

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0318695

Insp Area: 4

Thos Bros:

Sub-Type: NAPT

Housing (Y/N): N

Site Address: 5350 DUNLAY DR SAC St: #12

Parcel No: 201-0440-031 BLDG UNIT:

CONTRACTOR
PACIFIC WEST BUILDERS
7025 LONGLEY LANE #60
RENO NV 89511

OWNER
SYRAH, LLC
7025 LONGLEY LANE #60
RENO, NV 89511

ARCHITECT
HUMPHREYS & PARTNERS LP
5350 ALPHA RD
DALLAS TX 75240

**Nature of Work: 7 UNIT CONDOMINIUMS W/ATTACHED GARAGE (RESIDENCE UNITS
INCLD: 1 @ A-1, 2 @ B-1, 2 @ B-2, 2 @ B-3)**

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 FB License Number 754967 Date 12/11/03 Contractor Signature [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);

____ 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 _____

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 12/11/03 Applicant/Agent Signature [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:

Carrier STAR INS Policy Number 238-0000508-02

____ (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 12/11/03 Applicant Signature [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.

PAID
CITY OF SACRAMENTO
DEC 11 2003
Exp Date 04/01/2004
NORTH PERMIT CENTER

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 5350 DUNLAY DR., BLDG. #12 Permit No.: 0318695
Building Use: NEW APARTMENT Occupancy: R1
Building Owner: SYRAH, LLC Construction Type: V-1HR
Owner Address: RENO, NEVADA 89511 Sprinkled? Yes No
Portion of Building Occupied: ENTIRE Area: 13,316 Sq. Ft.
02/07/05 James Redford RON BEEHLER
Date By: (Print) Sign INTERIM CHIEF BUILDING OFFICIAL

[Finaled By: MW, CDY, CM, CP, KW]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

DIAMOND WALL INSULATING SYSTEM, INC.

CALIFORNIA CONTRACTOR'S LICENSE #745646
460 Roseville Road • Roseville, CA 95678
(916) 786-2088 / (916) 786-2064

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

TRACT SYRATH @ WYCHANS 101 12 TRK 1
STREET _____ CITY SACRAMENTO

EXTERIOR WALLS: CF 2x4 3 1/2 13
MANUFACTURER CF THICKNESS 2x4 R-VALUE 19

CEILING AREA: BATS
MANUFACTURER CF THICKNESS 10 R-VALUE 30

CEILINGS: BLOWN IN
MANUFACTURER FULL BARK THICKNESS 12 R-VALUE 30

SQUARE FOOTAGE 2400 NUMBER OF BAGS USED 43
FLOOR AREA CF THICKNESS 3 1/2 R-VALUE 11

MANUFACTURER CF THICKNESS 3 1/2 R-VALUE 11
WALLY WALL
EXTERIOR WALL

MANUFACTURER CF THICKNESS 3 1/2 R-VALUE 11

INTERIOR KNEEWALL:
MANUFACTURER CF THICKNESS 10 R-VALUE 30

APPLIED CAULK & SEALANT TO ALL EXTERIOR OPENINGS & PENETRATIONS
YES NO _____

GENERAL CONTRACTOR _____
CALIFORNIA CONTRACTORS _____
LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____
INSULATION CONT. SIGNATURE _____ TITLE _____
DATE _____

OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

5350 DUNLAW STREET I
SACRAMENTO CA

Date of Job Completion 1-21-05

PLASTERING CONTRACTOR:

Name: Kenyon Plastering B-12

Address: 3223 FREEMAN PARK DR

Telephone No: (916) 349-8191

Contractor Number of Diamond Wall System # 2280

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.

1-21-05
Date

Rock Wehler
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.

INSTALLATION CERTIFICATE

(Page 1 of 8)

CF-6R

5350 DUNLAP DR.
Site Address

AREA #4

BLD #12

0318695
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 Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ (>CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
HRD80	APOLLO W-4230	3		ATTIC			42,000
HRD80	APOLLO W-4235	4		ATTIC			45,000
HRD80	APOLLO H-3230	1		ATTIC			

R-1/R-2
R-3/R-4
REC.

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ (>CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
	GIBSON OSOKA	3	10	ATTIC		28,000	
	GIBSON OSOKA	4	10	ATTIC		34,000	

1. \geq reads 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 Appliance Efficiency Regulations or Part 6) where applicable.

Signature, Date

[Signature]
Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std., Point-of-Use)	If Recirculation, Control Type	# of Identical Systems	Rated ² Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ² (EF, RE)	Standby ² Loss (%)	External Insulation R-value ³
GAS	APOLLO A650NRATL			1	52,500	50	76%		R-16
GAS	APOLLO A650NRATL			4	65,000	50	76%		R-16
GAS	APOLLO A650NRATL			2	62,000	50	76%		R-16

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 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-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

[Signature] PWB
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

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

January 4, 2001

INSTALLATION CERTIFICATE

(Page 2 of 8)

CF-6R

5350 DUNLAP DR BUDG: #12

0318695

Site Address

Permit Number

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. AMSCO LOW-E	0.350	0.29	2	17	24.0		B-1 B-2 B-3
2. AMSCO LOW-E	0.350	0.29	1	4	4.5		B-1
3. AMSCO LOW-E	0.350	0.29	2	6	40.0		B-1 B-2 B-3
4. AMSCO LOW-E	0.350	0.29	2	3	20.0		B-1
5. AMSCO LOW-E	0.350	0.29	1	2	6.7		B-2
6. AMSCO LOW-E	0.350	0.29	2	2	17.7		B-2
7. AMSCO LOW-E	0.350	0.29	2	11	12.0		B-2 B-3
8. AMSCO LOW-E	0.350	0.29	2	2	15.0		B-2
9. AMSCO LOW-E	0.350	0.29	2	4	28.0		B-3
10. AMSCO LOW-E	0.350	0.29	2	1	13.5		B-3
11. AMSCO LOW-E	0.350	0.29	2	1	33.3		B-3
12. AMSCO LOW-E	0.350	0.29	2	4	21.0		B-2
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 (from Part), where applicable.

3-15-05

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

PACIFIC WEST BLDG

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

Certification of Compliance
School District Development Fees

Part I—To be completed by the APPLICANT

Owner's Name/Address Syrath L.P.
Project Address 5350 DUNBAR
Parcel Number 201-0440-031 & 2010440033 Lot No. _____
Subdivision Name SYRATH No. of Units 295
Applicant's Signature [Signature] Title PARTNER
Phone No. 775-745-3949 Date 6/23/03

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II—To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0301576
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 354,305 \$
Signature/Title [Signature] Sup 12/23/03 Date 6/23/03

Part III—To be completed by the SCHOOL DISTRICT

School District Natomas Unified School Dist Certificate No. 04-413

Exempt Comments _____

Residential/Apartment/etc. 354,305 Square ft. x \$ 3.22 = \$ 1,140,862.10

Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____

Total fees collected = \$ _____

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 10/23/03

White & Canary—School District • Pink—Building Department • Goldenrod—Applicant

Certification of Compliance
School District Development Fees

Part I—To be completed by the APPLICANT

Owner's Name/Address Syrah L.P.
Project Address 5350 T. Dun Lay
Parcel Number 201 0440 031 201 0440 033 Lot No. _____
Subdivision Name SYRAH No. of Units _____
Applicant's Signature [Signature] Title PARTNER
Phone No. 775-852-8953 Date 6/23/03

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II—To be completed by the BUILDING DEPARTMENT

Plan Identification Number 030 1536
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 1725 #
Signature/Title [Signature] Sup Bldg Insp Date 6/23/03

Part III—To be completed by the SCHOOL DISTRICT

School District NUSD Certificate No. 04-414
 Exempt Comments _____
Residential/Apartment/etc. _____ Square ft. x \$ _____ = \$ _____
Commercial/Industrial 1725 Square ft. x \$.34 = \$ 586.50
Total fees collected = \$ _____

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature Linda K. [Signature] Date 10/23/03

White & Canary—School District • Pink—Building Department • Goldenrod—Applicant

COUNTY SANITATION DISTRICT 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE
PERMIT AND CALCULATION

APPLICATION NO: _____ BLDG PERMIT NO. 2003-00491

GENERAL INFORMATION
295 1000 2752

THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
2003-00491

THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF U MF U	
CSD-1	10979.06	COMMERCIAL USE	
SRCS			
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	10979.06		

APN: 201-244-031,033

DESCRIPTION/SUBDIVISION _____ LOT: _____

PROPERTY ADDRESS 5350 Dunlap St

OWNER PRO. INC. WEST BLDG CO.

MAILING ADDRESS 1025 CONWAY LAKE WIFE CO.

CITY-STATE-ZIP REDDING, CA 96001 PHONE 707-523-5454

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE _____

CONSOLIDATED UTILITY BILLING USE ONLY _____

ACCT _____ INPUT _____ START _____

Sacramento Regional County Sanitation District
5 Armstrong Ave., Ste. 101
Redding, California
96001

Effective 11, 2003
Billing FAX: 775-201-1943
Billing FAX: 916-876-6161

John

Phone: 201-0440-031,033
Fax: SWD2003-00491

Costs at the above parcel

183.75 ESDs	\$ 132,300
183.75 ESDs	\$ 965,606
	\$ 1,097,906

RECEIPT

The CSD-1 Fees will increase on July 1, 2003 from (\$720/ESD) to \$1853/ESD.

If you have any questions regarding the above, please feel free to call me at 876-6073.

[Signature]

This fee is also subject to adjustment if the data supplied is changed.

www.srcsd.com/www.csd-1.com
e-mail: wingfield@accountry.net



County of Sacramento
 Building Inspection Division

PERMIT OFFICES
 Downtown (916) 874-6433
 827 - 7th St. Rm. 102, Sacramento 95814
 Branch Center (916) 875-5296
 4101 Branch Center Rd. Sacramento 95827

www.bldginspection.org

Case Fee Summary

Case Number: SWD2003-00491
Location: CITY OF SACRAMENTO
Job Address: 5350 DUNWAY STREET

Status: ACT

Issue Date: 6/27/2003

Date Printed: 6/27/20

Fee Type	Fee Due	Fee Paid	Date Paid
CSD 1 Fees	132,300.00	0.00	
SRCSO Sewer Fees	965,606.00	0.00	
Fees Due:	1,097,906.00	Fees Paid:	0.00
	Balance Due:		1,097,906.00

County of Sacramento
 Accounting and Fiscal Services

Date: 06/27/2003 Cashier #: 1

Receipt #: 120030000000014437

Check #: 5147

Permit #: SWD2003-00491

Fee Type	Amount
CSD 1 Fees	\$132,300.00
SRCSO Sewer Fees	\$965,606.00
Total Due	\$1,097,906.00

Check Tendered: \$1,097,906.00



Sacramento Regional County Sanitation Distr
10545 Armstrong Ave., Ste. 101
Mather, California
95655

June 11, 2003
RECEIVING FAX: 775-201-1943
SENDING FAX: 916-876-6161

TO: **Pacific West**
Marissa Ph: 775-852-8453 X 15

FROM: **Fred R. Wingfield**
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

To: John

RE: **SEWER FACILITY IMPACT FEES**
Condos
5350 Dunway Street
Sacramento, CA 95835

APN: 201-0440-031,033
Case: SWD2003-00491

The Sewer Facility Impact Fees for the new 245 Condo Units at the above parcel are as follows:

<u>Impact to County Sanitation District-1 (15.70 Acres)</u>	
245 Condo Units x .75 ESDs/unit =	183.75 ESDs
CSD-1 FEES DUE: 183.75 ESDs X \$720/ESD =	\$ 132,300
<u>Impact to Sacramento Regional County Sanitation District (NEW)</u>	
Condo Units = 245 Units x .75 ESDs/Unit =	183.75 ESDs
SRCS-1 FEES DUE: 183.75 ESDs X \$5,255/ESD =	\$ 965,606
TOTAL SEWER IMPACT FEES DUE:	\$ 1,097,906

These Fee Quotes are only valid through June 30, 2003.

The CSD-1 Fees will increase on July 1, 2003 from (\$720/ESD) to \$1853/ESD.

If you have any questions regarding the above, please feel free to call me at 876-6073.

This fee is also subject to adjustment if the data supplied is changed.

www.srcsd.com/www.csd-1.com

e-mail: wingfieldf@saccounty.net