

Development Services
We Help Build A Great City

CITY OF SACRAMENTO

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT

Inspection Request: 1-916-808-7622

Downtown Permit Center
New City Hall
915 I Street, 3rd Floor
Sacramento, CA 95814

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

Permit No. 0613943
Date Applied 09/11/2006
Type Commercial
Subtype New Building
Category Hotel or Motel

Permit Address 7515 SHELDON RD
SACRAMENTO CA
Site Location

Parcel No. 11702120100000

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

Applicant Carol Christensen
Minor Permit & Residential 1-2
City of Sacramento
Development Services Department
916-808-1939 D. R. HORTON/JOE MEYER
D. R. HORTON/JOE MEYER

Valuation \$ 314,256.20

Fee Items	# of Each	Amount
Permit--Building-Com	1	\$2,532.18
Plan Ck--Building Com	1	\$2,055.79
Review--Fire Department	1	\$214.32
Review--Building ESC	1	\$100.00
Strong Motion	1	\$65.99
Construction Excise Tax	1	\$2,514.05
Residential Const Tax	1	\$950.00
City Business Oper Tax	1	\$125.70
Bldg--Technology Surcharg	1	\$183.52
General Plan Surcharge	1	\$185.85
Park Develop Impact Fee	1	\$7,941.00
Jacinto Creek Facilities Fee - 288	6891	\$6,891.00
Jacinto Drainage #4 - 293	1983	\$1,983.00
Jacinto Creek Administration Fee - 297	354	\$354.00
Total		\$26,096.40

LICENSED CONTRACTOR'S 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: 12/11/06 Contractor: [Signature]

OWNER-BUILDER DECLARATIONS
 I hereby affirm that I am exempt from the Contractor's License Law (C.L.L.) for the following reason (Sec. 7031.5.B&P 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/she is licensed pursuant to the provisions of C.L.L. Chapter 9 (commencing with Sec.7000) of Division 3 of the B&P Code) or that he/she is exempt there from and the basis for the alleged exemption. Any violation of Sec. 7031.5 by any applicant for a permit subjects the applicant to civil penalty of not more than five hundred dollars (\$500):

I, as 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 B&P Code: The C.L.L. does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his 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 did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractor(s) to construct the project (Sec. 7044, B&P Code: The C.L.L. does not apply to an owner of property who holds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the C.L.L.)

I am exempt under Sec. _____ B & P.C. for this reason:
 Date: _____ Owner: _____

WORKERS COMPENSATION DECLARATION
 I hereby affirm that I have a certificate of consent to self-insure, or a Certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec 3800, Labor Code).
 Policy Number: _____ Company: _____
 Certified copy is hereby furnished.
 Certified copy is filed with the city building inspection department or city department.
 Date: 12/11/06 Applicant: [Signature]

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to construction. I hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.
 Date: 12/11/06 Applicant or Agent: [Signature]

Description of Work:
 BLDG #17 - 5,640 S.F. -2 STORY TRI-PLEX -NAPT COMPLEX

PAID
CITY OF SACRAMENTO
 DEC 11 2006
 NEIGHBORHOODS PLANNING
 AND DEVELOPMENT SERVICES

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

INSTALLATION CARD

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

Job Address:

ICBO Evaluation Services, Inc.

DR HORTON- LAGUNA POINTE

Report No. 3899

BLDG#17 - UNIT#50 - 7516 SHELDON RD # 17102

Date of Job Completion: 4-25-07

Permit # 0613943

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 LIVING 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

4-4-07
Date

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

No. DRH-50

INSTALLATION CARD

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

Job Address:

ICBO Evaluation Services, Inc.

DR HORTON- LAGUNA POINTE

Report No. 3899

BLDG#17 - UNIT#49 - 7515 SHELDON RD # 10101

Date of Job Completion: 4-25-07

Permit # 0613943

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 Luvano 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

4-4-07
Date

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

No. DRH-48



GEOTECHNICAL
ENVIRONMENTAL
WATER RESOURCES
CONSTRUCTION SERVICES

Project No.
6735.5.001.02

May 22, 2007 Permit # 0613943

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

Subject: North Laguna Pointe Condominiums - Building 17
Sheldon Road
Elk Grove, California

FINAL CONSTRUCTION CONFORMANCE REPORT

To Whom It May Concern:

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

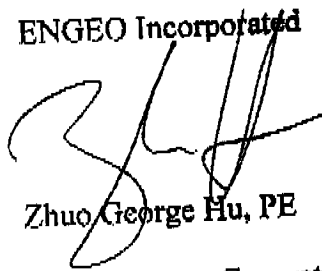
Pad moisture testing of subject building was performed before placement of the water vapor retarder.

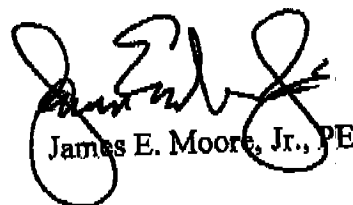
To the best of our knowledge and based on our observations and test results, the work requiring special inspection is in general conformance with the approved plans and specifications, field recommendations of the Structural Engineer, and the applicable workmanship provisions of the Uniform Building 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


James E. Moore, Jr., PE



Attachments: Concrete Sampling and Stressing Reports

COUNTY SANITATION DISTRICT 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE
PERMIT AND CALCULATION

APPLICATION NO:		BLDG PERMIT NO. <u>241-01-0094</u>	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
		THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/> MF <input checked="" type="checkbox"/>	
CSD-1		COMMERCIAL USE	
SRCSD	<u>1 15750</u>		
CONSTRUCTION		<u>3 UNITS</u>	
IN-LIEU		<u>17101-17103</u>	
	<u>15750.00</u>		
TOTAL FEE	<u>15750.00</u>		
APN: <u>117-14-1-10</u>			
DESCRIPTION/SUBDIVISION		LOT: <u>17</u>	
PROPERTY ADDRESS		<u>7515 Sheldon Rd. #17101-17103</u>	
OWNER <u>DR. HELLON</u>			
MAILING ADDRESS		<u>1919 Foundation Pl. 95820</u>	
CITY-STATE-ZIP		<u>Gold River, CA 95670</u> PHONE <u>249-6800</u>	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE <u>[Signature]</u>			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

RECEIPT

Certification of Compliance
School District Development

0613943

Part I--To be completed by the APPLICANT

Owner's Name/Address DE Horton Inc. 11919 Foundation Place Gold/Kovach
 Project Address 7515 Sheldon Road
 Parcel Number 117-1930-001 Lot No. Bldg 17
 Subdivision Name Laguna Pointe #2 No. of Units 3
 Applicant's Signature DEP Title Permit Tech
 Phone No. 489-9115 Date 11/27/06

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 #0613943 7515 Sheldon Rd. Bldg 17
 Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area 5640 4415
 Signature/Title Carol Christensen Date 11/27/06

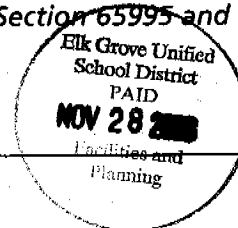
Part III--To be completed by the SCHOOL DISTRICT

School District ELK GROVE UNIFIED SCHOOL DISTRICT Certificate No. 52125
 Exempt Comments _____
 Residential/Apartment/etc. ##### 4418 Square ft. x \$ 5.05 = \$22,310.90
 Commercial/Industrial _____ Square ft. x \$ _____ = \$ 0
 Total fees collected..... = \$22,310.90

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 _____



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



GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 4/4/2007
Project No: LG10083

061 3943

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

6161 Valley Hi
SACRAMENTO, CA.

Date Inspected: 3/30/2007
Representative: David Gray

6161

High Strength Bolt Torque Test

Load Test Performed: Bolt				Method Tested: Turn Of The Nut	
Applied Torque (ft-lbs)	Number Of Bolts	Bolt Type	Bolt Size	Number Tested:	380
	240	A325	1/2	Number Passed:	380
	138	A325	3/4	Number Failed:	0
Bolt Location: 70' Bell Tower at Column splice flanges and Tubesteel braces.					

Notes: Observed systematic tightening of all 1/2" and 3/4" High Strength Bolts at all connections specified on Sheet S2/Details H,J,L,M,N, as well as at Column Splice.
NOTE: 1/2" TS connection at 62'-10" elevation required changing of TS member. Unable to observe tightening at the time of 20 bolts. Instructed workers to proceed with replacement and fax photo documentation of completed connections to our office, in lieu of additional inspection. Requested that issuance of this report be held back pending receipt of these photos.

LODI • SACRAMENTO • RENO • CERES

CORPORATE OFFICE 902 Industrial Way • Lodi, California 95240 • 209.367.3701 • 209.333.8303 • WWW.NOANDERSON.COM

Report Date: 4/4/2007

Project No: LGI0083

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.



Garret S. Hubbard, Principal
Geotechnical Engineer 2588

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GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 3/12/2007

Project No: LG10083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 3/2/2007

Representative: Rollin Hall

Site Inspection

Job description: Reinforcement and anchor bolt inspection.

Items inspected: Reinforcement at (12) #8 vertical bars and (44) #4 ties. All reinforcement ASTM A615 Grade 60. (8) anchor bolts by 1 1/2" diameter by 6'0" long on a 21" diameter bolt circle held in place with templates top and bottom.

Ok to install rebar cage.

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.



Garret S. Hubbart, Principal
Geotechnical Engineer 2588

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GEOTECHNICAL
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LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 3/2/2007
Project No: LGI0083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 3/1/2007
Representative: David Gray

Site Inspection

Inspected reinforcing for drilled pier cell tower foundation at SW pier. Excavation and steel conform to design drawings. OK to pour.

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.

Garret S. Hubbart, Principal
Geotechnical Engineer 2588

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GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 3/2/2007

Project No: LG10083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 2/28/2007

Representative: David Gray

Site Inspection

Verified depth of excavation and rebar configuration for drilled pier foundation for 70' cell tower per supplied Drawing sheet 13668 by Boris Fayman. Ok to pour.

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.



Garret S. Hubbart, Principal
Geotechnical Engineer 2588

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GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 2/23/2007

Project No: LGI0083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 2/21/2007

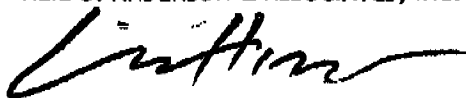
Representative: Cliff Zenger

Site Inspection

Drilled pier inspection for a metro pcs 70' bell/cell tower permit #0615745. When I arrived on site contractor was drilling the first pier of three. Minimum depth and diameter was met per plan specifications. There was no ground water seepage or caving encountered in pier location. Contractor will be drilling and pouring other two piers on 2/22/07 & 2/23/07.

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.



Garret S. Hubbart, Principal
Geotechnical Engineer 2588

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GEOTECHNICAL
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LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 2/23/2007
Project No: LGI0083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

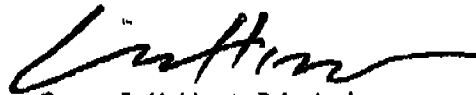
Date Inspected: 2/21/2007
Representative: Cliff Zenger

Site Inspection

I inspected steel for drilled pier. Permit #0615745 Metro pcs 70' Bell/Cell Tower. All steel was inspected for size, grade, spacing, quantity, and ties for pier 1 of 3. Steel inspection complies with plan specifications. O.K. to place concrete at this time.

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.



Garret S. Hubbart, Principal
Geotechnical Engineer 2588

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GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 3/30/2007

Project No: LGI0083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 3/2/2007

Representative: Rollin Hall

The concrete inspection was performed per ASTM C39. The results of the concrete inspection are presented next.

Concrete Inspection

Type Of Inspection: Continuous

Mix Design No: 800AFPA1

Sets Of Cylinders: 1

Design Strength PSI: 4000

Design Slump (in.) (ASTM C143): 7

Design Air Content (%) (ASTM C231): N/A

Design Unit Weight (pcf) (ASTM C138): N/A

Contractor: Triton Tower

Concrete Supplier: Folsom Ready Mix, Inc.

Concrete Quality: Good

Total Concrete Placed(cu.yd): 19

Admixture: N/A

Weather Conditions: Sunny & Warm

Max Aggregate Size (in): 1"

Cement Factor: 8.00

Location of pour: Northeast 30'0" drilled pier.

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Report Date: 3/30/2007

Project No: LGI0083

Set 1 of 1	Date Sampled: 3/2/2007	Slump (in) (ASTM C143):	6.5
	Time Sampled: 02:10 PM	Air Content (%) (ASTM C231):	N/A
Cylinders In Set: 4	Truck No: 0313	Unit Weight (pcf) (ASTM C138):	N/A
Hold Cylinder Used: No	Ticket No: 1-10256	Air Temp (F):	63
Location Set Taken (ASTM C31): Top 1/2 of the drilled pier.		Mix Temp (F) (ASTM C1064):	67

Lab No	Age (day)	Date Tested	Type Of Fracture	Cross Sec Area (in. sq.)	Diameter (in.)	Defects	Ultimate Load (lbs)	Ultimate Strength (psi)
63261	7	3/9/2007	CONE	28.27	6		107,000	3,780
63262	28	3/30/2007	CONE	28.27	6	NONE	129,000	4,560
63263	28	3/30/2007	CONE	28.27	6	NONE	128,000	4,530

Average Compressive Strength of 28 day breaks (psi): 4550

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.

Troy Schiess
FOR:

Troy Schiess, Lab Manager
Staff Engineer, EIT 114065

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GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 3/29/2007

Project No: LGI0083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 3/1/2007
Representative: David Gray

The concrete inspection was performed per ASTM C39. The results of the concrete inspection are presented next.

Concrete Inspection

Type Of Inspection: Continuous

Mix Design No: 800AFPA1

Sets Of Cylinders: 1

Design Strength PSI: 4000

Design Slump (in.) (ASTM C143): 7

Design Air Content (%) (ASTM C231): N/A

Design Unit Weight (pcf) (ASTM C138): N/A

Contractor: Triton Tower, Inc.

Concrete Supplier: Folsom Ready-Mix

Concrete Quality: Good

Total Concrete Placed(cu.yd): 19

Admixture:

Weather Conditions: Cloudy

Max Aggregate Size (in): 3/8-3/4

Cement Factor: 8.00

Location of pour: SW drilled pier for cell tower.

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Report Date: 3/29/2007

Project No: LGI0083

Set 1 of 1	Date Sampled: 3/1/2007	Slump (in) (ASTM C143):	6
	Time Sampled: 12:50 PM	Air Content (%) (ASTM C231):	N/A
Cylinders In Set: 4	Truck No: 111	Unit Weight (pcf) (ASTM C138):	N/A
Hold Cylinder Used: No	Ticket No: 124240	Air Temp (F):	58
Location Set Taken (ASTM C31): SW drilled pier first load F.G. -25'		Mix Temp (F) (ASTM C1064):	65

Lab No	Age (day)	Date Tested	Type Of Fracture	Cross Sec Area (in. sq.)	Diameter (in.)	Defects	Ultimate Load (lbs)	Ultimate Strength (psi)
63241	7	3/8/2007	CONE	28.27	6	NONE	131,000	4,630
63242	28	3/29/2007	CONE	28.27	6	NONE	163,000	5,766
63243	28	3/29/2007	CONE	28.27	6	NONE	158,000	5,589

Average Compressive Strength of 28 day breaks (psi): 5680

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.

Troy Schiess
Troy Schiess, Lab Manager
Staff Engineer, EIT 114065

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GEOTECHNICAL
ENVIRONMENTAL
INSPECTIONS & TESTING
LABORATORY SERVICES
POOL ENGINEERING
POST TENSION DESIGN

Report Date: 3/29/2007

Project No: LG10083

Metro PCS
785 Orchard Drive, Suite 200
Folsom, CA 95630

Subject: Metro PCS SAC-238
6162 Valley High Drive
Elk Grove, CA

Date Inspected: 2/28/2007

Representative: David Gray

The concrete inspection was performed per ASTM C39. The results of the concrete inspection are presented next.

Concrete Inspection

Type Of Inspection: Continuous	Contractor: Triton Tower, Inc.
Mix Design No: 800AFPA1	Concrete Supplier: Folsom Ready mix
Sets Of Cylinders: 1	Concrete Quality: Good
Design Strength PSI: 4000	Total Concrete Placed(cu.yd): 19
Design Slump (in.) (ASTM C143): 7	Admixture:
Design Air Content (%) (ASTM C231): N/A	Weather Conditions: Clear mild
Design Unit Weight (pcf) (ASTM C138): N/A	Max Aggregate Size (in): crushed
	Cement Factor: 8.00

Location of pour: NW cell tower off Center Parkway at 6161 Valley Hi Drive

LODI • SACRAMENTO • RENO • CERES

CORPORATE OFFICE 902 Industrial Way • Lodi, California 95240 • 209.367.3701 • 209.333.8303 • WWW.NOANDERSON.COM

Report Date: 3/29/2007

Project No: LG10083

Set 1 of 1		Date Sampled: 2/28/2007	Slump (in) (ASTM C143):	7
		Time Sampled: 01:45 PM	Air Content (%) (ASTM C231):	N/A
Cylinders In Set:	4	Truck No: 137	Unit Weight (pcf) (ASTM C138):	N/A
Hold Cylinder Used:	No	Ticket No: 124186	Air Temp (F):	56
Location Set Taken (ASTM C31):		Second load F.G. - 15'	Mix Temp (F) (ASTM C1064):	62


Lab No	Age (day)	Date Tested	Type Of Fracture	Cross Sec Area (in. sq.)	Diameter (in.)	Defects	Ultimate Load (lbs)	Ultimate Strength (psi)
63237	7	3/7/2007	cone	28.27	6	none	119,000	4,210
63238	28	3/28/2007	CONE	28.27	6	NONE	144,000	5,090
63239	28	3/28/2007	CONE	28.27	6	NONE	145,000	5,130

Average Compressive Strength of 28 day breaks (psi): 5110

We have employed accepted engineering and testing procedures. However, we do not undertake the guarantee of construction nor do we relieve the contractor of his primary responsibility to produce a completed project conforming to the project plans and specifications.

Sincerely,
NEIL O. ANDERSON & ASSOCIATES, INC.

FOR:


Troy Schiess, Lab Manager
Staff Engineer, EIT 114065

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CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address: 7515 SHELDON RD
Site Location: BLD 17
Building Use: Hotel or Motel
Building Owner: D R HORTON INCORPORATE

Permit No: 0613943
Occupancy: R1
Construction Type:
Sprinkled?
Area (sqft): 5640

Portion of Building Occupied: ENTIRE

Exception(s): NONE

06/11/2007

Carolyn Cooper

Carl Hefner

Date

By: (Print)

(Sign)

ASSISTANT BUILDING OFFICIAL

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 the 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

CERTIFICATION OF INSULATION

0613943

PART I GENERAL	ADDRESS OR TRACT DR. Horton Laguna Pointe 7515 Sheldon ELK Grove CA.	SACRAMENTO BUILDING PRODUCTS <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	
	50 Plan 1-17102 51 Plan 2-17103 49 Plan 3-17101 Lot # 17 Permit # 0613943	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
	R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED
	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS
R-13	3 1/2	R-30	
R-19	5 1/2	R-30	
BAGS	BAGS	BAGS	
MIN. INSTALLED WEIGHT PER SQUARE FOOT	MIN. INSTALLED WEIGHT PER SQUARE FOOT	MIN. INSTALLED WEIGHT PER SQUARE FOOT	
BAGS	BAGS	BAGS	
BAGS	BAGS	BAGS	
BAGS	BAGS	BAGS	
BAGS	BAGS	BAGS	
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE			
MATERIAL FIBERGLASS	FORM BATTS	R VALUE	MANUFACTURER
CT	OC	JM	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	TITLE MANAGER	DATE 5-3-07	
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE	
REMARKS			

INSTALLATION CERTIFICATE

(Page 2 of 13)

CF-6R

DR HORTON LAGUNA, FL PLAN A Bldg. 17
 Site Address 7515 Sheldon Rd. LOTS 50-Plan 1-17102 Permit Number 0613943
 51-Plan 2-17103
 49-Plan 3-17101

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (S CF-1R value) ²	Product SHGC ¹ (S CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1. _____	_____	_____	_____	_____	_____	_____	_____
2. CLASSIC SGD	.32	.35	12	3	136	_____	_____
3. STYLELINE HV	.38	.30	30	15	221	_____	_____
4. STYLELINE SH	.39	.30	30	15	182	_____	_____
5. STYLELINE PWS	.35	.30	15	15	72	_____	_____
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 Item #s (if applicable)	<u>Joe Bost</u> 5/25/06 Signature, Date	<u>MILGARD MANUFACTURING</u> 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 CERTIFICATE

(page 1 of 4)

CF-6R

D.R. Horton
 Site Address 7515 SHELTON DR. Bldg. 17-17101 LOT 49 Laguna Pointe
 Permit Number 0613943

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 (≥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 6), 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 ¹ (EF, 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. 17-17102 LOT 50 Laguna Pointe
 Permit Number 0613943

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 (≥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 6), 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 ¹ (EF, RE)	Standby ¹ Loss (%)	External Insulation R-value
<u>GAS</u>	<u>A.O. Smith</u> <u>QVR-50</u>	<u>STD</u>	<u>N/A</u>	<u>1</u>	<u>40,000</u>	<u>50</u>	<u>0.82</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.

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Iron Clavel 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. 17-17103 LOT 51 Laguna Pointe
 Permit Number 0613943

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 (≥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 6), 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 ¹ (EF, 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:

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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. 17 LOT 50 - 1 Plan - 17102 Permit # 0613943

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 - 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 Date 09/15/06

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 Sheldon Rd. Bldg. 17 Lot 51 - 2 Plan - 17103 - Permit # 0613943

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 - 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

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

7515 Sheldon Rd. Bldg. 17 LOT 49 - 3 Plan - 17101 Permit # 0413943

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 - LY8S040A12LH11	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 - H2RD036S06	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 Blake _____ 09/15/06
 Signature Date

3rd Generation Heating & Air Conditioning
 Installing Subcontractor

INSTALLATION CARD

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

Job Address:

ICBO Evaluation Services, Inc.

DR HORTON- LAGUNA POINTE

Report No. 3899

BLDG#17 - UNIT#51 - 7515 SHELDON RD # 17103

Date of Job Completion: 4-25-07

Permit# 0613943

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 Luyang 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

6-4-07
Date

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

No. DRH-51