

CITY OF SACRAMENTO

Permit No: 0503639

1231 I Street, Sacramento, CA 95814

Insp Area: 1
Thos Bros: 297F5

Site Address: 2810 O ST SAC
Parcel No: 007-0274-005

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

CONTRACTOR
OWNER BUILDER

OWNER
WORDLOW ANTHONY P & MARILYN
1253 MONTE VISTA WY
SACRAMENTO, CA 95831

ARCHITECT
DAVID M. SOLOMON
2811 O ST
SACRAMENTO, CA. 95816-6016

Nature of Work: INDUSTRIAL WAREHOUSE TO OFFICE TI OF 4,000 SF

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 0 _____ 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.)

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 July 8, 2005 Owner Signature [Signature] **PAID** **SACRAMENTO** **JUL 08 2005** **DAVID M. SOLOMON** **REGIONAL TRANSIT**

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 a 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 July 8, 2005 Applicant/Agent Signature [Signature] **DAVID M. SOLOMON** **REGIONAL TRANSIT**

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 _____

(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.

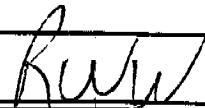
X Date July 8, 2005 Applicant Signature [Signature] **DAVID M. SOLOMON** **REGIONAL TRANSIT**

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.

0503639

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 2810 O Street	APN: 007-0274-005
DRPB AREA / PUD / SPD: Alhambra Corridor SPD	ZONING: C-2-SPD
EXISTING LAND USE: Former Print Shop	
PROPOSED USE: Office for Regional Transit.	
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 type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: 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 checked="" 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 type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input 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: Parcel accessed for retail or commercial. No real change that would trigger additional parking requirements apparent. Alhambra Special Planning District guidelines do not appear to require retail frontage along this portion of O street.	
DATE: 17 March 2005	BY: Robert W. Williams 

2810 032

0503639

HVAC SYSTEM REPORT

DATE: 4-19-07

FAN NAMEPLATE DATA	FAN	DESIGN	ACTUAL	PROJECT
MANUFACTURER	TOTAL CFM	<u>1600</u>	<u>1572</u>	A/C 1
MODEL	RETURN AIR CFM	<u>1410</u>	<u>1352</u>	
TYPE	OUTSIDE AIR CFM	<u>450</u>	<u>8477</u>	
SIZE	FAN SPEED			
SERIAL NUMBER	STATIC PRESSURE +			
FAN PULLEY DATA	STATIC PRESSURE -			
DIAMETER	TOTAL STATIC PRESSURE			
SHAFT	FILTER STATIC PRESSURE			
ADJ/FIXED	MOTOR			
MOTOR NAMEPLATE DATA	AMPS			
MANUFACTURER	VOLTS			
VOLTS/PHASE	HORSEPOWER			
HORSEPOWER	MOTOR SPEED			
FULL LOADS AMPS				
RPM				
MOTOR PULLEY DATA				READINGS BY <i>Scott Kendrick</i> <i>Clarke + Rush</i> <i>Mech</i>
DIAMETER				
SHAFT				
ADJ/FIXED				
BELT NO. & SIZE				
CONDENSING UNIT DATA				
MANUFACTURER				
MODEL				
TONNAGE				
SERIAL NUMBER				

JOB NUMBER

DIFFUSERS AND GRILLS

Room	Outlet Number	Code	Size	Required CFM	Test 1	Final CFM	% Of Design
<u>Office 1</u>	<u>S1</u>		<u>8</u>	<u>200</u>	<u>210</u>	<u>210</u>	
	<u>R1</u>		<u>8</u>	<u>200</u>	<u>195</u>	<u>195</u>	
<u>Office 2</u>	<u>S1</u>		<u>9</u>	<u>250</u>	<u>300</u>	<u>245</u>	
	<u>R1</u>		<u>10</u>	<u>250</u>	<u>245</u>	<u>245</u>	
<u>Office 3</u>	<u>S1</u>		<u>8</u>	<u>160</u>	<u>100</u>	<u>165</u>	
	<u>R1</u>		<u>8</u>	<u>160</u>	<u>165</u>	<u>165</u>	
<u>Main</u>	<u>S1</u>		<u>8</u>	<u>250</u>	<u>245</u>	<u>247</u>	
	<u>S2</u>		<u>8</u>	<u>250</u>	<u>255</u>	<u>255</u>	
	<u>S3</u>		<u>8</u>	<u>245</u>	<u>240</u>	<u>244</u>	
	<u>S4</u>		<u>8</u>	<u>245</u>	<u>240</u>	<u>242</u>	
	<u>R1</u>		<u>12</u>	<u>800</u>	<u>875</u>	<u>795</u>	

REMARKS:

2003 NCI, INC.

Clarke & Rush Mechanical, Inc.

HVAC SYSTEM REPORT

DATE: 4-19-07

FAN NAMEPLATE DATA

MANUFACTURER
 MODEL
 TYPE
 SIZE
 SERIAL NUMBER
FAN PULLEY DATA
 DIAMETER
 SHAFT
 ADJ/FIXED
MOTOR NAMEPLATE DATA
 MANUFACTURER
 VOLTS/PHASE
 HORSEPOWER
 FULL LOADS AMPS
 RPM
MOTOR PULLEY DATA
 DIAMETER
 SHAFT
 ADJ/FIXED
 BELT NO. & SIZE
CONDENSING UNIT DATA
 MANUFACTURER *FHEEM*
 MODEL *RR66 05N363AR*
 TONNAGE *3*
 SERIAL NUMBER *AYA4471*

FAN	DESIGN	ACTUAL
TOTAL CFM	1400	1405
RETURN AIR CFM	1200	1230
OUTSIDE AIR CFM	290	280
FAN SPEED		
STATIC PRESSURE +		
STATIC PRESSURE -		
TOTAL STATIC PRESSURE		
FILTER STATIC PRESSURE		
MOTOR		
AMPS		
VOLTS		
HORSEPOWER		
MOTOR SPEED		

PROJECT

SYSTEM

A/C 2

READINGS BY

*Scott Kendrick
Clarke & Rush*

JOB NUMBER

DIFFUSERS AND GRILLS

Room	Outlet Number	Code	Size	Required CFM	Test 1	Final CFM	% Of Design
<i>Main</i>	<i>S1</i>		<i>12</i>	<i>350</i>	<i>360</i>	<i>360</i>	
	<i>S2</i>		<i>12</i>	<i>350</i>	<i>355</i>	<i>355</i>	
	<i>S3</i>		<i>12</i>	<i>350</i>	<i>350</i>	<i>350</i>	
	<i>S4</i>		<i>12</i>	<i>350</i>	<i>340</i>	<i>340</i>	
	<i>R1</i>		<i>16</i>	<i>1200</i>	<i>1230</i>	<i>1230</i>	

REMARKS:

HVAC SYSTEM REPORT

DATE: 4-19-07

FAN NAMEPLATE DATA

MANUFACTURER
 MODEL
 TYPE
 SIZE
 SERIAL NUMBER
FAN PULLEY DATA
 DIAMETER
 SHAFT
 ADJ/FIXED
MOTOR NAMEPLATE DATA
 MANUFACTURER
 VOLTS/PHASE
 HORSEPOWER
 FULL LOADS AMPS
 RPM
MOTOR PULLEY DATA
 DIAMETER
 SHAFT
 ADJ/FIXED
 BELT NO. & SIZE
CONDENSING UNIT DATA
 MANUFACTURER CARRIER
 MODEL 50HSQ-W
 TONNAGE 3
 SERIAL NUMBER 3405 646474

FAN	DESIGN	ACTUAL
TOTAL CFM	<u>900</u>	<u>932</u>
RETURN AIR CFM	<u>640</u>	<u>657</u>
OUTSIDE AIR CFM	<u>260</u>	<u>278</u>
FAN SPEED		
STATIC PRESSURE +		
STATIC PRESSURE -		
TOTAL STATIC PRESSURE		
FILTER STATIC PRESSURE		
MOTOR		
AMPS		
VOLTS		
HORSEPOWER		
MOTOR SPEED		

PROJECT

SYSTEM
A/C 3

READINGS BY
Scott Kardouk
Charles Rusk
Mech

JOB NUMBER

DIFFUSERS AND GRILLS

Room	Outlet Number	Code	Size	Required CFM	Test 1	Final CFM	% Of Design
<u>Break Room</u>	<u>S1</u>		<u>9</u>	<u>250</u>	<u>300</u>	<u>255</u>	
	<u>S2</u>		<u>9</u>	<u>250</u>	<u>245</u>	<u>255</u>	
	<u>R1</u>		<u>10</u>	<u>500</u>	<u>600</u>	<u>510</u>	
<u>Restroom</u>	<u>S1</u>		<u>7</u>	<u>130</u>	<u>120</u>	<u>135</u>	
	<u>S2</u>		<u>7</u>	<u>130</u>	<u>160</u>	<u>140</u>	
	<u>S3</u>		<u>7</u>	<u>140</u>	<u>160</u>	<u>152</u>	
	<u>R1</u>		<u>7</u>	<u>140</u>	<u>180</u>	<u>147</u>	

REMARKS:



Summary Report #1

August 22, 2005

Job No: J3553
Job Name: 2810 O St.
Sacramento, CA

Permit #: N/A

0503439

Sacramento Regional Transit District
Attn: Mike Ely
1400 29th St.
Sacramento, CA 95812

5/7/07
Finalized
B.P.

August 17, 2005

Brian Arnold reported to Lauren with RT at the job site. Observed placing of epoxy set bolts for roof ledger lines A/2-3, A/3-4, and C/1-2. Epoxy: material Hilti HY-150, hole depth 4", diameter 5/8". Checked holes for cleanliness.

Work observed was, to the best of Brian's knowledge, in conformance with approved plans, specifications and applicable standards of workmanship.

August 19, 2005

Brian Arnold reported to Lauren with RT at the job site. Observed placing of epoxy set bolts for roof ledger lines C/2-3 and C/3-4. Epoxy: material Hilti HY-20, hole depth 6", diameter 3/4". Checked holes for cleanliness.

Work observed was, to the best of Brian's knowledge, in conformance with approved plans, specifications and applicable standards of workmanship.

Laboratory tests results are enclosed if testing was done during the period covered by this report.

Limitations: These inspections were performed in accordance with requirements, but please note this report shall not be relied upon by others, as acceptance or guarantee of the work. Even with diligent inspection techniques, the contractor is solely liable for defects or failures to adhere to the code.

Bradford L. Quon (for reports only)

8/26/05

Reviewed by Bradford L. Quon
Operations Manager

Date

Technical Contact: Patrick Greenan, P.E.
Administrative Contact: Brenda Harris (bharris@cts-l.com)

CC: Building Dept.-City of Sacramento

- | | | |
|--|------------------------|----------------------|
| 1233 East Beamer Street, Unit B, Woodland, CA 95776 | • Phone (530) 666-4774 | • Fax (530) 666-4749 |
| 2174 Rheem Drive, Suite A, Pleasanton, CA 94588 | • Phone (925) 462-5151 | • Fax (925) 462-5183 |
| One Embarcadero Center, Suite 535, San Francisco, CA 94111 | • Phone (415) 438-2357 | • Fax (415) 334-4747 |
| 246 30 th St., Suite 101, Oakland, CA 94601 | • Phone (510) 444-4747 | • Fax (510) 835-1825 |

PD# 03/17/2005 U41 VGR
 DATE: 03/17/2005 1:37PM 00003236
 PMT#: 0503639 SHT COM BLDG PT
 0205PLAN CK-COMM'L
 \$977.06

OR COMMERCIAL BUILDING PERMIT

PC CHANGE

\$977.06
\$0.00

ACTIVITY # 0503639	Insp. Area
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2810 O STREET, SACRAMENTO, CA 95816 Suite _____
 PARCEL # 007-0274-005

CONTACT Name <u>EDUARDO OROZCO</u> Street Address <u>2811 O STREET</u> City/State/Zip <u>SACRAMENTO CA, 95816</u> Phone <u>916 321-3846</u> FAX <u>916 454 6016</u> E-mail: <u>eorozco@sacrt.com</u>		LICENSED CONTRACTOR Lic No. # _____ Name <u>TBD</u> Address _____ City/State/Zip <u>Owner/Builder</u> Phone _____ FAX _____ E-mail: _____	
ARCHITECT/ENGINEER Name <u>DAVID SOLOMON</u> Address <u>2811 O STREET</u> City/State/Zip <u>SACRAMENTO CA 95816</u> Phone <u>916 557-4682</u> FAX <u>916 454-6016</u> E-mail: <u>dsolomon@sacrt.com</u>		OWNER Name <u>LYNN CAIN</u> Address <u>1400 29TH ST</u> City/State/Zip <u>SACRAMENTO, CA 95812</u> Phone <u>916 321-5375</u> FAX <u>916 557 4541</u> E-mail: <u>lcain@sacrt.com</u>	

Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 WORKER'S COMPENSATION POLICY # 3757145 EXPIRATION DATE: 7/05

NATURE OF WORK IN DETAIL: TENANT IMPROVEMENTS TO AN EXISTING 4000 SQUARE FOOT SINGLE STORY MASONRY BUILDING INCLUDING CONVERSION FROM INDUSTRIAL TO OFFICE USE. UPGRADING TO A NEW: ADA ACCESS & RESTROOMS, PLUMBING HVAC REGISTERS, DUCTWORK & FANS & LIGHTING.

OCCUPANT/TENANT: SACRAMENTO REGIONAL TRANSIT DISTRICT VALUATION: \$ 120,000

LOAD STATUS:		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHELL	APT	TIC	REM	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES	BEDG	MECH	PLUMB	ELEC	SITE	FIRE			
Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y <input checked="" type="checkbox"/>	Fed. Code	Vio. File	
		<u>4000</u>		<u>B</u>	<u>3-1hr</u>	<input checked="" type="checkbox"/> SPR <input type="checkbox"/> 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>EW</u>	<u>UTIL</u>

REMARKS: Converting paint shop to office space

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed