1231 I Street, Sacramento, CA 95814 Thos Bros: 319-C4 Site Address: 23 NORTHWICH CT SAC Sub-Type: NSFR STEAMBOAT BEND UNIT 3 LOT #143 Housing (Y/N): 052-0200-059 Parcel No: N ARCHITECT <u>OWNER</u> **CONTRACTOR** HOFMANN CONSTRUCTION PO BOX 907 CONCORD CA 94522 Nature of Work: NSFR MP2271 11 RMS 2 STORY 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 Lender's Name 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 Number 189167 Date 1-30-05 Contractor Signature License Class B 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). APR 2 8 7005 I am exempt under Sec. B & PC for this reason: 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes. Applicant/Agent Signature Date 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: STATE FUND Policy Number 1633130 Exp Date 04/01/2005 Carrier (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 complex ith those provisions. Applicant 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

CITY OF SACRAMENTO

0502071

Permit No:

Insp Area:

COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.



Planning and Building Department

CITY OF SACRAMENTO CALIFORNIA

Building Division

NTO

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

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

ADDRESS 23 NOR HWICH CT- PERMIT NO. 0502071

INSPECTION COMMENTS	PERMIT DOCUMENTS
5-16-05 B to AP HWH	SHIBALKS OK
	+ w H-
7-21-05- B/7- AR TM	1
8-2-05 B26 ACT	wg 4 352 B7
8-16.05 B67- HP H	1 3320/
8-17-3 1543 412 4	W.A
8-14-5 BTZ FF F	N AWA OKTO INS
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CERTIFICATION OF INSULATION

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2005 JUN/15/WED 12:35 PM CF-6R INSTALLATION CERTIFICATE NORTHWICH Permit Number Steamboat Plan 2309 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 143 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). Heating Heating HVAC SYSTEMS: Duct or Duct Capacity Load Efficiency Location Piping Heating Equipment # of (Btn/ht) (AFUE, cic.) (Btu/hr) (attic, etc.) R-value Identical CEC Certified Mft Name Equip. Type (pkg. [2CF-1R value] Systems and Model Number 90,000 R6 licat pump) Attic Gibson #GL1RC090D16B 1 92% Cooling Furnace Cooling Duct Capacity Efficiency Location Duct Load (Btm/pr) Cooling Equipment (Btu/ht) CEC Certified Compressor (SEER, etc.) (attic. etc.) R-value Identical [2CF-1R value] Unit Mfr Name and Equip. Type (pkg. Systems Model Number 36,000 R6 heat pump) Attic 10 SEER Gibson #JS3BA036KA 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 mahafactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable: Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner Signature, Date WATER HEATING SYSTEMS: ciency: Standby Insulation (EF, RE) Loss (%) R-values Effi-Tank Rateda If Recir-Input (kW Volume Distribution Identical (gallons) culation, or Btu/hr) Type (Std. Systems CEC Certified Mfr Control Point-of-Use) Heater Name & Model Type Турс Number 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 ractor.
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.

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-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

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

09/21/2005 12:00 2095382885 Installation Certificate	CALIFLI (Page 3 o			PAGE C
LOT-143 23 WORTHWICH C Site Address DUCT LEAKAGE AND DESIGN DIAGNOST	2 <i>T</i> ·		2071 per	
DUCT LEAKAGE REDUCTION				
Pressurization Test Results (CFM @ 25 Pa	·			Addition to the second
		Downstair	<u>Up:</u>	stairs
Fan Flow	Test Leakage (CFM	102		0
If fan flow is calculated ap 400cfm/ton x numbe Heating Capacity in Thousands of Btu Hr. enter	r of tons, or as 21.7 x calculated value here	114 Sq. FT.		
If fan flow is measured ente		5,1		^^
Leakage Fraction = Test Leakage/(Measured or	Calculated Fan Flow) #	7.1	-	0.0
Pass If le	eakage fraction < ± 6%		Ø	
For AEROSOL TYPE SEALANTS ONLY – The following diagnos Duct Fan Pressurization at rough-in measured HECK AFTER FINISHING WALL:	itic testing was completed: I leakage (CFM)		Pass	Fail
Yes No Pressure pan test of House pressurization to	96			
Yes ☐ No Visual Inspection of Duct Connections⊓	•			
THERMOSTATIC EXPANSION VALVE (TXV)				
				h'a
? Yes No Thermostatic Expansion valve is installed a provided for inspection		V	2 Pass	Eail
, 2002-00-00-00-00-00-00-00-00-00-00-00-00		Yes is a pass	F 433	FAII
DUCT DESIGN				
Yes No ACCA Manual D Design calculations ha	ve been completed. Duct	Design is on the		
Yes No TXV is installed or Fan flow has been videsign	prified. If no TXV, verified	fan flow matches		
	Measured Fan	Flow =		
	Yes for both 1 a	ind 2 is a Pass	Pass	Fail

of the CF-6R signed by the builder employees or sub-contractors certifying that diagnostic testing and installation meet the requirements for compliance credit.)

Tests Performed

Signature, Date

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

COPYTO:

2.

Building Department HERS Provider (if applicable) **Building Owner at Occupancy**

Compliance Forms

August 2001

A-22



Site Address Lot. 143 - 23-NOThwich

Permit Number

FENESTRATION/GLAZING

Manufacturer/ Brand Name	Operator Type	Product U-Yejues-1 (<- CF-1R Value)²	Product SHGC-1 (<- CF-1R Value)*	# of Panes	Total Quantity of Like Product (Optional)	Total Square Feet	Interior or Exterior Shading Device or Overhang	Comments Special Features
Philips 800 S & 'V (Low E)	Slider	.36	.33					U-Values based on
Philips 800 S & N (L ow E)	Single Hwag	.36	.33					Products supplied
Philips 800 S & N (Low E)	Fixed	.33	.36					by Insight Glass
Philips 800 S & N (Low E)	Patio Door	.35	.35					Only!!
		-	10.1					U-Values On fenestration
								Products supplied by
								others are not available.

1. 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-value must be less than or equal to value from CF-1R. Installed SHGC must be less than or equal to values from CF-1R, or a shading device (interior, exterior or overhang) is installed as specified on the CF-1R. Afternatively, installed weighted average U-Values for the total fenestration area are less than or equal to values from CF-1R.

? the undersigned verify that the fenestration/gizzing listed above my signature (1) is the actual fenestration product installed; (2) is equivalent to or more efficient than that specified in the certificate or 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.

	11148	2/22/05	Insight Glass Inc.
if applicable)	Signature, Date		Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
tems #s if applicable)	Signature, Date		Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
rems #s f 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

Compliance Forms

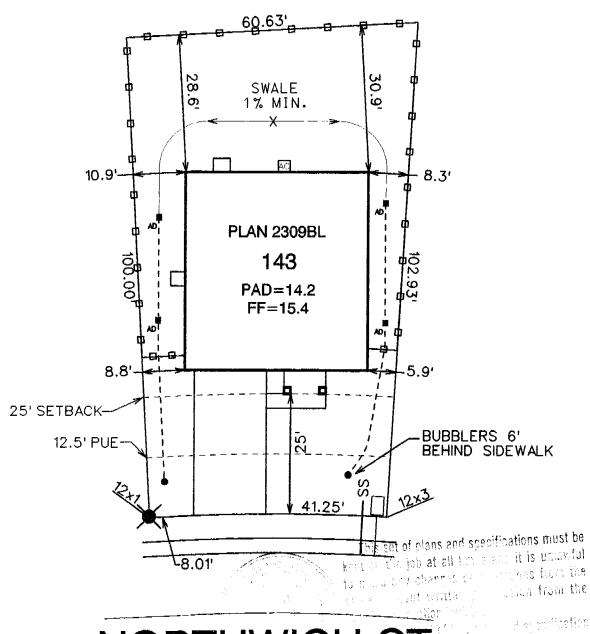
July 1, 1999

PAGE 02 P. 002

NO.511 0002

Enuip. CEC Centred Compressor R of Efficiency Location Duct Load	Choling Capacity Choling Capacity (Blucher) ent to or more
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Signature, Date Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner	ies'
WATER HEATING SYSTEMS:	
Distribution If Recity wof Raind Tank Effic	
Type (Std culation, letnical input (kW Volume circly stanto)	<u>Parent</u>
True Name & Model Number Paul-of-Use) Control Type Systems & Madel Verman	landby ⁱ Insulati
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MEAN GST 50 YOCT & STOCAGE TOOSE STOCAGE	iandby: Insulati Des (91) R-insulati

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





SCALE: 1'=20'

NORTHWICH C'

FIRE HYDRANT

D.I.

E ELECTRICAL BOX

WATER SERVICE

X STREET LIGHT

SANITARY SEWER

CABLE T.V. BOX

SWALE(1% MIN.)

AREA DRAIN

BUBBLERS

GARAGE LOCATION FACING HOUSE R OR L FF FINISH FLOOR

LP/HP LOW/HIGH POINT

TOP OF CURB TC

TOP OF WALL TW

BOTTOM OF WALL BW FINISH GRADE FG

P.U.E. PUBLIC UTILITY EASEMENT =

PLOT PLAN FOR

LOT 143

BEND

GARAGE LIP GL D/W DRIVEWAY

LOT AREA: 5536 SQ. FT. BLDG COVERAGE: 1558 SQ. FT. % LOT COVERAGE: 28%

Himble tos

225 LOT NUMBER LOT LINE

➂ S.S. CLEAN OUT

П WATER METER BOX

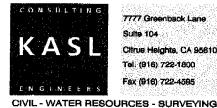
TRANSFORMER

· EMBANKMENT(2:1 MAX,)

FRETAINING WALL ■ MASONRY FENCE

6' VIEW FENCE

⊕ 6' HIGH WOOD FENCE



7777 Greenback Lane Suite 104 Citrus Heights, CA 95610 Tel. (916) 722-1800 Fax (916) 722-4595

ADDRESS:

A.P.N. COUNTY: SACRAMENTO

STEAMBOAT

SCALE: 1"=20" DATE: 2-03-05 REVISED: DRAWN BY: PWG CHK'D. BY: DLA

W.O. 3940-03