

**Development Services**  
We Help Build A Great City

**CITY OF SACRAMENTO**

www.cityofsacramento.org

Help Line: 1-916-808-6656 OR 1-866-EZ-PERMIT

Inspection Request: 1-916-808-7622

**Downtown Permit Center**  
New City Hall  
915 I Street, 3rd Floor  
Sacramento, CA 95814

**North Permit Center**  
2101 Arena Blvd., Suite 200  
Sacramento, CA 95834

**Permit No.** 0615042  
**Date Applied** 09/27/2006  
**Type** Residential  
**Subtype** New Building  
**Category** Single Family  
  
**Permit Address** 8576 BRUCEVILLE RD  
SACRAMENTO CA  
**Site Location**  
  
**Parcel No.** 11701400020000  
  
**Owner** TANG PAUL PHON A  
8667 FALMOUTH WY  
SACRAMENTO, CA  
916/203-5516  
  
**Applicant** TANG PAUL PHON A  
TANG PAUL PHON A  
8667 FALMOUTH WY  
SACRAMENTO, CA  
916/203-5516  
  
**Valuation** \$ 387,184.80

| Fee Items                          | # of Each | Amount            |
|------------------------------------|-----------|-------------------|
| Permit--Building-Res               | 1         | \$3,027.09        |
| Plan Ck--Building Res              | 1         | \$1,271.61        |
| Strong Motion                      | 1         | \$38.72           |
| Construction Excise Tax            | 1         | \$2,306.13        |
| City Business Oper. Tax            | 1         | \$154.87          |
| Bldg-Technology Surcharg           | 1         | \$171.95          |
| General Plan Surcharge             | 1         | \$228.92          |
| Water Supply Test                  | 1         | \$110.00          |
| Water Meter Fee                    | 1         | \$385.00          |
| Res Const Water Use Fee            | 1         | \$53.55           |
| Water Supply Test - 233            | 1         | \$475.00          |
| Residential Construction Tax - 209 | 385       | \$385.00          |
| <b>Total</b>                       |           | <b>\$8,607.84</b> |

**PAID**  
**CITY OF SACRAMENTO**  
**DEC 01 2006**

Description of Work: NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES  
 NSFR-3941 SQ FT AND 1100 SQ FT GARAGE, 140 SQ FT COVERED PORCH

**LICENSED CONTRACTOR'S 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: \_\_\_\_\_ License Number: \_\_\_\_\_  
 Date: \_\_\_\_\_ Contractor: \_\_\_\_\_

**OWNER-BUILDER DECLARATIONS**

I hereby affirm that I am exempt from the Contractor's License Law (C.L.L.) for the following reason (Sec. 7031.5.B&P 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/she is licensed pursuant to the provisions of C.L.L. Chapter 9 (commencing with Sec.7000) of Division 3 of the B&P Code) or that he/she is exempt there from and the basis for the alleged exemption. Any violation of Sec. 7031.5 by any applicant for a permit subjects the applicant to civil penalty of not more than five hundred dollars (\$500):

I, as 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 B&P Code: The C.L.L. does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his 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 did not build or improve for the purpose of sale.)

PA I, as owner of the property, am exclusively contracting with licensed contractor(s) to construct the project (Sec. 7044, B&P Code: The C.L.L. does not apply to an owner of property who holds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the C.L.L.)

I am exempt under Sec. \_\_\_\_\_ B & P.C. for this reason:  
 Date: 10/11/06 Owner: [Signature]

**WORKERS COMPENSATION DECLARATION**

I hereby affirm that I have a certificate of consent to self-insure, or a Certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec 3800, Labor Code).  
 Policy Number: \_\_\_\_\_ Company: \_\_\_\_\_  
 Certified copy is hereby furnished.  
 Certified copy is filed with the city building inspection department or city \_\_\_\_\_ department.  
 Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to construction. I hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

Date: 10/11/06 Applicant or Agent: [Signature]

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

|  |                                 |                              |
|--|---------------------------------|------------------------------|
| <b>INSTALLATION CERTIFICATE</b>            |                                 | <b>(Page 12 of 12) CF-6R</b> |
| Site Address<br><u>0576 Bruceville Rd.</u> | Permit Number<br><u>0615047</u> |                              |
| County Subdivision<br><u>Elk Grove Ca</u>  | Lot Number<br>_____             |                              |

**Description of Insulation (Formerly IC-1 Form)**

1. RAISED FLOOR Garage living above  
 Material Batts Brand Name Knauf  
 Thickness (inches) 5/2 Thermal Resistance (R-Value) R-19
2. SLAB FLOOR/PERIMETER  
 Material \_\_\_\_\_ Brand Name \_\_\_\_\_  
 Thickness (inches) \_\_\_\_\_ Thermal Resistance (R-Value) \_\_\_\_\_  
 Perimeter Insulation Depth (inches) \_\_\_\_\_
3. EXTERIOR WALL Wood  
 Frame Type Wood  
 A. Cavity Insulation  
 Material Batts Brand Name Knauf  
 Thickness (inches) 3/2 Thermal Resistance (R-Value) R-13  
 B. Exterior Foam Sheathing  
 Material \_\_\_\_\_ Brand Name \_\_\_\_\_  
 Thickness (inches) \_\_\_\_\_ Thermal Resistance (R-Value) \_\_\_\_\_
4. FOUNDATION WALL  
 Material \_\_\_\_\_ Brand Name \_\_\_\_\_  
 Thickness (inches) \_\_\_\_\_ Thermal Resistance (R-Value) \_\_\_\_\_
5. CEILING Batt  
 Batt or Blanket Type Batt Brand Name Knauf  
 Thickness (inches) 12 Thermal Resistance (R-Value) R-38  
 Loose Fill Type \_\_\_\_\_ Brand \_\_\_\_\_  
 Contractor's min installed weight/ft<sup>2</sup> \_\_\_\_\_ lb Minimum thickness \_\_\_\_\_ inches  
 Manufacturer's installed weight per square foot to achieve Thermal Resistance (R-Value) R-19 under platform
6. ROOF  
 Material \_\_\_\_\_ Brand Name \_\_\_\_\_  
 Thickness (inches) \_\_\_\_\_ Thermal Resistance (R-Value) \_\_\_\_\_

**Declaration**

I hereby certify that the above insulation was installed in the building at the above location in conformance with the current *Energy Efficiency Standards* for residential buildings (Title 24, Part 6, California Code of Regulations) as indicated on the Certificate of Compliance, where applicable.

|  |                                 |                         |  |
|--|---------------------------------|-------------------------|--|
| Item #s<br>(if applicable)<br><u>1,3,5</u> | Signature<br><u>[Signature]</u> | Date<br><u>08-01-07</u> | Installing Subcontractor (Co. Name) OR<br>General Contractor (Co. Name) OR Owner<br>OR Window Distributor<br><u>DHP INSULATION</u> |
| Item #s<br>(if applicable)                 | Signature                       | Date                    | Installing Subcontractor (Co. Name) OR<br>General Contractor (Co. Name) OR Owner<br>OR Window Distributor                          |
| Item #s<br>(if applicable)                 | Signature                       | Date                    | Installing Subcontractor (Co. Name) OR<br>General Contractor (Co. Name) OR Owner<br>OR Window Distributor                          |

**INSTALLATION CERTIFICATE**

(Page 3 of 12) CF-6R

Site Address

8576 BRUCEVILLE RD ELK GROVE CA 95758

Permit Number

0615042

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*

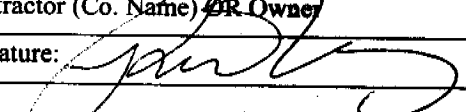
| Equip Type<br>(pkg. heat pump) | CEC Certified Mfr.<br>Name and Model<br>Number | # of<br>Identical<br>Systems | Efficiency<br>(AFUE, etc.) <sup>1</sup><br>(≥CF-1R value) | Duct<br>Location<br>(attic, etc.) | Duct or<br>Piping<br>R-value | Heating<br>Load<br>(Btu/hr) | Heating<br>Capacity<br>(Btu/hr) |
|--------------------------------|--|------------------------------|---|-----------------------------------|------------------------------|-----------------------------|---------------------------------|
|                                | ARMSTRONG                                      |                              | 100000 80%  |                                   |                              |                             |                                 |
|                                | ARMSTRONG                                      |                              | 50000 80%   |                                   |                              |                             |                                 |

*Cooling Equipment*

| Equip Type<br>(pkg. heat pump) | CEC Certified Mfr.<br>Name and Model<br>Number | # of<br>Identical<br>Systems | Efficiency<br>(SEER or EER) <sup>1</sup><br>(≥CF-1R value) | Duct<br>Location<br>(attic, etc.) | Duct<br>R-value | Cooling<br>Load<br>(Btu/hr) | Cooling<br>Capacity<br>(Btu/hr) |
|--------------------------------|--|------------------------------|--|-----------------------------------|-----------------|-----------------------------|---------------------------------|
| 570W                           | ARMSTRONG                                      |                              |  | 13 FEER                           |                 |                             |                                 |
| 370W                           | ARMSTRONG                                      |                              |  | 13 FEER                           |                 |                             |                                 |

1. ≥ symbol reads *greater than or equal to what is indicated on the CF-1R 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                  |               |
| Signature:  | Date: 1/22/08 |

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

**INSTALLATION CERTIFICATE**

(Page 1 of 12) CF-6R

|   |                          |
|---|--------------------------|
| Site Address<br>8576 BRUCEVILLE RD ELK GROVE CA 95758 | Permit Number<br>0615042 |
|---|--------------------------|

Installation certificates (CF-6R) are required for each and every dwelling unit. When the installation of measures that require field verification and diagnostic testing is complete, the builder or the builder's subcontractor shall complete diagnostic testing and the procedures specified in this section. When the installation is complete, the builder or the builder's subcontractor shall complete the CF-6R (Installation Certificate), and keep it at the building site for review by the building department. The builder also shall provide a copy of the Installation Certificate to the HERS rater for any measures requiring field verification and diagnostic testing, per Section 10-103(a).

**WATER HEATING SYSTEMS:**

| Heater Type | CEC Certified Mfr Name & Model Number | Distribution Type (Std, Point-of-Use, etc) | If Recirculation, Control Type | # of Identical Systems | Rated Input (kW or Btu/hr) <sup>1</sup> | Tank Volume (gallons) | Efficiency (EF, RE) <sup>2</sup> | Standby Loss (%) <sup>2</sup> | External Insulation R-value <sup>2</sup> |
|-------------|---------------------------------------|--|--------------------------------|------------------------|---|-----------------------|----------------------------------|-------------------------------|--|
| ① GAS SMALL | AMERIBORN WATER HEATER CO             |  |                                |                        | 40000                                   | 40                    | EF                               |                               |  |
|             | PROLINE PLUMBING                      |  |                                |                        |   | 40                    |                                  |                               |  |
| ② GAS SMALL |                                       |  |                                |                        | 40000                                   | 40                    | EF                               |                               |  |

- 1 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 (EF). For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery (RE), Thermal Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Thermal Efficiency and Rated Input.
2. R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

**Kitchen Piping:**

If indicated on the CF-1R, all hot water piping  $\geq 3/4$  inches in diameter that runs from the hot water source to the kitchen fixtures is insulated.

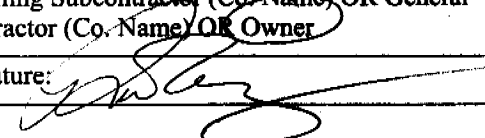
**Faucets & Shower Heads:**

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

**Central Water Heating in Buildings with Multiple Dwelling Units (required for prescriptive)**

- All hot water piping in main circulating loop is insulated to requirements of §150(j)
- Central hot water systems serving six or fewer dwelling units which have (1) less than 25' of distribution piping outdoors; (2) zero distribution piping underground; (3) no recirculation pump; and (4) insulation on distribution piping that meets the requirements of Section 150(j)
- Central hot water systems serving more than 6 dwelling units - presence of either a time control or a time/temperature control

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.

|  |               |
|--|---------------|
| Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner                  |               |
| Signature:  | Date: 1/20/08 |

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

January 30, 2007

Paul Tang  
8667 Falmouth Way  
Sacramento, CA 95823

RE: SHGC VALUES

Dear Mr. Tang,

I am writing in regard to the SHGC values published in the Windford brochure. The testing lab (ETC) inadvertently tested our windows with the spectrally selective coating on the third surface (3<sup>rd</sup>). This is incorrect for this climate zone; they should have tested on the second (2<sup>nd</sup>) surface. ETC has retested our windows with the coating on the correct surface. I have included the results below.

| NFRC Product ID | Type | UValue | SHGC | VLT  |
|-----------------|------|--------|------|------|
| WDL-A-001       | SH   | 0.35   | 0.30 | 0.55 |
| WDL-A-002       | HS   | 0.35   | 0.30 | 0.55 |
| WDL-A-003       | PW   | 0.32   | 0.31 | 0.62 |
| WDL-A-004       | PD   | 0.33   | 0.31 | 0.58 |

Please feel free to contact Todd Ford or myself should you require additional information. Again, thank you for allowing us to address your concerns. We look forward to working with your company.

Sincerely,

Clifford Boley  
Operations Manager

221 RICHARDS BLVD. SACRAMENTO, CA 95814

PHONE # 916-440-8981 • FAX # 916-440-8985 • WINDFORD.COM

**INSTALLATION CERTIFICATE**

(Page 2 of 12) CF-6R

|  |                                 |
|--|---------------------------------|
| Site Address<br><b>8576 BRUCEVILLE RD ELK GROVE CA 95758</b> | Permit Number<br><b>0615042</b> |
|--|---------------------------------|

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:**

| Item | Manufacturer/Brand Name (GROUP LIKE PRODUCTS) | Product U-factor <sup>1</sup> (≤ CF-1R value) <sup>2</sup> | Product SHGC <sup>1</sup> (≤ CF-1R value) <sup>2</sup> | # of Panes | Total Quantity of Like Product (Optional) | Area Square Feet | Exterior Shading Device or Overhang | Comments/Location/Special Features |
|------|---|--|--|------------|---|------------------|-------------------------------------|------------------------------------|
| 1.   |   | 0.35   | 0.30   |            |   |                  |                                     |                                    |
| 2.   |   | 0.35   | 0.30   |            |   |                  |                                     |                                    |
| 3.   |   | 0.32   | 0.31   |            |   |                  |                                     |                                    |
| 4.   |   | 0.33   | 0.31   |            |   |                  |                                     |                                    |
| 5.   |   |  |  |            |   |                  |                                     |                                    |
| 6.   |   |  |  |            |   |                  |                                     |                                    |
| 7.   |   |  |  |            |   |                  |                                     |                                    |
| 8.   |   |  |  |            |   |                  |                                     |                                    |
| 9.   |   |  |  |            |   |                  |                                     |                                    |
| 10.  |   |  |  |            |   |                  |                                     |                                    |
| 11.  |   |  |  |            |   |                  |                                     |                                    |
| 12.  |   |  |  |            |   |                  |                                     |                                    |
| 13.  |   |  |  |            |   |                  |                                     |                                    |
| 14.  |   |  |  |            |   |                  |                                     |                                    |
| 15.  |   |  |  |            |   |                  |                                     |                                    |

<sup>1</sup>) 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.

<sup>2</sup>) 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) submitted 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.

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

Copies to: Building Department , HERS Rater (if applicable) Building Owner at Occupancy