

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0603230

Insp Area: 4

Thos Bros: 298B1

Site Address: 1689 ARDEN WY SAC St: #2176

Parcel No: 277-0160-071

SUITE 2176

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

WELLS CONSTRUCTION INC
503 GIUSEPPE CT #8
ROSEVILLE, CA 95678

OWNER

ARDEN FAIR ASSOCIATES
3875 TAYLOR RD #B
LOOMIS, CA 95670

ARCHITECT

Nature of Work: INTERIOR REMODEL EXISTING RETAIL SPACE FOR "UP AGAINST THE WALL", SPACE 2176

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 619655

Date 5-08-06

Contractor Signature

Rebecca J. Money

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date

May 8, 2006

Applicant/Agent Signature

Rebecca J. Money

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury that 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 No. NEW 431-000287-04

Exp Date 10/01/2006

(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

May 8, 2006

Applicant Signature

Rebecca J. Money

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.

PAID
CITY OF SACRAMENTO
MAY 8 2006
NEW CITY HALL
ALL

CIRCO System Balance, Inc.

Contractor License #G24117

AIR - HYDRONIC - TEMPERATURE - SOUND - SYSTEM SURVEY
4100 FLORIN-PERKINS RD. SACRAMENTO, CA. 95826 (916) 387-5100 FAX (916) 387-5101

AUGUST 12, 2006

AIR BALANCE REPORT
CIRCO # 606-9785-B1

PROJECT: UP AGAINST THE WALL
LOCATION: SPACE # 2176
ARDEN FAIR MALL
SACRAMENTO, CALIFORNIA
ARCHITECT: CORTLAND MORGAN
CONTRACTOR: SMITH HEATING & AIR CONDITIONING, INC.
DESCRIPTION: PERFORM AIR BALANCE PROCEDURES FOR VAV-1
AND ASSOCIATED AIR DISTRIBUTION DEVICES.

*Image
Permit # 0603230*

REMARKS

SUPPLY & EXHAUST AIRFLOWS WERE MEASURED USING AN ALNOR FLOWHOOD,
AT COMPLETION OF BALANCE PROCEDURES THE SPACE PRESSURE RELETIVE TO
MALL OPEN ATRIUM AREA WAS MEASURED AT POSITIVE 0.018 IN WC.

CD = CEILING DIFFUSER
CE = CEILING EXHAUST

ADDITIONAL NOTES MAY BE FOUND ON INDIVIDUAL TEST SHEETS.

TESTS PERFORMED BY: *Matt Murphy*
MATT MURPHY

CIRCO System Balance, Inc.

AIR - HYDRONIC - TEMPERATURE - SOUND - SYSTEM SURVEY

4100 FLORIN PERKINS RD

SACRAMENTO, CA 95826

(916) 387-5100

FLOWHOOD CALIBRATION CERTIFICATE

CFM RANGE	CFM STANDARD FLOW	CFM TEST READING
800/2000	1690	1690
	1450	1450
	1230	1230
	900	900
400/1000	900	890
	830	825
	750	750
	610	610
	440	435
0/500	440	440
	390	390
	340	335
	230	230
	180	175
	120	120

SERIAL NO 10375DATED TESTED: 6-26-06

TESTED BY:

MGM

THE ABOVE TEST DATA WAS ESTABLISHED ON OUR IN-HOUSE FLOW CALIBRATOR. THE CALIBRATOR OF THIS FLOWHOOD, AS RECOMMENDED BY AABC, NEBB & ASHRAE STANDARDS.

MATT

CIRCO System Balance, Inc.

SB JOB# 9785
 SECTION 1 PAGE 1
 DATE 8-12-06

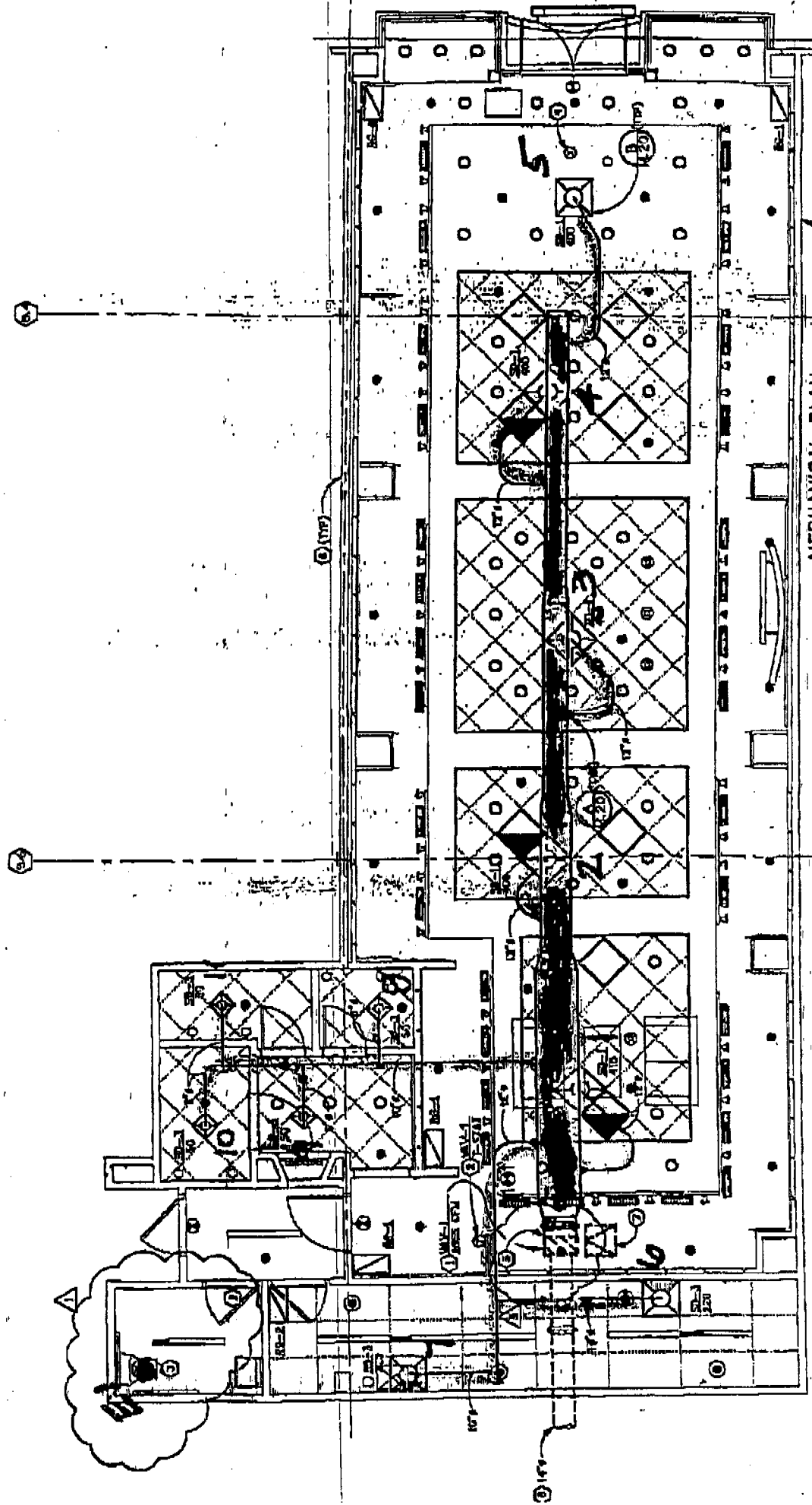
TEST SHEET

AREA SERVED SPACE # 2176 UNIT VAV-1

ROOM	OPENING			FACTOR	DESIGN		TEST #1		TEST #2		TEST #3			
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM		
					SUPPLY				Maximum	Minimum				
1	CD		24x24	1.0	415		270		410					
2	}	}	}	}	400		300		450					
3					400		270		405					
4					400		260		410					
5					400		250		425					
6					220		170		270					
7					220		170		230					
8						12x12		50		50		50		
9										80		30		
10										60		55		
11										50		50		
									2635		1740		2725	
					VAV Velocity Pressure					1.41"		0.15"		
					Ceiling Exhaust Room									
					EI CE 12x12	1.0	75		65		65			

REMARKS:

0 1 2 3 4 5 6 7 8 9 10 11 12 13

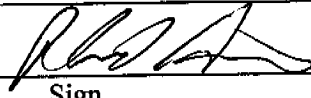


MECHANICAL PLAN

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address: 1689 ARDEN WAY Permit No.: 0603230
Building Use: RETAIL Occupancy: M
Building Owner: ARDEN FAIR ASSOCIATES Construction Type: II-N
Owner Address: LOOMIS, CA Sprinkled? Yes No
Portion of Building Occupied: SUITE 2176 Area: 2,185 Sq. Ft.
08/16/06 RICHARD HEINS  ROBERT LEE CHASE, AIA
Date By: (Print) Sign CHIEF BUILDING OFFICIAL

[Finaled By:JBB; SMB; SINGH]

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

30 DAY TEMPORARY
Certificate of Occupancy
For Information Contact (916) 808-5716

Building Address: 1689 ARDEN WAY Permit No.: 0603230
Building Use: RETAIL Occupancy: M
Building Owner: ARDEN FAIR ASSOCIATES Construction Type: II-N
Owner Address: LOOMIS, CA Sprinkled? Yes No
Portion of Building Occupied: SUITE 2176 Area: 2,185 Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

7/20/06 ROBERT T. STETSON [Signature] CARL HEFNER
Date By: (Print) Sign ASSISTANT BUILDING OFFICIAL

[TCO approvals:: SB, SINGH]

CBC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO
 FACILITY PERMIT & INSURANCE

APPLICATION FOR BUILDING PERMIT

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DEPARTMENT
 PERMIT SERVICES SECTION
 915 I Street, 3rd floor
 Sacramento, CA 95834 (916) 808-5656 FAX (916)808-1901

ACTIVITY #	Insp. Area
0603230	4/

Applicant MUST complete ALL Unshaded areas

ADDRESS ARDEN FAIR MALL 1689 ARDEN WAY SACRAMENTO Suite 2176
CA, 95814
 PARCEL # _____

RESPONSIBLE PARTY Name <u>SPG 3 - HEATHER RAYLINSKY</u> Street Address <u>1524 DELANCEY ST.</u> City/State/Zip <u>PHILADELPHIA, PA 19102</u> Phone <u>215-735-1524</u> FAX <u>215-735-4949</u> E-mail: <u>RAYLINSKY@SPG3.COM</u>		LICENSED CONTRACTOR Lic No. # _____ Name <u>WILLIAMS CONST // MARISA 788-4490</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
ARCHITECT/ENGINEER Name <u>CORBLAND MORGAN, ARCHITECT</u> Address <u>6910 WOODLAND DR.</u> City/State/Zip <u>DALLAS, TX 75225</u> Phone <u>214-368-3687</u> FAX <u>214-368-3690</u> E-mail: _____		OWNER Name <u>UP AGAINST THE WALL - LONG RAP INC.</u> Address <u>1420 WISCONSIN AVE.</u> City/State/Zip <u>WASHINGTON, D.C. 20007</u> Phone <u>202-337-6610</u> FAX <u>202-333-1246</u> E-mail: <u>CHUCK@UPAGAINSTTHEWALL.COM</u>	

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

NATURE OF WORK IN DETAIL: INTERIOR FIT-OUT, DEMOLITION OF EXISTING AND CONSTRUCTION OF NEW IN-LINE RETAIL APPAREL STORE WITHIN MALL.

OCCUPANT/TENANT: UP AGAINST THE WALL VALUATION: \$ 225,000.00

INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC	SITE	FIRE
# Stories	1 st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vio. File
<u>1</u>	<u>2,185 S.F.</u>	<u>2,185 S.F.</u>	<u>M</u>	<u>'M'</u>	<u>11-N</u>	<u>SPR</u> <u>ALARM</u>	<u>18</u>	
<u>B</u>	<u>I</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No



AUTHORIZATION TO START WORK

**City of Sacramento, Building Inspections Division
2101 Arena Blvd., Suite 200, Sacramento, CA 95834**

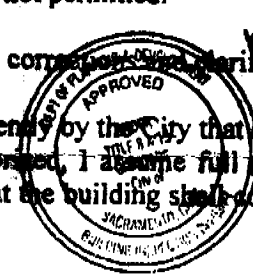
Company: Wells Construction, Inc PC # 0603230
Address: 10648 Industrial Ave., Roseville, CA 95678 BID App. _____
Job Phone: _____ Office Ph. 916-788-4480 Fee _____
SUBJECT: Project Address: Arden Fair Mall, Arden Way, Sacramento Suite # 2176

I request permission to start the following work Light demolition including existing ductwork, store display fixtures, safe off of electrical, sawcutting for plumbing in restroom. Rough in of MEP. No work shall be covered prior to receipt of permit and inspections

I realize that all work will be at the owner's and contractor's risk without assurance that the permit for the project will be granted. Any code conflicts will be corrected. I agree not to cover or conceal any work or portion thereof. I realize that inspections will not be made on this project until a building permit is issued. All changes required to conform to the approved plans will be completed without delay and work affecting the structural integrity of the existing building is not permitted.

I will expedite necessary revisions, corrections and modifications to the plans and specifications as required to obtain the building permit.

If it should be determined subsequently by the City that changes in the design of the building are necessary after commencement of the work authorized, I assume full responsibility and all risk of loss which may result by reason of such changes. I agree that the building shall conform to the approved final plans as amended, without regard to the stage of completion.



This set of plans and specifications must be kept on the job at all times and work affecting the structural integrity of the existing building is not permitted. Any changes or alterations from the same without written permission from the Building Inspection Department shall be held in violation of the State Law.

This authorization is valid for 30 days while the plans are being processed for permit. These state required declarations must be properly executed before this authorization is valid. This authorization is valid when initialed by authorized Building Department personnel and stamped approved. Keep posted on job site at all times.

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 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 the Business and Professions Code and my license is in full force and effect.

Lic. Class B Lic. Number 619655 Wells Construction, Inc.
COMPANY NAME
Rebecca Jones April 11, 2006
SIGNATURE DATE

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Section 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, 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 3 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).

I, as 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 Professions 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 or her own employees, provided that such improvement 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 or 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 & P Code for this reason _____

SIGNATURE DATE

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 the work for which this 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 Exp. 10/06

Policy No.: 43100028705

I certify under penalty of perjury 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.

Rebecca Joney
SIGNATURE

April 11, 2006
DATE

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 FEES.

In issuing this 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 the 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 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, understand and agree to the above conditions. I certify under penalty of perjury that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

Rebecca Joney
SIGNATURE

April 11, 2006
DATE

Start Work Authorization ~ Bldg001.Dat

2005 ACCEPTANCE REQUIREMENTS FOR CODE COMPLIANCE

Lighting Control Acceptance Document **LTG-2-A**
Form of

PROJECT NAME <i>UP Against The Wall</i>	DATE <i>7-19-06</i>
PROJECT ADDRESS <i>Arden Fair Mall</i>	
TESTING AUTHORITY <i>KES Electric</i>	TELEPHONE <i>916 536 0772</i>
LIGHTING CONTROL SYSTEM NAME / DESIGNATION <i>Intermatic Model CT71615CR</i>	

Intent: Lights are turned off when not needed per 119(d) & 131(d).

Construction Inspection

- 1 Instrumentation to perform test includes, but not limited to:
 - a. Light meter
 - b. Hand-held amperage and voltage meter
 - c. Power meter
- 2 Occupancy Sensor Construction Inspection
 - Occupancy sensor has been located to minimize false signals
 - Occupancy sensors do not encounter any obstructions that could adversely effect desired performance
 - Ultrasonic occupancy sensors do not emit audible sound (119a) 5 feet from source
- 3 Manual Daylighting Controls Construction Inspection
 - If dimming ballasts are specified for light fixtures within the daylight area, make sure they meet all the Standards requirements, including "reduced flicker operation" for manual dimming control systems
- 4 Automatic Time Switch Controls Construction Inspection
 - a. Automatic time switch control is programmed for (check all):
 - Weekdays
 - Weekend
 - Holidays
 - b. Document for the owner automatic time switch programming (check all):
 - Weekdays settings
 - Weekend settings
 - Holidays settings
 - Set-up settings
 - Preference program setting
 - Verify the correct time and date is properly set in the time switch
 - Verify the battery is installed and energized
 - Override time limit is no more than 2 hours

Certification Statement: I certify that all statements are true on this LTG-2-A form including the PASS/FAIL Evaluation. I affirm I am eligible to sign this form under the provisions described in the Statement of Acceptance on form LTG-1-A

Name: *Ken Jackson*
Company: *KES Electric*
Signature: *[Signature]* Date: *7-19-06*
License: *73504* Expires: *12-07*

2005 ACCEPTANCE REQUIREMENTS FOR CODE COMPLIANCE

Lighting Control Acceptance Document **LTG-2-A**

Form of

PROJECT NAME UP against the wall Ar Jan DATE 7-19-06

A. Select Acceptance Test (Indicate lighting control systems Names/Designations by the applicable tests below)

- 1 Occupancy Sensor
- 2 Manual Daylighting Controls
- 3 Automatic Time Switch Controls

N/A
N/A
N/A

B. Equipment Testing Requirements	Applicable Lighting Control Systems		
	1	2	3
Check and verify those items applicable to selected system:			
Occupancy Sensor - Step 1: Simulate an unoccupied condition			
a. Lights controlled by occupancy sensors turn off within a maximum of 30 minutes from start of an unoccupied condition per Standard Section 119(d)	Y / N		
b. The occupant sensor does not trigger a false "on" from movement in an area adjacent to the controlled space or from HVAC operation	Y / N		
c. Signal sensitivity is adequate to achieve desired control	Y / N		
Step 2: Simulate an occupied condition			
a. Status indicator or annunciator operates correctly	Y / N		
b. Lights controlled by occupancy sensors turn on when immediately upon an occupied condition OR (this requirement is mutually exclusive with Step 2.c.)	Y / N		
c. Sensor indicates space is "occupied" and lights turn on manually	Y / N		
Step 3: System returned to initial operating conditions			
Manual Daylighting Controls - Step 1: Manual switching control			
a. At least 50% of lighting power in daylight areas is separately controlled from other lights		Y / N	
b. The amount of light delivered to the space is uniformly reduced		Y / N	
Step 2: System returned to initial operating conditions			
Automatic Time Switch Controls - Step 1: Simulate occupied condition			
a. All lights can be turned on and off by their respective area control switch			(Y) / N
b. Verify the switch only operates lighting in the ceiling-height partitioned area in which the switch is located			(Y) / N
Step 2: Simulate unoccupied condition			
a. All non-exempt lighting turn off per Section 131(d)1			(Y) / N
b. Manual override switch allows only the lights in the selected ceiling height partitioned space where the override switch is located, to turn on or remain on until the next scheduled shut off occurs			(Y) / N
c. All non-exempt lighting turns off			(Y) / N
Step 3: System returned to initial operating conditions			
(Y) / N			

Note: Shaded areas do not apply for particular test procedure

C. PASS / FAIL Evaluation (check one):

- PASS:** All applicable **Construction Inspection** responses are complete and all applicable **Equipment Testing Requirements** responses are positive (Y - yes)
- FAIL:** Any applicable **Construction Inspection** responses are incomplete OR there is one or more negative (N - no) responses in any applicable **Equipment Testing Requirements** section. Provide explanation below. Use and attach additional pages if necessary.