

CITY OF SACRAMENTO

New City Hall, 915 I St., 3rd Floor, Sacramento, CA 95814

Permit No: 0613957

Insp Area: 2

Thos Bros: 358C2

Site Address: 7515 SHELDON RD SAC St: #9

Parcel No: 117-0212-010

#9

Sub-Type: NAPT

Housing (Y/N): N

CONTRACTOR

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

OWNER

D R HORTON INCORPORATE
4401 HAZEL AV
FAIR OAKS, CA 95628

ARCHITECT

Nature of Work: BLDG #9 - 5,640 S.F. -2 STORY TRI-PLEX -NAPT COMPLEX

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 11/01/06 Contractor Signature Christy Smelburg

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 abovementioned property for inspection purposes.

Date 11/01/06 Applicant/Agent Signature Christy Smelburg

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 07/01/2007

(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 11/01/06 Applicant Signature Christy Smelburg

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.

CERTIFICATION OF INSULATION

0613957

| | | | | | | | |
|---|--|---|-------------------------------|-----------------------------------|---|------------------------|----------------------|
| PART I GENERAL | ADDRESS OR TRACT | SACRAMENTO BUILDING PRODUCTS | | | | | |
| | DR Horton Laguna Pointe 7515 SHELDON RD. Bldg. 9 Lots 25 # 9101 Permit # 0613957 LOT # 9 24 # 9102 27 # 9103 EIK grove CA | <input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026 <input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675 <input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675 DATE INSULATION COMPLETED | | | | | |
| PART II AREAS INSULATED | WALLS | CEILING | FLOORS | | | | |
| | (SQUARE FEET) | (SQUARE FEET) | (SQUARE FEET) | | | | |
| | TYPE OF INSULATION | TYPE OF INSULATION | TYPE OF INSULATION | | | | |
| | MATERIAL FIBERGLASS | MATERIAL FIBERGLASS | MATERIAL FIBERGLASS | | | | |
| | FORM BATTS | FORM BATTS & BLOW | FORM BATTS | | | | |
| | MANUFACTURER'S PRODUCT I.D. | | | MANUFACTURER'S PRODUCT I.D. | | | |
| | MANUFACTURER | | | MANUFACTURER | | | |
| | CT | OC | JM | CT | OC | JM | |
| | R - VALUE INSTALLED | APPLIED THICKNESS | R - VALUE INSTALLED | APPLIED THICKNESS | MIN. INSTALLED WEIGHT PER SQUARE FOOT | R - VALUE INSTALLED | APPLIED THICKNESS |
| | R-13/R-19 | 3 1/2 / 5 1/2 | 30 | 9" | | | |
| | | 30 | 12" | | | | |
| KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE | | | | | | | |
| MATERIAL FIBERGLASS | FORM BATTS | R VALUE | | | MANUFACTURER | | |
| | | | | | CT | OC | JM |
| AIR INFILTRATION SEALANT | | | | | | | |
| MATERIAL Foam | MANUFACTURER HILTI | | | MANUFACTURER HANDY FOAM | | | |
| THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS. | | | | | | | |
| SIGNATURE — INSULATION CONTRACTOR JC | | TITLE MANAGER | | DATE 2-11-7 | | | |
| SIGNATURE — GENERAL CONTRACTOR | | TITLE | | DATE | | | |
| REMARKS | | | | | | | |

ENGEO

INCORPORATED

GEOTECHNICAL
ENVIRONMENTAL
WATER RESOURCES
CONSTRUCTION SERVICES

7515 SHELDON Rd. Bldg. 9 LOTS 25 & 4101 24 & 4102 27 & 4103 Permit # 0613957

Project No.
6735.5.001.02

March 22, 2007

D.R. Horton
11919 Foundation Place, Suite 200
Gold River, CA 95670

Subject: North Laguna Pointe Condominiums Lot #9
Sheldon Road
Elk Grove, California

FINAL CONSTRUCTION CONFORMANCE REPORT

For D.R. Horton:

With your authorization, ENGEO Incorporated performed special inspections related to the post-tensioned foundation slabs for the subject building in Elk Grove, California. The inspections were performed from November through December 2006. This report is submitted in accordance with Chapter 17 of the Uniform Building Code.

Pad moisture testing of subject building was performed before placement of the water vapor retarder.

To the best of our knowledge and based on our observations and test results, the work requiring special inspection is in general conformance with the approved plans and specifications, field recommendations of the Structural Engineer, and the applicable workmanship provisions of the Uniform Building Code. Results of the concrete compression testing and elongation measurements from stressing of post-tensioned tendons for the subject building are attached.

We make no representation as to the accuracy of dimensions, calculations, or any portion of the design for this project. If you have any questions or comments, please contact us.

Very truly yours,

ENGEO Incorporated


Zhuo George Hu, PE


Dan Haynosch, GE



Attachments: Concrete Sampling and Stressing Reports

INSTALLATION CERTIFICATE

DR HORTON LAGUNA PLAN C Bldg 9
 Site Address 7515 SHELTON RD. Bldg. 9 LOT 25# 9101 Permit Number 0613957
26# 9102
27# 9103

FENESTRATION/GLAZING:

| Manufacturer/Brand Name (GROUP LIKE PRODUCTS) | Product U-Factor' (≤ CF-1R value) ² | Product SHGC' (≤ CF-1R value) ² | # of Pans | Total Quantity of Like Product (Optional) | Square Feet | Exterior Shading Device or Overhang | Comments/Location/ Special Features |
|--|--|--|-----------|---|-------------|-------------------------------------|-------------------------------------|
| 1. | | | | | | | |
| 2. CLASSIC SLD | .38 | .35 | 12 | 3 | 136 | | |
| 3. STYLELINE HV | .38 | .30 | 30 | 15 | 221 | | |
| 4. STYLELINE SH | .39 | .30 | 28 | 14 | 172 | | |
| 5. STYLELINE PIN | .35 | .30 | 16 | 16 | 92 | | |
| 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.

42 Joe Poylt MILGARD MANUFACTURING
 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

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

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

Job Address:

ICBO Evaluation Services, Inc.

D.R. HORTON - LAGUNA POINTE

Report No. 3899

BLDG#09 - UNIT# 25 - 7515 SHELDON RD # 8101

Date of Job Completion: 2-21-07

Permit # 0013957

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 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.

May Allen
Signature of authorized representative of plastering contractor

3-15-07
Date

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

No. DRH-25

INSTALLATION CARD

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

Job Address:

ICBO Evaluation Services, Inc.

D.R. HORTON - LAGUNA POINTE

Report No. 3899

BLDG#09 - UNIT# 26 - 7515 SHELDON RD # 9102
Permit # 0613957

Date of Job Completion: 2-21-07

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 Luvung 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

3-15-07
Date

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

No. DRH-26

INSTALLATION CARD

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

Job Address:

ICBO Evaluation Services, Inc.

D.R. HORTON - LAGUNA POINTE

Report No. 3899

Permit #

BLDG#09 - UNIT# 27 - 7515 SHELDON RD # 9103
0013957

Date of Job Completion: 2-21-07

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 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

3-15-07
Date

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

No. DRH-27

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6R

D.R. Horton

Site Address 7515 SHELTON DR. Bldg. 9 #9101 LOT 25 Laguna Pointe Permit Number 0413957

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:

Plans 1, 2 and 3

Heating Equipment

| Equip. Type (pkg. heat pump) | CEC Certified Mfr Name and Model Number | # of Identical Systems | Efficiency (AFUE, etc.) ¹ (2CF-1R value) | Duct Location (attic, etc.) | Duct or Piping R-value | Heating Load (Btu/hr) | Heating Capacity (Btu/hr) |
|------------------------------|---|------------------------|---|-----------------------------|------------------------|-----------------------|---------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Cooling Equipment

| Equip. Type (pkg. heat pump) | CEC Certified Compressor Unit Mfr Name and Model Number | # of Identical Systems | Efficiency (SEER, etc.) ¹ (2CF-1R value) | Duct Location (attic, etc.) | Duct R-value | Cooling Load (Btu/hr) | Cooling Capacity (Btu/hr) |
|------------------------------|---|------------------------|---|-----------------------------|--------------|-----------------------|---------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

1. \geq reads greater than or equal to.

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 manufactured devices (from the Appliance Efficiency Regulations or Part 5), where applicable.

Signature, Date

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 (SF, RE) | Standby ¹ Loss (%) | External Insulation R-value |
|-------------|---------------------------------------|---------------------------------------|-------------------------------|------------------------|---|-----------------------|----------------------------------|-------------------------------|-----------------------------|
| <u>GAS</u> | <u>A.O. Smith GVR-50</u> | <u>STD</u> | <u>N/A</u> | <u>1</u> | <u>40,000</u> | <u>50</u> | <u>.62</u> | <u>N/A</u> | <u>R-20</u> |

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.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed; 2) is 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) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Ivan Chavel 1/2/07
Signature, Date

J.R. Pierce Plumbing Co.
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

COPY TO: Building Department
Building Owner at Occupancy

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6R

D.R. Horton
 Site Address: 7515 SHELTON DR. Bldg. 9 # 9102 LOT 26 Laguna Pointe
 Permit Number: 0613957

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

Plans 1, 2 and 3

| 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) |
|------------------------------|---|------------------------|---|-----------------------------|------------------------|-----------------------|---------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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) |
|------------------------------|---|------------------------|---|-----------------------------|--------------|-----------------------|---------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

1. ≥ reads greater than or equal to.

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 manufactured devices (from the *Appliance Efficiency Regulations* or Part 5), where applicable.

Signature, Date _____

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 (SF, RE) | Standby Loss (%) | External Insulation R-value |
|-------------|---------------------------------------|---------------------------------------|-------------------------------|------------------------|---|-----------------------|----------------------------------|------------------|-----------------------------|
| <u>GAS</u> | <u>A.O. Smith GVR-50</u> | <u>STD</u> | <u>N/A</u> | <u>1</u> | <u>40,000</u> | <u>50</u> | <u>0.62</u> | <u>N/A</u> | <u>R-20</u> |

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.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed; 2) is 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) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the *Appliance Efficiency Regulations* or Part 6), where applicable.

Iron Chisel 1/2/07
 Signature, Date

J.R. Pierce Plumbing Co.
 Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 Building Owner at Occupancy

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6R

D.R. Horton
Site Address 7515 SHELTON DR. Bldg. 9 # 9103 LOT 27 Laguna Pointe Permit Number 0613957

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).

HYAC SYSTEMS:

Plans 1, 2 and 3

Heating Equipment

| Equip. Type (pkg. heat pump) | CEC Certified Mfr Name and Model Number | # of Identical Systems | Efficiency (AFUE, etc.) ¹ [2CF-1R value] | Duct Location (attic, etc.) | Duct or Piping R-value | Heating Load (Btu/hr) | Heating Capacity (Btu/hr) |
|------------------------------|---|------------------------|---|-----------------------------|------------------------|-----------------------|---------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Cooling Equipment

| Equip. Type (pkg. heat pump) | CEC Certified Compressor Unit Mfr Name and Model Number | # of Identical Systems | Efficiency (SEER, etc.) ¹ [2CF-1R value] | Duct Location (attic, etc.) | Duct R-value | Cooling Load (Btu/hr) | Cooling Capacity (Btu/hr) |
|------------------------------|---|------------------------|---|-----------------------------|--------------|-----------------------|---------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

1. \geq reads greater than or equal to.

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 manufactured devices (from the Appliance Efficiency Regulations or Part 5), where applicable.

Signature, Date _____

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 ¹ Input (kW or Btu/hr) | Tank Volume (gallons) | Efficiency ² (EF, RE) | Standby Loss (%) | External Insulation R-value |
|-------------|---------------------------------------|---------------------------------------|--------------------------------|------------------------|---|-----------------------|----------------------------------|------------------|-----------------------------|
| <u>GAS</u> | <u>A.O. Smith</u> <u>GVR-50</u> | <u>STD</u> | <u>N/A</u> | <u>1</u> | <u>40,000</u> | <u>50</u> | <u>0.62</u> | <u>N/A</u> | <u>R-20</u> |

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.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed; 2) is 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) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Ivan Chavel 1/2/07
Signature, Date

J.R. Pierce Plumbing Co.
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

COPY TO: Building Department
Building Owner at Occupancy

3rd Generation
Heating & Air Conditioning
 4120 Cameron Park Dr. Suite 200A
 Cameron Park, CA 95682
 530-677-9873

7515 SHELDON Rd. Bldg. 9 LOT 25 # 9101 Permit # 0613957

Installation Certificate

Site Address: Laguna Pointe
 Plan: All

HVAC SYSTEM:
Heating Equipment

| Equipment (pkg. - heat pump) | CEC Certified Mfr Name & Model Number | # Identical Systems | Efficiency (AFUE, etc.) | Duct Location | Duct/Piping R-Value | Heating Load | Heating Capacity |
|---------------------------------|--|------------------------|----------------------------|----------------------|------------------------|-----------------|---------------------|
| Gas - LY8S040A12UH11 | York | 1 | 80% | Conditioned Space | R-6 | 40000 | 40000 |
| Coil - ACE36A3X145 | York | 1 | | | | | |

Cooling Equipment

| Equipment (pkg. - heat pump) | CEC Certified Mfr Name & Model Number | # Identical Systems | Efficiency (AFUE, etc.) | Duct Location | Duct/Piping R-Value | Cooling Load | Cooling Capacity |
|---------------------------------|--|------------------------|----------------------------|----------------------|------------------------|-----------------|---------------------|
| Elect - H2R1X036S06 | York | 1 | 13 SEER | Conditioned Space | R-6 | | 3 Ton |

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 CE-IR) 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.

Sheryl L. Blake _____ 09/15/06
 Signature

3rd Generation Heating & Air Conditioning
 Installing Subcontractor

3rd Generation**Heating & Air Conditioning**

4120 Cameron Park Dr. Suite 200A

Cameron Park, CA 95682

530-677-9873

7515 SHELTON Rd. Bldg. 9 LOT 26 #9102 Permit # 0613957**Installation Certificate****Site Address: Laguna Pointe****Plan: All****HVAC SYSTEM:****Heating Equipment**

| Equipment (pkg. - heat pump) | CEC Certified Mfr Name & Model Number | # Identical Systems | Efficiency (AFUE, etc.) | Duct Location | Duct/Piping R-Value | Heating Load | Heating Capacity |
|--|--|------------------------|----------------------------|----------------------|------------------------|-----------------|---------------------|
| Gas - LY8S040A12UH11 Coil - ACE36A3X145 | York York | 1 1 | 80% | Conditioned Space | R-6 | 40000 | 40000 |

Cooling Equipment

| Equipment (pkg. - heat pump) | CEC Certified Mfr Name & Model Number | # Identical Systems | Efficiency (AFUE, etc.) | Duct Location | Duct/Piping R-Value | Cooling Load | Cooling Capacity |
|---------------------------------|--|------------------------|----------------------------|----------------------|------------------------|-----------------|---------------------|
| Elect - H2RIX036S06 | York | 1 | 13 SEER | Conditioned Space | R-6 | | 3 Ton |

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 CE-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.

Sheryl L. Blake 09/15/06
Signature

3rd Generation Heating & Air Conditioning
Installing Subcontractor

3rd Generation
Heating & Air Conditioning
4120 Cameron Park Dr. Suite 200A
Cameron Park, CA 95682
530-677-9873

7515 SHELTON Rd. Bldg. 9 LOT 27 # 9103 Permit # 0613957

Installation Certificate

Site Address: Laguna Pointe
Plan: All

HVAC SYSTEM:
Heating Equipment

| Equipment (pkg. - heat pump) | CEC Certified Mfr Name & Model Number | # Identical Systems | Efficiency (AFUE, etc.) | Duct Location | Duct/Piping R-Value | Heating Load | Heating Capacity |
|--|---------------------------------------|---------------------|-------------------------|-------------------|---------------------|--------------|------------------|
| Gas - LY8S040A12UH11 Coil - ACE36A3X145 | York York | 1 | 80% | Conditioned Space | R-6 | 40000 | 40000 |

Cooling Equipment

| Equipment (pkg. - heat pump) | CEC Certified Mfr Name & Model Number | # Identical Systems | Efficiency (SEER, etc.) | Duct Location | Duct/Piping R-Value | Cooling Load | Cooling Capacity |
|------------------------------|---------------------------------------|---------------------|-------------------------|-------------------|---------------------|--------------|------------------|
| Elect - H2RX036S06 | York | 1 | 13 SEER | Conditioned Space | R-6 | | 3 Ton |

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 CE-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.

Sheryl L. Blake
Signature: _____ 09/15/06

3rd Generation Heating & Air Conditioning
Installing Subcontractor