

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0301581**  
**Insp Area: 4**  
Thos Bros:  
Sub-Type: NSFR  
Housing (Y/N): N

**Site Address: 5431 CALABRIA WY SAC**  
Parcel No: 201-0690-022

NORTHPOINTE PARK 20 LOT 22

CONTRACTOR  
LENNAR RENAISSANCE INC  
2240 DOUGLAS BL  
ROSEVILLE, CA 95661

OWNER

ARCHITECT

**Nature of Work: MP426 2 STORY 10 ROOM SFR**

**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 732348 Date 2/28/03 Contractor Signature [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 \_\_\_\_\_

**PAID**  
**CITY OF SACRAMENTO**  
**FEB 24 2003**  
**NORTH PERMIT**  
**AGENT**

**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 2-24-03 Applicant/Agent Signature [Signature]

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm under penalty of perjury one of the following declarations:

\_\_\_\_ I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier OLD REPUBLIC INS. CO. Policy Number MWC10845400 Exp Date 11/01/2003

\_\_\_\_ (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 2-24-03 Applicant Signature [Signature]

**WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.**

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

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

2

Project Address: 5431 CALABRIA WAY Assessor Parcel # 201-0690-022  
 Lot Number: 22 Subdivision NORTHPOINTE PARK VILLAGE 20

OWNER INFORMATION:

Legal Property Owner: WINNCREST HOMES Phone# 773-7471  
 Owner Address: 2240 DOUGLAS BLVD City ROSEVILLE State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor WINNCREST HOMES Lic. # 1732348 Phone # 773-7471 Fax \_\_\_\_\_

PROJECT INFORMATION:

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A  
 No. of Stories: TWO No. of Rooms: \_\_\_\_\_ Street Width: 40'  
 1<sup>st</sup> Floor Area 1335 2<sup>nd</sup> Floor Area 1012 Basement H/A Roof Material TILE  
 AREA IN SQUARE FOOT OF:  
 Dwelling/Living 2347 0301581  
 Garage/Storage 580  
 Decks/Balconies 96  
 Carports \_\_\_\_\_  
 SCOPE OF WORK: NEW SFD  
M.P. # 426

FOR OFFICE USE ONLY

- Information Above Complete
- Violation Files Checked
- Standard Setbacks
- County Sewer
- AR Flood Waiver Required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply:

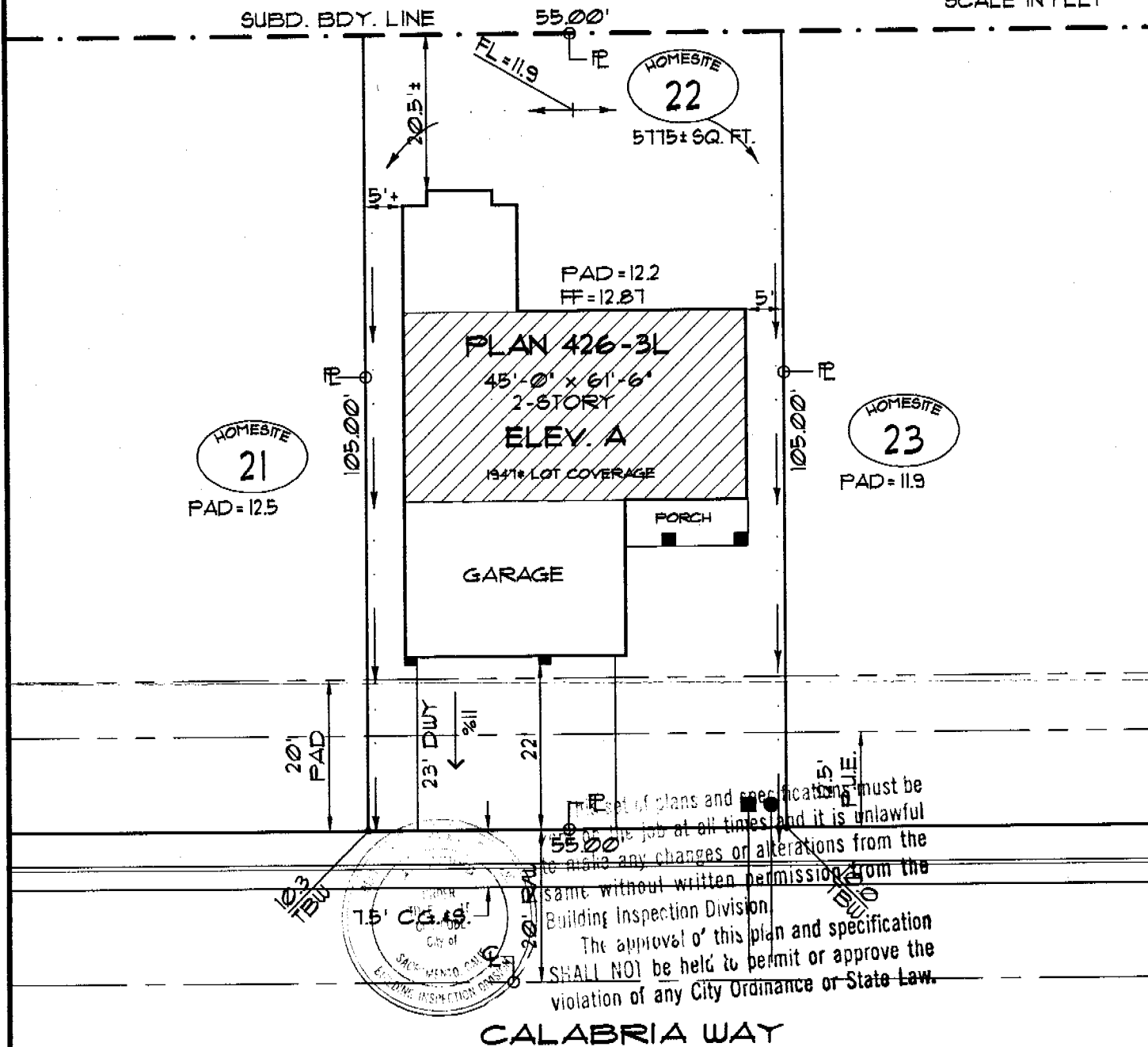
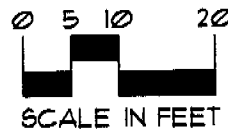
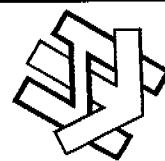
~THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT~

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 1 X 1 / COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION
  - a) Assessor's Parcel Number
  - b) New Floor Area
  - c) Owners Name
  - d) Project Address

Date: \_\_\_\_\_ Received by: (staff) \_\_\_\_\_ Permit # \_\_\_\_\_

# plot plan

THIS PLOT PLAN IS FOR THE PURPOSE OF SHOWING THE HOUSE TO BE CONSTRUCTED ON THE LOT AND MAY NOT REPRESENT THE FINAL AS-BUILT CONFIGURATION OF THE PROPERTY OR IMPROVEMENTS THEREON. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED, NOR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS, OTHER THAN MINIMUM ORDINANCE, MAY VARY OR CHANGE WITHOUT PRIOR NOTICE, DUE TO ACTUAL SITE CONDITIONS.




This set of plans and specifications must be used for this job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division. The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

CALABRIA WAY

lot coverage	
LOT AREA:	5715± #
BUILDING:	1947 #
BLDG./ LOT AREA:	34 %

retaining wall	
HEIGHT:	_____
LENGTH:	_____
DISTANCE FROM PL.:	_____

symbols legend	
DROP INLET:	
ELECTRIC SERVICE BOX:	
FIRE HYDRANT:	
FLOW LINE HIGH POINT:	FL=23.4
GAS SERVICE:	
PAD-MOUNT TRANSFORMER:	
SEWER SVC.:	
STREET LIGHT:	
TOP-BACK OF SIDEWALK ELEV.:	123.4 TEW
SWALE (FLOW DIRECTION):	
WATER SVC.:	
EXTENTS OF 2ND STORY LEVEL:	



## Winncrest Homes

### GOSSAMER SPRINGS

A REGENCY PARK COMMUNITY

# home site #22

## 5431 Calabria Way

NORTHPOINTE PARK VILLAGE 20  
CITY OF SACRAMENTO, CALIFORNIA  
a.p.n.: 201-0690-022

**General notes**

- 1) DIMENSIONS ALONG CURVED LINES ARE CHORD LENGTHS, U.O.N.
- 2) SETBACK DIMENSIONS ARE ROUNDED DOWN TO NEAREST HALF UNIT, U.O.N.
- 3) FOOTPRINT AREA CALCULATIONS (#) ARE BASED ON PLAN DIMENSIONS ONLY AND DO NOT INCLUDE COVERED ENTRIES, PORCHES OR ARCHITECTURAL PROJECTIONS.

22	BCB	1/27/03	20:1
phase	drawn by	issue	scale



Planning and Building Department  
Building Division

**CITY OF SACRAMENTO**  
CALIFORNIA

**Downtown Permits Center**  
1231 I Street, #200  
Sacramento, CA 95814-2998  
**North Permits Center**  
2101 Arena Blvd., Suite 200  
Sacramento, CA 95834

ADDRESS 5431 Calabria

PERMIT NO. 0301581

INSPECTION COMMENTS	PERMIT DOCUMENTS

FINAL APPROVALS	
BUILDING	<i>M. Asquith</i> <i>12/15/03</i>
ELECTRICAL	
PLUMBING	
MECHANICAL	
FIRE	
SITE	

# ENGEL INSULATION, INC.

CALIFORNIA CONTRACTOR'S LICENSE #745646

460 Roseville Road • Roseville, CA 95678

(916) 786-2088 / (916) 786-2064

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

TRACT California State Blvd LOT 000 200 926

STREET 5431 Calabria CITY Rocklin

### EXTERIOR WALLS:

MANUFACTURER CT THICKNESS 3 1/2 R-VALUE 13

### CEILING AREA: BATTS

MANUFACTURER CT THICKNESS 1 1/2 R-VALUE 38

### CEILINGS: BLOWN IN

MANUFACTURER Watts THICKNESS 1 1/4 R-VALUE 38

SQUARE FOOTAGE 928 NUMBER OF BAGS USED 22

### FLOOR AREA:

MANUFACTURER CT THICKNESS 6 1/4 R-VALUE 19

### EXTERIOR KNEEWALL:

MANUFACTURER CT THICKNESS 6 1/4 R-VALUE 19

### INTERIOR KNEEWALL:

MANUFACTURER CT THICKNESS 3 1/2 R-VALUE 13

APPLIED CAULK & SEALANT TO ALL EXTERIOR OPENINGS & PENETRATIONS

YES  NO

GENERAL CONTRACTOR \_\_\_\_\_

CALIFORNIA CONTRACTORS

LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE

TITLE

Paul Johnson INSULATION CONT. SIGNATURE Paul Johnson, 1/13/83 TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**OMEGA PRODUCTS INTERNATIONAL, INC.**  
**DIAMOND WALL INSULATING STUCCO SYSTEM**

ICBO Report # 4004

Job Address:

WINNCREST HOMES-GOSSAMER SPRINGS

Date of Job Completion: October 20, 2003

Lot Number: 22

**PLASTERING CONTRACTOR:**

Name: STUCCO WORKS, INC.

Address: 5900 WAREHOUSE WAY - SACRAMENTO, CALIFORNIA 95826

Telephone No: (916) 383-6667

Contractor Number of Diamond Wall System: 2175

This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's inspections.

November 25, 2003

Date

  
Signature of authorized representative of Plastering Contractor

This installation card must be presented to the building inspector after completion of work and before final inspection.

**INSTALLATION CERTIFICATE**

Site Address:

Permit Number:

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

**HVAC SYSTEMS:**

**Heating Equipment**

Equip. Type (pkg. heat pump)	CBC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) <sup>1</sup> (≥CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	Bryant 310JAV036070	1	.80	Attic	4.2	24345	51000

**Cooling Equipment**

Equip. Type (pkg. heat pump)	CBC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) <sup>1</sup> (≥CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
Split AC	Bryant 537A036	1	14.0	Attic	4.2	31492	35800

1. ≥ reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) the actual equipment installed, 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the *Energy Efficiency Standards* for residential buildings, and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the *Appliance Efficiency Regulations* or Part 6), where applicable.

Robert J. [Signature] 4-30-03  
Signature, Date.

Deal Sheet Metal Inc.  
Installing Subcontractor (Co. Name)  
OR General Contractor (Co. Name) OR Owner

**WATER HEATING SYSTEMS:**

Heater Type	CBC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation Control Type	# of Identical Systems	Rated <sup>2</sup> Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency <sup>2</sup> (EF, RE)	Standby <sup>2</sup> Loss (%)	External Insulation R-value <sup>2</sup>

- 2 For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.
- 3. R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

**Faucets & Shower Heads:**

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 111.

I, the undersigned, verify that equipment listed above my signature is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the *Energy Efficiency Standards* for residential buildings; and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the *Appliance Efficiency Regulations* or Part 6), where applicable.

Signature, Date

Installing Subcontractor (Co. Name) OR  
General Contractor (Co. Name) OR Owner

COPY TO: Building Department  
HERS Provider (if applicable)  
Building Owner at Occupancy

**INSTALLATION CERTIFICATE** (page 1 of 4) **CF-6R**

Site Address \_\_\_\_\_ Permit Number \_\_\_\_\_

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department upon request, building owner at occupancy per Section 10-1030a.

**HVAC SYSTEMS:**

**Heating Equipment**

Equip. Type (e.g., Heat Pump)	CES Certified Mfr Name & Model Number	# of Heating Systems	Efficiency (AFUE, etc.) (a CE-18 value)	Best Location (e.g., etc.)	Dist or Piping (e.g., etc.)	Heating Load (BTU/hr)	Heating Capacity (BTU/hr)
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

**Cooling Equipment**

Equip. Type (e.g., Heat Pump)	CES Certified Compressor Unit Mfr Name and Model Number	# of Heating Systems	Efficiency (SEER, etc.) (a CE-18 value)	Best Location (e.g., etc.)	Dist or Piping (e.g., etc.)	Cooling Load (BTU/hr)	Cooling Capacity (BTU/hr)
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-13) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date \_\_\_\_\_

Installing Subcontractor (Co. Name) \_\_\_\_\_  
 OR General Contractor (Co. Name) OR Owner \_\_\_\_\_

**WATER HEATING SYSTEMS:**

Model No.	CES Certified Mfr Name & Model Number	Manufacturer Type (e.g., Tankless)	# Bath Connections	# of Heating Systems	Rated Input BTU/hr	Tank Volume (Gallons)	EF (Energy Factor)	Capacity (GPH)	External Insulation (R-Value)
_____	<u>HILVERSON</u>	<u>STD</u>	<u>N/A</u>	<u>N/A</u>	<u>40,000 BTU/hr</u>	<u>0</u>	<u>0.67</u>	<u>160 to 200</u>	<u>R-20</u>
_____	<u>HILVERSON</u>	<u>STD</u>	<u>N/A</u>	<u>N/A</u>	<u>40,000 BTU/hr</u>	<u>0</u>	<u>0.67</u>	<u>160 to 200</u>	<u>R-20</u>

For small gas storage heated input at 75,000 Btu/hr, electric resistance and heat pump water heaters, list Energy Factor.  
 For large gas storage water heaters heated input > 75,000 Btu/hr, list Recovery Efficiency, Capacity and Rated Input.  
 For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.

**Faucets & Shower Heads:**

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 8, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-13) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Rich Sande  
 Signature, Date \_\_\_\_\_

WIL-MOR PLUMB  
 Installing Subcontractor (Co. Name) OR  
 General Contractor (Co. Name) OR Owner \_\_\_\_\_

COPY TO: Building Department \_\_\_\_\_