

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0011926
Insp Area: I

Site Address: 2111 Q ST SAC
Parcel No: 007-0321-014

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

CONTRACTOR

OWNER
MCCLATCHY NEWSPAPERS
2111 Q ST
SACRAMENTO CA 95816

ARCHITECT

Nature of Work: INTERIOR REMODEL: CONSTRUCT 4 NEW OFFICES, UPGRADE EXISTING RESTROOMS TO COMPLY WITH CURRENT ADA.

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 _____ License Number _____ Date _____ Contractor 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.)

→ ~~X~~ 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 _____

X Date 10-13-00 Owner Signature John Kershaw

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.

X Date 10-13-00 Applicant/Agent Signature John Kershaw

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 _____ Exp Date _____

→ ~~X~~ (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.

X Date 10-13-00 Applicant Signature John Kershaw

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 3700 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 # 0011926

Insp. Area 1 C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS _____ Suite _____

PARCEL # _____

<p style="text-align: center;">CONTACT</p> <p>Name _____</p> <p>Street Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____

→ WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: REMODEL, GUTTING, ADDITION

OCCUPANT/TENANT: _____ VALUATION: \$ _____

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(<u>Y</u>)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>	SITE	FIRE		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y <u>N</u>		Fed Code	Vio. File	
<u>1</u>		<u>7600</u>		<u>B</u>	<u>II</u>	SPR	ALARM	<u>15</u>	[H]	[Quad]
<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>PW</u>	<u>UTIL</u>	
<u>130T</u>	<u>130T</u>	<u>131K4</u>	<u>131K4</u>	<u>131K4</u>						

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

**RAGLEN
SYSTEM
BALANCE, INC.**

DATE 12/15/00
PAGE 1
UNIT AC-1

FAN TEST SHEET

AREA SERVED NEW MEDIA

INSTALLED EQUIPMENT

MOTOR NAMEPLATE DATA (3)

MFG	GE		
HP	3/4	V	115
PH	1	SF	TP
FLA	13.8	RPM	1055
MOTOR FRAME #	NL		

SHEAVE DATA: MOTOR

DIA		SHAFT	
ADJ.P.D.		FIXED	
BELT CENTERLINE			

FAN NAMEPLATE DATA

MFG	LENOX
MODEL	G12QSE-100"
TYPE	-
SIZE	-
SERIAL #	NL

SHEAVE DATA: FAN

DIA		SHAFT	
BELTS			
DIRECT DRIVE	<input checked="" type="checkbox"/>		

SCHEDULED/SUBMITTED DATA

FAN CFM	3,000
TSE/ESP	
RPM	
BHP	
R.A.	
O.A. CFM	450

DESIGN OUTLET/INLET

TOTAL CFM	3000
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TESTED OUTLET/INLET

TOTAL CFM	3165
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TRAVERSE TOTAL

TOTAL CFM	NT
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MOTOR TEST DATA (3)

VOLTS	120
AMPS	12.9 / 13.0
RPM	00
BHP	-
SPEED SET.	HIGH

FAN TEST DATA

RPM	00
SP	.40 / .40
SP+	1
TSE/ESP	-
FILTER SP	.35 / .35 (2)
CFM TOTAL	3165
CFM RA	2688
CFM OA MIN.	477

ROOM NO.	OUTLET NO.	CODE	SIZE	EFFECTIVE AREA	REQUIRED		TESTED		
					FPM VEL	CFM	FPM VEL	CFM	
	1	CO	9'0"			250	265		260
	2					NL	300	(1)	300
	3					1	160	(1)	250
	4					150	160		320
	5					1	160		260
	6					275	280		270
	7					250	305		270
	8					1	250		300
	9					1	265		320
	10					1	265		

Remarks:

(1) CFM values were not listed. At the owners direction we set # 2 at 300 cfm because it is a conference room. We left some diffusers high on the ~~left~~ side of the building to handle heat loads on high temperature days.
(2) Filters were leaked halfway between clean & dirty.
(3) Data is for two motors.

**RAGLEN
SYSTEM
BALANCE, INC.**

DATE 12/5/00
PAGE 2
UNIT AC-1

DIFFUSER AND GRILLE TEST SHEET

Room No.	Outlet No.	Code	Size	Effective Area	Required		Tested		
					FPM Vel	CFM	FPM Vel	CFM	
	11	CD	9.4			25	255	220	
	12						250	300	
	13						250	290	
			TOTAL SUPPLY			3000	3165	3390	313
	14	CR	22.2	156	817	1273	998	1557	
	15						725	1131	
			TOTAL RETURN			2550	2688		

Remarks:

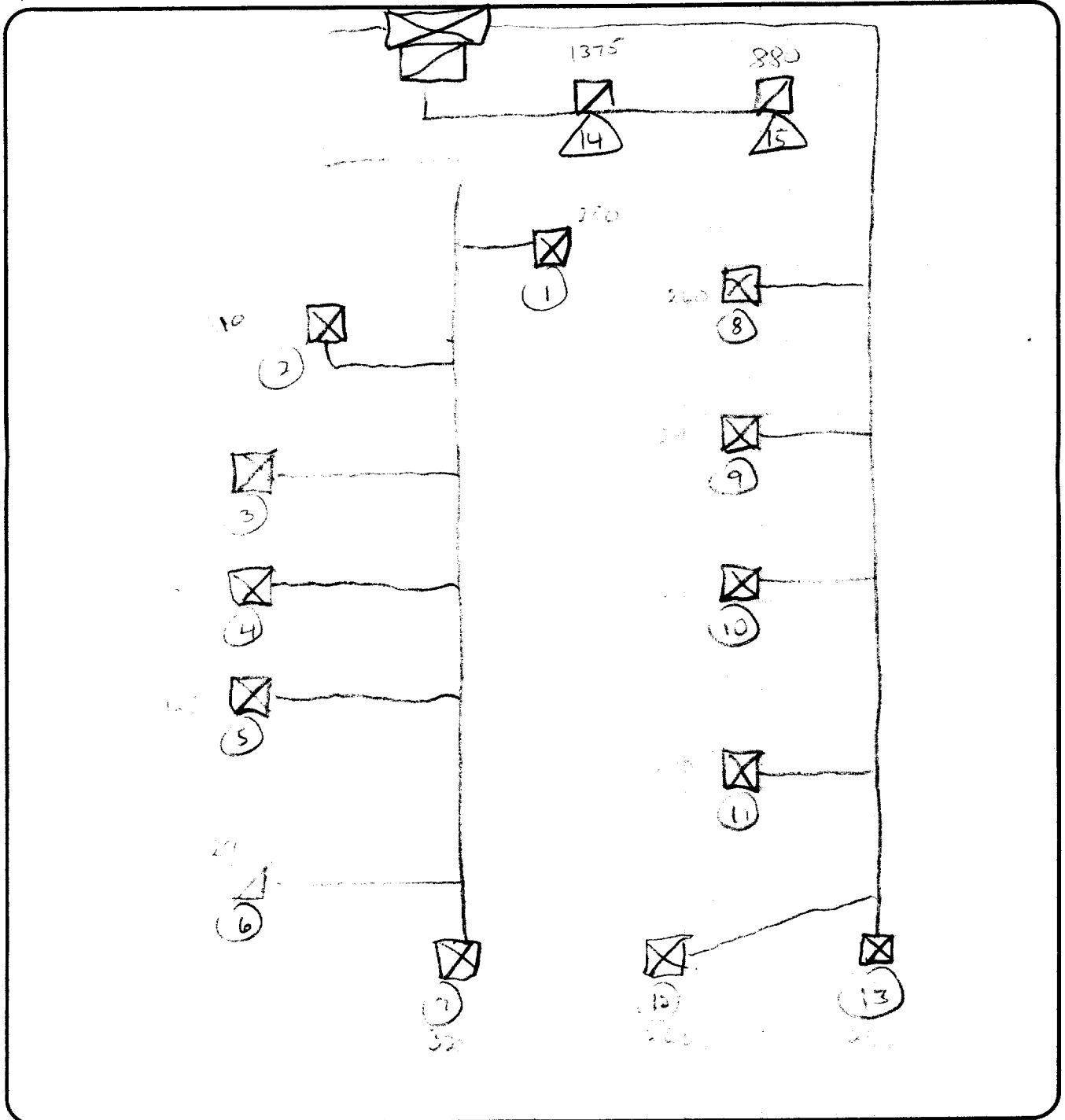
CAL LIC #434901

1121 UNIVERSITY TERRACE
RENO, NEVADA 89503
(702) 747-0100



JOB SAL BEE - NEW MEDIA BY _____ Please Reply Date _____

Sheet MP 2.1



REMARKS _____