

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0001179

Insp Area: 3

Thos Bros: 318A6 956

Site Address: 5961 OUTFALL CR SAC

Parcel No: 062-0120-004

Sub-Type: NCOM

Housing (Y/N): N

CONTRACTOR

BUZZ OATES ENTERPRISES
8615 ELDER CREEK RD
SACRAMENTO CA 95828

OWNER

O K/B
8920 43RD AV
SACRAMENTO CA 95828

ARCHITECT

Nature of Work: NEW 96658 SHELL WHSE/OFFICE BLDG

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 B License Number 381-3600 Date 8/14/02 Contractor Signature Thomas Mulline

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

PAID CITY OF SACRAMENTO

AUG 14 2002

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.

Date 8/14/02 Applicant/Agent Signature Thomas Mulline

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 CALIFORNIA INDEMNITY INS Policy Number N5048119D Exp Date 03/01/2003

(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 8/14/02 Applicant Signature Thomas Mulline

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 COMPLIANCE**

For Information Contact (916) 808-5716

Building Address: 5961 OUTFALL CR Permit No.: 0001179
Building Use: WAREHOUSE SHELL/OFFICE Occupancy: S1
Building Owner: O K/B Construction Type: III-NHR
Owner Address: SACRAMENTO, CA Sprinkled? Yes No
Portion of Building Occupied: ENTIRE Area: 96658 Sq. Ft.

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

6/14/05 Carolyn Cooper RON BEEHLER
Date By: (Print) Sign CHIEF BUILDING OFFICIAL

[TCO approvals:PWC,JZB,MJB,MMC,SFK]

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

Permit # 0001179

Release # 035935

GROUND FAULT TEST REPORT

CUSTOMER	W ELECTRICAL	LOCATION	SACRAMENTO, CA	DATE	3/14/05
DESIGNATION	5961 OUTSIDE	JOB NUMBER	1802	TECH.	JWC
	MAIN NORTH BUILDING	TEST EQUIP. USED	MS-2, ME-6000R		
NAMEPLATE DATA					
SWBD MFG.	SQUARE D	SERIAL #	N/A	MAIN OVERCURRENT DEV.	2000A DXTF
				C.B. SWITCH	
GROUND FAULT SYSTEM TYPE (CIRCLE ONE)	RESIDUAL	SOURCE GND.		RELAY MFG.	N/A
CURRENT RANGES	640 - 1200	TIME RANGES	.7-.5	RELAY CAT#	N/A
				CURRENT SETTING	640
				TIME SETTING	.5
VISUAL AND MECHANICAL INSPECTIONS					
ITEM	STATUS	NOTES	ITEM	STATUS	NOTES
GROUND POINT	A		TEST PANEL OPERATION	N/A	
NEUTRAL SENSOR LOCATION	A		CONTROL POWER XFMR	N/A	
NEUTRAL SENSOR POLARITY	A		ZONE INTERLOCKING	N/A	
MAIN BONDING JUMPER	A		MULTIPLE SOURCE SCHEME	N/A	
REDUCED VOLTAGE TEST	A		NEUTRAL CONDUCTOR	A	
ELECTRICAL TESTS					
PICK UP CURRENT	590	AMPS	NEUTRAL INSULATION TO GROUND	1.35	MEGOHMS
% PICKUP	150		PRIMARY TEST CURRENT (AMPS)	920	
			MEASURED TIME (SEC)	.48	
			ACCEPTABLE TIME (SEC)	.5 +/- .10	
NOTES	PASS	FAIL			

*STATUS A - ACCEPTABLE R - NEEDS REPAIR OR REPLACEMENT X - UNACCEPTABLE NA - NOT APPLIC.

INDUSTRIAL TESTS INC.

"AN ELECTRICAL TESTING CONTRACTOR"

916-859-5959

To Be Scanned



BUZZ OATES CONSTRUCTION

8615 Elder Creek Road
Sacramento, California 95828
916.381.3600
916.381.4707 fax

To: JEFF BROOKS	From: Tom McGuire
Fax: 808-8370	Pages: 5
Phone: 880-8352	Date: 04/14/05
Re: Outfall Circle	CC:

Urgent For Review Please Comment Please Reply Please Recycle

Per your request, copies of RP certs for inspection for 5961 Outfall Circle. Permit # 0001179. Any questions, please give me a call at 379-3843.

Thank you.

COUNTY OF SACRAMENTO
ENVIRONMENTAL MANGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
8475 JACKSON RD, STE 240
SACRAMENTO CA 95828-3904
(916) 875-8440 • FAX (916) 875-8513

BACKFLOW ASSEMBLY TEST REPORT

WATER PURVEYOR: _____

IF APPLICABLE, WATER METER NO.: _____

TYPE: <u>DC</u>	SIZE: <u>10</u>	MFG: <u>omer</u>
MODEL: <u>2000 SS</u>	SERIAL NO.: <u>130015</u>	
<input type="checkbox"/> EXISTING ⇒ REFERENCE NO.: _____		
<input type="checkbox"/> REPLACEMENT ⇒ OLD ASSEMBLY SERIAL NO.: _____		
<input checked="" type="checkbox"/> NEW ⇒ PLUMBING PERMIT NO.: _____		
TYPE OF SERVICE: DOMESTIC <input type="checkbox"/> IRRIGATION <input type="checkbox"/> FIRE <input checked="" type="checkbox"/>		

FACILITY	BUSINESS NAME: <u>Buzz Oiler Const.</u>	SITE PHONE: _____
	SITE ADDRESS: <u>5969 Outfall</u>	CITY: <u>SAC</u>
	ASSEMBLY LOCATION: <u>20' RT of ENTRANCE</u>	
	INTERNAL <input type="checkbox"/> : _____	

HOME OR PERSONAL INFORMATION IS NOT GIVEN ON PUBLIC RECORD SEARCHES. ARE THE ADDRESS AND THE PHONE NUMBER BELOW FOR YOUR HOME OR BUSINESS? HOME: BUSINESS: MAILING ADDRESS CORRECTION REQUESTED

OWNER / MANAGEMENT	OWNER / CONTACT NAME (ATTN): <u>Tom MAQUINIS</u>	PHONE: _____
	MANAGEMENT NAME (C/O): <u>Buzz Oiler Const.</u>	CELL PHONE: _____
	MAILING ADDRESS: <u>8615 Elder Creek Rd</u>	FAX NUMBER: _____
	CITY, STATE, & ZIP: <u>Sac, CA 95828</u>	OTHER: _____

TEST RESULTS INFORMATION

HELD AT: <u>1.9</u> PSID <input type="checkbox"/>	HELD AT: <u>2.8</u> PSID <input type="checkbox"/>	OPENED AT: _____ PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
LEAKED <input type="checkbox"/>	CLOSED TIGHT (RP) <input type="checkbox"/> LEAKED <input type="checkbox"/>	OPENED UNDER 2.0 PSID OR DID NOT OPEN <input type="checkbox"/>	OPENED UNDER 1.0 PSID OR DID NOT OPEN <input type="checkbox"/>	LEAKED <input type="checkbox"/>
1) CLEANED <input type="checkbox"/> REPLACED: <input type="checkbox"/>	1) CLEANED <input type="checkbox"/> REPLACED: <input type="checkbox"/>	1) CLEANED <input type="checkbox"/> 2) EXERCISED <input type="checkbox"/> REPLACED: <input type="checkbox"/>	1) CLEANED <input type="checkbox"/> REPLACED: <input type="checkbox"/>	1) CLEANED <input type="checkbox"/> REPLACED: <input type="checkbox"/>
2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>	3) DISC(S) <input type="checkbox"/>	2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>
3) SPRING <input type="checkbox"/>	3) SPRING <input type="checkbox"/>	4) SPRING <input type="checkbox"/>	3) DIAPHRAGM <input type="checkbox"/>	3) MODULE <input type="checkbox"/>
4) GUIDE <input type="checkbox"/>	4) GUIDE <input type="checkbox"/>	5) DIAPHRAGM(S) <input type="checkbox"/>	4) FLOAT <input type="checkbox"/>	4) OTHER <input type="checkbox"/>
5) SEAT <input type="checkbox"/>	5) SEAT <input type="checkbox"/>	6) SEAT(S) <input type="checkbox"/>	5) OTHER <input type="checkbox"/>	
6) MODULE <input type="checkbox"/>	6) MODULE <input type="checkbox"/>	7) O-RING(S) <input type="checkbox"/>		
7) OTHER <input type="checkbox"/>	7) OTHER <input type="checkbox"/>	8) MODULE <input type="checkbox"/>		
		9) OTHER <input type="checkbox"/>		

START TIME: <u>9:10 AM</u>	START TIME: _____
END TIME: <u>8:20</u>	END TIME: _____
DATE: <u>9-16-04</u>	DATE: _____

COMMENTS: _____

ASSEMBLY: PASSED FAILED TAG NO.: BA 4575
If FAILED, please mail the test report to the County and notify the appropriate water purveyor within 24 hours!

FREEZE BAG? FREEZE CAGE?
THOMAS GUIDE MAP, PAGE -- GRID: _____

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DREW ALDRED
Andrew Aldred

COUNTY OF SACRAMENTO
ENVIRONMENTAL MANAGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
8475 JACKSON RD, STE 240
SACRAMENTO CA 95828-3904
(916) 875-8440 • FAX (916) 875-8513

BACKFLOW ASSEMBLY TEST REPORT

WATER PURVEYOR: CITY

IF APPLICABLE, WATER METER NO.: _____

TYPE: <u>RP</u>	SIZE: <u>2"</u>	MFG: <u>WATTS</u>
MODEL: <u>009 M2</u>	SERIAL NO.: <u>225582</u>	
<input type="checkbox"/> EXISTING ⇒ REFERENCE NO.: _____		
<input type="checkbox"/> REPLACEMENT ⇒ OLD ASSEMBLY SERIAL NO.: _____		
<input checked="" type="checkbox"/> NEW ⇒ PLUMBING PERMIT NO.: _____		
TYPE OF SERVICE: DOMESTIC <input checked="" type="checkbox"/> IRRIGATION <input type="checkbox"/> FIRE <input type="checkbox"/>		

FACILITY	BUSINESS NAME: <u>Buzz Water Const.</u>	SITE PHONE: _____
	SITE ADDRESS: <u>5961 Outfall Cr</u>	CITY: _____
OWNER / MANAGEMENT	ASSEMBLY LOCATION: <u>Water S. Side of Prop.</u>	
	INTERNAL <input type="checkbox"/> _____	
	HOME OR PERSONAL INFORMATION IS NOT GIVEN ON PUBLIC RECORD SEARCHES. ARE THE ADDRESS AND THE PHONE NUMBER BELOW FOR YOUR HOME OR BUSINESS? HOME: <input type="checkbox"/> BUSINESS: <input type="checkbox"/> MAILING ADDRESS CORRECTION REQUESTED <input type="checkbox"/>	
	OWNER / CONTACT NAME (ATTN): <u>Tom Macquive</u>	PHONE: _____
	MANAGEMENT NAME (CO): <u>Buzz Water Const.</u>	CELL PHONE: _____
	MAILING ADDRESS: <u>8615 Eldon Creek Rd</u>	FAX NUMBER: _____
	CITY, STATE, & ZIP: <u>Sac Ca 95828</u>	OTHER: _____

TEST RESULTS INFORMATION

HELD AT: <u>8.8</u> PSID	HELD AT: _____ PSID	OPENED AT: <u>2.6</u> PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
LEAKED <input type="checkbox"/>	CLOSED TIGHT (RP) <input checked="" type="checkbox"/> LEAKED <input type="checkbox"/>	OPENED UNDER 2.0 PSID OR DID NOT OPEN <input type="checkbox"/>	OPENED UNDER 1.0 PSID OR DID NOT OPEN <input type="checkbox"/>	LEAKED <input type="checkbox"/>
1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> 2) EXERCISED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:
2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>	3) DISC(S) <input type="checkbox"/>	2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>
3) SPRING <input type="checkbox"/>	3) SPRING <input type="checkbox"/>	4) SPRING <input type="checkbox"/>	3) DIAPHRAGM <input type="checkbox"/>	3) MODULE <input type="checkbox"/>
4) GUIDE <input type="checkbox"/>	4) GUIDE <input type="checkbox"/>	5) DIAPHRAGM(S) <input type="checkbox"/>	4) FLOAT <input type="checkbox"/>	4) OTHER <input type="checkbox"/>
5) SEAT <input type="checkbox"/>	5) SEAT <input type="checkbox"/>	6) SEAT(S) <input type="checkbox"/>	5) OTHER <input type="checkbox"/>	
6) MODULE <input type="checkbox"/>	6) MODULE <input type="checkbox"/>	7) O-RING(S) <input type="checkbox"/>		
7) OTHER <input type="checkbox"/>	7) OTHER <input type="checkbox"/>	8) MODULE <input type="checkbox"/>		
		9) OTHER <input type="checkbox"/>		
HELD AT: _____ PSID	HELD AT: _____ PSID	OPENED AT: _____ PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
	CLOSED TIGHT (RP) <input type="checkbox"/>			

START TIME: <u>8:35</u>	START TIME: _____
END TIME: <u>8:40</u>	END TIME: _____
DATE: <u>9-16-04</u>	DATE: _____

COMMENTS: _____

ASSEMBLY: PASSED FAILED TAG NO.: BA 4578
If FAILED, please mail the test report to the County and notify the appropriate water purveyor within 24 hours

FREEZE BAG? FREEZE CAGE?

THOMAS GUIDE MAP, PAGE - GRID: _____

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DREW ALDRER
[Signature]

COUNTY OF SACRAMENTO
ENVIRONMENTAL MANAGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
8475 JACKSON RD, STE 240
SACRAMENTO CA 95828-3904
(916) 875-8440 • FAX (916) 875-8513

BACKFLOW ASSEMBLY TEST REPORT

WATER PURVEYOR: CITY

IF APPLICABLE, WATER METER NO.: _____

TYPE: <u>DC</u>	SIZE: <u>10"</u>	MFG: <u>James</u>
MODEL: <u>2000 SS</u>	SERIAL NO.: <u>130822</u>	
<input type="checkbox"/> EXISTING ⇒ REFERENCE NO.:		
<input type="checkbox"/> REPLACEMENT ⇒ OLD ASSEMBLY SERIAL NO.:		
<input checked="" type="checkbox"/> NEW ⇒ PLUMBING PERMIT NO.:		
TYPE OF SERVICE: DOMESTIC <input type="checkbox"/> IRRIGATION <input type="checkbox"/> FIRE <input checked="" type="checkbox"/>		

FACILITY	BUSINESS NAME: <u>Buzz Oater Court</u>	SITE PHONE: _____
	SITE ADDRESS: <u>5961 Outback Cir</u>	CITY: _____
	ASSEMBLY LOCATION: <u>15' LT. of SO. ENTRANCE</u>	
	INTERNAL <input type="checkbox"/> : _____	
OWNER/ MANAGEMENT	HOME OR PERSONAL INFORMATION IS NOT GIVEN ON PUBLIC RECORD SEARCHES. ARE THE ADDRESS AND THE PHONE NUMBER BELOW FOR YOUR HOME OR BUSINESS? HOME: <input type="checkbox"/> BUSINESS: <input type="checkbox"/> MAILING ADDRESS CORRECTION REQUESTED <input type="checkbox"/>	
	OWNER/CONTACT NAME (ATTN): <u>Tom Mc</u>	PHONE: _____
	MANAGEMENT NAME (C/O): <u>Buzz Oater Mgmt</u>	CELL PHONE: _____
	MAILING ADDRESS: <u>8615 Elder Creek Rd</u>	FAX NUMBER: _____
	CITY, STATE, & ZIP: <u>Sac Ca 95828</u>	OTHER: _____

TEST RESULTS INFORMATION

HELD AT: <u>2.1</u> PSID	HELD AT: <u>3.1</u> PSID	OPENED AT: _____ PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
LEAKED <input type="checkbox"/>	CLOSED TIGHT (RP) <input type="checkbox"/> LEAKED <input type="checkbox"/>	OPENED UNDER 2.0 PSID OR DID NOT OPEN <input type="checkbox"/>	OPENED UNDER 1.0 PSID OR DID NOT OPEN <input type="checkbox"/>	LEAKED <input type="checkbox"/>
1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> 2) EXERCISED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:
2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>	3) DISC(S) <input type="checkbox"/>	2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>
3) SPRING <input type="checkbox"/>	3) SPRING <input type="checkbox"/>	4) SPRING <input type="checkbox"/>	3) DIAPHRAGM <input type="checkbox"/>	3) MODULE <input type="checkbox"/>
4) GUIDE <input type="checkbox"/>	4) GUIDE <input type="checkbox"/>	5) DIAPHRAGM(S) <input type="checkbox"/>	4) FLOAT <input type="checkbox"/>	4) OTHER <input type="checkbox"/>
5) SEAT <input type="checkbox"/>	5) SEAT <input type="checkbox"/>	6) SEAT(S) <input type="checkbox"/>	5) OTHER <input type="checkbox"/>	
6) MODULE <input type="checkbox"/>	6) MODULE <input type="checkbox"/>	7) O-RING(S) <input type="checkbox"/>		
7) OTHER <input type="checkbox"/>	7) OTHER <input type="checkbox"/>	8) MODULE <input type="checkbox"/>		
		9) OTHER <input type="checkbox"/>		
HELD AT: _____ PSID	HELD AT: _____ PSID	OPENED AT: _____ PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
	CLOSED TIGHT (RP) <input type="checkbox"/>			

START TIME: <u>8:20</u>	START TIME: _____
END TIME: <u>8:30</u>	END TIME: _____
DATE: <u>9-16-04</u>	DATE: _____

COMMENTS: _____

ASSEMBLY: PASSED FAILED TAG NO.: BA 4577
If FAILED, please mail the test report to the County and notify the appropriate water purveyor within 24 hours!

FREEZE BAG? FREEZE CAGE?
THOMAS GUIDE MAP, PAGE - GRID: _____

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OREW ALDRED
Andrew Aldred

COUNTY OF SACRAMENTO
ENVIRONMENTAL MANGEMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
8475 JACKSON RD, STE 240
SACRAMENTO CA 95826-3904
(916) 875-8440 • FAX (916) 875-8513

BACKFLOW ASSEMBLY TEST REPORT

WATER PURVEYOR: city

IF APPLICABLE, WATER METER NO.: _____

TYPE: <u>RP</u>	SIZE: <u>1"</u>	MFG: <u>WATTS</u>
MODEL: <u>009M2</u>	SERIAL NO.: <u>225581</u>	
<input type="checkbox"/> EXISTING → REFERENCE NO.: _____		
<input type="checkbox"/> REPLACEMENT → OLD ASSEMBLY SERIAL NO.: _____		
<input checked="" type="checkbox"/> NEW → PLUMBING PERMIT NO.: _____		
TYPE OF SERVICE: DOMESTIC <input checked="" type="checkbox"/>		IRRIGATION <input type="checkbox"/> FIRE <input type="checkbox"/>

FACILITY	BUSINESS NAME: <u>Buzz Water Const.</u>	SITE PHONE: _____
	SITE ADDRESS: <u>5961 Outfall Cir</u>	CITY: _____
	ASSEMBLY LOCATION: <u>C Meter, No Entrance</u>	
	INTERNAL <input type="checkbox"/>	
OWNER / MANAGEMENT	HOME OR PERSONAL INFORMATION IS NOT GIVEN ON PUBLIC RECORD SEARCHES. ARE THE ADDRESS AND THE PHONE NUMBER BELOW FOR YOUR HOME OR BUSINESS? HOME: <input type="checkbox"/> BUSINESS: <input type="checkbox"/> MAILING ADDRESS CORRECTION REQUESTED <input type="checkbox"/>	
	OWNER / CONTACT NAME (ATTN): <u>Tom</u>	PHONE: _____
	MANAGEMENT NAME (CO): <u>Buzz Water Mgmt.</u>	CELL PHONE: _____
	MAILING ADDRESS: <u>8615 W Elden Creek Rd</u>	FAX NUMBER: _____
	CITY, STATE, & ZIP: <u>Sac, Ca 95828</u>	OTHER: _____

TEST RESULTS INFORMATION

HELD AT: <u>8.0</u> PSID	HELD AT: _____ PSID	OPENED AT: <u>2.6</u> PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
LEAKED <input type="checkbox"/>	CLOSED TIGHT (RP) <input checked="" type="checkbox"/> LEAKED <input type="checkbox"/>	OPENED UNDER 2.0 PSID OR DID NOT OPEN <input type="checkbox"/>	OPENED UNDER 1.0 PSID OR DID NOT OPEN <input type="checkbox"/>	LEAKED <input type="checkbox"/>
1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> 2) EXERCISED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:	1) CLEANED <input type="checkbox"/> REPLACED:
2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>	3) DISC(S) <input type="checkbox"/>	2) DISC <input type="checkbox"/>	2) DISC <input type="checkbox"/>
3) SPRING <input type="checkbox"/>	3) SPRING <input type="checkbox"/>	4) SPRING <input type="checkbox"/>	3) DIAPHRAGM <input type="checkbox"/>	3) MODULE <input type="checkbox"/>
4) GUIDE <input type="checkbox"/>	4) GUIDE <input type="checkbox"/>	5) DIAPHRAGMS) <input type="checkbox"/>	4) FLOAT <input type="checkbox"/>	4) OTHER <input type="checkbox"/>
5) SEAT <input type="checkbox"/>	5) SEAT <input type="checkbox"/>	6) SEAT(S) <input type="checkbox"/>	5) OTHER <input type="checkbox"/>	
6) MODULE <input type="checkbox"/>	6) MODULE <input type="checkbox"/>	7) O-RING(S) <input type="checkbox"/>		
7) OTHER <input type="checkbox"/>	7) OTHER <input type="checkbox"/>	8) MODULE <input type="checkbox"/>		
		9) OTHER <input type="checkbox"/>		
HELD AT: _____ PSID	HELD AT: _____ PSID	OPENED AT: _____ PSID	OPENED AT: _____ PSID	HELD AT: _____ PSID
	CLOSED TIGHT (RP) <input type="checkbox"/>			

START TIME: <u>8:55</u>	START TIME: _____
END TIME: <u>9:05</u>	END TIME: _____
DATE: <u>9-16-04</u>	DATE: _____

COMMENTS: _____

ASSEMBLY: PASSED FAILED TAG NO.: BA 4576
If FAILED, please mail the test report to the County and notify the appropriate water purveyor within 24 hours!

FREEZE BAG? FREEZE CAGE?

THOMAS GUIDE MAP, PAGE - GRID: _____

253
DREW ALDRED
[Signature]

BLDG B

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0001179 Insp. Area 3C

Applicant MUST complete ALL Unshaded areas

ADDRESS ~~5961 Outfall Cir~~ 5961 OUTFALL CIR Suite _____
PARCEL # 062-0120-004/005/006/007

<p>CONTACT</p> <p>Name <u>Mike Kelley / Buzz Oates</u></p> <p>Address <u>8615 Elder Creek Rd</u></p> <p>Phone <u>381-3600</u> FAX <u>381-4707</u></p> <p>E-mail _____</p>		<p>LICENSED CONTRACTOR Lic No. # <u>702621</u></p> <p>Name <u>Buzz Oates Ent.</u></p> <p>Address <u>8615 Elder Creek Rd</u></p> <p>Phone <u>381-3600</u> FAX <u>381-4707</u></p> <p>E-mail _____</p>	
<p>ARCHITECT/ENGINEER</p> <p>Name <u>McClade + Assoc</u></p> <p>Address <u>3417 Arden Wy</u></p> <p>Phone <u>488-8386</u> FAX <u>488-7062</u></p> <p>E-mail _____</p>		<p>OWNER</p> <p>Name <u>O.K. + B.</u></p> <p>Address <u>8615 Elder Creek Rd</u></p> <p>Phone <u>381-3843</u> FAX <u>381-7826</u></p> <p>E-mail _____</p>	

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: California Indemnity
→ WORKER'S COMPENSATION POLICY # N 5048119 D EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: New industrial shell 96658 S.F.

OCCUPANT/TENANT: Vacant - Spec VALUATION: \$ 1,150,000

FLOOD STATUS: <input checked="" type="checkbox"/>		S.C.A.T.						
JOB DESCRIPTION	BLDG <u>SHELL</u>	APT ()	TI ()	REM ()	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 firArea	Total Area	Use Zone	Occp Group	Const type	Fire Rec. <u>Y</u> N	Fed Code	Vio. File
		<u>96658</u>		<u>S1</u>	<u>III/N</u>	<u>SPR</u> <u>ALARM</u>	<u>18</u>	[H] [Quad]
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	D	<u>PW</u> <u>UTIL</u>

COMMENTS: Customer to bring in WATER FLOW Test report

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 5961 Outfall Circle

Assessor's Parcel Number: 062-0120-004/005/006/007/008/009/010/011

Previous Use: Bare land

Description of Request/Proposed Use: new industrial shell

Is This a Change of Use? Yes (vacant to industrial)

Zoning Designation: M2S

Prior Applications for Project Site(P#, Z#, DRPB#): 299-082, 297025

Comments: - limited to 25% office.

- outdoor storage to be screened

Are There Any Planning Issues?: (circle one) YES NO

Needs to finish U.A. up to Gary Spruce

* Staff Site Plan Check Required? (Circle one)

YES NO

* Field Inspection Required? (Circle one)

YES NO

* Design Review/Preservation Required?: (Circle one)

YES NO

Planning Review by/Date: [Signature]

2-8-00

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL



**CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
1231 I STREET, ROOM 200, SACRAMENTO, CA 95814**

Prior to issuance of a permit, the applicant shall complete Part I of this form. Part II and Part III shall be completed by the project Architect/Engineer and the Development Services Department as a part of the plan review process. Before permit issuance all parties must sign this agreement. Please note that failure to comply with special inspection requirements could be expensive in terms of retrofit design and construction as well as delays in the project.

PART I - SPECIAL INSPECTION AND TESTING AGREEMENT

PROJECT NAME _____
 PROJECT ADDRESS 5961 outfall Circle
 PLAN REVIEW NUMBER 0001179
 PERMIT NUMBER _____
 OWNER'S NAME _____
 OWNER'S ADDRESS _____
 OWNER'S REPRESENTATIVE _____ PHONE NUMBER _____

TESTING/INSPECTION FIRM(S) ITEMS
 1 Raney Geotechnical

CONTACT PERSON: John Raney
 2 _____

CONTACT PERSON: _____

PART II - SPECIAL INSPECTION AND TESTING AGREEMENT - INSPECTION REQUIRED

In accordance with Chapter 17 Section 1701 of the UBC, as adopted by this jurisdiction, SPECIAL INSPECTION is required as noted below:

PRECONSTRUCTION MEETING () REQUIRED () WAIVED

CODE SECTION	TYPE OF WORK	CONTINUOUS	PERIODIC
1701.5.1	CONCRETE	<input checked="" type="checkbox"/>	
1701.5.2	BOLTS INSTALLED IN CONCRETE		<input checked="" type="checkbox"/>
1701.5.3	SPECIAL MOMENT - RESISTING CONCRETE FRAME		
1701.5.4	REINFORCING STEEL AND PRESTRESSING STEEL TENDONS		<input checked="" type="checkbox"/>
1701.5	STRUCTURE WELDING		
1701.5.1	GENERAL		
	FIELD STRUCTURAL WELDING		<input checked="" type="checkbox"/>
	SHOP STRUCTURAL WELDING (REQUIRING SPECIAL INSPECTION)		
1701.5.2	SPECIAL MOMENT - RESISTING STEEL FRAMES		
1701.5.3	WELDING OF REINFORCING STEEL		
1701.5.6	HIGH STRENGTH BOLTING		<input checked="" type="checkbox"/>
1701.5.7	STRUCTURAL MASONRY		
1701.5.8	REINFORCED GYPSUM CONCRETE		
1701.5.9	INSULATING CONCRETE FILL		
1701.5.10	SPRAY APPLIED FIREPROOFING		
1701.5.11	PILING, DRILLED PIERS AND CAISSONS		
1701.5.12	SHOTCRETE		
1701.5.13	SPECIAL GRADING, EXCAVATION & FILLING		<input checked="" type="checkbox"/>
1701.5.14	SMOKE CONTROL SYSTEM		
1701.5.15	SPECIAL CASES		

1702 STRUCTURAL OBSERVATION PER SECTION 307 REQUIRED: () YES () NO

SCC 9.26.1004 FLOOD PROOFING INSPECTION & CERTIFICATION

OTHER: Epoxy Anchors

SPECIAL INSTRUCTIONS: _____



SPECIAL INSPECTION AND TESTING AGREEMENT

When special inspection is required by Section 1701, the architect or engineer of record shall prepare an inspection program which shall be submitted to the Building Official for approval prior to issuance of the building permit. The special inspector shall be employed by the owner (other than owner-builder/developer), the engineer or architect of record, or an agent of the owner, BUT NOT the contractor, or any other person responsible for the work (such as an owner-builder/developer).

The special inspection firm(s) named in Part I have been authorized to perform the special inspection and testing services designated in this agreement, and in accordance with the Uniform Building Code (UBC) requirements, and to report all activities to the Building Official, and other parties as listed. It is understood that special inspections are required in addition to the normal inspections performed by the Building Inspector.

The undersigned hereby affirm, under penalty of law, that the special inspection program is in accordance with the requirements of the UBC and the City of Sacramento.

The undersigned has used all reasonable diligence in completing this form and to the best of his/her knowledge the information contained herein is true and complete. The undersigned hereby certifies under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURES		PHONE NUMBER
OWNER		916 381-3600
ARCHITECT		
ENGINEER		
CONTRACTOR		
DEVELOPER		
SPECIAL INSPECTOR		

WARNING: Any person, who certifies under penalty of perjury in any case where certification is permitted by law and willfully states as true any material matter which he or she knows to be false, may be found guilty of perjury and subject to penalties which may include fines or imprisonment under the California Penal Code.

PART III • GEOTECHNICAL INSPECTION REQUIREMENTS

GEOTECHNICAL FIRM	
GEOTECHNICAL FIRM ADDRESS	PHONE NUMBER
GEOTECHNICAL ENGINEER	
REPORT NUMBER	
REPORT DATE	REVISION DATES
	RECEIPT NUMBER
	TYPE OF WORK
	REQUIRED
SITE PREPARATION/FILL COMPACTION	
FOUNDATION OBSERVATION	
DRILLED PIERS AND CAISSONS	

IF THE EARTHWORK INSPECTION IS NOT BEING DONE BY THE ABOVE GEOTECHNICAL ENGINEERING FIRM THEN A REVISED REPORT MUST BE SUBMITTED TO AND APPROVED BY THE CITY'S DEVELOPMENT SERVICES DIVISION.

ACCEPTED FOR THE BUILDING DEPARTMENT

PLAN CHECK ENGINEER (Please Print) JOHN TANG

PLAN CHECK ENGINEER SIGNATURE John Tang DATE 3/22/00

- INSTRUCTIONS TO THE SPECIAL INSPECTOR**
- 1 • PROVIDE DAILY FIELD REPORTS TO THE BUILDING INSPECTOR ON SITE AS CONSTRUCTION PROGRESSES.
 - 2 • A COPY OF ALL SPECIAL INSPECTIONS LABORATORY REPORTS SHALL BE SENT TO THE PLAN CHECK ENGINEER IDENTIFIED ABOVE AND THE ARCHITECT OR ENGINEER OF RECORD.
 - 3 • UPON COMPLETION OF SPECIAL INSPECTIONS AND TESTING WORK, PROVIDE THE CITY'S PLAN CHECK ENGINEER WITH A FINAL SPECIAL INSPECTIONS TEST REPORT, WET STAMPED AND SIGNED BY THE RESPONSIBLE PROFESSIONAL ENGINEER.

Date of Request: _____
By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: 5961 Outfall Circle

Assessor's Parcel Number: 062-0120-004/005/006/007/~~008/009/010/011~~

Previous Use: Rare land

Description of Request/Proposed Use: new industrial shell

Is This a Change of Use? Yes (vacant to industrial)

Prior Applications for Project Site(P#, Z#, DRPB#): Zoning Designation: M2S
299-082, 297025

Comments: - limited to 25% office.
- outdoor storage to be screened

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: [Signature] 2-8-00

*Needs to finish U.A.
up to Gary Sprose*

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0001179
Bldg Commercial
as of 08-07-2002 Permit Status: **READY**

Site Address: **5961 OUTFALL CR SAC**
Parcel No: 062-0120-004
Thomas Bros: 318A6 956

CONTRACTOR
BUZZ OATES ENTERPRISES
8615 ELDER CREEK RD
SACRAMENTO CA 95828
Phone: 916-381-3600

OWNER
O K/B
8920 43RD AV
SACRAMENTO CA 95828
Phone:

ARCHITECT

Phone:

Nature of Work: **NEW 96658 SHELL WHSE/OFFICE BLDG**

Permit Valuation: \$1,150,000.00
Square Footage: 0

Building Permit	\$8,204.35	Phased Permit Fee	\$0.00
Plan Review	\$6,696.65	Partial Permit Fee	\$0.00
Strong Motion Fee	\$241.50	Water Development Fee:	\$11,334.00
Auth to Start Work	\$0.00	Sewer Development Fee:	\$0.00
Housing Surcharge	\$0.00	Pocket Area Road	\$0.00
Technology Fee	\$596.04	Pocket Area Bridge	\$0.00
City Bus Oper Tax.....	\$460.00	Housing Trust Fund.....	\$26,147.66
Const Excise Tax.....	\$9,200.00	Granite Park Fee	\$0.00
Res Const Tax	\$0.00	FBA-South Natomas	\$0.00
Water Supply Test.....	\$0.00	FBA-Jacinto Creek.....	\$0.00
Review - Fire	\$3,673.00	Natomas Dev Fees.....	\$0.00
- Engr - Pub Wks.....	\$0.00	South Natomas Impr	\$0.00
- Engr-PubWks Dep...:(\$0.00)		Impact Fee	\$0.00
- Engr - Utilities.....	\$600.00	Park Dev Impact Fee	\$3,866.32
- Grading	\$0.00	SAFCA CIEF Fee.....	\$0.00
- Landscape.....	\$50.00	Habitat Mitigation Fee.....	\$0.00
Penalty Fee	\$0.00	Deferred Fees	\$0.00
Inspections	\$0.00	Refund	\$0.00
Cert of Occupancy.....	\$0.00	Additional Fees	\$0.00
Replace Cards/Plans....	\$0.00	TOTAL FEES	\$71,069.52
Plan Revisions	\$0.00	Payments	\$6,696.65
Permit Renewal	\$0.00	BALANCE DUE	\$64,372.87
Coach Recording	\$0.00		
Manuf Hsg Fee	\$0.00		

(Print or Type) If Printing, press hard for four copies

PART I To be completed by APPLICANT

OWNER'S NAME MARVIN L. OATES
 OWNER'S ADDRESS 7615 ELDER CREEK
 PROJECT ADDRESS 5961 OUTFALL CIRCLE
 PARCEL NUMBER 062-0120-004 LOT NO. _____
 SUBDIVISION NAME FLORIN DEPOT INDUSTRIAL PARK
 NUMBER OF UNITS _____

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE Don M. M... [Signature]
 TITLE OF APPLICANT PROJECT MANAGER
 DATE 8/09/02 PHONE NUMBER (916) 381 3600

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 0001179
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL
 SQUARE FEET OF CHARGEABLE BUILDING AREA 96,658
 SIGNATURE [Signature]
 TITLE Sup Bldg Insp. DATE 8-9-02

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT [Signature]
 DISTRICT CERTIFICATION NO. 33436

EXEMPT	COMMENTS
RESIDENTIAL/APT/CONDO	SQ FT X \$ = \$
COMMERCIAL/INDUSTRIAL <u>96,658</u>	SQ FT X \$ <u>.34</u> = \$ <u>32863.72</u>
OTHER FEE TYPE	SQ FT X \$ = \$
TOTAL FEES COLLECTED	= \$ <u>32863.72</u>

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature]
 TITLE _____ DATE 08/14/02

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

BUZZ OATES CONSTRUCTION

8615 ELDER CREEK ROAD
SUITE 100
SACRAMENTO, CA 95828

BANK OF AMERICA NT & SA
REID DEPOSIT CENTER
PO BOX 471
SACRAMENTO, CA 95812-0471

11-35
1210

DATE: April 17, 2001
CHECK NO.: 21860
AMOUNT: \$****190,659.00

Pay: *One hundred ninety thousand six hundred fifty-nine dollars and no cents

PAY TO THE ORDER OF: S.R.C.S.D.
9660 ECOLOGY LANE
SAC. CO. REG. SANITATION DISTRICT
SACRAMENTO, CA 95827-3881



THE REVERSE SIDE OF THIS DOCUMENT INCLUDES AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

0021860 121000358 14257 52086

COUNTY SANITATION DISTRICT NO. 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
PERMIT AND CALCULATION SHEET

APPLICATION NO:	BLDG PERMIT NO:
GENERAL INFORMATION	THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
	THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	\$14,748	COMMERCIAL USE	UNITS
SRCS	\$74,957	OFFICE/WAREHOUSE	
CONSTRUCTION		96,658 SF	
IN-LIEU			
TOTAL FEE	\$89,705		

APN: 062-0120-025

DESCRIPTION/SUBDIVISION: _____ LOT: _____

PROPERTY ADDRESS: 5961 OUTFALL CIR.

OWNER: BUZZ OATES CONTS.

MAILING ADDRESS: _____

CITY-STATE-ZIP: _____ PHONE: _____

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE: *M. Schaub*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

SRCS Sacramento Regional County Sanitation District

0545 Armstrong Avenue
Suite 101
Father, California
95655

Marshall Caston
Senior Engineering Technician
Customer Service/Sewer Fees

Office: [916] 876-6013
Fax: [916] _____
E-mail: castonm@sacounty.net

Technology in balance with nature

PAID

APR 18 2001

BY: *M. Caston*

OFFICE COPY

MESSAGE CONFIRMATION

02/09/00 06:22
ID=DEVELOPMENT SERVICES

NO.	MODE	BOX	GROUP
270	TX		

DATE/TIME	TIME	DISTANT STATION ID	PAGES	RESULT	ERROR PAGES	S.CODE
02/09 06:21	00'30"	916 875 6253	001/001	OK		0000



Customer Service Group
PWA Water Quality Engineering for
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

REQUEST FOR SEWER FEE QUOTE

DATE	2/8/00	NUMBER OF PAGES	1	PHONE	264-7046
FROM	City of SACRAMENTO	FAX	264-7046	PHONE	264-5547
TO	SRCSD Customer Service DULORE'S ROSS	FAX	875-6253	PHONE	

URGENT -- Applicant is in office or ready to pay permit.
If urgent, call 875-8820 to notify an Engineering employee that you faxed a request.
Press zero to speak to the operator.

1 WEEK WOULD BE FINE

NOT URGENT -- Applicant has requested informal quote

Applicant	NAME X WILKE KELLEY	PHONE 381-3600 381-4707
Property	APPLICANT'S PARCEL NUMBER 062 0120 004-007	PROPERTY ADDRESS 5961 Outfall Cr

BUZZ OATES
ENTERPRISES

Wednesday, December 22, 1999

5961 Outfall Cr.
Rev # 0001179

Troy Malaspino
Sacramento Fire Department
1231 I Street
Sacramento, CA 95814

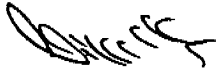
Re: Outfall Circle Project

Dear Troy,

As we discussed during our meeting on Tuesday, December 14th, the Sacramento Fire Marshall agreed earlier this year to several conditions regarding a proposed project on Outfall Circle (see attached letter, dated 6/29/99). Based on your assurance during our meeting that these conditions remain in effect, Buzz Oates Enterprises is proceeding with this project in accordance with these conditions.

If you have any questions or concerns, please call me at 381-3600. Thank you for your assistance.

Sincerely,



Mike Kelley
Project Manager

CITY OF SACRAMENTO
PERMIT ASSISTANCE

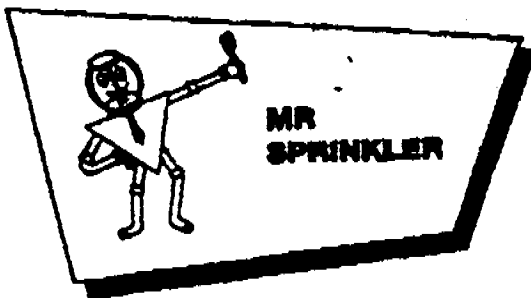
FEB 11 2000

cc: Jeff Rovegno, Mr. Sprinkler Fire Protection

RECEIVED

Fire Protection Contractor

CA Lic. 0472616
NY Lic. 0004889
AZ Lic. 0117000
VT Lic. 000-309100-0001



City of Sacramento Fire Marshal
1231 I Street
Sacramento, CA 95814-2979

June 29, 1999

Re: Buzz Oates Enterprises Outfall Circle Project

Subject: Summary of June 23rd Meeting

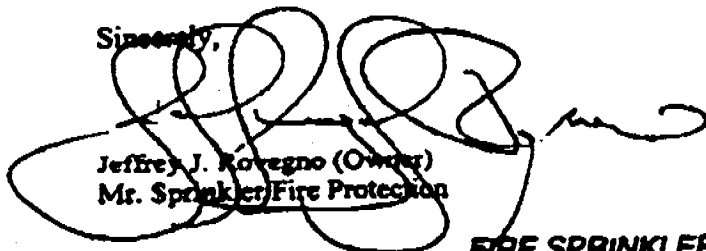
Dear Sir,

In summary of the meeting held Wednesday July 23rd with Greg Schubert and Mike Kelley of Buzz Oates Enterprises, Ross Woodman and Greg Hoeger of the City of Sacramento Fire Department, and myself, we agreed to the following:

1. The fire flows would be acceptable with the following stipulations:
 - a) The Buildings shall be protected with ESFR Automatic Fire Sprinkler Systems.
 - b) The Buildings shall be protected throughout with Beam Type Smoke Detection Systems (No additional pull stations, horns, or strobes will be required)
 - c) The Buildings shall be served by a single fire pump with a reciprocal maintenance agreement recorded on the deed to each property.
 - d) The Fire pump shall have a Pressure Sustaining Valve set at not less than 10psi to reduce the chance of cavitation damage to the pump and the public water supply.
 - e) The Fire pump shall be tested at the Sprinkler System Demand through the Test Nozzle (Discharging Water). Pump performance and certification to 150% of pump rating shall be established through the Flow Meter Test Loop (Circulating Water).
2. Six on site hydrants shall be added to the Civil Plan evenly spaced respectively between the buildings and at the building corners.
3. Any Fencing shall be subject to Fire Department review and approval.

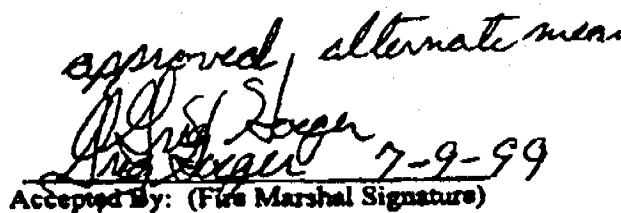
If these conditions meet with your approval, please sign in the space provide below. Please let us know if you have any questions or concerns. Thank you.

Sincerely,



Jeffrey J. Rovigno (Owner)
Mr. Sprinkler/Fire Protection

approved, alternate means



Accepted By: (Fire Marshal Signature) 7-9-99

FIRE SPRINKLERS SAVE LIVES
1526 Pine Valley Circle • Roseville, CA 95661 • (916) 773-7036 • Fax (916) 773-6995

WATER SUPPLY TEST - DEPT. OF UTILITIES 1395 35TH AVENUE SACRAMENTO, CA. 95822 PHONE: 916 / 264-1430 FAX: 916 / 264-8897	TEST NO: 99-37	FILE NO: R99-0033
	REQUEST DATE: 4-29-99	
	COMPLETE DATE: 5-6-99	
	ANALYSIS FEE: \$90.00	DATE PAID: 4-29-99
	FIELD TEST FEE: \$360.00	DATE PAID: 4-29-99
CONTACT PERSON: GREGG SCHUBERT	PHONE NO: 381-3600	FAX NO: 381-4707
COMPANY: BUZZ OATES ENTERPRISES	CELL PHONE NO:	
COMPANY ADDRESS: 8615 EIDER CREEK RD. SAC	STREET ADDRESS OF TEST: OUTFALL CIRCLE	
PURPOSE OF TEST: FIRE FLOWS	ASSESSOR'S PARCEL NUMBER: 068-18-4,5,6,7,8,9,10	

The undersigned agrees to the following items and conditions:

- (1) The street address shown above is correct.
- (2) Water supply data is developed from several sources of information which may include water supply test data, pipe network computer models, and continuous pressure recording stations. The design water supply data given below is to be used for design purposes.
- (3) Although the water supply data reported herein is believed to be accurate, the City makes no warranty, guaranty, certification or other representation of any kind that such data is accurate or correct, or that the pressures and/or flow rates reported herein can or will be maintained. The undersigned agrees that the City, its officers and employees shall not be liable for any damages of any kind resulting from the use of or reliance upon the water supply data reported herein by the undersigned or by any third party.
- (4) If the undersigned desires to witness the water supply test performed by the City, please check the box below:
 I want to witness this water supply test, which will be scheduled at the convenience of the Department of Utilities.
- (5) If the undersigned elects to hire a licensed engineer, at the undersigned's sole expense, to witness and certify the water supply test performed by the City, please check the box below:
 At my expense, I will arrange for a licensed engineer to witness and certify this water supply test, which will be scheduled at the convenience of the Department of Utilities.

Print Name: MIKE KELLEY Signature: [Signature] Date: 4/29/99

ENGINEERING REQUEST DATE: 4-29-99 DATE OF TEST: 4-30-99 TIME OF TEST: 10:35

WATER MAIN SIZE: 8" TEST CONDUCTED BY: Colasanti, Arnone, Task

	HYDRANT NO.	MAP PAGE	STATIC PRES. (PSI)	RESIDUAL PRES. (PSI)	PITOT PRES. (PSI)	OUTLET DIA. (IN.)	COEFFICIENT		CALC. FLOW @ PRES. (G.P.M.)	FLOW @ 20 PSI (G.P.M.)
							C ₁	C ₂		
RESIDUAL	77	103	35	18						
FLOWED	74	103			7	4.5	0.90	0.83	1194	
FLOWED	76	103			14	2.5	0.90	1.0	628	
FLOWED									TOTAL	1822
FLOWED										1703

• THE WATER SUPPLY TEST DATA IS NOT TO BE USED FOR THE DESIGN OF DOMESTIC WATER SYSTEMS.
 • (STATIC PRES. - RESIDUAL PRES.) / (STATIC PRES. - 20 PSI) IS LESS THAN 25%. THEREFORE, THESE RESULTS ARE ONLY VALID FOR FLOWS NOT EXCEEDING _____ G.P.M.

$$Q = 29.83 C_1 C_2 D^2 \sqrt{P_{pitot}}$$

$$Q_{20} = Q_F \left(\frac{P_s - 20}{P_s - P_r} \right)^{0.54}$$

	ACTUAL	DESIGN (1)
STATIC PRES.	35 - PSI	34 - PSI
RESIDUAL PRES.	18 - PSI	17 - PSI
TOTAL FLOW @ RESIDUAL PRES.	1800 - GPM	1800 - GPM
TOTAL FLOW @ 20 PSI	1700 - GPM	1600 - GPM

(1) The Design Water Supply Data reflects fluctuations and future demands on the water distribution system. It is to be used for design purposes.

March 10, 2005

Buzz Oates Enterprises II
Attention: Tom McGuire
8615 Elder Creek Road
Sacramento, California 95828

SUMMARY REPORT
CONSTRUCTION OBSERVATION AND TESTING SERVICES
OUTFALL CIRCLE
5961 and 6001 Outfall Circle
Sacramento, California
Reference No. 146-285.01
Permit Nos. 0001179, 0001180

INTRODUCTION

In accordance with your request, we have performed construction observation and testing services for the subject project. The project included construction of two concrete tilt-up buildings with concrete slab-on-grade floors of approximately 84,000 and 98,000 square feet. Our construction testing and observations were performed between August 2, 2000 and February 2, 2005. Our firm prepared a Foundation Investigation for the project dated June 1, 1999.¹ This letter summarizes the results of our construction observation and testing.

EARTHWORK OBSERVATION AND TESTING

Building Pad Construction

Following grading, the upper 12 inches of the building pad soils were treated with four pounds of cement per cubic foot. The chemically treated soil was brought to a uniform over-optimum moisture content, thoroughly mixed and compacted. Maximum fill depths within the building pad were on the order of two feet. Building pad areas appeared stable under earthwork equipment during and following earthwork construction.

Foundation Excavation Observation

Our representative observed all building foundation excavations prior to foundation concrete placement. All foundation excavations engaged suitable bearing materials in accord with the recommendations of our referenced report. Foundations appeared to meet or exceed minimum specified dimensions and were clean at the time of our observation.

¹ Raney Geotechnical Inc.: "Foundation Investigation, Outfall Circle Buildings, Outfall Circle and Unsworth Drive, Sacramento, California"; Job No. 146-285; June 1, 1999.

Pavement Construction

Pavement subgrade soils were cleared, scarified, moisture conditioned, and compacted. Pavement section aggregate base materials were placed, moisture conditioned, and compacted. All pavement areas appeared stable under earthwork equipment at the time of aggregate base placement. We understand that pavement subgrade soils were chemically treated prior to testing.

Field Density Testing

Our representative performed field density tests on building pad, utility trench backfill, and pavement section materials in accordance with ASTM Test Designations D2922 and D3017 (Nuclear Probe Method). Our test data indicate that the chemically treated building pad and pavement subgrade soils were compacted to a minimum of 92 percent of the laboratory determined maximum dry density.

Laboratory Compaction Testing

We performed laboratory compaction tests on representative samples of the site soils. The compaction tests were performed in accordance with ASTM Test Designation D1557. The results of the laboratory compaction tests are summarized below.

Material Description	Method	Maximum Dry Density (pcf)	Optimum Moisture Content (%)
Tan clayey silt – chemically treated	A	114	15.3
Tan fine sandy silt	A	110	13.6
Tan fine sandy silt – chemically treated	A	105	14.0

CONCRETE CONSTRUCTION

Reinforcing Steel Placement Observations

Our scope of work included observation wall panel reinforcing steel for the subject building. Detailed observations generally were performed one day prior to concrete placement with any corrections being verified by our representative prior to structural concrete placement. All reinforcing steel appeared to be placed in compliance with industry standards and the project plans, for size and placement location.

Concrete Placement Observation

Our representative observed concrete placement procedures during concrete construction of wall panels and closure strips. Concrete truck batch and placement times were recorded to ensure that the concrete was placed within a reasonable period (generally less than 90 minutes). Concrete temperatures were monitored and recorded. Concrete appeared to be placed and consolidated in general accord with industry standards.

Slump Testing

Our representative performed concrete slump testing during concrete placement. Slump testing was generally performed at least once per 150 cubic yards of concrete in accord with ASTM Test Designation C143, Slump of Portland Cement Concrete. Slump test specimens were obtained in accord with ASTM C172, Sampling Freshly Mixed Concrete. Slump test measurements were relayed to the contractor verbally. Our data would indicate that no significant amount of concrete was placed with an excessive slump.

Compressive Strength Testing

Generally, one set of four test specimens was cast per 150 cubic yards of concrete placed. The test specimens were returned to our laboratory for curing and compressive strength testing. Test specimens were cast, transported, and cured in accord with ASTM Test Designation C31, Making and Curing Concrete Test Specimens in the Field. Test specimens were stored in a humidity room complying with ASTM Specification C511. The test specimens were tested in unconfined compression in our laboratory at 7 and 28 days in accord with ASTM Test Designation C39. Copies of compressive strength test data are attached.

STRUCTURAL STEEL CONSTRUCTION

Shop Welding Observations

Our representative observed structural shop welding for panel embeds. We observed welding materials and workmanship; materials and workmanship appeared to comply with project specifications, industry standards and provisions of the American Welding Society.

Field Welding Observations

Our representative observed structural field welding for panel holddowns, columns, and the roof structure connections. Prior to initiation of welding operations we reviewed qualification certificates of all project welders; our review indicated that the welder's certificates were current and applicable to the various types of project welding. We observed welding materials and procedures; welding procedures, workmanship, and materials appeared to comply with industry standards and provisions of the American Welding Society Structural Welding Code.

Field welds were examined for visual defects or flaws; all welds appeared to be sound. In addition, we checked welded connections for conformance to project plans and specifications; all welds appeared to meet specifications for size, length and type.

High Strength Bolting

Our representative performed observation of A325 high strength bolts for the building's roof frame. We checked bolted connections for conformance to project plans and specifications; our observations indicate that the high strength bolts were installed in accord with industry standards and the project plans.

EPOXY OBSERVATIONS

Our representative observed the pre-drilled holes used for epoxy installation of all-thread bolts. All-thread bolts were installed to provide anchorage for roof joist supports. The pre-drilled holes appeared to meet depth requirements and were brushed and blown out prior to bolt installation and epoxy placement. Our representative observed the mixing and application of epoxy at the pre-drilled holes. Our observations indicate that epoxy installation was performed in accordance with the applicable ICBO report and the project plans.

EXPANSION ANCHOR OBSERVATIONS

Our representative observed installation of expansion anchors that were used for anchorage of roof ledgers to wall panels. Our observations indicate that the installation appeared to be in conformance with the project drawings and the applicable ICBO report.

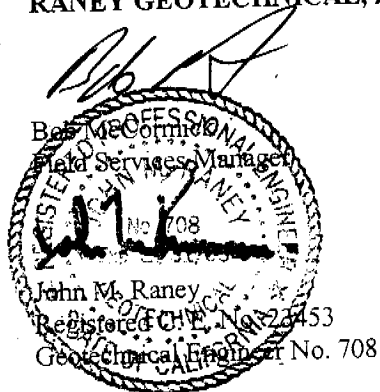
SUMMARY AND LIMITATIONS

Our test data and observations indicate that the described construction observed by this company has, to the best of our knowledge, been performed in accord with sound engineering practice, the project plans, and our referenced report. Horizontal and vertical limits of the described work were determined by others. We cannot guarantee construction, nor should our work or this letter be construed as relieving the contractors from their primary responsibility to conform to contractual agreements and sound engineering practice.

Should you have any questions regarding this letter or require any further information, please contact our office.

Very truly yours,

RANEY GEOTECHNICAL, INC.



Attachments: Compressive Strength Reports

(2) Addressee

BM/JMR/cjh

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00034
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/8/2004	TICKET #:	54090507
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Merced R.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	41 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	83 Degrees F
AIR ENTRAINMENT:			
LOCATION:	Panel 35		

STRENGTH RESULTS

SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	AREA(sq. inches)	BREAKDATE	Corr.	STRENGTH (psi)
A	7	76600	28.27	1/15/2004		2710
B	28	110400	28.27	2/5/2004		3910
C	28	106100	28.27	2/5/2004		3750

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: Bob A

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00035
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/8/2004	TICKET #:	54090519
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Merced R.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	41 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	80 Degrees F
AIR ENTRAINMENT:			
LOCATION:	Panel 1		

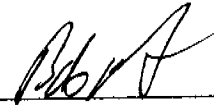
STRENGTH RESULTS

SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	AREA(sq. inches)	BREAK DATE	Corr.	STRENGTH(psi)
A	7	86300	28.27	1/15/2004		3050
B	28	109200	28.27	2/5/2004		3860
C	28	107600	28.27	2/5/2004		3810

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00036
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/8/2004	TICKET #:	54090536
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Merced R.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	40 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	81 Degrees F
AIR ENTRAINMENT:			
LOCATION:	Panel 8		

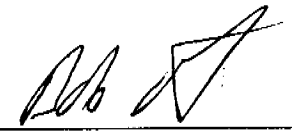
STRENGTH RESULTS

SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	AREA(sq. inches)	BREAK DATE	Corr.	STRENGTH (psi)
A	7	89900	28.27	1/15/2004		3180
B	28	113000	28.27	2/5/2004		4000
C	28	113000	28.27	2/5/2004		4000

- Meets 28 day strength requirement
- Does not meet 28 day strength requirement
- No strength requirement given

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
 Greg Schubert
 8615 Elder Creek Rd.
 Sacramento, CA 95828

SAMPLE ID: 04-00037
PROJECT: 146-285.01
 Outfall Circle
 Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/12/2004	TICKET #:	54090700
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Merced R.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	40 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	88 Degrees F
AIR ENTRAINMENT:			
LOCATION: Panel 23			

STRENGTH RESULTS

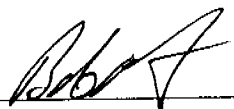
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	85300	6	28.27	1/19/2004		3020
B	28	107600	6	28.27	2/9/2004		3810
C	28	96300	6	28.27	2/9/2004		3410

- Meets 28 day strength requirement
- Does not meet 28 day strength requirement
- No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
 Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00038
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/12/2004	TICKET #:	54090713
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Merced R.	SLUMP:	5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	40 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	85 Degrees F
		AIR ENTRAINMENT:	
LOCATION:	Panel 30		

STRENGTH RESULTS


SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	86500	6	28.27	1/19/2004		3060
B	28	110100	6	28.27	2/9/2004		3890
C	28	114300	6	28.27	2/9/2004		4040

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00039
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/12/2004	TICKET #:	54090726
MATERIAL TYPE:	Concrete	MIX DESIGN:	98
SAMPLED BY:	Merced R.	SLUMP:	4 inches
SPEC. STRENGTH:	4000 psi	AIR TEMP:	38 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	88 Degrees F
		AIR ENTRAINMENT:	
LOCATION:	Panel 20		

STRENGTH RESULTS

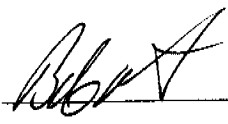
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	104400	6	28.27	1/19/2004		3690
B	28	123700	6	28.27	2/9/2004		4380
C	28	126100	6	28.27	2/9/2004		4460

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00077
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/15/2004	TICKET #:	54091181
MATERIAL TYPE:	Concrete	MIX DESIGN:	54091181
SAMPLED BY:	Scott E.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	47 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	76 Degrees F
		AIR ENTRAINMENT:	
LOCATION:	Building A, Panel 3		

STRENGTH RESULTS

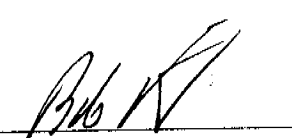
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	81500	6	28.27	1/22/2004		2880
B	28	86800	6	28.27	2/12/2004		3070
C	28	101400	6	28.27	2/12/2004		3590

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:-

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00078
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/15/2004	TICKET #:	54091206
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Scott E.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	46 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	74 Degrees F
AIR ENTRAINMENT:			
LOCATION: Building A, Panel 40			

STRENGTH RESULTS


SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	79600	6	28.27	1/22/2004		2820
B	28	106800	6	28.27	2/12/2004		3780
C	28	104500	6	28.27	2/12/2004		3700

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00079
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/15/2004	<input checked="" type="checkbox"/> TICKET #:	54091241
MATERIAL TYPE:	Concrete	MIX DESIGN:	98
SAMPLED BY:	Scott E.	SLUMP:	4.75 inches
SPEC. STRENGTH:	4000 psi	AIR TEMP:	46 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	77 Degrees F
		AIR ENTRAINMENT:	
LOCATION:	Building A, Panel 33		

STRENGTH RESULTS

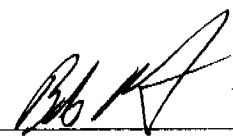
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	94500	6	28.27	1/22/2004		3340
B	28	113700	6	28.27	2/12/2004		4020
C	28	122500	6	28.27	2/12/2004		4330

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00109
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/16/2004	TICKET #:	54091457
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Scott E.	SLUMP:	4.25 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	45 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	77 Degrees F
AIR ENTRAINMENT:			
LOCATION: Building A, Panel 14			

STRENGTH RESULTS


SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	77900	6	28.27	1/23/2004		2760
B	28	104110	6	28.27	2/13/2004		3680
C	28	105330	6	28.27	2/13/2004	-	3730

- Meets 28 day strength requirement
- Does not meet 28 day strength requirement
- No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00110
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/16/2004	TICKET #:	54091488
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Scott E.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	46 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	77 Degrees F
		AIR ENTRAINMENT:	
LOCATION: Building A, Panel 22			

STRENGTH RESULTS

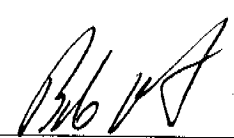
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	75000	6	28.27	1/23/2004		2650
B	28	99330	6	28.27	2/13/2004		3510
C	28	102100	6	28.27	2/13/2004		3610

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-00111
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	1/16/2004	TICKET #:	54091510
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Scott E.	SLUMP:	4.5 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	46 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	76 Degrees F
AIR ENTRAINMENT:			
LOCATION:	Building A, Panel 26		

STRENGTH RESULTS


SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	80300	6	28.27	1/23/2004		2840
B	28	112800	6	28.27	2/13/2004		3990
C	28	108520	6	28.27	2/13/2004		3840

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-01624
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	8/18/2004	TICKET #:	54114351
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Robert S.	SLUMP:	4.8 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	78 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	82 Degrees F
AIR ENTRAINMENT:			
LOCATION: Closure Strip, Slab on Grade.			

STRENGTH RESULTS

SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK-DATE	Corr:	STRENGTH (psi)
A	7	73190	6	28.27	8/25/2004		2590
B	28	102540	6	28.27	9/15/2004		3630
C	28	103400	6	28.27	9/15/2004		3660

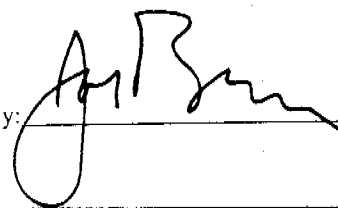
- Meets 28 day strength requirement
- Does not meet 28 day strength requirement
- No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By:



Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-01642
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	8/19/2004	TICKET #:	54114547
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Chuck S.	SLUMP:	4.75 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	76 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	88 Degrees F
AIR ENTRAINMENT:			
LOCATION:	Building A, Pour Strip		

STRENGTH RESULTS

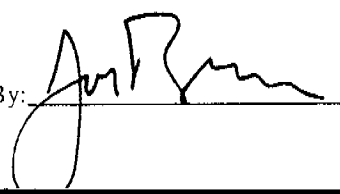
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	79040	6	28.27	8/26/2004		2800
B	28	102750	6	28.27	9/16/2004		3630
C	28	104980	6	28.27	9/16/2004		3710

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-01674
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	8/23/2004	TICKET #:	54114035
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Robert S.	SLUMP:	4.2 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	64 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	80 Degrees F
AIR ENTRAINMENT:			
LOCATION: Perimeter Strip, South Wall			

STRENGTH RESULTS

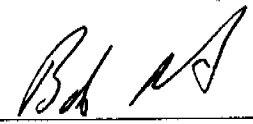
SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	69170	6	28.27	8/30/2004		2450
B	28	99210	6	28.27	9/20/2004		3510
C	28	103800	6	28.27	9/20/2004		3670

- Meets 28 day-strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

CC: RMC Pacific Materials
Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 

Compressive Strength Report

ASTM METHOD: C-39

Buzz Oates Enterprises II
Greg Schubert
8615 Elder Creek Rd.
Sacramento, CA 95828

SAMPLE ID: 04-01675
PROJECT: 146-285.01
Outfall Circle
Outfall Circle & Unsworth Drive

SAMPLE DATA

DATE SAMPLED:	8/20/2004	TICKET #:	54114714
MATERIAL TYPE:	Concrete	MIX DESIGN:	58
SAMPLED BY:	Brian M.	SLUMP:	4 inches
SPEC. STRENGTH:	3000 psi	AIR TEMP:	66 Degrees F
SUPPLIER:	RMC Pacific Materials	MIX TEMP:	80 Degrees F
AIR ENTRAINMENT:			
LOCATION: Building B, Slab on Grade, Pourstrip at line F/4			

STRENGTH RESULTS

SAMPLE	AGE(days)	ULTIMATE LOAD(lbs.)	Dia (in)	AREA(in)	BREAK DATE	Corr:	STRENGTH (psi)
A	7	88170	6	28.27	8/27/2004		3120
B	28	107440	6	28.27	9/17/2004		3800
C	28	110540	6	28.27	9/17/2004		3910

- Meets 28 day strength requirement
 Does not meet 28 day strength requirement
 No strength requirement given

Specimens are free from defects and fractures are of a typical nature unless otherwise noted below.

Notes:

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Leo McGlade & Assoc., Inc., Dave Collis

Reviewed By: 