CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Site Address: 5708 DA VINCI WY SAC

Parcel No:

JMA NORTH NATOMAS VILLAGE 2 LOT # 7

OWNER

Insp Area:

Permit No:

0603408

Thos Bros:

ARCHITECT

Sub-Type: **NSFR**

Housing (Y/N): N

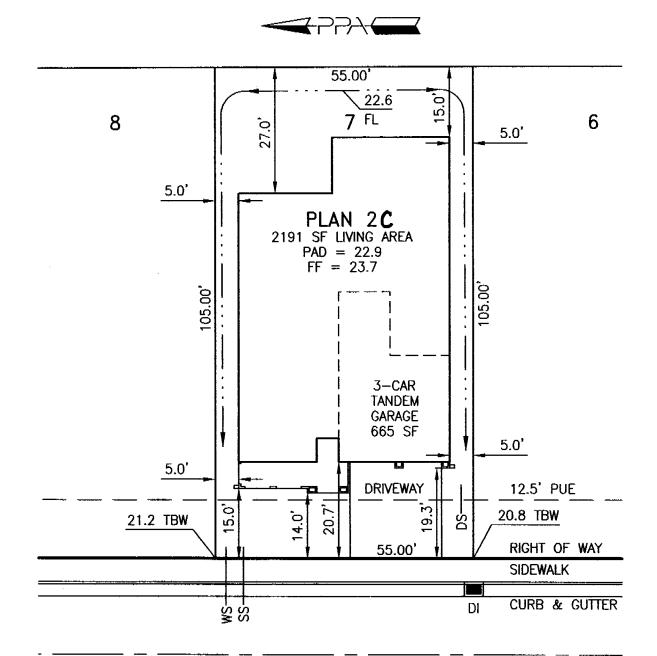
CONTRACTOR REYNEN AND BARDIS COMMUNITIES 9856 BUSINESS PARK DRIVE **SUITE A 95827**

Nature of Work: MP2191 1 STORY 8RM 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 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 Date 3-12-04 Contractor Signature License Class License Number 790351 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) CTOVOPSAC licensed pursuant to the Contractors License Law). B & PC for this reason: I am exempt under Sec. 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 destinot 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes. Applicant/Agent 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: Policy Number (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, Ishall 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. 3-15-16

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.

Applicant Signature

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



VINCI WAY



This set of plans and specifications must be er the light of all first and it is unlawful n. Plans from the and the from the

Should have the dispersion approve the violation of any City Ordinance or State Law.

Approved By:	Reynen & Bardis Rep.	Date
Revision	Approved By	Date
Æ		

LOT AREA: 5775 SF ALLOWED LOT COVERAGE: N/A

ACTUAL LOT COVERAGE: 3021 SF = 52.3%

REAR YARD AREA: 1125 SF

NUMBER OF BEDROOMS:

It is understood that the drainage areas, slopes and grades shall not be altered, changed, blocked, modified or in any way be reconstructed by Owner contrary to what is depicted on this Plot Plan. THESE CONDITIONS RUN WITH THE LAND AND ARE BINDING ON ALL SUBSEQUENT OWNERS. All setback dimensions and elevations as shown may be adjusted to fit field conditions.

Plot Plan for

I IS PREPARED TO PERMIT ISSUANCE.

SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINES, DRAINAGE CONTROL ELEVATIONS AND DIRECTION OF DRAINAGE FLOW. THIS IS DONE TO CONFORM TO LOCAL ORDINANCES FOR THE PURPOSE INFORMATION SHOWN ON THIS PLAN IS APPROXIMATE EXCEPT FOR MINIMUM SETBACKS WHICH ARE REQUIRED BY LOCAL ORDINANCE. THIS PLAN, DOES, NOT REFLECT AS BUILT CONDITIONS, WHICH WILL LIKELY VARY FROM THIS PLAN.

PPA Job_#013008 Lot

APN

JMA Village 2

XX Da Vinci Way, Sacramento, California 95835

Reynen & Bardis Communities

10630 Mather Boulevard, Sacramento, California 95655 Phone (916) 366-3665 Fax (916) 369-0971

Plot Plan Associates www.plotplans.org PO Box 435, Citrus Heights, CA 95611-0435 (916) 769-9063

Date Drawn: 02/22/06 Scale: 1"=20' Date Revised: Drawn By: HAB

OMEGA PRODUCTS INTERNATIONAL, INC. DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO REPORT #4004

Builder: Reynen & Bardis

Job# J4101 Romanesque Natoma

Lot #7

Plan/Elevation: 2191C

Date of Job Completion: 8/3/06

PLASTERING CONTRACTOR:

Cornerstone Plaster Development, Inc. (CPD Inc.) 7309 Roseville Rd. Unit #1

Sacramento, CA 95842 Phone/Fax: (916) 332-26269 332-4844

Contractor Number of Diamond Wall System: 5135

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.

Date

Signature of authorized representative of CPD Inc.

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

0403408 5708 DA VINCI WY

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)	CEC Certified Mfr name and Model #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-1R value	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)	
Furnace	Lennox G40UH48B-090	11_	0.80	Attic	R-4.2	34,638	90,000	Plan 1 (1906)
Furnace	Lennox G40UH48B-090	1	0.80	Attic	R-4.2	45,329	90,000	Plan 2 (2191)
Furnace	Lennox G40UH48B-090	1	0.80	Attic	R-4.2	47,410	90,000	Plan 3 (2614)
Furnace	Lennox G40UH60C-110	1	0.80	Attic	R-4.2	52,618	110,000	Plan 4 (2724)
Furnace	Lennox G40UH60C-110	1	0.80	Attic	R-4.2	60,253	110,000	Plan 5 (2951)
Cooling Equ	uipment							
Equip. Type (pkg. Heat pump)	CEC Certified Compressor Unit Mfr Name and Model #	# of Identical Systems	(I) Efficiency (SEER, etc.) > CF-1R Value	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)	
Type (pkg.	Unit Mfr Name and	# of Identical		Location	Duct R-value		Capacity	– Plan 1 (1906)
Type (pkg. Heat pump)	Unit Mfr Name and Model #	# of Identical	etc.) > CF-1R Value	Location (attic, etc.)		Load (Btu/hr)	Capacity (Btu/hr)	Plan 1 (1906) Plan 2 (2191)
Type (pkg. Heat pump) Condenser	Unit Mfr Name and Model #	# of Identical	etc.) > CF-1R value	Location (attic, etc.)	R-4.2	Load (Btu/hr) 22,908	Capacity (Btu/hr) 32,200	
Type (pkg. Heat pump) Condenser Condenser	Unit Mfr Name and Model # Lennox 13ACC036 * Lennox 13ACC042 *	# of Identical	etc.) > CF-1R value 13.0 13.0	Location (attic, etc.) Attic Attic	R-4.2 R-4.2	22,908 27,750	Capacity (Btu/hr) 32,200 35,300	Plan 2 (2191)
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⁽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.

Beutler Corporation

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model #	Distribution Type (Std, point of use)	If Recirculation Control Type	# of Identical Systems	(2) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(2) Efficiency (EF,RE)	(2) Standby Loss (%)	External Insulation R-value
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- (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 that 0.58.

## Facets & Shower Heads:

All facets 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)

COPY TO: Building Department

HERS Provider (if applicable)

Building Owner at Occupancy

OR General Contractor (Co. Name) OR Owner

pot 7 5708 DA Vind wy.

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Compliance Forms August 2001

Builder Name   Page	CERTIFICATE OF FIELD VERIFICATION DIAGNOSTI		CF-4R
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MINIMUM REQUIREMENTS FOR DUCT LEAKAGE REDUCTION COMMINIMUM REQUIREMENTS FOR DUCT LEAKAGE REDUCTION COMMINIMUM REQUIREMENTS FOR DUCT LEAKAGE REDUCTION COMMINIMUM REQUIREMENTS FOR DUCT LEAKAGE REDUCTION.  Duct Diagnostic Leakage Tesuits (PEMICO 25 Pa)  Duct Pressurization Test Results (CFMICO 25 Pa)  Duct Pressurization Test Results (CFMICO 25 Pa)  Pass of Enter Tested Leakage Flow in CFM  Ren Flow: Calculated (Norminal: Cooling: Meating) or Measured  Ren Flow: Calculated (Norminal: Cooling: Measured)  Res of the Calculated (Norminal: Calculated)  Res of the Calculated (Norminal: Calculated)  Res of the Calculated (Norminal: Calculated)  Res	New systems where clott backed, rubber adhesive duct table to	seal leaks at duct connection	ns.
Enter Tested Leakage Flow in CFM	Procedures for field verification and diagnostic testing of air distribution systems and	ivaliable in MACM, Appendix 1104.	<b>3</b> ,
Enter Tested Leakage Flow in CFM   Fan Flow: Calculated (Norminal:   Cooling:   Heating) or   Measured   1541 BTU   / Enter Total Fan Flow in CFM:   Cooling:   Heating) or   Measured   1541 BTU   /	Procedures for field verification and diagnostic testing of air distribution systems and Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:		
Fan Flow: Calculated (Norminal: Cooling: Heating) or Measured 1541 BTU / Enter Total Fan Flow in CFM: 0.0 (Line#1)/ 0.0 (Line#2)il	Procedures for field verification and diagnostic testing of air distribution systems and Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:	Measured	Values
Pass if Leakage Percentage <= 6% [100 x	Procedures for field verification and diagnostic testing of air distribution systems and Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM© 25 Pa)	Measured	Values
Pass if Leakage Percentage <= 6%    100 x	Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM © 25 Pa)  1 Enter Tested Leakage Flow in CFM	Measured 92 /	Values
SUPPLY DUCTS LOCATED IN CONDITIONED SPACE COMPLIANCE CREDIT    Yes	Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM© 25 Pa)  1 Enter Tested Leakage Flow in CFM  Fao Flow: Calculated (Norminal: Cooling: Heating) or Measured	Measured 92 /	Values 0
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Duct system design varification is required for a compliance credit for the following:  1. Supply duct surface area reduction 2. Buried supply ducts on the celling 3. Deeply buried supply ducts  DUCT SYSTEM DESIGN VERIFICTION  Lyes No Adequate airflow verified Lyes No The duct system design plan meets the requirements specified in RACM, Appendix RE, Section RE.4.2  Lyes No The duct system design plan exists on building plans Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct system layout and locations of supply and return registers match the duct system design plan Lyes No Duct sizes, duct sy	Procedures for field verification and diagnostic testing of air distribution systems and Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM© 25 Pa)  1 Enter Tested Leakage Flow in CFM  Fan Flow: Calculated (Norminal: Cooling: Heating) or Measured  2 Enter Total Fan Flow in CFM:  3 Pass if Leakage Percentage <= 6% [100 x 6.0 (Line#1)/ 0.0	92 / 1541 BTU /	Values 0
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Yes No The duct system design plan meets the requirements specified in FACM, Appendix T.  Yes No The duct system design plan exists on building plans  Yes to all is a pass Pass Fai  THERMOSTATIC EXPANSION VALVE (TXV)  Procedures for field verification of thermostatic expansion valves are available in RACM, Appendix RI.  Yes No No Access is provided for inspection. The procedure shall consist of visual verification that the TXV is installed on the system and installation of the specific equipment shall be verified.	Procedures for field verification and diagnostic testing of air distribution systems and Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM© 25 Pa)  1 Enter Tested Leakage Flow in CFM  2 Fan Flow: Calculated (Norminal: Cooling: Heating) or Measured Enter Total Fan Flow in CFM:  3 Pass if Leakage Percentage <= 6% [100 x 6.0 (Line#1)/ 0.0  SUPPLY DUCTS LOCATED IN CONDITIONED SPACE COMPLIATIONS OF A COMPLIATION OF A C	Measured 92 / 1541 BTU / (Line#2)]]  ANCE CREDIT	Values 0 ☑ Pass ☐ F
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Yes to all is a pass Pass Fai  THERMOSTATIC EXPANSION VALVE (TXV)  Procedures for field verification of thermostatic expansion valves are available in RACM, Appendix RI.  Access is provided for inspection. The procedure shall consist of visual verification that the TXV is installed on the system and installation of the specific equipment shall be verified.	Procedures for field verification and diagnostic testing of air distribution systems.  Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM© 25 Pa)  Enter Tested Leakage Flow in CFM  Fan Flow: Calculated (Norminal: Cooling: Heating) or Measured  Enter Total Fan Flow in CFM:  Pass if Leakage Percentage <= 6% (100 × 6.0 (Line#1))/ 0.0  SUPPLY DUCTS LOCATED IN CONDITIONED SPACE COMPLIA  Yes No Ducts are located within the conditioned volume of building.  Yes to to  Duct system design verification is required for a compliance credit for the following. Supply ducts on the celling 3. Deeply buried supply ducts  DUCT SYSTEM DESIGN VERIFICTION  LYES NO Adequate airflow verified  The duct system design plan meets the requirements specification.	Measured 92 / 1541 BTU / (i.ine#2)]]  ANCE CREDIT  This compliance credit is a pass	Values 0  Pass Fail
THERMOSTATIC EXPANSION VALVE (TXV)  Procedures for field verification of thermostatic expansion valves are available in RACM, Appendix RI.  Access is provided for inspection. The procedure shall consist of visual verification that the TXV is installed on the system and installation of the specific equipment shall be verified.	Procedures for field verification and diagnostic testing of air distribution systems and complete the construction of the cons	Measured 92 / 1541 BTU / (Line#2)]]  ANCE CREDIT  Als compliance credit is a pass  Measured 1541 BTU / 1541 BT	Values 0  Pass Fail  RE.4.2
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	Procedures for field verification and diagnostic testing of air distribution systems.  Duct Diagnostic Leakage Testing Results  NEW CONSTRUCTION:  Duct Pressurization Test Results (CFM © 25 Pa)  1	Measured 92 / 1541 BTU /  (I,ine#2)]]  ANCE CREDIT  This compliance credit is a pass  ed in RACM, Appendix RE, Section eturn registers match the duct syst Yes to all is a pass	Values 0  Pass ☐ F  Pass ☐ F  RE.4.2  Tem design plan
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# **INSULATION CONTRACTORS ASSOCIATION OF AMERICA**

INSULATION CERTIFICATE

. 516 pm Sp. Fr. · F.ST6

1/04

1321 DUKE STREET, SUITE 303 • A	ALEXANDRIA, VA 22314 • (703)	739-0356
THIS IS TO CERTIFY THAT INSULATION H CURRENT ENERGY REGULATIONS, CALIFOR CALIFORNIA, IN THE BUILDING LOCATED AT	RNIA ADMINISTRATIVE CODE	NFORMANCE WITH TITLE 24, STATE OF
Rr B	LOT # 7 TRACT #	Achsian
STREET 5768 DA VINCI WAS	CITY SACA	AMENTO
EXTERIOR WALLS:		. a = 9 /*
MANUFACTURER	_ THICKNESS/TYPE 31/4	R-   3/5     VALUE
CEILINGS:		
BATTS: MANUFACTURER FG	THICKNESS 12	R-
BLOWN IN:	MINIMUM A	R-
BLOWN IN: MANUFACTURER LT ASIA	_ THICKNESS/4/.50	VALUE 38
SQUARE FOOTAGE COVERED	NUMBER OF BAGS USED	36
FLOORS:	-	R-
MANUFACTURER	_ THICKNESS/TYPE	VALUE
SLAB ON GRADE:		R-
MANUFACTURER	_ THICKNESS/TYPE	VALUE
WIDTH OF INSULATION	INCHES	
FOUNDATION WALLS:		R-
MANUFACTURER	_ THICKNESS/TYPE	VALUE
GENERAL CONTRACTOR		
CALIFORNIA CONTRACTORS LICENSE #		
	E	DATE
SIGNATURE	TITLE	
INSULATION CONTRACTOR ALCAL AR	CADE CONTRACTING	
CALIFORNIA CONTRACTORS LICENSE #81528	6	3 3
NEVADA CONTRACTORS LICENSE #0055291	C	DATE 8/28/6
() #1/1/ A-1	- Just	
SIGNATURE	TITLE	
AAC2000		



# ALTERNATE MATERIAL OR METHODS

Permission has been granted for the instal	
PEX TUBING, FITTINGS	: Marablak System
PEX TUBING, FITTINGS &  Job name/location ARTISM Ron  SUBDISSION.	MATONIAS
Total no. of buildings 10/	
REQUIREM	IENTS
<ol> <li>Permission is granted to above named</li> <li>Installers must be certified by manufact</li> <li>Manufactures installation instructions inspectors.</li> </ol>	cturers and city of sacramento.
4. This notice must be posted on jobsite w	ith permits.
5. Permission to use alternate materials of to have been unlawfully issued.	
6. This permission has been granted per t	
CPC 301.2—CMC 105.0—CBC 104.2.	8CEC 90-2
A DI	3-3-06
Administrative Authority	Date
Administrative Authority	Dail

# @lpha Inspections & Material Testing 70 Rancho Del Sol • Carnino, CA 95709 (530) 644-6726 • (916) 384-7815 DSA FILE/APPL. NO. DATE: 6-9-66 OSHPD NO. PROJECT NO. ZOUL PERMIT NO. PROJECT: D.B./ REYNEN & B TEMP: WEATHER: LOCATION: ARTISAN WITNESSING ☑ PROOF LOAD Testing was performed on the following items. All tests were performed with the following calibrated equipment: M _TORQUE WRENCH: GAGE: A7-1004 TORQUE WRENCH: GAGE: RETEST LOAD Ib # REJ. % of TOTAL # ACC. GAGE (PSI) TYPE/SIZE TESTED LOCATION OF TEST HOLD-DOWN RPOXIED ANCHOR 3 0 Z970 7460 O130 UTO __ Method of application / cleaning: Type of epoxy / grout used: Visual inspection was performed on

To the best of my knowledge, the above WAS WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Inspector/Technician

Except As Noted

Superintendent/Representative: