

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0316596

Insp Area: 4

Thos Bros:

Sub-Type: N1/2PLEX

Housing (Y/N): N

Site Address: 2236 BAY HORSE LN SAC

Parcel No: HERITAGE @ NATOMAS PARK VIL 19 LOT 59

CONTRACTOR

US HOME
2366 GOLD MEADOW DR STE 100
GOLD RIVER, CA 95670 77041

OWNER

ARCHITECT

Nature of Work: MP1296 1 STORY 5 ROOM 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 451839 Date 11/4/3 Contractor Signature Don McCluskey

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 **RAID** 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).

RAID
CITY OF SACRAMENTO

I am exempt under Sec. _____ B & PC for this reason: NOV 04 2003

Date _____ Owner Signature NORTH PERMIT

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 11/4/3 Applicant/Agent Signature Don McCluskey

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.

X 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 OLD REPUBLIC INS. CO. Policy Number MWC10815000 Exp Date 11/01/2003

_____, (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 11/4/3 Applicant Signature Don McCluskey

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.

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 2236 Bay Horse Ln. Assessor Parcel # _____
 Lot Number: 59 Subdivision Heritage @ Natomas Park Village 19

OWNER INFORMATION:

Legal Property Owner: US Home Phone# (916) 858-3900
 Owner Address 2366 Gold Meadow Way City Gold River State ca Zip 95670

CONTRACTOR INFORMATION:

Contractor: US Home Lic. # 45L839 Phone # (916) 858-3900 Fax (916) 858-3925
Don McCloskey (916) 719-9050

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN1 Fed Code 1A
 No. of Stories: 1 No. of Rooms: _____ Street Width: _____
 1st Floor Area 1296 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

| | |
|-----------------|-------------|
| Dwelling/Living | <u>1296</u> |
| Garage/Storage | <u>462</u> |
| Decks/Balconies | <u>38</u> |
| Carports | _____ |

SCOPE OF WORK: _____

FOR OFFICE USE ONLY

- | | | |
|---|---|---|
| <input type="checkbox"/> Information Above Complete | <input type="checkbox"/> AR Flood Waiver Required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation Files Checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval |
| <input type="checkbox"/> Standard Setbacks | <input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Special Fee Districts Apply: |
| <input type="checkbox"/> County Sewer | | |

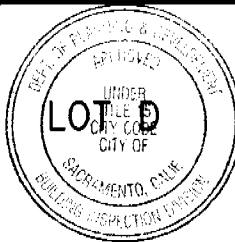
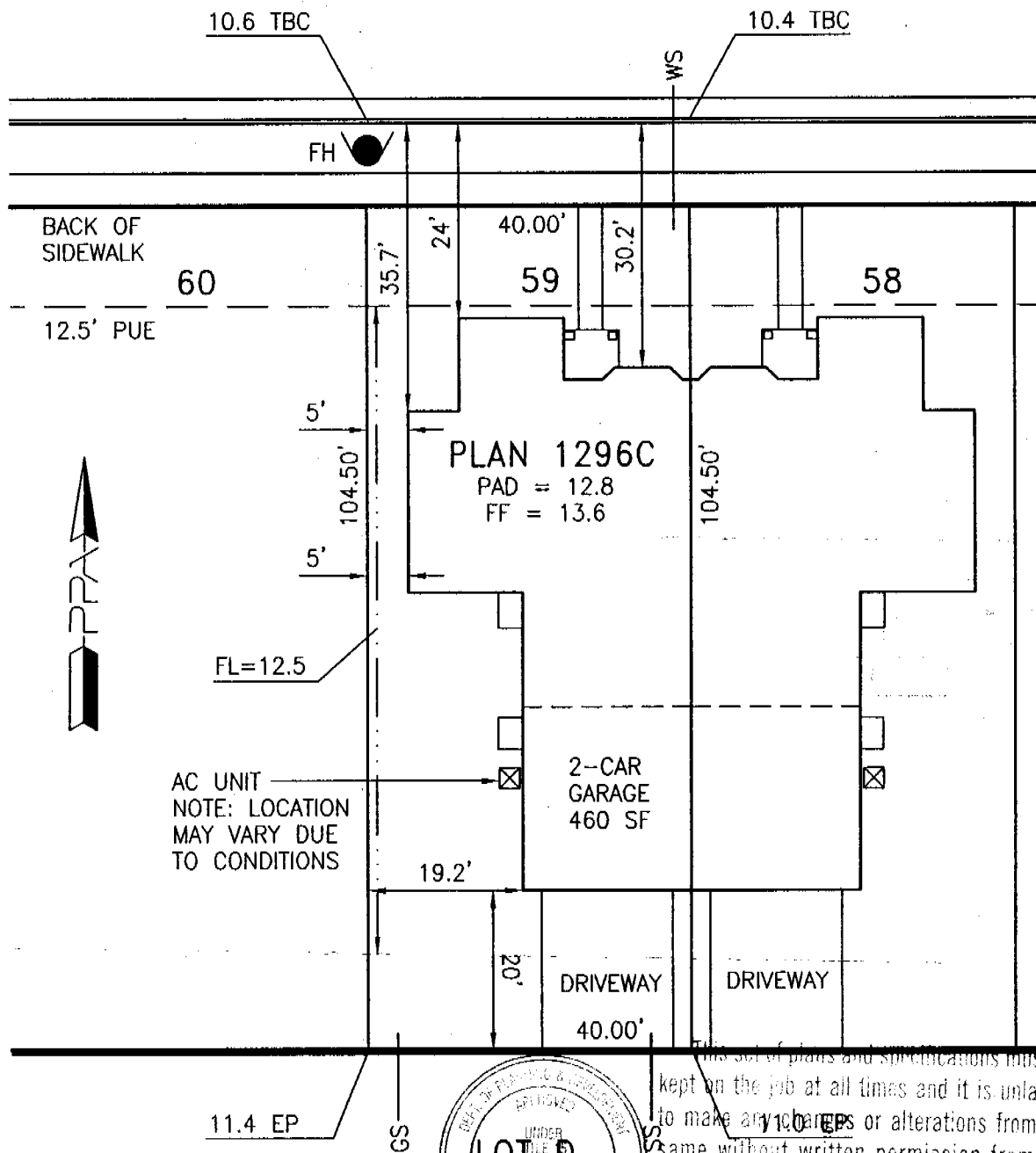
~THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT~

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION

| | |
|-----------------------------|--------------------|
| a) Assessor's Parcel Number | c) Owners Name |
| b) New Floor Area | d) Project Address |

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINES. DRAINAGE CONTROL ELEVATIONS AND DIRECTION OF DRAINAGE FLOW. THIS IS DONE TO CONFORM TO LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN ON THIS PLAN IS APPROXIMATE EXCEPT FOR MINIMUM SETBACKS WHICH ARE REQUIRED BY LOCAL ORDINANCE. THIS PLAN DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL VARY FROM THIS PLAN.

BAY HORSE LANE



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

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

| | | |
|--------------|--------------------|------|
| Approved By: | US Home Corp. Rep. | Date |
| Revision | Approved By | Date |
| ▲ | | |
| ▲ | | |

LOT AREA: 4180 SF
 ALLOWED LOT COVERAGE: 1881 SF = 45.0%
 ACTUAL LOT COVERAGE: 1540 SF = 36.8%
 REAR YARD AREA: 429 SF
 NUMBER OF BEDROOMS:

It is understood that the drainage areas, slopes and grades shall not be altered, changed, blocked, modified or in any way be reconstructed by Owner contrary to what is depicted on this Plot Plan. THESE CONDITIONS RUN WITH THE LAND AND ARE BINDING ON ALL SUBSEQUENT OWNERS. All setback dimensions and elevations as shown may be adjusted to fit field conditions.

Plot Plan for Heritage at Natomas Park Village 19
Heritage Park - Coastal
 Bay Horse Lane, Sacramento, CA 95835

PPA Job #005010
Lot 59
 APN

US Home Corporation - Sacramento Division

2366 Gold Meadow Way, Suite 200, Gold River, CA 95670 Phone (916) 858-3900 Fax (916) 858-3925

Plot Plan Associates www.plotplans.org
 PO Box 435 Citrus Heights CA 95611-0435 (916) 769-9063

Date Drawn: 09/16/03 Scale: 1"=20'
 Date Revised: - Drawn By: KLM

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 2236 Bay Horse Ln. Assessor Parcel # _____
 Lot Number: 59 Subdivision Heritage @ Natomas Park Village 19

OWNER INFORMATION:

Legal Property Owner: US Home Phone# (916) 858-3900
 Owner Address 2366 Gold Meadow Way City Gold River State ca Zip 95670

CONTRACTOR INFORMATION:

Contractor: US Home Lic. # 451339 Phone # (916) 858-3900 Fax (916) 858-3925
Don McCloskey (916) 719-9050

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of Stories: 1 No. of Rooms: _____ Street Width: _____
 1st Floor Area 1296 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living 1296
 Garage/Storage 462
 Decks/Balconies 38
 Carports _____

SCOPE OF WORK: _____

FOR OFFICE USE ONLY

- Information Above Complete
- Violation Files Checked
- Standard Setbacks
- County Sewer
- AR Flood Waiver Required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply:

-THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT-

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION
 - a) Assessors Parcel Number
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

CERTIFICATION OF INSULATION

PART I GENERAL

| | |
|---|--|
| ADDRESS OR TRACT <div style="font-size: 1.2em; margin-top: 10px;"> U S Homes LOT # 359 Duplexes @ Heritage Park Gold River, Ca </div> | SACRAMENTO BUILDING PRODUCTS <input 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 | | | CEILINGS | | | 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'S PRODUCT I.D. | | |
| MANUFACTURER | | | MANUFACTURER | | | MANUFACTURER | | |
| CT | OC | JM | CT | OC | JM | CT | OC | JM |
| BAGS | | | BAGS | | | BAGS | | |
| R-VALUE INSTALLED | APPLIED THICKNESS | R-VALUE INSTALLED | APPLIED THICKNESS | MIN. INSTALLED WEIGHT PER SQUARE FOOT | R-VALUE INSTALLED | APPLIED THICKNESS | | |
| 13 19 | 3 1/2" 5 1/2" | 30 | 14 1/4" 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 | | HANDY FOAM | |

PART III CERTIFICATION

THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.

| | | |
|-----------------------------------|-------------------------|------------------------|
| SIGNATURE — INSULATION CONTRACTOR | TITLE MANAGER | DATE 5/11/14 |
| SIGNATURE — GENERAL CONTRACTOR | TITLE | DATE |
| REMARKS | | |

INSTALLATION CERTIFICATE

CREATIVE WINDOW CONCEPTS

916 638 0882 P.01/01

2236 Bay Horse Ln
Site Address

03 16596
Permit Number



FENESTRATION/GLAZING:

| Manufacturer/Brand Name (GROUP LIKE PRODUCTS) | Operator Type (e.g. Fixed, Sliding) | Manufacturer Labeled U-value (if CF-IR value) ¹ | Size, Built, Position of Panel | Default U-Value ¹ | Quantity (Options) | Total Square Foot | Comments/ Special Features |
|--|--|---|--------------------------------------|---------------------------------|-----------------------|-------------------------|-------------------------------|
| 1. Philips 800N | SH | .38 | 2 | NOT | | | Performance Plus LowE |
| 2. | HS | .38 | 2 | APPLICABLE | | | |
| 3. | Fix | .36 | 2 | APPLICABLE | | | |
| 4. | SGD | .35 | 2 | APPLICABLE | | | |
| 5. | Radius | .35 | 2 | APPLICABLE | | | |
| 6. | | | | | | | |
| 7. | | | | | | | |
| 8. | | | | | | | |
| 9. | | | | | | | |
| 10. | | | | | | | |
| 11. | | | | | | | |
| 12. | | | | | | | |
| 13. | | | | | | | |
| 14. | | | | | | | |
| 15. | | | | | | | |

¹ Installed U-value must be less than or equal to value from CF-IR. Alternatively, installed weighted average U-value for the total fenestration area is less than or equal to value from CF-IR.

I, the undersigned, verify that the fenestration/glazing listed above my signature: 1) is the actual fenestration product installed; 2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-IR) submitted (or 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
(if applicable)

[Signature]
Signature, Date

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

Item #s
(if applicable)

Signature, Date

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

Item #s
(if applicable)

Signature, Date

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

**COPY TO: Building Department
Building Owner at Occupancy**

Revised March 1, 1996



2236 Bay Horse Ln.

NO. 873 8013

INSTALLATION CERTIFICATE

CF-6R

US Home Corporation - Heritage Park Product Line 4 - Sacramento - Plan 1286

Site Address

Permit Number

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required, however, use of this form to provide the information is optional.) After completion of final inspection a copy must be provided to the building department (upon request) and the building owner or occupant, per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

| Equip. Type (e.g. Heat pump) | CBC Certified Mfg Name and Model # | # of Identical Systems | (1) Efficiency (SEER, etc.) > CF-18 value | Duct Location (Attic, etc.) | Duct or Flange R-value | Heating Load (Btu/hr) | Heating Capacity (Btu/hr) |
|------------------------------|------------------------------------|------------------------|---|-----------------------------|------------------------|-----------------------|---------------------------|
| Furnace | York #FNUA12-008 | 1 | 0.80 | Attic | 4.2 | 18,566 | 40,000 |

Cooling Equipment

| Equip. Type (e.g. Heat pump) | CBC Certified Compressor Unit Mfg Name and Model # | # of Identical Systems | (1) Efficiency (SEER, etc.) > CF-18 value | Duct Location (Attic, etc.) | Duct R-value | Cooling Load (Btu/hr) | Cooling Capacity (Btu/hr) |
|------------------------------|--|------------------------|---|-----------------------------|--------------|-----------------------|---------------------------|
| A/C | York #HRC03A | 1 | 12.0 | Attic | 4.2 | 17,171 | 23,000 |

(1) > grade greater than or equal to.
 I, the undersigned, verify that equipment listed above in: 1) is the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-18) 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 Part 6), where applicable.

Signature
 Signature Date

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

WATER HEATING SYSTEMS:

| Water Type | CBC Certified Mfg Name & Model # | Diameter Type (Std. size or size) | # Recirculation Control Type | # of Identical Systems | (1) Rated Input (kW or Btu/hr) | Tank Volume (gallons) | (2) Efficiency (E.F./RE) | (3) Standby Loss (%) | External Insulation R-value |
|------------|----------------------------------|-----------------------------------|------------------------------|------------------------|--------------------------------|-----------------------|--------------------------|----------------------|-----------------------------|
| GAS | Rheem 411-V40M | STD | N/A | 0 | 40,000 | 40 | .56 | | R-6.7 |

(2) For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, the Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), the Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, the Recovery efficiency and Rated Input.
 (3) R-11 external insulation is mandatory for storage water heaters with an energy factor of less than 0.56.

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 in: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-18) 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 04-04-03
 Signature Date

Menarch Plumbing Co., INC.
 Installing Subcontractor (Co. Name)
 OR General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 MERS Provider (if applicable)
 Building Owner or Occupant

NO. 1312 P. 8/19

APR 3 2003 3:33 PM Mail U.S. HOME HERITAGE PARK