

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0400881

Insp Area: 1

Thos Bros: 297C4

Site Address: 601 CAPITOL ML SAC

Parcel No: 006-0151-005

Sub-Type: NCOM

Housing (Y/N): N

CONTRACTOR

HENSEL PHELPS CONSTRUCTION
901 H ST, SUITE 100
SACRAMENTO CA 95814

OWNER

SACRAMENTO HOUSING REDEV AGENCY
630 I STREET, 3RD FLOOR
SACRAMENTO CA 95814

ARCHITECT

HOK
ONE BUSH ST SUITE 200
SAN FRANCISCO CA. 94104

Nature of Work: NEW 1000 S.F. COMMERCIAL BLDG TO BE USE FOR MARKETING CENTER.

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.

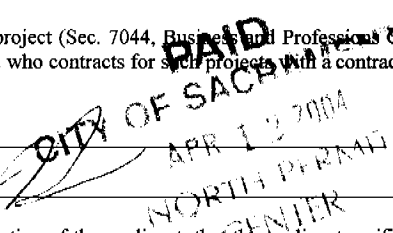
License Class P License Number 519252 Date P Contractor Signature P

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 P 7-12-04 Owner Signature [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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date P 4-12-04 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 TRAVELERS INDEMNITY OF ILLINOI Policy Number ub260t8036 Exp Date 06/01/2004

(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 P 04-12-04 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

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 601 CAPITOL MALL Permit No.: 0400881

Building Use: COMMERCIAL/MARKETING Occupancy: B

Building Owner: LOT A LAND HOLDERS, LLC Construction Type: II-N

Owner Address: 1201 K STREET, SACRAMENTO Sprinkled? Yes No

Portion of Building Occupied: ENTIRE Area: 1000 Sq. Ft.

1/14/2005 TOM MELAVIC *Tom Melavic* RON BEEHLER
 Date By: (Print) Sign INTERIM CHIEF BUILDING OFFICIAL

[Finaled By: PWC, CDY, CAAC, GRS, AH]

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 Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 601 CAPITOL ML Permit No.: 0400881
Building Use: OFFICE/MARKETING CENTER Occupancy: B
Building Owner: LOT A LANDHOLDER LLC Construction Type: II-N
Owner Address: SACRAMENTO, CA Sprinkled? [] Yes [X] No
Portion of Building Occupied: ENTIRE Area: 1000 Sq. Ft.
1/14/05
Date By: (Print) Byron Nakasaka Sign RON BEEHLER
INTERIM CHIEF BUILDING OFFICIAL

[Finaled By:PWC,CDY,AAC,GRS,JH,RT]

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 Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 1251 I Street, Suite 200 or 2101 Arena Bl., 200
 Sacramento, CA 95814 Sacramento, CA 95834
 (916) 264-5656, 1-866 EZ PERMIT or www.cityofsacramento.org

ACTIVITY #	Insp. Area
040881	1

Applicant to complete all areas down to valuation

ADDRESS 601 Capitol Mall Suite _____
 PARCEL # ~~006-0149-029-005 CAPITOL MALL~~ 006-0651-0005
601 Capitol Mall

CONTACT		LICENSED CONTRACTOR Lic No. # <u>519252</u>	
Name <u>Mark Ruby</u>	Street Address <u>1201 K St. Suite 1840</u>	Name <u>Hensel Phelps Const.</u>	Address <u>901 H Street, Suite 100</u>
City/State/Zip <u>Sacramento, CA 95814</u>	Phone <u>556-1215</u> FAX <u>556-1206</u>	City/State/Zip <u>Sacramento, CA 95814</u>	Phone <u>497-0869</u> FAX <u>497-0869</u>
E-mail: <u>mruby@DTaylorinterests.com</u>		E-mail: <u>hamarel@henselphelps.com</u>	
ARCHITECT/ENGINEER		OWNER	
Name <u>HOK</u>	Address <u>One Bush Street, Suite 200</u>	Name <u>Lot A Landholders, LLC.</u>	Address <u>1201 K St. Suite 1840</u>
City/State/Zip <u>San Francisco, CA 94104</u>	Phone <u>415-243-0555</u> FAX <u>415-882-7763</u>	City/State/Zip <u>Sacramento, CA 95814</u>	Phone <u>556-1215</u> FAX <u>556-1206</u>
E-mail:		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: To Build a 1900 S.F. Marketing Center.

OCCUPANT/TENANT: _____ VALUATION: \$ _____

FLOOD STATUS		S.C.A.T.	
JOB DESCRIPTION	BLDG <input type="checkbox"/> SHELL <input type="checkbox"/> APT <input type="checkbox"/> TI () <input type="checkbox"/> REM () <input type="checkbox"/> SW <input type="checkbox"/> FIRE <input type="checkbox"/> ADD <input type="checkbox"/> OTHER <input type="checkbox"/>		
INSPECTION DISCIPLINES	BLDG MECH PLUMB ELEC SITE FIRE		
# Stories	1 st flr Area	Total Area	Use Zone
<u>1</u>	<u>1</u>	<u>1900</u>	<u>Mb</u>
Occp Group	Const type	Fire Req. Y/N	Fed Code
<u>E</u>	<u>F</u>	<u>S</u>	<u>3</u>
		SPR	ALARM
		<u>S</u>	<u>PW</u>
			<u>UTIL</u>

COMMENTS: 7 SETS
Site Dev \$35,000

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

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 601 Capitol Mall	APN: 006-0151-005
DRPB AREA / PUD / SPD: Central Business District	ZONING: C-3-SPD
EXISTING LAND USE: Surface Parking Lot	
PROPOSED USE: New 969 sq ft office building. Office to be used as a sales and leasing office for future high rise office building.	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input checked="" type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR X PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input checked="" type="checkbox"/>	Application(s) IN PROGRESS: DR04-011 Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input type="checkbox"/>	Application(s) COMPLETED: Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input checked="" type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: Meets all height and area requirements. Use is allowable under land use requirements. No additional parking is required.	
DATE: 01/21/04	BY: Ashley Feeney

Certification of Compliance School District Development

Part I—To be completed by the APPLICANT

Owner's Name/Address LOT A Landholders, LLC.

Project Address 601 Capitol Mall

Parcel Number 006-0151-005 Lot No. _____

Subdivision Name _____ No. of Units 1

Applicant's Signature Mark S. Puf Title Project Const. Manager

Phone No. 916-556-1215 Date 4-9-04

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II—To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0400881

Building Type (check one) Residential Apartment/Condominium Commercial/Industrial

Square Feet of Chargeable Building Area 1000

Signature/Title Carol Christensen Bldg Tech Date 4/9/04

Part III—To be completed by the SCHOOL DISTRICT

School District SCUSD Certificate No. 9240

Exempt Comments _____

Residential/Apartment/etc. _____ Square ft. x \$ _____ = \$ _____

Commercial/Industrial 1000 Square ft. x \$.34 = \$ 340.00

Total fees collected..... = \$ 340.00

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature Joan E. DeLeo Date 4/12/04

White & Canary—School District • Pink—Building Department • Goldenrod—Applicant

CITY SANITATION DISTRICT 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

FRW
 4/12/04

SEWER IMPACT FEE
 PERMIT AND CALCULATION

APPLICATION NO:		BLDG PERMIT NO: <u>SWD2004-00395</u>	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
CITY OF SACRAMENTO PAID APR 12 2004		THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/> MF <input type="checkbox"/>	
CSD-1		COMMERCIAL USE	
SRCSD	<u>2,314</u>		
CONSTRUCTION		<u>SALES OFFICE</u>	
IN-LIEU		<u>1,000 S.F.</u>	
		<u>1 ESU MW</u>	
TOTAL FEE	<u>2,314</u>		
APN: <u>006-0151-005</u>			
DESCRIPTION/ SUBDIVISION		LOT:	
PROPERTY ADDRESS <u>1601 CAPITOL</u>			
OWNER <u>DAVID S TAYLOR INTEREST</u>			
MAILING ADDRESS			
CITY-STATE-ZIP		PHONE <u>916-556-1215</u>	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE <u>[Signature]</u>			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

Issue Date: 4/12/2004

Date Printed: 4/12/2004

Fee Paid Date Paid
 0.00
 0.00

RECEIPT

Test and Balance Analysis Report

**621 Capital Mall Sales Office
621 Capital Mall
Sacramento, CA**



FINAL AIR BALANCE CO., INC
License# 77985



FINAL AIR BALANCE CO., INC
Testing & Balancing – Industrial & Environmental Systems
 13020 Piper Hill Dr. Penn Valley, CA 95946
 Ph: (530) 432-2226 Fax: (530) 432-2901

**TEST AND BALANCE ANALYSIS REPORT
 FOR**

621 Capital Mall Sales Office
 621 Capital Mall
 Sacramento, CA

Architect:

Engineer: Frank M. Booth Design Build Co.
 4220 Douglas Blvd.
 Granite Bay, CA 95746
 (916) 784-0777

Contractor: Frank M. Booth Design Build Co.
 4220 Douglas Blvd
 Granite Bay, CA 95746
 (916) 784-0777

This is to certify that Final Air Balance Co., Inc. has balanced the systems described herein to their optimum performance capabilities, unless otherwise noted in the project summary.

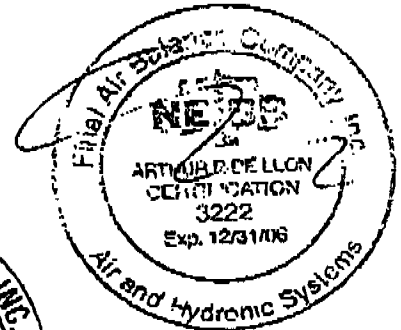
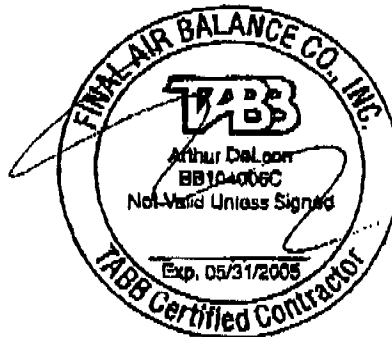
NEBB Certification: 3222

TABB Certification: BB104006C

Date : 9/8/04

FAB Job Number: 0409J520

Approved : Art De Leon



FINAL AIR BALANCE CO., INC
Testing & Balancing – Industrial & Environmental Systems
13020 Piper Hill Dr. Penn Valley, CA 95946
Ph: (530) 432-2228 Fax: (530) 432-2801

Performance Guarantee

Pursuant to the agreement between

FINAL AIR BALANCE CO., INC.

And

Frank M. Booth Design Build Co.

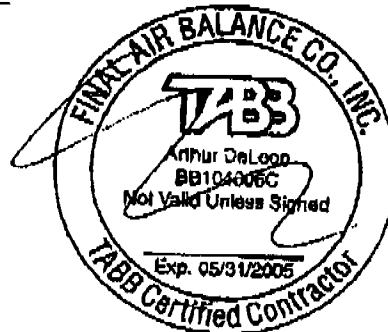
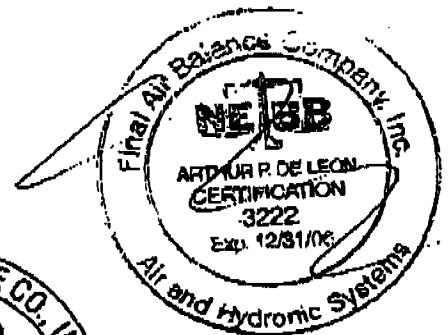
All systems shall be balanced in accordance with the plans and specifications and to the optimum performance capabilities of the equipment and design. Testing and balancing shall be done in accordance with the standards published by the National Environmental Balancing Bureau.

Air Balance performed by Final Air Balance Co., Inc. shall be guaranteed for one year. This applies to all equipment and air distribution per specifications on the Final Test & Analysis Report. Any problems will be investigated and corrected at no additional charge. This guarantee is void if the systems involved are changed in any way or adjusted by another person(s), facilities, or another air balance company.

Project Name: 621 Capital Mall Sales Office

Date: 9/8/04

By: Arthur De Leon



FINAL AIR BALANCE CO., INC
Testing & Balancing – Industrial & Environmental Systems
 13020 Piper Hill Dr. Penn Valley, CA 95946
 Ph: (530) 432-2226 Fax: (530) 432-2901

TEST AND BALANCE INSTRUMENTATION

The following *bold/italicized* instruments were used to successfully measure and set each device on this project. These instruments meet the National Environmental Balancing Bureau's minimum guidelines for accuracy and calibration.

Instrument	Manufacturer	Model	Serial number	Calibration Date
Air Data Multimeter	Shortridge	ADM860	M02540	12/23/03
Air Data Multimeter	Shortridge	ADM870	M00755	8/28/03
Amp/Volt Meter – Digital	Fluke	337 AC/DC True RMS	85910057	6/18/04
Amp/Volt Meter - Digital	Fluke	36 AC/DC True RMS	78203394	1/06/04
Amp/Volt Meter - Digital	Fluke	336 AC/DC True RMS	80904943	12/23/03
Amp/Volt Meter - Analog	A.W. Sperry	SPR300	A-CG6659	1/15/03
Duct Leakage Test Kit with Oriface Tube .1"	McGill Airflow	LTK-SCA 2"	48608 2310-S 2861-S	N/A 12/23/02 12/23/02
Flow Hood - Analog	Alnor	6461	3845/1735	12/23/03
Flow Hood - Digital	Shortridge	8400	M02540	12/23/03
Flow Hood - Digital	Shortridge	8400	M00755	8/28/03
Hydronic Manometer	Alnor	HM650	393	12/23/03
Manometer - Digital	Dwyer	475-1	N45N / 3209	12/23/03
Pitot Tube	Dwyer	18"	-----	N/A
Pitot Tube	Dwyer	36"	-----	N/A
Pitot Tube	Dwyer	48"	-----	N/A
Pitot Tube	Dwyer	60"	-----	N/A
Pressure Gauge – Digital	PSI-Tronix	PG2000CG	3208	1/6/04
Pressure Gauge – Digital	PSI-Tronix	PG2000CG	8024652-1	12/23/03
Rotating Vane Anemometer	Davis	LCA 6000	060896	12/23/03
Sound Level Meter	Extech	407764	020620718	8/21/02
Sound Level Calibrator	Extech	407766	P879365	8/21/02
Tachometer - Digital	Monarch	Tach-100	1354512	12/23/03
Tachometer - Digital	Monarch	Tach-100	1354509	11/26/02
Tachometer - Digital	Monarch	Tach-100	1355785	12/23/03
Tachometer - Digital	Ametek	1726	112191088	1/15/03
Thermo Anemometer - Digital	Dwyer	471-3	N-210	12/23/03
Thermometer - Non contact	Raytek	RAYST20	2039480201-0001	1/6/04
Thermometer - Thermocouple	Fluke	51-II	80390110	12/23/03



FINAL AIR BALANCE CO., INC
Testing & Balancing – Industrial & Environmental Systems

S U M M A R Y

The following conditions were noted during the process of balancing:

- 1) The systems meet the outside air quantity specified.



FINAL AIR BALANCE COMPANY, INC.

REVIEWED - NO EXCEPTIONS TAKEN

MAKE CORRECTIONS NOTED

REVISE AS NOTED AND RESUBMIT

Date: 09/08/04

Submittal was reviewed only for its conformance with the intent of the Design Development & Contract Documents.

Date: 9/10 By: [Signature]



AIR MOVING EQUIPMENT TEST SHEET

JOB NAME: 621 Capital Mall Sales Office

ADDRESS: 621 Capital Mall Sacramento, CA

SYSTEM	HP-1
Equipment Location	Roof
Area Served	Office Bldg.
Equipment Manufacturer	Carrier
Model	50JX-080-301AD
Serial number	2204G51165

	Specified	Actual	Specified	Actual
Total CFM - Fan	1950	1795 (1)		
Total CFM - Outlet	1950	1795		
R/A CFM	1750	1585		
O/A CFM	200	210		
Static Pressure - External	0.50"	0.96"		
Inlet Pressure	DNL	-0.87"	SEE NOTE #4	
Discharge Pressure	DNL	0.09"		
Fan RPM	3 speed	Hi speed		
Filters PD-Clean	DNL	0.66" (4)		

	Specified	Actual	Specified	Actual
Motor Manufacturer	DNL	(3)		
Motor HP / BHP	2.0 / DNL	(3)		
Phase	1	1		
Voltage	208 / 230	237		
Amperage	6.2 (2)	4.1		
Motor RPM	3 speed	Hi speed		
Motor Service Factor / Starter		(3)		
Frame / No Load Amps		(3)		

Motor Sheave & Bore	Direct Drive
Fan Sheave & Bore	Direct Drive
Number of Belts & Size	Direct Drive
Sheave Position, % closed	Direct Drive
C to C / In / Out	Direct Drive

Remarks:

- (1) Summation of Outlets; No valid location for duct traverse.
- (2) Rated ampens achieved from AC unit's nameplate.
- (3) All motor info covered by motor bracket.
- (4) Construction filter media installed.

REPLACE W/ FINAL FILTERS