

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0420291

Insp Area: 4
Thos Bros: 277F5

Site Address: 529 WISCONSIN AV SAC
Parcel No: 262-0101-002

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

CONTRACTOR
OWNER BUILDER

OWNER
SABLAN VICTOR J/ANTONIA Q
525 WISCONSIN AV
SACRAMENTO, CA 95833

ARCHITECT

Nature of Work: NEW 1 STORY SFD 2320 SQ FT LIVING , 612 SQ FT GARAGE, 180 PATIO AREA --IN DWESIGN REVIEW AREA--

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 _____ License Number 0 _____ Date _____ Contractor Signature _____

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);

ADJ 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).

I am exempt under Sec. _____ B & PC for this reason: _____
Date 5/2/05 Owner Signature Antonia Q. Sablan

PAID
MAY 02 2005
CITY OF SACRAMENTO
CENTER

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 5/2/05 Applicant/Agent Signature Antonia Q. Sablan

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 _____ Policy Number _____ Exp Date _____

(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 _____ 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 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.

Department of Planning and Development
Building Inspection Division
Grading and Erosion Control Questionnaire

To be completed for all residential new construction and additions

PART I (To be completed by applicant)

Site Address 529 Wisconsin Ave A.P.N. 262-0101-002

Applicant Information

Name Victor & Antonia Sablan
Address 3201 Nordyke Dr
Scotts, Ca. 95833
Phone 916 925 3510

Project Information (Check One)

Single Family Dwelling ✓
Duplex
Triplex
Deep Lot Development

PART II (To be completed by the applicant when the project is not a part of a larger subdivision)

Are there existing structures on site? Y N
Does the site front on a paved road? Y N*
Is the site higher than the crown of adjacent road? Y N*
Is the proposed building site higher than the back of the sidewalk or curb? Y N*

Describe existing frontage improvements along road.

Ditch * Curb and Gutter Curb, Gutter, and Sidewalk

The direction of drainage on this site is:

Front to Rear * Rear to Front Side to Side *

Does an adjacent site drain across this parcel? Y* N

Does this site have an existing low area or drainage swale? Y* N

Will construction require cut or fill on site? (* >50FT3 or >2FT) Y N

- How much cut? _____ Yards Depth
- How much fill? _____ Yards Depth

Has building site been previously been filled? Y* N

Will existing drainage be re-routed? Y* N

Do you plan to construct or modify culverts or drainage ditches? Y* N

Print Name Victor J. Sablan Title owner/builder

Signature Victor J. Sablan Date 4/11/05
Owner or Contractor

Please complete and return to Plan ck.

PART III (To be completed by staff)

What is the acreage of the parcel to be built on? _____ Acres.

If greater than 1/2 acre has an approved erosion and sediment control plan been provided? Y N

If greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N

Is the parcel to be built on part of a larger subdivision? Y N

Subdivision Name: _____

If yes has an approved erosion and sediment control plan been provided? Y N

If the original subdivision is greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N

Is grading and drainage approval required prior to permit issuance? Y N

Approved by: [Signature] Date: 4/30/05

Building permit #: 04-26291

White Copy - Permit Jacket
Yellow - Utilities
Pink - Bldg. Div.

INSTALLATION CERTIFICATE

(Page 1 of 7)

CF-6R

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 18-103(b).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (e.g. gas furnace)	CEC Certified Make and Model Number	# of Identical Furnaces	Efficiency (AFUE, % or ECF, Btu input)	Dist. Location (e.g. attic)	Dist. or Piping Number	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Gas Furnace	5757404000	1	90%	Attic	#2	67,000	74,000

Cooling Equipment

Equip. Type (e.g. air conditioner)	CEC Certified Component Make and Model Number	# of Identical Units	Efficiency (SEER, etc. or EER, Btu input)	Dist. Location (e.g. attic)	Dist. or Piping Number	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
A/C Unit	5452100000	1	12 SEER	Attic	#2	44,000	46,000

1. I, the undersigned, verify that equipment listed above is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1B) 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.

9-27-05
Signature, Date

The Air Company
Installing Subcontractor (Co. Name) OR
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Water Type	CEC Certified Make and Model Number	Distribution Type (e.g. PEX-AT-1/2)	IFR: min/max, Control Type	# of Installed Units	Rated Input (kW or Btu/hr)	Test Volume (gallons)	Eff. (EF, EER)	Standby Loss (%)	Estimated recirculating Btu/hr

7. For gas storage water heaters (rated input of greater than 75,000 Btu/hr), show recovery efficiency and standby loss. For instantaneous gas water heaters, list recovery efficiency and standby loss.
8. If external circulation is necessary 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 is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1B) 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

Permit # 0420291
 VICTOR SABLAN

This form is to be filled out completely & signed by applicant/owner/contractor responsible for Title 24 Energy Compliance & returned to the field inspector at final.

INSTALLATION CERTIFICATE (Page 1 of 15) **CF-6R**

Site Address: _____ Permit Number: _____

An installation certificate is required to be posted at the building site or made available for all appropriate inspectors. (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 or occupant, per Section 70-10003.

HVAC SYSTEMS

Heating Equipment

Type	Manufacturer	Model	Capacity (BTU/hr)	Efficiency (AFUE)	Year	Location	Notes
Gas	Carrier	5800	100,000	80%	2005	Basement	

Cooling Equipment

Type	Manufacturer	Model	Capacity (BTU/hr)	Efficiency (SEER)	Year	Location	Notes
Gas	Carrier	5800	100,000	12	2005	Basement	

I, the undersigned, verify that equipment listed above 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 of Part 6), where applicable.

Signature, Date: _____
 Installing Subcontractor (Co. Name) OR Owner: _____

WATER HEATING SYSTEMS

Type	Manufacturer	Model	Capacity (GPH)	Efficiency (UEF)	Year	Location	Notes
Gas	Carrier	5800	40	0.65	2005	Basement	

1. For units less than or equal to 75,000 Btu/hr, include venting and hot water recovery details, see Energy Factor. For large gas storage water heaters (total input of greater than 75,000 Btu/hr), see Recovery Efficiency, Monthly Loss and Reset Input. For Appliances per other sections, see Recovery Efficiency and Reset Input.

2. A-12 electrical loadings to determine the energy water heater -40 to energy factor of less than 0.60.

Permits & Review Details: All permits and documents 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 of Part 6), where applicable.

Signature, Date: Jeffrey Freese 9-21-05
 Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner: J.W. Freese Plumbing

CCP# TO: Building Department
 EHS# Provide (if applicable)
 Building Owner or Occupant

Permit # 0420291
(VICTOR SABLAK)

INSTALLATION CERTIFICATE

(Page 2 of 8)

CF-6R

Site Address

Permit Number

INSULATION/GLAZING

Manufacturer/Brand Name (GROUP LINE PRODUCTS)	Product U-Factor ¹ (CF-1R value) ²	Product SHGC ¹ (CF-1R value) ²	# of Panels	Total Quantity of Lbs Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

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.

² 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.

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 window meets or exceeds the appropriate requirements for manufactured devices (from Part 6), where applicable.

Item #
(if applicable)

Signature, Date

[Handwritten Signature]

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

INTERNATIONAL WINDOW
30536 SANTONIA ST HAYWARD, CA

Item #
(if applicable)

Signature, Date

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

* 1-510-482-1122

Item #
(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

987-0447 January 4, 2001 0420291
9087046

Permit # 0420291
(VICTOR SABLAK)

CM



National Fenestration Rating Council

CERTIFIED

International Window Corporation

5300HS Horiz. Slider
Vinyl Frame
Low-E
Double Glazing

RES97

ENERGY PERFORMANCE RATINGS

U-Factor .37 (U.S./IP)	R-Value 2.1 (Metric/SI)	Solar Heat Gain Coefficient .32
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ADDITIONAL PERFORMANCE RATINGS

Visible Transmittance .56	
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Manufacturer certifies that these ratings conform to applicable NFRC procedures for determining whole product energy performance. NFRC ratings are determined for a fixed unit of environmental conditions and a specific product size. Consult manufacturer's literature for other product performance information.

www.nfrc.org

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

Permit #
0420291
(VICTOR SABLANT)

JOB ADDRESS:

529 Wisconsin Ave
Sacramento, CA

ICBO Report #4004

Date of Job Completion _____

PLASTERING CONTRACTOR:

Name: G. Glenn Plastering
Address: 6330 main Ave St 4, Orangethorpe, CA 95062
Telephone No: 916 989-8755

Contractor Number of Diamond Wall System _____

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.

9/27/2005
Date

Delores Glenn
Signature of authorized representative of
Plastering Contractor

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

Attn: Nene

INSULATION CERTIFICATE

*Permit #
0420291
(VICTOR SABLAN)*

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:

SITE ADDRESS 529 WISCONSIN AVE SACRAMENTO CA
NUMBER CITY STATE

CEILINGS:

BLOW: MANUFACTURER GREEN FIBER THICKNESS 10.3" R/VALUE 38

BATTS: MANUFACTURER KNAUF THICKNESS 13" R/VALUE 38
KNAUF

EXTERIOR WALLS:

MANUFACTURER KNAUF THICKNESS 3.5" R/VALUE 13
KNAUF

FLOOR INSULATION:

MANUFACTURER KNAUF THICKNESS N/A R/VALUE N/A
KNAUF

AIR INFILTRATION: (TITLE 24)

YES XXX NO

OTHER: _____

GENERAL CONTRACTOR: SALADINE CONSTRUCTION LICENSE # _____

BY: _____ TITLE _____ DATE _____

INSULATION CONTRACTOR: WESTERN INSULATION LP LICENSE # 794484

BY: Becky Gutherz TITLE AUTH. AGENT DATE 7/12/2005
BECKY GUTHERZ

529 Wisconsin

INSTALLATION CERTIFICATE

(Page 2 of 8)

CF-6R

Site Address

Permit Number

FENESTRATION/GLAZING

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (S CF-1R value) ²	Product SHGC ¹ (S CF-1R value) ²	# of Panels	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

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.

² 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.

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 (Form Part 6), where applicable.

Item #s
(if applicable)

Signature, Date

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

INTERNATIONAL WINDOWS
30526 SANTONIS ST MAYWOOD CO.

Item #s
(if applicable)

Signature, Date

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

1-510-487-1122

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

January 4, 2001

To - 9087046

0420291



Waterworks Pressure Water Pipe Products Submittal and Data Sheet

AWWA C900 Distribution Pipe, Cast Iron Pipe Size (Gasketed)

October 1998

Pressure Class 100 psi - DR 25

Nominal Pipe Size (inches)	Average Outside Diameter (inches)	Approximate Inside Diameter (inches)	Minimum Wall Thickness (inches)	UL Listed Approximate Weight (lbs/100')
4	4.800	4.39	0.192	193
6	6.900	6.31	0.276	398
8	9.050	8.28	0.362	685
10	11.100	10.15	0.444	1030
12	13.200	12.08	0.528	1457

Pressure Class 150 psi - DR 18

Nominal Pipe Size (inches)	Average Outside Diameter (inches)	Approximate Inside Diameter (inches)	Minimum Wall Thickness (inches)	UL Listed, FM Approved Approximate Weight (lbs/100')
4	4.800	4.23	0.267	264
6	6.900	6.08	0.383	543
8	9.050	7.98	0.503	936
10	11.100	9.79	0.617	1408
12	13.200	11.64	0.733	1989

Pressure Class 200 psi - DR 14

Nominal Pipe Size (inches)	Average Outside Diameter (inches)	Approximate Inside Diameter (inches)	Minimum Wall Thickness (inches)	UL Listed, FM Approved Approximate Weight (lbs/100')
4	4.800	4.07	0.343	333
6	6.900	5.85	0.493	688
8	9.050	7.68	0.646	1182
10	11.100	9.41	0.793	1779
12	13.200	11.20	0.943	2516

AWWA C905 Transmission Pipe, Cast Iron Pipe Size (Gasketed)

Pressure Rated 165 psi - DR 25

Nominal Pipe Size (inches)	Average Outside Diameter (inches)	Approximate Inside Diameter (inches)	Minimum Wall Thickness (inches)	UL Listed Approximate Weight (lbs/100')
14	15.300	14.00	0.612	1950
16	17.400	15.92	0.696	2622
18	19.500	17.84	0.780	3213
20	21.600	19.76	0.864	3942
24	25.800	23.61	1.032	5603

Pressure Rated 235 psi - DR 18

Nominal Pipe Size (inches)	Average Outside Diameter (inches)	Approximate Inside Diameter (inches)	Minimum Wall Thickness (inches)	UL Listed Approximate Weight (lbs/100')
14	15.300	13.49	0.850	2664
16	17.400	15.34	0.967	3447
18	19.500	17.20	1.083	4389
20	21.600	19.05	1.200	5386
24	25.800	22.78	1.433	7728

Pipe Material: Pipe compound meets ASTM D 1784, cell class 12454.
Pipe Joints: Pipe is manufactured with thickened integral bells; bells include elastomeric gaskets. The gasket meets the requirements of ASTM F 477.
Agency: Certified by Underwriters Laboratories, Inc.® to ANSI/NSF Standard 81. Underwriters Laboratories, Inc.® also tests our C900 to the requirements of the Uniform Plumbing Code™.
Installation: The pipe system design engineer and installer should refer to the following installation guides: AWWA C605 and PWPipe's *Installation Guide for PVC Water Pipe*.
Hydrostatic Proof Testing: Every standard and random length of PWPipe's C900 and C905 pipe is individually pressure tested to the requirements of AWWA.
PWPipe C900/C905 products also undergo additional in-house quality assurance testing, such as impact resistance, flattening, quick burst, and extrusion quality, where applicable.