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

Site Address: 12 BEACHCOMBER PL SAC Parcel No:

THE HAMPTONS VIL. 3 LOT #41

<u>CONTRACTOR</u> KB HOME NORTH BAY INC. 611 ORANGE DR VACAVILLE CA. 95687

**OWNER** 

Thos Bros:

Permit No: 0512493 Insp Area:

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

**ARCHITECT** 

Nature of Work: MP1722 2 5	STORY 7RM SFR		
CONSTRUCTION LENDING At the work for which this permit is issued	GENCY: 1 hereby affirm under penalty of 1 (Sec. 3097, Civ. C).	of perjury that there is a con	nstruction lending agency for the performance of
Lender's Name	<u>ď</u> nder'	'sAddress	
(commencing with section 7000) of Di-	DECLARATION: 1 hereby affirm undivision 3 of the Business and Professions Cod	le and my license is in full f	t I am licensed under provisions of Chapter 9 force and effect.
reason (Sec. 7031.5, Business and Proprior to its issuance, also requires the a	fessions Code; any city or county which requipplicant for such permit to file a signed state with Section 7000) of Division 8 of the Bus	uires a permit to construct, ement that he or she is licen siness and Professions Cod	om the contractors License Law for the following alter, improve, demolish, or repair any structure, issed pursuant to the provisions of the Contractors le) or that he or she is exempt therefrom and the applicant to a civil penalty of not more than five
sale (Sec. 7044, Business and Professi	onal Code: The Contractors License Law do for through his/her own employees, provide	oes not apply to an owner or that such improvements:	rk, and the structure is not intended or offered for of property who builds or improves thereon, and are not intended or offered for sale. If, however, proving that he/she did not build or improve for
The Contractors License Law does not licensed pursuant to the Contractors Li	apply to an owner of property who builds or cense Law).	actors to construct the projer improves thereon, and who carry of SACF	ect (Sec. 7044, Business and Professions Code: to contracts for such projects with a contractor(s)
I am exempt under Sec		SEP 0 8	
	Ower Signature	<del></del>	
IN ISSUING THIS BUILDING PE measurements and locations shown or private agreement relating to permissi improvement or the violation of any pr	RMIT, the applicant represents, and the city in the application or accompanying drawings ble or prohibited locations for such improve ivate agreement relating to location of impro-	y relies on the representations and that the improvement is many expensions. The building pernorments.	pg का the applicant, that the applicant verified all into because the bear of the property of
building construction and herby author	ize representative(s) of this city to enter upor	n the abovementioned prope	y and county ordinances and state laws relating to erty for inspection purposes.
Date 9905	Aplicant/Agent Signature	Willy.	
WORKER'S COMPENSATION  I have and will maintain a cert performance of work for which the per	N DECLARATION: I hereby affirm und ifficate of consent to self-insure for workers' mit is issued.	ler penalty of perjury one o compensation as provided	f the following declarations: I for by Section 3700 of the Labor Code, for the
I have and will maintain worker this permit is issued. My workers' con	ers' compensation insurance, as required by Supensation insurance carrier and policy numbers.	Section 3700 of the Labor per are:	Code, for the performance of the work for which
Carrier	Policy Nur	mber	Exp Date
not employ any person in any manner	eleted if the permit is for \$100 or less) I certi so as to become subject to the workers' com election 3700 of the Labor Code, I shall forthw	pensation laws of Californ	of the work for which this permit is issued, Ishall in and agree that if I should become subject to the visions.
Date 4/9/08	Aplicant Signature	1//	

Aplicant Signature 9/9/05 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.



Planning and Building Department

SITE

**Building Division** 

CITY OF SACRAMENTO CALIFORNIA

Downtown Permits Center 1231 I Street, #200 Sacramento, CA 95814-2998

North Permits Center 2101 Arena Bivd., Suite 200 Sacramento, CA 95834

PERMIT NO. <u>0512493</u> 12 Prach Combes ADDRESS

ADDRESS_F= L.L.			
INSPECTION COM	MENTS	PERMIT DOCUMENTS	
agas Cornes		SET BACK COM	
600 P.42	CN COM		
9 14-05 P-42	A.P. T.R		
9-14-05 SET	BACK A	P. T.K	
9-16-05 BULL AD	33		
11-1-05 B26, 67 4	P (B17)	C/~ 330-	
4 1605 BATTER AD	NO GIENE	ė	
4/605 86114			
11-16-05 B. CIN	B61 186	CN John	C' Carthag
11/21/2 8/18/8/14	AP SIS	BITAP SUS Verily 66.	3)000
11-29-05 1-47	B.P. T.K.	os Fix.	
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	FINAL A	PPROVALS	
BUILDING			
ELECTRICAL	120	11:	_
PLUMBING	OC	10/	
MECHANICAL	, 0	Oreus	4
FIRE		Wop	_

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INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

Hamptons Clusters- Plan # (722 C

Site Address 12 Beachcomber Place

Permit Number 0512493

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:

Teating Eq. Equip. Type (pkg. leat pond)	CEC Certified Mfr Name	# of Identical Systems	Efficiency (AFUE, etc.)¹ (≥CF-†R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load ( <u>Bto/br)</u>	Heating Capacity (Btu/hr)
<del></del>					<del></del>		
Cooling Eq	uipment	•					
Equip.	CEC Certified Compressor	# of	Efficiency	Duct	_	Cooling	Cooling
ype (pkg.	Unit Mfr Nume and	Identical	(SEER, etc.)	Location	Duct	Load	Capacity
gat pump)	Model Number	Systems	[≥CF-1R value]	(attic, etc.)	R-value	(B(u/br)	(Btu/hr

1. ≥ reads greater than or equal to.

Lethe 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.

Signature, Date

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

#### WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (\$td, Point-of-Use)	If Recir- culation, Control Type	# of Identical Systems	Rated <sup>2</sup> Input (kW or Btu/hr)	Tank Volume (galions)	Effi- ciency <sup>2</sup> (EF, RE)	Standby <sup>2</sup> Lose (%)	External Insulation R-value <sup>3</sup>
GAS	AO Smith GVR-50	STD	n/a	1	40,000	50	.62	п/в	R16

<sup>2</sup> 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-IR) 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

INSTALL ATION CERTIFICATE  LOT  Site Address  An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The in provided on this form is required; however, use of this form to provide the information is optional.) After completion of final is 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. CEC Certified Mfr name # of Identical (1) Efficiency (AFUE, Location Duct or Piping Heating Load  Heat pump) and Model # Systems etc. > CE 18 related.	Heating Capacity

Heat pump	) and Model #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-1R value	Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)		
	Carrier 58STX070-12	1	80%	ATTIC	6	28,313	(Btu/hr)	<b>-</b>
FURNACE	Carrier 58STX070-12	<u> </u>	80%	ATTIC	6		70,000	PLAN 1708
	Carrier 58STX070-12	1	80%	ATTIC	6	27,627	70,000	PLAN 1722
FURNACE	Carrier 58STX090-16	1	80%	ATTIC		31,392	70,000	PLAN 1848
				<u> </u>	6	27,627	90,000	PLAN 1922
Cooling E	quipment					<u></u>		
Equip. Type (pkg. Heat pump)	CEC Certified Compressor Unit Mfr Name and Model #	# of Identical Systems	(i) Efficiency (SEER, etc.) > CF-JR Value	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity	
A/C	Carrier 38BRC036*	1	13.0	ATTIO			(Btu/hr)	
AVC	Carrier 38BRC036*	1	13.0	ATTIC	6	22,792	33,100	PLAN 1708
A/C	Carrier 38BRC036*	1	13.0	ATTIC	6	23,526		PLAN 1722
A/C	Carrier 38BRC042*	<del></del>	13.0	ATTIC	6	26,043		PLAN 1848
_		<del></del>	13.0	ATTIC	6	23,526		PLAN 1922

# \* = TXV valve installed as part of coil

(1) reads greater than or equal to.

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.

Signature, Date

BEUTLER CORPORATION

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

### **INSULATION CERTIFICATE**

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

Permit# 0512493

ia Beach comber Place

SITE ADDRES	SS LOT 41 HAM	PTONS (CLUSTER)	NATOMAS		CA	
	NUMBER		CITY		STATE	
CEILINGS:						
BLOW:	MANUFACTURER	GREEN FIBER	THICKNESS	10.3"	_R/VALUÉ	38
BATTS:	MANUFACTURER	KNAUF	THICKNESS	13"	_	38
		KNAUF			_	
EXTERIOR W	ALLS:					
	MANUFACTURER	KNAUF KNAUF	THICKNESS	3.5"	_R/VALUE 	13
FLOOR INSUI	LATION:					
	MANUFACTURER	KNAUF	THICKNESS	6.5"	_R/VALUE	19
AIR INFILTRA	ATION: (TITLE 24)					
	YES 2	XXX NO				
OTHER:		<del> </del>				
GENERAL COI	NTRACTOR: KBH	OMES	LICENSE #			
BY:		TITLE		DATE		
INSULATION C	CONTRACTOR: WES	TERN INSULATION LP	LICENSE #	79	4484	
BY: DL/A	hyduthen	TITLE AUTH. AG	ENT	DATE	12/9	9/2005

LOT 41

Site Address 12 Beach comber Place

Pacific Window

## FENESTRATION/GLAZING:

Manusacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Fzctor <sup>1</sup> (≤ CF-1R value) <sup>2</sup>	Product SHGC¹ (≤ <u>CP-1R value)²</u>	# of Panes	1 otal Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/ Special Features
(GROUP LIKE PRODUCTS)  1. Pac. C. C.  2	35 35 37 35	5 <u>H</u> XJ PW PD					low EZ
5							
9. 10. 11. 12.							
13. 14. 15.							

- Manufactured fenestration products use the values from the product label. Field fabricated fenestration products use the default values from Section 116 of the Energy Efficiency Standards.
- 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 overbang) 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.

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 (Fonn CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the product meets or exceeds the appropriate regreterements 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

COPY TO:

Building Department

HERS Provider (if applicable) Building Owner at Occupancy a a

