

CITY OF SACRAMENTO

Permit No: 0421206

1231 I Street, Sacramento, CA 95814

Insp Area: 2
Thos Bros: 297D7

Site Address: 1832 3RD AV SAC
Parcel No: 012-0133-004

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

CONTRACTOR
BRYAN K HAIL
100 AUDUBON CIRCLE
SACRAMENTO CA 95831

OWNER
HAIL BRYAN K/SARAH K
1832 3RD AVE
SACRAMENTO, CA 95818

ARCHITECT

Nature of Work: 2 ND STORY ADDITION TO 1 STORY SFR EXTEND 1 STORY KITCHEN 815 SQ FT TOTAL 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 668977 Date 7-8-05 Contractor Signature *Bryan K Hail*

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
JUL 08 2005

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 abovementioned property for inspection purposes.

Date 7-8-05 Applicant/Agent Signature *Bryan K Hail*

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 EXEMPT/BA Policy Number _____ Exp Date _____

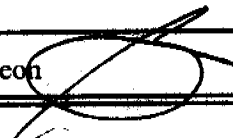
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become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

Date 7-8-05 Applicant Signature *Bryan K Hail*

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.

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 1832 3 rd Avenue	APN: 012-0133-004
DRPB AREA / PUD / SFD: Citywide	ZONING: R-1
EXISTING LAND USE: 1 story RSF with detached garage	
PROPOSED USE: 46 sq ft addition to 1 st floor and 769 sq ft addition of 2 nd floor	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input type="checkbox"/>	Application(s) COMPLETED: Building permit may be issued to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input checked="" type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: Lot area = 6098 (Metroscan). Existing lot coverage = 1673 + 46 proposed = 1719 / 6098 = 28% Meets all setback and lot coverage requirements. 2 nd floor addition to be 769 sq ft and does not count against lot coverage. No additional Planning entitlements required. No Design Review approval required. Building permits may be issued.	
DATE: 12/30/04	BY: Bonnie Surgeon 

Certification of Compliance
School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address Brown K Hinc 1832 3RD AVE SACRAMENTO CA 95818
Project Address 1832 3RD AVE SACRAMENTO CA 95818
Parcel Number 012 0133 004 000 Lot No. _____
Subdivision Name _____ No. of Units _____
Applicant's Signature Brown K Hinc Title Owner
Phone No. (916) 767-1588 Date 1-12-05

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 0421206
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 815
Signature/Title [Signature] Building Insp. Date 1-12-05

Part III - To be completed by the SCHOOL DISTRICT

School District SCUSD Certificate No. 10493
 Exempt Comments _____
 Residential/Apartment/etc. 815 Square ft. x \$ 214 = \$ 1,744.10
Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
Total fees collected..... = \$ 1,744.10

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 4/8/05

White - Canary - School District • Pink - Building Department • Goldenrod - Applicant



CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
 1231 I STREET, ROOM 200, SACRAMENTO, CA 95814

Prior to issuance of a permit, the applicant shall complete Part I of this form. Part II and Part III shall be completed by the project Architect/Engineer and the Development Services Department as a part of the plan review process. Before permit issuance all parties must sign this agreement. Please note that failure to comply with special inspection requirements could be expensive in terms of retrofit design and construction as well as delays in the project.

PART I • SPECIAL INSPECTION AND TESTING AGREEMENT

PROJECT NAME S.F.R. 2ND FLOOR ADDITION
 PROJECT ADDRESS 1832 3rd AVE
 PLAN REVIEW NUMBER 0421206
 PERMIT NUMBER 0421206
 OWNER'S NAME BRYAN HALL
 OWNER'S ADDRESS 1832 3rd AVE
 OWNER'S REPRESENTATIVE _____ PHONE NUMBER _____

TESTING FIRM(S) _____ ITEMS _____
 1. WALLACE-KUHL & ASSOCIATES, INC
3050 INDUSTRIAL BLVD. WEST SACRAMENTO CA 95691
 CONTACT PERSON PETER LANGOIS
 2. _____

CONTACT PERSON: _____

PART II • SPECIAL INSPECTION AND TESTING AGREEMENT • INSPECTION REQUIRED

In accordance with Chapter 17 Section 1701 of the UBC, as adopted by this jurisdiction, SPECIAL INSPECTION is required as noted below:

PRECONSTRUCTION MEETING () REQUIRED () WAIVED

CODE SECTION	TYPE OF WORK	CONTINUOUS	PERIODIC
1701.5.1	CONCRETE		
1701.5.2	BOLTS INSTALLED IN CONCRETE		✓
1701.5.3	SPECIAL MOMENT - RESISTING CONCRETE FRAME		
1701.5.4	REINFORCING STEEL AND PRESTRESSING STEEL TENDONS		
1701.5	STRUCTURE WELDING		
1701.5.1	GENERAL		
	FIELD STRUCTURAL WELDING		
	SHOP STRUCTURAL WELDING (REQUIRING SPECIAL INSPECTION)		
1701.5.2	SPECIAL MOMENT - RESISTING STEEL FRAMES		
1701.5.3	WELDING OF REINFORCING STEEL		
1701.5.6	HIGH STRENGTH BOLTING		
1701.5.7	STRUCTURAL MASONRY		
1701.5.8	REINFORCED GYPSUM CONCRETE		
1701.5.9	INSULATING CONCRETE FILL		
1701.5.10	SPRAY APPLIED FIREPROOFING		
1701.5.11	PILING, DRILLED PIERS AND CAISSONS		
1701.5.12	SHOTCRETE		
1701.5.13	SPECIAL GRADING, EXCAVATION & FILLING		
1701.5.14	SMOKE CONTROL SYSTEM		
1701.5.15	SPECIAL CASES		
1702	STRUCTURAL OBSERVATION PER SECTION 307 REQUIRED: () YES () NO		
SCC 9.26.1004	FLOOD PROOFING INSPECTION & CERTIFICATION		

OTHER: _____

SPECIAL INSTRUCTIONS: _____



CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
 1231 I STREET, ROOM 200, SACRAMENTO, CA 95814

SPECIAL INSPECTION AND TESTING AGREEMENT

When special inspection is required by Section 1701, the architect or engineer of record shall prepare an inspection program which shall be submitted to the Building Official for approval prior to issuance of the building permit. The special inspector shall be employed by the owner (other than owner-builder/developer), the engineer or architect of record, or an agent of the owner, BUT NOT the contractor, or any other person responsible for the work (such as an owner-builder/developer).

The special inspection firm(s) named in Part I have been authorized to perform the special inspection and testing services designated in this agreement, and in accordance with the Uniform Building Code (UBC) requirements, and to report all activities to the Building Official, and other parties as listed. It is understood that special inspections are required in addition to the normal inspections performed by the Building Inspector.

The undersigned hereby affirm, under penalty of law, that the special inspection program is in accordance with the requirements of the UBC and the City of Sacramento.

The undersigned has used all reasonable diligence in completing this form and to the best of his/her knowledge the information contained herein is true and complete. The undersigned hereby certifies under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE		PHONE NUMBER
OWNER	<i>Bryan K Hand</i>	769-1388
ARCHITECT		
ENGINEER		
CONTRACTOR	<i>Bryan K Hand</i>	769-1388
DEVELOPER		
SPECIAL INSPECTOR		

WARNING: Any person, who certifies under penalty of perjury in any case where certification is permitted by law and willfully states as true any material matter which he or she knows to be false, may be found guilty of perjury and subject to penalties which may include fines or imprisonment under the California Penal Code.

PART III • GEOTECHNICAL INSPECTION REQUIREMENTS

GEOTECHNICAL FIRM	PHONE NUMBER
GEOTECHNICAL FIRM ADDRESS	
GEOTECHNICAL ENGINEER	
REPORT NUMBER	
REPORT DATE	REVISION DATES
	RECEIPT NUMBER
	TYPE OF WORK
	REQUIRED
SITE PREPARATION/FILL COMPACTION	
FOUNDATION OBSERVATION	
DRILLED PIERS AND CAISSONS	

IF THE EARTHWORK INSPECTION IS NOT BEING DONE BY THE ABOVE GEOTECHNICAL ENGINEERING FIRM THEN A REVISED REPORT MUST BE SUBMITTED TO AND APPROVED BY THE CITY'S DEVELOPMENT SERVICES DIVISION.

ACCEPTED FOR THE BUILDING DEPARTMENT

PLAN CHECK ENGINEER (Please Print)

PLAN CHECK ENGINEER SIGNATURE

MEL GRUB
[Signature]

DATE

1-12-05

INSTRUCTIONS TO THE SPECIAL INSPECTOR

- 1 • PROVIDE DAILY FIELD REPORTS TO THE BUILDING INSPECTOR ON SITE AS CONSTRUCTION PROGRESSES.
- 2 • A COPY OF ALL SPECIAL INSPECTIONS LABORATORY REPORTS SHALL BE SENT TO THE PLAN CHECK ENGINEER IDENTIFIED ABOVE AND THE ARCHITECT OR ENGINEER OF RECORD.
- 3 • UPON COMPLETION OF SPECIAL INSPECTIONS AND TESTING WORK, PROVIDE THE CITY'S PLAN CHECK ENGINEER WITH A FINAL SPECIAL INSPECTIONS TEST REPORT, WET STAMPED AND SIGNED BY THE RESPONSIBLE PROFESSIONAL ENGINEER

Downtown Permit Center
 1231 I Street, Suite 200
 Sacramento, CA 95814
 Help Line: 1-916-264-5656

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DEPARTMENT
 BUILDING DIVISION
www.cihsacramento.org

North Permit Center
 2101 Arena Blvd., Suite 200
 Sacramento, CA 95834
 Inspection: 1-916-808-4677

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 012 - 0133 - 004 PERMIT # 04-21206
 SITE ADDRESS 1832 - 3RD AVE ACREAGE _____

The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All questions must be answered.

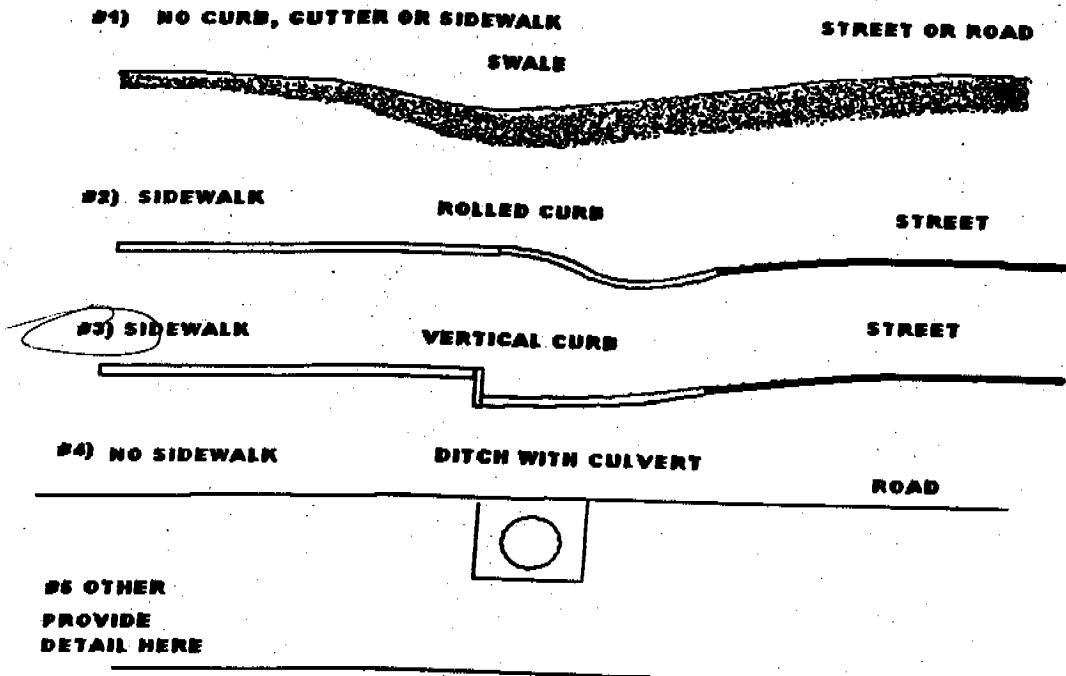
- | | | | |
|--|-------------------------------------|------------------------------------|--------------------------------------|
| 1. Are there existing structures on the site? | <input checked="" type="radio"/> Y | <input type="radio"/> N | |
| 2. Is there an existing concrete or paved driveway to this parcel from the street? | <input checked="" type="radio"/> Y | <input type="radio"/> *N | |
| 3. Will the existing access to this parcel be changed in any way for this project? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | |
| 4. Are all portions of the lot higher than the crown of the street? | <input checked="" type="radio"/> Y | <input type="radio"/> *N | |
| 5. Are all portions of the lot higher than the back of the sidewalk? | <input checked="" type="radio"/> Y | <input type="radio"/> *N | |
| 6. Is there a curb and gutter at the street level? | <input checked="" type="radio"/> *Y | <input type="radio"/> N | |
| 7. Is there a sidewalk with a curb and gutter at the street? | <input checked="" type="radio"/> *Y | <input type="radio"/> N | |
| 8. Is the curb at the street square? | <input checked="" type="radio"/> *Y | <input type="radio"/> N | <input type="radio"/> N/A |
| 9. Is there a rolled curb at the street? | <input type="radio"/> Y | <input checked="" type="radio"/> N | <input checked="" type="radio"/> N/A |
| 10. Is there a drainage ditch or culvert at the street? | <input checked="" type="radio"/> Y | <input type="radio"/> *N | <input type="radio"/> N/A |
| 11. Does the lot drain from back to front? | <input checked="" type="radio"/> Y | <input type="radio"/> *N | |
| 12. Does the lot drain from front to rear? | <input type="radio"/> Y | <input checked="" type="radio"/> N | |
| 13. Does another lot drain across this parcel? | <input checked="" type="radio"/> *Y | <input type="radio"/> N | |
| 14. Does the lot drain from side to side? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | |
| 15. Does the site have an existing low area or drainage swale? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | |
| 16. Does the drainage swale drain to an adjacent parcel? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | <input type="radio"/> N/A |
| 17. Does the drainage swale drain to the street? | <input checked="" type="radio"/> Y | <input type="radio"/> *N | <input type="radio"/> N/A |
| 18. Will existing drainage be re-routed? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | |
| 19. Will drainage ditches or culverts be constructed or modified? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | <input type="radio"/> N/A |
| 20. Did this project require approval from the Zoning Administrator? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | |
| 21. Did the project require approval from the Planning Administrator? | <input checked="" type="radio"/> *Y | <input checked="" type="radio"/> N | |

1832 3rd Ave 0421206

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

- 22. Is there any tree, telephone pole, guy wire or similar obstruction located at the front of the property adjacent to the street or road? Y N
- 23. Is this a corner lot? Y N
- 24. Is the posted speed limit on this street greater than 25 MPH? Y N
- 25. Is this parcel located on a four-lane street? Y N
- 26. If site is greater than 1/2 acre has an erosion and sediment control plan been submitted? Y *N N/A
- 27. If site disturbs 1 acre or more has a copy of the State General Permit NOI and SWPPP been submitted? Y *N N/A
- 28. If site is part of a larger subdivision greater than 1 acre has a copy of the State General Permit NOI and SWPPP been submitted? Y *N N/A

CIRCLE THE DRAWING NUMBER BELOW THAT BEST ILLUSTRATES THE EXISTING CONDITION AT THE LOCATION OF THE PROPOSED DRIVEWAY OR SITE ACCESS.



The information provided on this document is accurate. I understand that if this form is incomplete, contains inaccurate or misleading information, the project located at this address may be delayed until any drainage or encroachment issues are resolved to the satisfaction of the City of Sacramento.

SIGNED [Signature] DATE 7-8-05

TITLE owner

PHONE NO. 916 769-1388

Site verify DRAINAGE to
street.
JRioran
7/9/05

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

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

B. B. Plumbing Co.

Signature, Date

[Signature]

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.

All faucets and showerheads installed are certified by the Commission, pursuant to Title 24, Part 6, Section 111.

- 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 instantaneous gas water heaters, list Recovery Efficiency, Hot Recovery Efficiency, Standby Loss and Rated Input.
- 3 R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Gal. Point-of-Use)	R Factor, insulation, Control Type	# of Identical Systems	Rated Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency (EF, EER)	Standby Loss (%)	External Insulation R-value
THWLESS	Model # 257	STD		1					

WATER HEATING SYSTEMS:

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

Signature, Date

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.

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) [CF-1R value]	Duct Location (attic, etc.)	Duct Re-vents	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

HVAC SYSTEMS:
Heating Equipment

Equip. Type (pkg. heat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) [CF-1R value]	Duct Location (attic, etc.)	Duct or Piping Re-vents	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

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).

Site Address 1932 3rd AVE

Permit Number 0421206

INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

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

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 13)

CF-6R

Site Address 1432 3rd Ave

Permit Number 0421296

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 10-109(b).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (e.g. heat pump)	CBC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (DCE-IR value)	Duct Location (attic, etc.)	Duct or Piping Leaks	Heating Load (Btu/h)	Heating Capacity (Btu/h)
ATTC	TRUDISOR 847367A	1	80.0	attic	R-6		47,000

Cooling Equipment

Equip. Type (e.g. heat pump)	CBC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) (DCE-IR value)	Duct Location (attic, etc.)	Duct Leaks	Cooling Load (Btu/h)	Cooling Capacity (Btu/h)
gas-elect	24TR3036 2400A	1	13.00 SEER	attic	R-6	38,000	36,000

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 of Part 6), where applicable.

8/16/07

Signature, Date

Daniel Bailey owner

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CBC Certified Mfr Name & Model Number	Distribution Type (e.g. Point-of-Use)	# Recirculation Control Type	# of Identical Systems	Rated Input (kW or Btu/h)	Tank Volume (gallons)	Efficiency (EF, UEF)	Standby Loss (M)	External Insulation R-value

- 2. For small gas storage (rated input of less than or equal to 75,000 Btu/h), electric resistance and heat pump water heaters, list Energy Factor.
- For large gas storage water heaters (rated input of greater than 75,000 Btu/h), 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 0.50.

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 of 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

INSTALLATION CERTIFICATE

(Page 2 of 8)

CF-6R

1832 3RD AVE
Site Address

0421206
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 Pans	Total Quantity of Like Product (Columns)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. Andersen Casements	.30	.34	8	5	75		
2. Andersen D/H 4x6	.33	.34	29	13	155		
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 (from Part 6), where applicable.

18
Item #s
(if applicable)

[Signature]
Signature, Date

Collier Warehouse Sean Stephenson
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

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

January 4, 2001