

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0014964
Insp Area: 1

Site Address: 2015 J ST SAC
Parcel No: 007-0016-019

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

CONTRACTOR

OWNER
KRAMBS MICHAEL
2115 J ST STE 210
SACRAMENTO CA 95816

ARCHITECT

Nature of Work: INTERIOR OFFICE REMODEL 2000 SQ FT

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.)

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.

PAID
CITY OF SACRAMENTO

I am exempt under Sec. _____ B & PC for this reason: _____

Date 12/21/00 Owner Signature [Signature] DEC 21 2000

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation, that the applicant has verified all measurements and locations shown on the application or accompanying drawings and that the improvements 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.

NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES

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 12/21/00 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 _____ 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.

Date 12/21/00 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.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

123 J Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0014964 Insp. Area 1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2015 J Street Suite 205
 PARCEL # 057-0016-019

| | |
|--|---|
| <p style="text-align: center;">CONTACT</p> Name <u>TED JOHN'S</u> Street Address <u>2115 J St Ste 210</u> City/State/Zip <u>SACRAMENTO CA 95816</u> Phone <u>444-0599</u> FAX <u>444-9070</u> E-mail: _____ | <p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____ |
| <p style="text-align: center;">ARCHITECT/ENGINEER</p> Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____ | <p style="text-align: center;">OWNER</p> Name <u>MICHAEL KRAMBS</u> Address <u>2115 J St Ste 210</u> City/State/Zip <u>SACRAMENTO CA 95816</u> Phone <u>444-0599</u> FAX <u>444-9070</u> 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: Interior Re-model, Office

OCCUPANT/TENANT: BEULDEN & ASSOCIATES VALUATION: \$ 24,000

| | | | | | | | | | | | |
|------------------------|--------------|-------------|-------------|--------------|-------------|---|-------------|-----------|--------|-----|--|
| FLOOD STATUS: | | S.C.A.T. | | | | | | | | | |
| JOB DESCRIPTION | | BLDG | SHELL | APT | TI() | REM(<input checked="" type="checkbox"/>) | SW | FIRE | ADD | OTH | |
| INSPECTION DISCIPLINES | | <u>BLDG</u> | <u>MECH</u> | <u>PLUMB</u> | <u>ELEC</u> | <u>SITE</u> | <u>FIRE</u> | | | | |
| # Stories | 1st flr Area | Total Area | Use Zone | Occp Group | Const type | Fire Req <input checked="" type="checkbox"/> Y <input type="checkbox"/> N | Fed Code | Vio. File | | | |
| <u>2</u> | | <u>2000</u> | | | <u>V-N</u> | <u>SPR</u> <u>ALARM</u> | <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> | PW | UTIL | | |
| <u>NONE</u> | <u>1344</u> | <u>1344</u> | <u>1344</u> | <u>1344</u> | <u>1344</u> | | | | | | |

COMMENTS: Red card + envelope

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

CITY OF SACRAMENTO
 BUILDING INSPECTION DIVISION
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1 Business Name: Boulder Associates Phone: _____
 Site Address: 2015 J St Ste 205 Suite: _____
(Street) (Zip)
 Business Owner/Representative: Don Meyer Phone: _____
 Nature of Business: Architects
 Property Owner: Michael Krumba Phone: 444-0599
 Address: 2115 J St Ste 210 Suite: _____
(Street) (City) (State) (Zip)
Sacramento ca 95816

2 Are you developing an undetermined tenant space? Yes ___ No Is this permit for a shell building? Yes ___ No
 Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.
 3 Does/Will your business generate hazardous waste? Yes ___ No
 4 Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.
 5 Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No ___
 6 Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No ___
 7 Is/Will your business be located within 1,000 feet of a school? Yes ___ No ___

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.
 8 Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No ___

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: TED JOHNS
(Print)
[Signature] 12/21/00
(Signature) (Date)

| | |
|--|--|
| BID Use Only: Plan Ck# <u>001496A</u> Permit # <u>001496A</u> OK to issue prmt? <u>[Signature]</u> <u>12/21/00</u> F.D. Appr Req'd? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <small>init date</small> | |
| Hold on Certificate of Occupancy? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Fire Dept. Use Only: OK to issue permit? init ___ date ___ OK to issue Certificate of Occupancy? init ___ date ___ | |



EXHIBIT 1

I have read and am familiar with the contents of City's standard Owner-Builder Notification and Owner-Builder Verification, as required by California Health and Safety Code Section 19830 and 19831. I authorize my agent(s) TED JONES to sign the Owner-Builder Verification on my behalf.

Signature Michael Krambs
Print Name MICHAEL KRAMBS
Address 2115 J St, Ste 210
SACRAMENTO 95816
Telephone 444-0599

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) _____
2. I (have/have not) _____ signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name IBI Address _____
City _____ Telephone _____
Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

| Name | Address | Phone | Type of work |
|-------|---------|-------|--------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Signed Neil Jones 12/21/00

Job Address 2015 N ST

Permit No. 0014964

HVAC SYSTEM REPORT

DATE: 3/2/01

NAMEPLATE DATA:

MANUFACTURE RUUD
 MODEL URMA-030JK04
 TYPE Gas-Electric
 SIZE 2.5-ton 40K input
 SERIAL NUMBER F4499-12566

FAN SHEAVE DATA:

DIAMETER
 SHAFT
 ADJ/FIXED Direct drive

MOTOR NAMEPLATE DATA:

MANUFACTURE
 VOLTS/PHASE
 HORSEPOWER 1/4
 FULL LOAD AMPS 2.8
 PRM 1125

MOTOR SHEAVE DATA:

DIAMETER
 SHAFT
 ADJ/FIXED direct drive

CONDENSING UNIT DATA:

MANUFACTURE (Package)
 MODEL
 TONNAGE 2.5 ton
 SERIAL NUMBER

| FAN: | DESIGN | ACTUAL |
|---------------------|--------|--------|
| TOTAL CFM | 1000 | 1184 |
| RETURN AIR CFM | 920 | 882 |
| OUTSIDE AIR CFM | 80 | 302 |
| FAN RPM | | |
| STATIC PRESSURE+ | 0.35 | 0.4 |
| STATIC PRESSURE - | 0.15 | 0.15 |
| TOTAL STATIC PRES. | 0.5 | 0.55 |
| FILTER STATIC PRES. | | |
| MOTOR: | | |
| AMPERES | | |
| VOLTS | | |
| HORSEPOWER | 1/4 | 1/4 |
| RPM | | |

FIELD FORMS AVAILABLE:

- _____ DUCT TRAVERSE
- _____ SYSTEM DIAGRAM
- _____ EXHAUST FAN REPORT
- _____ PULLY CALCULATIONS

COOL MODE HEAT MODE

TEMP ENT 78
 TEMP LVG 58
 DROP/RISE 20

DIFFUSERS AND GRILLES

| ROOM | OUTLET | CODE | SIZE | REQ CFM | TEST 1 | TEST 2 | FINAL CFM |
|------|--------|------|------|---------------|--------|--------|-----------|
| | | | | Supply | | | |
| | 1 | | | 200 | 234 | 210 | 210 |
| | 2 | | | 170 | 252 | 264 | 264 |
| | 3 | | | 200 | 233 | 233 | 233 |
| | 4 | | | 170 | 194 | 227 | 227 |
| | 5 | | | 260 | 264 | 264 | 250 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total | | | 1000 | 1177 | 1198 | 1184 |
| | | | | Return | | | |
| | 1 | | | 660 | 545 | 627 | 627 |
| | 2 | | | 260 | 277 | 240 | 255 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total | | | 920 | 822 | 867 | 882 |

PROJECT:

RKDevelopment
 2015 Jay Street
 Sacramento, 95816

SYSTEM/ZONE:
 BOULDER

AC #201

Clarke & Rush
 Mechanical

BALANCE TECH:
 Russ: 997-1263

~~7/26/00~~
 2/17/01

HVAC SYSTEM REPORT

DATE: 3/2/01

NAMEPLATE DATA:

MANUFACTURE RUUD
MODEL URMA-030JK04
TYPE Gas-Electric
SIZE 2.5-ton 40K input
SERIAL NUMBER (NOT READ)

FAN SHEAVE DATA:

DIAMETER
SHAFT
ADJ/FIXED Direct drive

MOTOR NAMEPLATE DATA:

MANUFACTURE
VOLTS/PHASE
HORSEPOWER 1/4
FULL LOAD AMPS 2.8
PRM 1125

MOTOR SHEAVE DATA:

DIAMETER
SHAFT
ADJ/FIXED direct drive

CONDENSING UNIT DATA:

MANUFACTURE (Package)
MODEL
TONNAGE 2.5 ton
SERIAL NUMBER

| FAN: | DESIGN | ACTUAL |
|---------------------|--------|--------|
| TOTAL CFM | 1000 | 1087 |
| RETURN AIR CFM | 820 | 910 |
| OUTSIDE AIR CFM | 180 | 177 |
| FAN RPM | | |
| STATIC PRESSURE+ | 0.35 | 0.35 |
| STATIC PRESSURE - | 0.15 | 0.1 |
| TOTAL STATIC PRES. | 0.5 | 0.45 |
| FILTER STATIC PRES. | | |
| MOTOR: | | |
| AMPERES | | |
| VOLTS | | |
| HORSEPOWER | 1/4 | 1/4 |
| RPM | | |

FIELD FORMS AVAILABLE:

- DUCT TRAVERSE
- SYSTEM DIAGRAM
- EXHAUST FAN REPORT
- PULLY CALCULATIONS

COOL MODE HEAT MODE

TEMP ENT 78
TEMP LVG 58
DROP/RISE 20

DIFFUSERS AND GRILLES

| ROOM | OUTLET | CODE | SIZE | REQ CFM | TEST 1 | TEST 2 | FINAL CFM |
|------|--------|------|------|---------------|--------|--------|-----------|
| | | | | Supply | | | |
| | 1 | | 8" | 170 | 210 | 207 | 207 |
| | 2 | | 8" | 170 | 185 | 188 | 188 |
| | 3 | | 7" | 150 | 160 | 162 | 162 |
| | 4 | | 7" | 160 | 175 | 170 | 170 |
| | 5 | | 7" | 140 | 175 | 150 | 130 |
| | 6 | | 8" | 210 | 230 | 242 | 230 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total | | | 1000 | 1135 | 1119 | 1087 |
| | | | | Return | | | |
| | 1 | | | 310 | 445 | 430 | 410 |
| | 2 | | | 300 | 340 | 320 | 310 |
| | | | | 210 | 230 | 200 | 190 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total | | | 820 | 1015 | 950 | 910 |

PROJECT:
RKDevelopment
2015 Jay Street
Sacramento, 95816

SYSTEM/ZONE:
BOULDER
AC #202

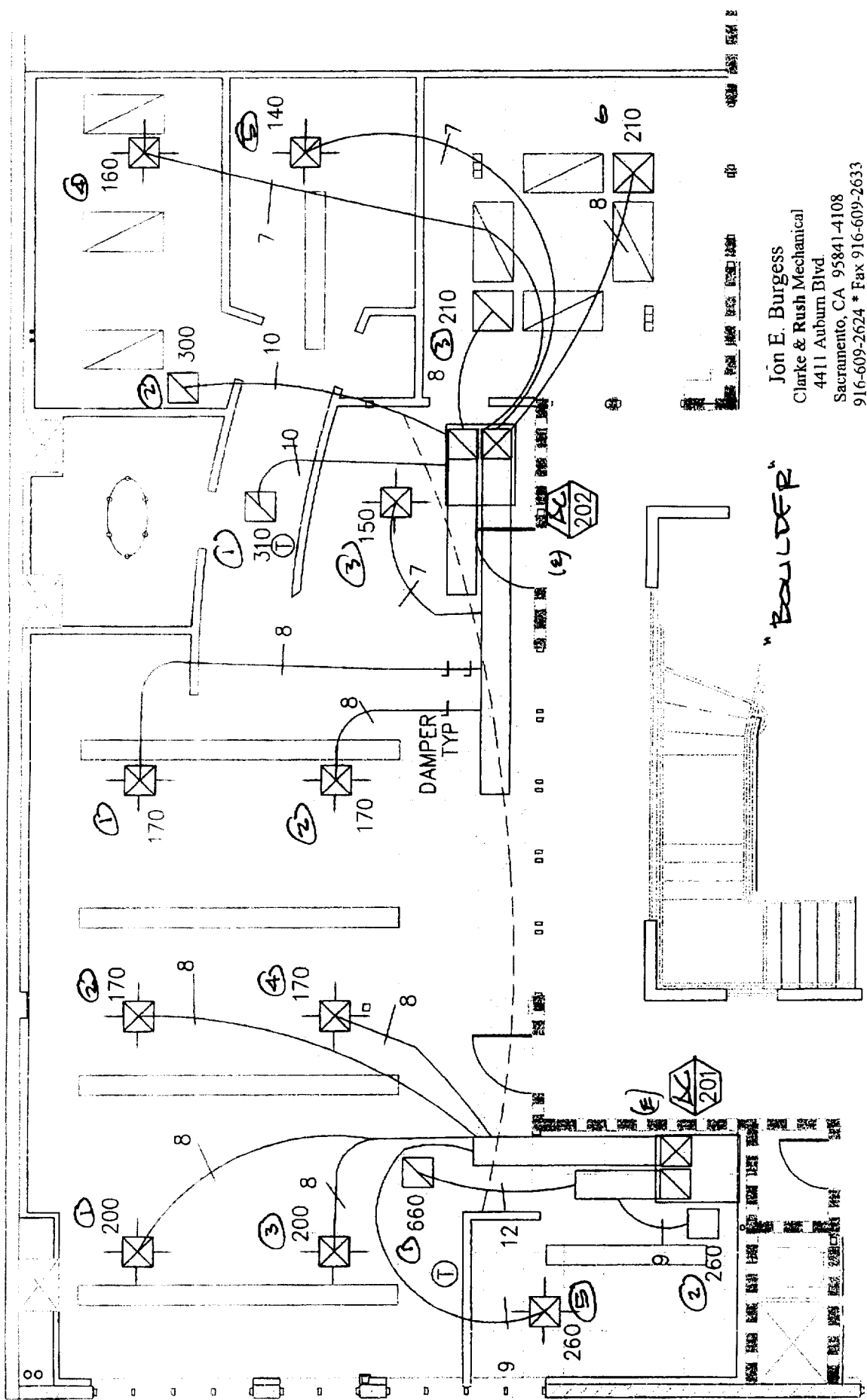
Clarke & Rush
Mechanical

BALANCE TECH:
Russ: 997-1263
~~7/26/00~~
2/17/01

1.10 PM, 3/2/01, 2015 #202

#E50917

Both 2.5-ton (min) 2.5-ton (min) for office



"BOULDER"

Jon E. Burgess
 Clarke & Rush Mechanical
 4411 Auburn Blvd.
 Sacramento, CA 95841-4108
 916-609-2624 * Fax 916-609-2633
 Lic. # 608005 jeburgess@jps.net

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 5-21-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2015 J ST

Has been conducted by Inspector

Robles

On

2-28-01

00-14964
Permit Number

2000
Square Footage

Remodel - CK Sprinklers
Type of Inspection

They system is acceptable by this department.

Ross L. Woodman
By: **Ross L. Woodman,**
Fire Prevention Officer II

00-523
F.D. Reference Number

✓

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 2015 J ST #205 Permit No. 0014964

Building Use: OFFICE Occupancy: B

Building Owner: MICHAEL KRAMBS Construction Type: _____

Owner Address: 2115 J ST #210 SACRAMENTO Sprinkled? [] Yes [] No

Portion of Building Occupied: SUITE 205 Area: 2000 Sq. Ft.

5/29/01 Nicholas A. Richardson **DENNIS RICHARDSON**
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By: DRP,WJR,JZB,RR]

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