

**CITY OF SACRAMENTO**

**Permit No: 0107725**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 3**

**Site Address: 7850 STOCKTON BL SAC**

**Thos Bros:**

**Sub-Type: REM**

**Parcel No: 117-0170-041**

**SUITE 160**

**Housing (Y/N): N**

**CONTRACTOR**

**G T CONSTRUCTION COMPANY**

**OWNER**

**JACKSON RALPH J SR  
5665 APOWER INN RD #140  
SACRAMENTO, CA 95824**

**ARCHITECT**

**Nature of Work: INTERIOR REMODEL TO DENTAL OFFICE**

**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.

X License Class B License Number 783403 X Date 8-24-01 X 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: \_\_\_\_\_

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

X Date 8-24-01 X Applicant/Agent 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.

X \_\_\_\_\_, 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 MID CENTURY INSURANCE Policy Number A05107341 Exp Date 01/01/2002

\_\_\_\_\_, (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 8-24-01 X Applicant 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

30 DAY TEMPORARY  
**Certificate of Occupancy**

For Information Contact (916) 264-5716

Building Address: 7850 STOCKTON BL #160 Permit No. 0107725

Building Use: OFFICE Occupancy: B

Building Owner: RALPH JACKSON SR. Construction Type: VN

Owner Address: 5665 POWER INN RD #140 SAC. Sprinkled?  Yes  No

Portion of Building Occupied: SUITE 160 Area: 2476 Sq. Ft.

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

EXTEND TO 12/9/01 NB

10/9/01

Date

By:Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[TCO approvals:GTD,RVL,MB,SB]

**BC 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**

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10/9/01 Willie Harris DENNIS RICHARDSON  
Date By:Print Sign CITY BUILDING OFFICIAL

[TCO approvals:GTD,RVL,MB,SB]

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CITY BUILDING OFFICIAL

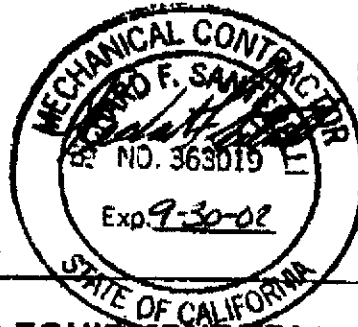
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SECTION V - PROCEDURES



Date 01-03-02

Page 1 of 3

Project Name DR TAN

**AIR MOVING EQUIPMENT TEST SHEET**

SYSTEM	A/c-1	A/c-2
Equipment Location	ROOF	ROOF
Area Served	OFFICE	OFFICE
Equipment Manufacturer	RHEEM	RHEEM
Model	RRKA04BCK08E	RRKA04BCK08E
Serial Number		

	Specified	Actual	Specified	Actual
Total CFM - Fan	1600	1670	1600	1556
Total CFM - Outlet	1670	1672	1556	1556
R/A CFM	1400	1472	1356	1356
O/A CFM	200	200	200	200
Total Static Pressure (Total/External)	.4	.5	.4	.5
Inlet Pressure	.10	.15	.10	.15
Discharge Pressure	.30	.35	.30	.35
Fan RPM	1129	1129	1129	1129

	Specified	Actual	Specified	Actual
Motor Manufacturer	G/E	G/E	G/E	G/E
Motor HP/ BHP	3/4	3/4	3/4	3/4
Phase	1φ	1φ	1φ	1φ
Voltage	208	208	208	208
Amperage	1.7	1.0	1.7	1.2
Motor RPM	1129	1150	1129	1164
Motor Service Factor	1.4	1.4	1.4	1.4
Starter Heater Elements	N/A	N/A	N/A	N/A

Motor Sheave & No. Grooves	DIRECT DRIVE		DIRECT DRIVE	
Fan Sheave & No. Grooves	~	~	~	~
Belts	~	~	~	~

Remarks \_\_\_\_\_

SECTION V—PROCEDURES

Date 01-03-02

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Project DR TAN

System A/C-2

Floor # 1

AIR DISTRIBUTION TEST SHEET

Terminal Number	Room Number	Terminal		Factor	Design		Test—FPM or CFM			Final	
		Type	Size		FPM	CFM	Test 1	Test 2	Test 3	FPM	CFM
SD-6	PIT OFF	T-BAR	24x24	1.2	286	336	360	340		283	340
SD-4	OP#3	TBAR	24x24	.92	217	200	240	210		228	210
SD-4	OP#4	TBAR	24x24	.92	217	200	240	195		211	195
SD-4	OP#5	TBAR	24x24	.92	217	200	130	190		206	190
SD-4	OP#6	TBAR	24x24	.92	217	200	200	205		223	205
SD-8	BATH	CEILING DIFF.	10x6	.33	212	70	90	70		212	70
SD-4	LOUNGE	T-BAR	24x24	.92	217	150	130	155		168	155
SD-4	TRAYED	T-BAR	24x24	.92	217	200	280	191		207	191
R6-8	PIT OFF	DEPT T-BAR	24x24	1.07	700	1036	1036	1036		700	1036
R6-6	OP'S	DEPT T-BAR	24x24	.51	592	320	320	320		592	320

Remarks \_\_\_\_\_

MEMO \_\_\_\_\_

21.13  
SECTION V - PROCEDURES

Date 01-03-02

Page 2 of 3

Project DR TAN

System A/C-1

Floor # 1

**AIR DISTRIBUTION TEST SHEET**

Terminal Number	Room Number	Terminal		Factor	Design		Test—FPM or CFM			Eval	
		Type	Size		FPM	CFM	Test 1	Test 2	Test 3	FPM	CFM
SD-5	WAITING ROOM	T-BAR	24x24	1.2	250	300	330	315		262	315
SD-5	WAITING ROOM	T-BAR	24x24	1.2	250	300	340	315		262	315
SD-4	BUSINESS	T-BAR	24x24	.92	215	200	180	190		206	190
SD-4	OFFICE	T-BAR	24x24	.92	215	200	200	190		206	190
SD-4	OP#2	T-BAR	24x24	.92	215	200	200	195		211	195
SD-2	LAB	T-BAR	24x24	.78	200	100	100	105		135	105
SD-8	BATH	CEILING DUFF	10x6	.33	212	70	100	75		227	75
SD-2	X-RAY	T-BAR	24x24	.78	154	120	120	115		147	115
SD-4	RECPY.	T-BAR	24x24	.92	195	180	100	172		187	172
RG-7	WAITING ROOM	DEFF T-BAR	24x24	.78	674	526	526	526		674	526
RG-8	HALL	DEFF T-BAR	24x24	1.07	816	874	875	875		817	875

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*Willie Harris*

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