

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0603955
Insp Area: 4
Thos Bros: 256-J3

Site Address: 5757 VAN EYCK WY SAC
Parcel No: JMA NORTH NATOMAS VII. 1 LOT 64

Sub-Type: NSFR
Housing (Y/N): N

CONTRACTOR
CAMBRIDGE HOMES
1816 TRIBUTE RD. STE. 100
SACRAMENTO CA. 95815

OWNER

ARCHITECT

Nature of Work: MP 3125 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 766741 Date 3-31-06 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
MAR 31 2006

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation in the application, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvements do 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 3-31-06 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 ABD INS&FINANCIAL SRVCS Policy Number 775 827 1555 Exp Date 01/01/2007

(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 3-31-06 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.

INSTALLATION CERTIFICATE

(Page 2 of 12)

CF-6R

Cambridge Comm. SMA/Orleans

Site Address 5757 VAN EYCK ROAD

Permit Number 0603955

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) 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(a).

FENESTRATION/GLAZING:

	Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Panels	Total Quantity of Like Product (Optional)	Area Square Feet	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1.	10110 HV	.24				85		
2.	10210 SH	.24				85		
3.	10340 PW	.23				92.25		
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								

¹ Use values from a fenestration product's NFRC label. For fenestration products without an NFRC label, use the default values from Section 116 of the Energy Efficiency Standards.

² Installed U-factor must be less than or equal to values from CF-1R. Installed SHGC must be less than or equal to values from CF-1R, or a shading device (exterior or overhang) is installed as specified on the CF-1R. Alternatively, installed weighted average U-factors for the total fenestration area are less than or equal to values from CF-1R. If using default table SHGC values from §116 identify whether tinted or not.

I, the undersigned, verify that the fenestration/glazing listed above my signature: 1) is the actual fenestration product installed; 2) is equivalent to or has a lower U-factor and lower SHGC than that specified in the certificate of compliance (Form CF-1R), admitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the product meets or exceeds the appropriate requirements for manufactured devices (from Part 6), where applicable.

3 [Signature] 10/20/06 [Signature]
 Item #s Signature Date Installing Subcontractor (Co. Name) OR
 (if applicable) General Contractor (Co. Name) OR Owner
 OR Window Distributor

Item #s Signature Date Installing Subcontractor (Co. Name) OR
 (if applicable) General Contractor (Co. Name) OR Owner
 OR Window Distributor

Item #s Signature Date Installing Subcontractor (Co. Name) OR
 (if applicable) General Contractor (Co. Name) OR Owner
 OR Window Distributor

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

ORLEANS PLAN #1

INSTALLATION CERTIFICATE (Page 3 of 12) CF-6R

Site Address 5757 VAN EYCK WAY	Permit Number 0603955
--	---------------------------------

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) 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(a).

HVAC SYSTEMS:*Heating Equipment*

Equip Type (pkg. heat pump)	CEC Certified Mfr. Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (-CF-IR value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	Lennox #640UH-60C110X 1		.80	Attic	6.0	43556	89400

Cooling Equipment

Equip Type (pkg. heat pump)	CEC Certified Mfr. Name and Model Number	# of Identical Systems	Efficiency (SEER or EER) (-CF-IR value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
Split A/C	Lennox #13ACD-048	1	13.0	Attic	6.0	29887	46,300

1. \geq symbol reads *greater than or equal to* what is indicated on the CF-IR value.
Include both SEER and EER if compliance credit for high EER air conditioner is claimed.

I, the undersigned, verify that equipment listed above is: 1) is 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.

Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner Deal Mechanical Inc.	Date:
Signature Robert Deal	

Copies to: BUILDING DEPARTMENT, HERS RATER (IF APPLICABLE) BUILDING OWNER AT OCCUPANCY

CERTIFICATION OF INSULATION

PART I GENERAL	Cambridge Orleans		LOT # 64		<input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026 <input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675 <input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675					
	DATE INSULATION COMPLETED					9-8-06				
PART II AREAS INSULATED	WALLS		CEILING			FLOORS				
	(SQUARE FEET)		(SQUARE FEET)			(SQUARE FEET)				
	TYPE OF INSULATION		TYPE OF INSULATION			TYPE OF INSULATION				
	MATERIAL FIBERGLASS		MATERIAL FIBERGLASS			MATERIAL FIBERGLASS				
	FORM BATTS		FORM BATTS & BLOW			FORM BATTS				
	MANUFACTURER'S PRODUCT I.D.		MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.				
	MANUFACTURER		MANUFACTURER			MANUFACTURER				
	CT	OC	JM	CT	OC	JM	CT	OC	JM	
	R - VALUE INSTALLED		APPLIED THICKNESS		R - VALUE INSTALLED		APPLIED THICKNESS		APPLIED THICKNESS	
	13 19		3 1/2" 5 1/2"		30		9" 12"			
MATERIAL FIBERGLASS		FORM BATTS		R VALUE		MANUFACTURER				
						CT	OC	JM		
MATERIAL <i>Foam</i>		MANUFACTURER		MANUFACTURER						
				HILTI		HANDY FOAM				
THIS IS TO CERTIFY THAT THE INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL SPECIFICATIONS AND MANUFACTURER'S INSTRUCTIONS.										
PART III CERTIFICATION	SIGNATURE — INSULATION CONTRACTOR				TITLE		DATE			
	<i>JC</i>				MANAGER		8-16-06			
SIGNATURE — GENERAL CONTRACTOR				TITLE		DATE				
REMARKS										

SIC - 303

BUILDER COPY

INSTALLATION CARD

WESTERN I-KOTE
Sacramento Stucco Company, Inc.

Job Address
Cambridge Homes - Orleans in Natomas
Lot 64

ICBO Evaluation Service, Inc.
Evaluation Report ER-3899

5757 VAN EYCK WAY

Date of Job Completion 09/05/06

Plastering Contractor

Name: Venture Lath & Plaster, Inc.

Address: PO Box 1391, North Highlands, CA 95660

Telephone Number: (916) 334-3591

Approved contractor number as issued by coating manufacturer: 243

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 instructions.

Jason Wu President
Signature of authorized representative or
plastering contractor

09/25/06
Date

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

INSTALLATION CARD

WESTERN I-KOTE
Sacramento Stucco Company, Inc.

Job Address

ICBO Evaluation Service, Inc.
Evaluation Report ER-3899

~~_____~~
~~_____~~
~~_____~~

Plastering Contractor

Name: Venture Lath & Plaster, Inc.

Address: PO Box 1391, North Highlands, CA 95660

Telephone Number: (916) 334-3591

Approved contractor number as issued by coating manufacturer: 243

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 instructions.

Jason Wu President
Signature of authorized representative or
plastering contractor

Date

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

INSPECTOR'S COPY