

TRANSMISSION VERIFICATION REPORT

TIME : 01/25/2006 14:32  
 NAME : CITY OF SACRAMENTO  
 FAX : 9168085543  
 TEL : 9168085656  
 SER.# : BROH4J832840

DATE, TIME 01/25 14:31  
 FAX NO./NAME 99208409  
 DURATION 00:01:15  
 PAGE(S) 02  
 RESULT OK  
 MODE STANDARD

**CITY OF SACRAMENTO  
 CASHIER'S WORKSHEET**

RECEIPT NUMBER: R0601403

TRANSACTION DATE: 01/25/2006  
 TRANSACTION AMOUNT: 79.87  
 NOTATION:

APD #: **0601023**  
 SITE ADDRESS: 294 SEAVEY CR SAC  
 PARCEL: 009-0030-023

TYPE: Bldg Minor Permit  
 SUB-TYPE: RES  
 HOUSING: N  
 STATUS: **ISSUED**

Mixed Income Housing  
 Fee Program  
 ??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Cash		79.87

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	.69	.00	.69
213	General Plan Surcharge	1760	1.18	.00	1.18
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00

<b>INSTALLATION CERTIFICATE</b>		<b>(Page 3 of 12) CF-6R</b>
Site Address <b>294 SEAVEY CIRCLE - SAC HOUSING L. GRIFFINS</b>	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) 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.) <sup>1</sup> (≥CF-IR value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Wall FURNACE ONLY	COZY W355	1		NONE		35K	35K

*Cooling Equipment*

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

1. ≥ 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	<b>KLEEN AIR</b>
Signature: <b>Pat Chappell</b>	Date: <b>1-16-2006</b>

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



Lic. 481974

1657 SILICA AVENUE • SACRAMENTO, CALIFORNIA 95815  
Telephone (916) 922-3995  
Fax (916) 920-8409

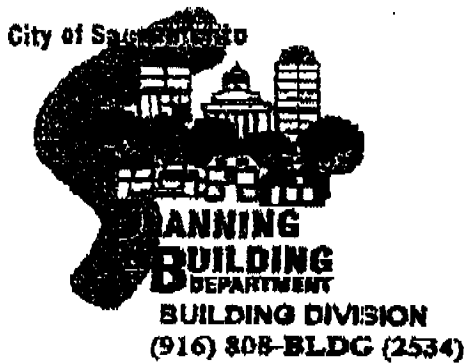
Thank you for having KleenAir install your new Heating and Air Conditioning. Having a new system installed brings responsibility to you. A permit was issued to have the work done at your location. You must call to have an inspector come out and check the install and final the permit.

KleenAir does not do this, the permit is only active for a few months after that it will expire, if the permit expires you will be charged a fine and a re-inspection fee, so don't let this happen, call as soon as work is complete, ~~and you have all the certificate of compliance forms at the job site you have on site the CF-1R and CF-6R and the attached~~ <sup>N/A</sup> ~~is your completion copy CF-4R form.~~ You should now call for your final inspection, <sup>N/A</sup> check your permit for who to call.

Please Call Kleen air if you have any questions

Thank you

Kleen Air Installation Department



### Building Permit

\*\*\*\*\* Office Use Only \*\*\*\*\*

KMC  
**PAID**

**CITY OF SACRAMENTO**  
**JAN 25 2006**

Permit No: 0601023  
 Date Issued: 1/25/06  
 Total Amount: 79.87  
 Insp Area: 2

\*\*\*\*\* Please Fill in the Following \*\*\*\*\*  
 Site Address: 294 SEAVEY CIRCLE  
 Nature of Work: C/O WALL FURNACE

\*\*\*\*\*  
**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 C-20 License Number 481974 Date 1-13-06 Signature Earl Cox

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the contractor 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 3 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 Professions 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 \_\_\_\_\_

**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 above-mentioned property for inspection purposes.

Date 1-13-06 Applicant/Agent Signature Earl Cox

**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 STATE FUND  
 Policy Number 1664742-2005 Expiration Date 10/06

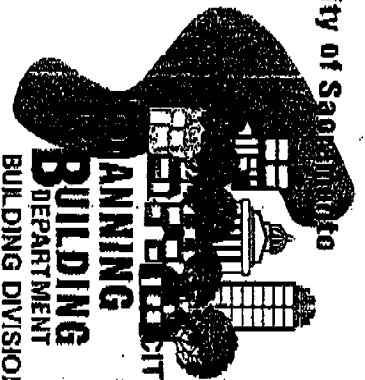
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 1-3-06 Applicant Signature Earl Cox

**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



808-1902  
297-AL

0601023

825 5296

**FAXBACK PERMIT APPLICATION**  
(certain restrictions apply)

**PAID** request received in this office before 3:00 p.m. will be processed the following work day. Contractors must have a current certificate of Worker's Compensation Insurance. Work started before a Building Permit is issued will be subject to quad fees. Permits requiring plan review are not eligible for FAXBACK.

JAN 25 2006

Fax # (916) 264-1901  
Inspection Request # (916) 264-7892

Credit Card Info on File? Yes  No  RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)

Job Address: 294 SEAVEY CIRCLE Unit # \_\_\_\_\_  
 Parcel Number: 009-0030-023 Contract Price \$ 1735.00  
 CONTACT PERSON: Debbie Livermore CONTACT PHONE: EARL COX  
 Property Owner: SACRAMENTO HOUSING Contractor: KLEEN AIR License # 481974  
 Address: 240 SEAVEY CIRCLE Address: 1051 SILICA AVENUE  
 City/State/Zip: SACRAMENTO, CA 95818 City/State/Zip: SACRAMENTO, CA 95815  
 Phone: 916-825-9762 Phone: 916-922-3995 FAX: 920-8409

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below.)

Change out WALL FURNACE

<input type="checkbox"/> REROOF (excluding tiles) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES # Stories: 1 2 3+ Material:	<input checked="" type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Spill system <input type="checkbox"/> Roof mount <input type="checkbox"/> Curtin <input type="checkbox"/> Heat pump or elect. unit to gas. <input checked="" type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Curtin: \$	<input type="checkbox"/> WATER HEATER <input type="checkbox"/> GAS <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Root Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mudstiff/Studs <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E	<input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste
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\* Design Review approval may be required.

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\*NOTE: Correction Notice items will require an additional building permit.

NVR Faxback Permit updated 12/30/01

<b>CERTIFICATE OF COMPLIANCE: RESIDENTIAL (Page 2 of 5) CF-1R</b>	
Project Title <b>294 SEAVEY CIRCLE</b> <b>SACRAMENTO, CA 95818</b>	Date <b>1-13-06</b>

**FENESTRATION PRODUCTS - U-FACTOR AND SHGC**

FENESTRATION MAXIMUM ALLOWED AREA WORKSHEET WS-4R - must be included for New Construction, Additions and Alterations.

Fenestration #/Type/Pos. (Front, Left, Rear, Right, Skylight)	Orientation, N, S, E, W <sup>1</sup>	Area (ft <sup>2</sup> )	U-factor <sup>2</sup>	U-factor Source <sup>3</sup>	SHGC <sup>4</sup>	SHGC Source <sup>5</sup>	Exterior Shading/Overhangs <sup>6,7</sup> <input checked="" type="checkbox"/> box if WS-3R is included
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>

- 1) Skylights are now included in West-facing fenestration area if the skylights are tilted to the west or tilted in any direction when the pitch is less than 1:12. See §151(f)3C and in Section 3.2.3 of the Residential Manual
- 2) Enter values in this column are either NFRC Rated value or from Standards default Table 116A.
- 3) Indicate source either from NFRC or Table 116A.
- 4) Enter values in this column from NFRC or from Standards Default Table 116B or adjusted SHGC from WS-3R.
- 5) Indicate source either from NFRC or Table 116B.
- 6) Shading Devices are defined in Table 3-3 in the Residential Manual and see WS-3R to calculate Exterior Shading devices.
- 7) See Section 3.2.4 in the Residential Manual.

**HVAC SYSTEMS**

Heating Equipment Type and Capacity (furnace, heat pump, boiler, etc.)	Minimum Efficiency (AFUE or HSPF)	Distribution Type and Location (ducts, attic, etc.)	Duct or Piping R-Value	Thermostat Type	Configuration (split or package)
<b>FURNACE</b> <b>ONLY NO</b> <b>A/C</b>		<b>N/C</b>	<b>N/C</b>	<b>MANUAL</b>	<b>IN ATTIC</b> <b>FURNACE</b>

Cooling Equipment Type and Capacity (A/C, heat pump, evap. cooling)	Minimum Efficiency (SEER or EER)	Duct Location (attic, etc.)	Duct R-Value	Thermostat Type	Configuration (split or package)