

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0611304

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 1790 ALICE WY SAC
Parcel No: SONORA SPRINGS LOT # 73

CONTRACTOR
D. R. HORTON INC.
11919 FOUNDATION PL
GOLD RIVER CA 95670

OWNER

ARCHITECT

Nature of Work: MP1981 2 STORY 7RM 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 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 B License Number 750190 Date 8/29/06 Contractor Signature DEP

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).

_____, I am exempt under Sec. _____ B & PC for this reason: _____

Date _____ Owner Signature _____

PAID
CITY OF SACRAMENTO
AUG 29 2006
NEIGHBORHOOD SERVICE
AND DEVELOPMENT SERVICE

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 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 abovementioned property for inspection purposes.

Date 8/29/06 Applicant/Agent Signature DEP

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 AMERICAN CASULTY CO Policy Number WC247856876 Exp Date 07/01/2006

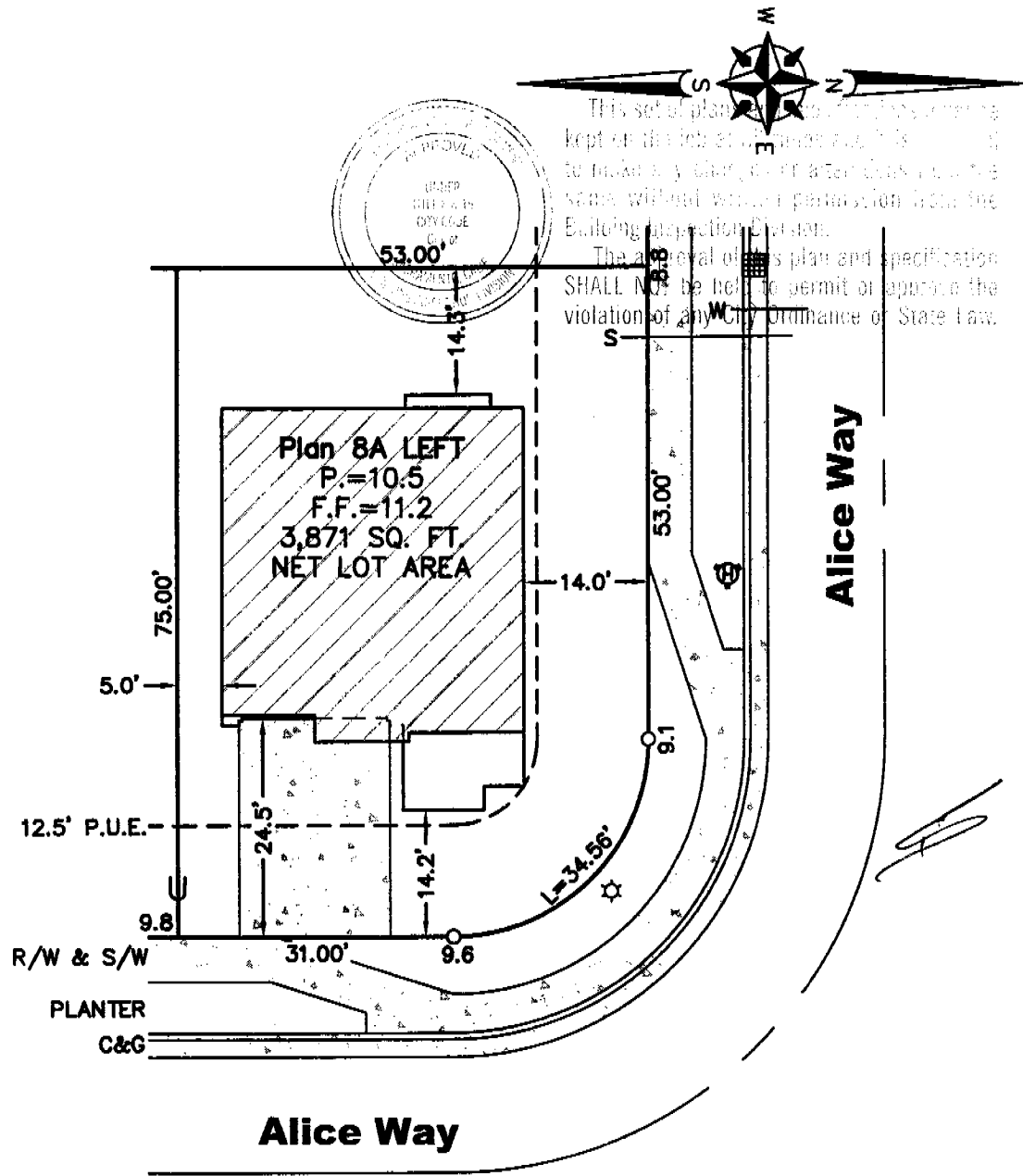
_____, (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should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

Date 8/29/06 Applicant Signature DEP

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.

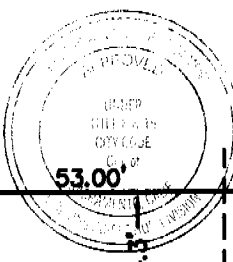
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSE OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE AND APPROXIMATE UTILITY CONNECTION, ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALLS ARE OPTIONAL, AND MAY OR MAY NOT BE CONSTRUCTED.



This set of plans is to be used for the purpose of indicating compliance with zoning set backs, general drainage and approximate utility connection, all other data shown hereon is conceptual. This plot plan does not reflect as-built condition, retaining walls are optional, and may or may not be constructed.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



LEGEND

- S - - - - SEWER
- W - - - - WATER
- U - - - - UTILITY LOCATION
- - - - - DIMENSION POINT
- ☼ - - - - STREET LIGHT
- ⊕ - - - - FIRE HYDRANT
- - - - - DRAIN INLET

ADDRESS:

ALICE WAY

5/15/2006

SCALE: 1" = 20'

PLOT PLAN
LOT 73
 Sonora Springs - Phase 1
 City of Sacramento
 County of Sacramento, State of California

WECKER
SURVEYS

1111 KENNEDY PLACE,
 SUITE 4
 DAVIS, CA 95616
 530-792-7252
 FAX 530-792-7171



Planning and Building Department
 Building Division

CITY OF SACRAMENTO
 CALIFORNIA

November 7, 2003

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

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

ADDRESS 1790 Annie Way Sac PERMIT NO. 0611304

S/BOK

INSPECTION COMMENTS			PERMIT DOCUMENTS
9-20-06	10-10-03	AP	[Signature]
9-27-06	11-12	AP	[Signature]
10/13/06	E-17	AP EWD	[Signature]
10-26-06	26-17	CV	[Signature]
10-25-06	26-17	AP	[Signature]
11-14-06	B-14	AP MDP	[Signature]
11-16-06	A-22	AP MDP	[Signature]
11-17-06	B-32	AP MDP	[Signature]
12/6/06	PAT 156	AP	[Signature]
1-3-07	Final	MDP	[Signature]
1-4-07	Final	MDP	[Signature]

FINAL APPROVALS		
BUILDING	<div style="font-size: 2em;">/</div>	
ELECTRICAL		
PLUMBING		1-4-07 MDP
MECHANICAL		
FIRE		
SITE		

INSTALLATION CARD
WESTERN ONE STUCCO SYSTEM
SACRAMENTO STUCCO PRODUCTS CO., INC.

Job Address:

ICBO Evaluation Services, Inc.

D.R. Horton - Sonora Springs

Report No. 3899

Lot 73 1790 Alice Way

Date of Job Completion: 1-3-07

Plaster Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3346 Luyung Dr., Rancho Cordova, CA 95742

Telephone Number: (916) 631-9844

Approved Applicator's License Number as
Issued by Western Stucco Products 507

This is to certify that the plastering 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.

Mary Allen
Signature of authorized representative of plastering contractor

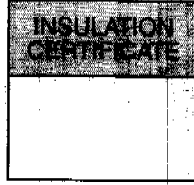
1-4-07
Date

Installation card must be presented to the building inspector
After completion of work and before final inspection.

No. DRH-73



INSULATION CONTRACTORS ASSOCIATION OF AMERICA



1321 DUKE STREET, SUITE 203 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT THE WORK HAS BEEN COMPLETED IN CONFORMANCE WITH CURRENT BUILDING CODES AND REGULATIONS AND MEETS THE REQUIREMENTS OF CALIFORNIA TITLE 24, STATE OF CALIFORNIA.

Dr. Horton LOT # 73 TRACT # SONORA S. STREET 1790 Alice way CITY LINCOLN CA.

EXTERIOR WALLS: MANUFACTURER F/G THICKNESS/TYPE 3 5/8 R-VALUE 13/19

CEILING: BATT: MANUFACTURER CT THICKNESS/TYPE 10 R-VALUE 30 BLOWN IN: MANUFACTURER INSUL-ITE THICKNESS 12 R-VALUE 30

SQUARE FOOTAGE COVERED 7720 NUMBER OF BAGS USED 20

FLOORS: MANUFACTURER THICKNESS/TYPE R-VALUE SLAB ON GRADE: MANUFACTURER THICKNESS/TYPE R-VALUE

WIDTH OF INSULATION INCHES FOUNDATION WALLS: MANUFACTURER THICKNESS/TYPE R-VALUE

GENERAL CONTRACTOR CALIFORNIA CONTRACTORS LICENSE # DATE

SIGNATURE TITLE

INSULATION CONTRACTOR ALCAL ARCADE CONTRACTING CALIFORNIA CONTRACTORS LICENSE # 616286 NEVADA CONTRACTORS LICENSE # 9000201 DATE 12/22/06

Signature: Otis Title: Installer

INSTALLATION CERTIFICATE

Plan 6 (Page 2 of 12) CF-6R

Site Address 1780 Alice Wy Permit Number 0611296

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).

FENESTRATION/GLAZING:

Manufacturer/Brand	Name (GROUP LIKE PRODUCTS)	Product U-factor ¹ (CF-1R value)	Product SHGC ¹ (CF-1R value)	# of Panels	Total Quantity of Like Product (Optional)	Area Square Feet	Shading Device Exterior or Overhang	Comments/Location/Special Features
1.	6210 SH	.34	.34	23	23	77		
2.	5621 SD	.34	.34	23	23	77		
3.	6110 HV	.34	.34	108	108	355		
4.	6340 DW	.34	.34	108	108	355		
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								

¹ Use values from a fenestration product's NFRC label. For fenestration products without an NFRC label, use the default values from Section 16 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 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. If using default table SHGC values from §16 identify whether tinted or not.

1. 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 (from Part 6), where applicable.

Item #s _____ Signature _____ Date _____
 (if applicable) Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Window Distributor
Milgard Manufacturing

Item #s _____ Signature _____ Date _____
 (if applicable) Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Window Distributor

Item #s _____ Signature _____ Date _____
 (if applicable) Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Window Distributor

COPY TO: Building Department
 HERS Rater (if applicable)
 Building Owner at Occupancy
 Residential Compliance Forms

INSTALLATION CERTIFICATE

D.R. Horton Sonoma Springs - All Plans

Permit Number 0611296

Site Address 1780 Alice Way

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 at occupancy, per Section 10-113(b).

HVAC SYSTEMS:

Heating Equipment

Equipment	Type (pkg. Heat pump)	CEC Certified Mfr name and Model #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-1R value (incl. etc.)	Duct Location	Duct or Piping Heating Load (Btu/hr)	Capacity (Btu/hr)
Furnace		York LY85090A12	1	0.80	Attic	R-6.0	29,385
Furnace		York LY85090A12	1	0.80	Attic	R-6.0	26,080
Furnace		York LY85090A12	1	0.80	Attic	R-6.0	27,455
Furnace		York LY85090B16	1	0.80	Attic	R-6.0	38,284
Furnace		York LY85090B16	1	0.80	Attic	R-6.0	37,718
Furnace		York LY85090B16	1	0.80	Attic	R-6.0	39,880
Furnace		York LY85090A12	1	0.80	Attic	R-6.0	31,527
Plan 1 (1985)							
Plan 2 (2064)							
Plan 3 (2029)							
Plan 4 (2320)							
Plan 6 (1425)							
Plan 7 (1680)							
Plan 8 (1981)							

Cooling Equipment

Equipment	Type (pkg. Heat pump)	CEC Certified Compressor Unit Mfr Name and Model #	# of Identical Systems	(1) Efficiency (SEER, EER, etc.) > CF-1R value (incl. etc.)	Duct Location	Duct R-value	Cooling Capacity (Btu/hr)
Coil		Aspen CB46AX	1	13/11	Attic		
Coil		Aspen CB46AX	1	13/11	Attic		
Coil		Aspen CB46AX	1	13/11	Attic		
Coil		Aspen CB46AX	1	13/11	Attic		
Coil		Aspen CB46AX	1	13/11	Attic		
Coil		Aspen CB46AX	1	13/11	Attic		
Coil		Aspen CB46AX	1	13/11	Attic		
Plan 1 (1985)							
Plan 2 (2064)							
Plan 3 (2029)							
Plan 4 (2320)							
Plan 6 (1425)							
Plan 7 (1680)							
Plan 8 (1981)							

* = TXV valves installed w/coil

(1) Leads greater than or equal to:
 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 Appliances Regulations or Part 6), where applicable.

Beutler Corporation
 Installing Subcontractor (Co. Name) OR Owner
 Signature, Date

WATER HEATING SYSTEMS:

Equipment	CEC Certified Mfr Name & Model #	Type (gal. tank or tankless)	# of Identical Systems	(1) Rated Tank Volume (gallons)	(2) Standby Loss (BTU/hr)	Efficiency (CF 2E)	Low (4)
Condenser	York HRD038		1	R-6.0	23,935		30,600
Condenser	York HRD038		1	R-6.0	24,009		30,500
Condenser	York HRD038		1	R-6.0	25,050		30,500
Condenser	York HRD042		1	R-6.0	28,128		38,100
Condenser	York HRD042		1	R-6.0	28,100		36,100
Condenser	York HRD042		1	R-6.0	28,410		36,100
Condenser	York HRD038		1	R-6.0	23,935		30,600
Plan 1 (1985)							
Plan 2 (2064)							
Plan 3 (2029)							
Plan 4 (2320)							
Plan 6 (1425)							
Plan 7 (1680)							
Plan 8 (1981)							

(2) For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric water heaters 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 Flood Input. For instantaneous gas water heaters, list Recovery efficiency and Flood Input.
 (3) R-12 thermal insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

Radiant & Shower Heaters:
 All radiant and shower heaters 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-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 Appliances Regulations or Part 6), where applicable.

Signature, Date

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

HVAC Provider (if applicable)
 Building Owner at Occupancy

COPY TO: Building Department