1 (# 1 ) 1   1   1   1   1   1   1   1   1			Thos Bros:	
Site Address	s: 1545 RIVER PARK	DR SAC	Sub-Type:	REM
Parcel No:	277-0286-029	STE 202	Housing (Y/N)	: N
			그 그를 그를 통하는 경험 이	
CONTRACTOR	NSTRUCTION INC	<u>OWNER</u> EQUITY OFFICE	<u>ARCHITECT</u>	
9050 RANCHVII		1610 ARDEN WAY #298		ter en
SACRAMENTO	CA 95624	SACRAMENTO CA 95819		
D.T	A MANUALAN AND CORT	T FOR COR AND		
Nature of wo	ork: INTERIOR REMODE	EL FOR STE 202	and the same of th	
CONSTRUCT	ION LENDING AGENCY:	I hereby affirm under penalty of pe	jury that there is a construction lending agence	vy for the performance of
the work for whic	h this permit is issued (Sec. 3097,	Civ. C).	J-1,	y ios and positionnamed of
Lender's Name		T and and A Ad		
		Lender's Add		
LICENSED C	ONTRACTORS DECLARA	ATION: I hereby affirm under p	enalty of perjury that I am licensed under	provisions of Chapter 9
commencing with			my license is in full force and effect.	
License Class	License Number 461321	*Date 07-10-02 *Cor	atractor Signature Janeel B	11441111
WNER-BUIL	LDER DECLARATION: Ih	ereby affirm under penalty of perjur	that I am exempt from the contractors Licen	se Law for the following
rior to its issuance	Dusiness and Professions Code	e; any city or county which requires ; uch permit to file a signed statement	permit to construct, alter, improve, demolish that he or she is licensed pursuant to the prov	i, or repair any structure,
icense Law (Cha	pter 9 (commencing with Section	7000) of Division 8 of the Business	and Professions Code) or that he or she is ex	empt therefrom and the
asis for the alleg	ed exemption. Any violation of S	section 7031.5 by any applicant for a	permit subjects the applicant to a civil pena	lty of not more than five
undred dollars (\$	500.00);			
I, as a owr	ner of the property, or my employe	es with wages as their sole compens	ation, will do the work, and the structure is no	ot intended or offered for
ale (Sec. 7044, B	Business and Professional Code: T	he Contractors License Law does no	ot apply to an owner of property who builds of	r improves thereon, and
ho does such wo	ork himself or herself or through h	is/her own employees, provided that	such improvements are not intended or offer	ed for sale. If, however
		of completion, the owner-builder wi	Il have the burden of proving that he/she did	not build or improve for
ne purpose of sale	5.)			e de la Section (N
I, as owner	of the property, am exclusively of	contracting with licensed contractors	to construct the project (Sec. 7044, Business	and Professions Code:
he Contractors L	icense Law does not apply to an o	wner of property who builds or impr	oves thereon, and who contracts for such pro-	jects with a contractor(s)
censed pursuant	to the Contractors License Law).			
I am exemp	ot under Sec.	B & PC for this reason:		
Salah Cilib	- 6	0		
Date		Owner Signature		
N ISSUING TH	IS BUILDING PERMIT, the ap	pplicant represents, and the city relie	s on the representation of the applicant, that	the applicant verified all
teasurements and	i locations shown on the applicati	ion or accompanying drawings and	that the improvement to be constructed does	not violate any law or
rivate agreement	relating to permissible or prohibit se violation of any private agreemen	ted locations for such improvements nt relating to location of improvemen	. This building permit does not authorize an	y illegal location of any
inproveinent of u	to violation any private agreemen	in relating to location of improvemen	<b></b>	
certify that I have	e read this application and state tha	at all information is correct. I agree t	o comply with all city and county ordinances	and state laws relating to
uilding constructi	ion and herby authorize representat	tive(s) of this city to enter upon the a	bovementioned property for inspection purpos	es.
ate (27 - 1	0-07-	Applicant/Agent Signature	.80 K	
<u> , , , , , , , , , , , , , , , , </u>	A to their tree at the	Applicano Agent Signature Lagran	we browning	
VORKER'S C	OMPENSATION DECLAR	ATION: I hereby affirm under per	alty of perjury one of the following declaratio	ns:
I have and	will maintain a certificate of cons	ent to self-insure for workers' comp	ensation as provided for by Section 3700 of	the Labor Code, for the
erformance of wo	ork for which the permit is issued.			
L have and	will maintain workers' compensati	on insurance as required by Section	3700 of the Labor Code, for Defermand	a of the work for which
is permit is issue	d. My workers' compensation inst	urance carrier and policy number are	CITY OF THE PARTY OF	c of the work for willen
	<u> </u>		CITY OF SACRA	MENTO
Carrier	STATE FUND	Policy Number	713016444 Exp Date	10/01/2002
(This section	n need not be completed if the per	mit is for \$100 or less). Lecrtify that	in the performance of the work for which this	normit is issued Labort
ot employ any pe	rson in any manner so as to becom	ne subject to the workers' compensat	ion laws of California and narce that if I shou	ld become subject to the
orkers' compensa	ntion provisions of Section 3700 of	the Labor Code, I shall forthwith cor	nply with those provisions.	1IT
ate_On- U	o - 02 -	Auntional Cinesa	CENTER	
alc. U - U	<u> </u>	Applicant Signature Vand	Drownery	
ARNING: FAI	LURE TO SECURE WORKER'	S COMPENSATION COVERAGE	IS UNLAWFUL AND SHALL SUBJECT	AN EMPLOVED TO
RIMINAL PENA	ALTIES AND CIVIL FINES U	TO ONE HUNDRED THOUSA	ND DOLLARS (\$100,000) IN ADDITION	TO THE COST OF
			OR CODE, INTEREST AND ATTORNEY	

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

Permit No: 0209202

Insp Area:

**CITY OF SACRAMENTO** 

1231 I Street, Sacramento, CA 95814

## APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION PERMIT SERVICES SECTION	TIVITY #0209202 Insp. Area					
1231 I Street, Rm. 200 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046	Applicant MUST complete ALL Unshaded areas					
DDRESS 1545 RIVEY PARK ARCEL # 277.0286.029	Suite ZOZ					
CONTACT  Name Dayrell Browning  Street Address 9000 Rawchulew CX.  City/State/Zip 61K Grove 95629  Phone 423-1105 FAX 685-5835  E-mail:	LICENSED CONTRACTOR Lic No. # 461321  Name Browning Gastruction Inc.  Address 9050 Ranchulew of  City/State/Zip Elle Grove as 91624  Phone 423-1105 FAX  E-mail:					
ARCHITECT/ENGINEER  Name Melson 1 Assoc.  Address 530 Howe Awe  City/State/Zip Special of 91825  Phone 925-0333 FAX  E-mail:	OWNER  Name <u>FRUITE</u> DHICE  Address <u>1610</u> Avden usery # 298  City/State/Zip <u>Sacramento</u> Phone <u>921-5600</u> FAX <u>921-5655</u> E-mail:					
Will permittee have any employees on the jobsite? ☐ No ☐  WORKER'S COMPENSATION POLICY # 71301  NATURE OF WORK IN DETAIL:	Yes → INSURANCE CO: State Compensa Trum  , 444 EXPIRATION DATE: 10-02  Model					
OCCUPANT/TENANT: KAISER	VALUATION: \$ 24,800 00					
FLOOD STATUS: S.C	A.T.					
JOB DESCRIPTION BLDG SHELL APT	TI( ) REM(→ SW FIRE ADD OTH					
INSPECTION DISCIPLINES BLDG CM	PLUMB ELEC SITE FIRE					
# Stories 1.5.11.7.Th	Group Const type Fire Req. (2) N Fed Code Vio. File  [H] [Quad]					
B (D) (P) (D) (3 THO 13 JAT 13 JAT 13	E F S D PW PUTIL					
COMMENTS:						
REGIONAL SANITATION FEES? Yes						

dssu/forms/commercialapp. [rev. 03/28/00]



Microfilm

## AIRCO Commercial Services, Inc.

5700 Alder Avenue, Sacramento, CA 95828

Sacramento: 916/381-4526 Santa Rosa: 707/576-7644 San Jose: 408/436-7770

Fax: 916/381-1629 License #: 572243

AIR OUTLET TEST REPORT

PROJECT NUMBER

OUTLET MANUFACTURER THUS TEST APPARATUS

		<b>O</b> U1	rlet		DESI	GK CFH	PRELI	HINARY			FINA	L CFH	
AREA SERVED	NO.	TYPE	SIZE	AK	нах	MIN	VEL OR CFN	VEL OR CFK			HAX	MIN	REHARKS
Windoware		Mag	10		290		325	125%	407	138%	401	139%	
VAU 2-10	2		10		2S.O			127%	335	132%	382		
	3	/	10		230		265	115%	301	130%	30)	35%	
	4		ర్తి		200		235	119%	277	137%	277	/338	
	_												
Intervance	1		ن		160		135		167	-		1045	
	2	$\geq$	9		150		125		153		153	102%	
	3	>	10		390		316		393		393	100%	
NEW VAU	1	5	10		<i>320</i>		BAO		420		350	109%	·
													<u> </u>
											÷		

PNEUMATIC T	STATS	LBS				

**REMARKS:** 

TEST DATE

READINGS BY \_\_

PAGE \_\_\_\_ OF \_\_

MECHANICAL SYSTEM DESIGN, BUILD, LINC Service®