690		
	2		14"		690		820	740	720	690		
			Total		1380	415	1580	1430	1440	1380	420	
VAV 2-2	1	S1	10"		400		320	350	310	410		
	2		12"		465		560	580	540	465		
	3		12"		465		490	510	480	455		
			Total		1330	400	1370	1440	1330	1330	400	
VAV 2-3	1	S1	12"		480		540	500		480		
			Total		480	300	540	500		480	310	
VAV 2-4	1	S1	12"		525		520			525		
	2		12"		525		520			525		
	3		10"		375		400			375		
	4		12"		525		560			535		
	5		12"		525		500			525		
	6		12"		525		520			515		
		Total		3000	900	3020				3000	915	

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	MIN CFM	MAX CFM	HEAT CFM	CFM	CFM	CFM	HEAT CFM	MAX CFM	
VAV 2-5	1	S1	8"		240		260				240	
	2		8"		240		260				240	
	3		8"		240		260				240	
	4		8"		240		280				240	
			Total		960	240	1060			245	960	
VAV 2-6	1	S1	10"		285		480	295			280	
	2		10"		285		420	265			300	
	3		10"		285		400	260			290	
	4		10"		285		480	260			285	
			Total		1140	285	1880	1080		290	1155	
VAV 2-7	1	S5	8"		160		210	200			175	
	2		8"		160		190	180			160	
	3		8"		160		160	160			150	
	4		8"		160		180	180			160	
			Total		640	160	760	720		160	645	

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
 5720 Alder Avenue
 Sacramento, California 95828

AIR OUTLET
 TEST REPORT

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

Handwritten notes:
 06/27/01
 11:45 AM
 14523

AREA SERVED	OUTLET			DESIGN		TEST				TOTAL		REMARKS
	NO.	TYPE	SIZE	MIN CFM	MAX CFM	HEAT CFM	CFM	CFM	CFM	HEAT CFM	MAX CFM	
VAV 2-8	1	S1	8"		150		250	430			470	X
	2		12"		475		690	170			150	
	3		8"		165		270	200			170	
	4		8"		165		335	200			170	
	5		8"		190		305	170			185	
			Total		1145	290	1850	1170		300	1145	
VAV 2-9	1	S1	6"		165		250	180			165	
	2		6"		165		320	160			165	
			Total		330	85	570	340		90	330	
VAV 2-10	1	S1	12"		660		620	570			630	
	2		10"		420		450	400			410	
	3		8"		60		180	170			60	
			Total		1140	325	1250	1140		330	1140	
VAV 2-11	1	S1	10"		400		360	450			400	
			Total		400	100	360	450		100	400	

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	MIN CFM	MAX CFM	HEAT CFM	CFM	CFM	CFM	HEAT CFM	MAX CFM	
VAV 2-12	1	S1	12"		580		580				580	
			Total		580	300	580			310	580	
VAV 2-13	1	S1	10"		245		375	240	225		245	
			Total		245	120	375	240	225	120	245	
VAV 2-14	1	S1	10"		360		390	430	390		360	
	2		10"		360		290	350	330		360	
			Total		720	300	680	780	720	290	720	
VAV 2-15	1	S1	10"		330		405	220	290		325	
	2		10"		330		410	225	300		335	
	3		10"		265		485	270	360		265	
			Total		925	300	1300	715	950	300	925	

TEST DATE: 06/27/01

READINGS BY: Jacobson

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
 TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	MIN. CFM	MAX. CFM	HEAT. CFM	CFM	CFM	CFM	HEAT. CFM	MAX. CFM	
VAV 3-1	1	S1	12"		685		720	700	700		685	
	2		12"		685		740	700			685	
			Total		1370	395	1460	1400		385	1370	
VAV 3-2	1	S1	12"		535		400	470			470	
	2		12"		420		300	300			300	
	3		12"		510		480	500			500	
			Total		1465	440	1180	1270		440	1270	
VAV 3-3	1	S1	12"		440						400	
			Total		440	300				290	400	
VAV 3-4	1	S1	14"		855		650	770	850		850	
	2		12"		580		455	520	570		570	
	3		12"		580		500	520	570		570	
	4		12"		580		530	510	560		560	
	5		10"		325		560	320	320		320	
	6		12"		605		660	540	595		595	
		Total		3525	1060	3355	3180	3465	1040	3465		

X
K

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	HEAT CFM	MAX CFM	CFM	CFM	CFM	CFM	HEAT CFM	MAX CFM	
VAV 3-5	1	S5	8"		160	290	140				160	
	2	S5	8"		160	270	160				175	
	3	S5	8"		160	230	180				150	
	4	S5	8"		160	200	195				160	
	5	S1	6"		80	160	120				80	
			Total	300	720	1150	795			310	725	
VAV 3-6	1	S1	10"		330	600	300				340	
	2		8"		150	400	200				150	
	3		8"		185	300	155				180	
	4		8"		175	440	185				175	
	5		8"		175	360	165				175	
			Total	265	1050	2100	1005			260	1055	
VAV 3-7	1	S1	10"		330	600	300	330			320	
	2		10"		330	640	315	350			340	
	3		10"		330	700	285	340			330	
			Total	250	990	1940	900	1020		245	390	

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	HEAT, CFM	MAX CFM	CFM	CFM	CFM	CFM	HEAT, CFM	MAX CFM	
VAV 3-8	1	S	10"		330	660	320	340	330		340	
	2		10"		330	640	340	340	330		340	
	3		10"		330	660	280	330	300		310	
			Total		250	990	1960	910	1010	960	250	990
VAV 3-9	1	S	8"		175	180	200	150			170	
	2		8"		175	240	250	200			180	
			Total	90	350	420	450	350		90	350	
VAV 3-10	1	S	10"		390	80	260	300	370		395	
	2		10"		390	800	260	290	355		380	
	3		6"		105	100	100	90	100		105	
	4		8"		135	160	130	180	130		140	
	5		6"		50	165	130	125	50		50	
			Total	270	1070	1305	880	985	1005	260	1070	
VAV 3-11	1	S	10"		250	230	205	260			255	
	2		10"		330	380	290	350			325	
			Total	300	580	610	495	610		300	580	

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
 5720 Alder Avenue
 Sacramento, California 95828

AIR OUTLET
 TEST REPORT

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: AC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	HEAT CFM	MAX CFM	TEST CFM	CFM	CFM	CFM	HEAT CFM	MAX CFM	
VAV 3-12	1	S	10"		250	230					245	
	2		8"		250	280					255	
			Total	300	500	510				290	500	
M-034	1	DP	7" x 6 3/4"	110	120					122	4242	①

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

... With the first
 ... VAVs to ...
 ... damper position is @ 15%
 * design = 5535

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

AIR OUTLET TEST REPORT

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: FC-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	HEAT.CFM	MAX CFM	CFM	CFM	CFM	CFM	HEAT.CFM	MAX CFM	
FC	1	S1	14"		675	580					700	
	2		14"		675	900					740	
			Total		1350	1480					1440	

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.
5720 Alder Avenue
Sacramento, California 95828

**AIR OUTLET
TEST REPORT**

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: EF-1

OUTLET MANUFACTURER: Titus

TEST APPARATUS: Alnor Balometer

AREA SERVED	OUTLET			DESIGN		TEST				FINAL		REMARKS
	NO.	TYPE	SIZE	MIN CFM	MAX CFM	CFM	CFM	CFM	CFM	MIN CFM	MAX CFM	
3rd fl	1	E2	8"		90	300	250				100	
	2		10"		415	520	400				425	
	3		8"		90	230	175				100	
	4		10"		415	435	350				425	
2nd fl	5		6"		65	70	60				70	
	6		8"		90	350	280				100	
	7		10"		415	520	410				420	
	8		8"		90	220	170				95	
	9		10"		415	350	270				420	
	10		6"		65	50	40				70	
1st fl	11		12"		410	600	480				440	
	12		12"		410	500	370				440	
	13		8"		75	150	120				80	
			Total		3045	4295	3375				3185	
<p>TEST DATE <u>06/27/01</u> READINGS BY: <u>Lyle Jacobson</u></p>												

PROJECT: California Medical Association 00-0076-00-03

SYSTEM: EF-2

OUTLET MANUFACTURER: NC

TEST APPARATUS: 05 Magnehelic Gauge

AREA SERVED	OUTLET			DESIGN			TEST			FINAL		REMARKS
	NO.	TYPE	SIZE	Vel / FPM	MAX CFM	CFM	CFM	CFM	CFM	Vel / FPM	MAX CFM	
Parking		duct	38"	2363	18,600					2268	17,853	
Garage												

TEST DATE: 06/27/01

READINGS BY: Lyle Jacobson

AIRCO MECHANICAL, INC.

5720 Alder Avenue
Sacramento, California 95828

AIR OUTLET TEST REPORT

PROJECT: CHINA SYSTEM: AC-1

OUTLET MANUFACTURER T TEST APPARATUS ALIOR BALANCE

AREA SERVED	OUTLET				DESIGN		TEST		TEST		FINAL		REMARKS
	NO.	TYPE	SIZE	AK	MAX CFM	MIN CFM	CFM	CFM	CFM	CFM	H75 MIN CFM	C15 MAX CFM	
11-1	1	32	12 A		370		370	390				370	
	2							320				310	
11-2	1		12 A				710	710			210	680	
	2							370				540	
11-2	3							450				450	
	4							450				450	
	5							450				450	
	6							450			600	550	

COMMENTS:

TEST DATE _____ READINGS BY _____

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 7-17-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

1201 J ST.

Has been conducted by Inspector

C PACK

On

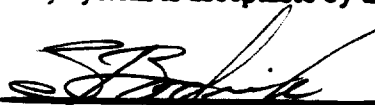
7-12-01

00-06752-10
Permit Number

Square Footage

FIRE ALARM
Type of Inspection

They system is acceptable by this department.



By: Ross L. Woodman,
Fire Prevention Officer II


00-511
F.D. Reference Number

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 1201 J ST Permit No. 0008752
Building Use: OFFICE Occupancy: B
Building Owner: CAL. MEDICAL ASSOC. Construction Type: II-1R
Owner Address: 221 MAIN ST SAN FRANCISCO Sprinkled? Yes No
Portion of Building Occupied: SHELL Area: 38400 Sq. Ft.

10/4/01  DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By: MJS,RDH CP]

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