

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0508047

Insp Area: 2

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 8607 STATUE WY SAC

Parcel No: SHELDON WHITEHOUSE PH 1 LOT # 36

CONTRACTOR
CENTEX HOMES
2527 CAMINO RAMON STE. #250
SAN RAMON, CA 94583

OWNER

ARCHITECT
RITNER ARCHITECTURAL GROUP
20201 SW BIRCH ST. STE. 150
NEWPORT BEACH, CA 92660

Nature of Work: MP936 1 STORY 4 RM HALF PLEX

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 NIA 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 825943 Date 6/16/05 Contractor Signature Debbie Stawers

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 Professions 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 representations 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 6/16/05 Applicant/Agent Signature Debbie Stawers

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 ZURICH AMERICAN INSUR Policy Number WC8322097-08 Exp Date 10/01/2005

(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.

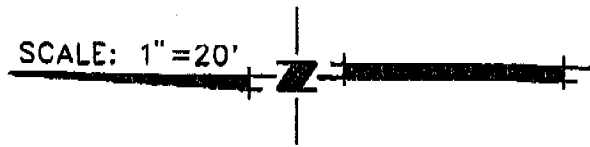
Date 6/16/05 Applicant Signature Debbie Stawers

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.

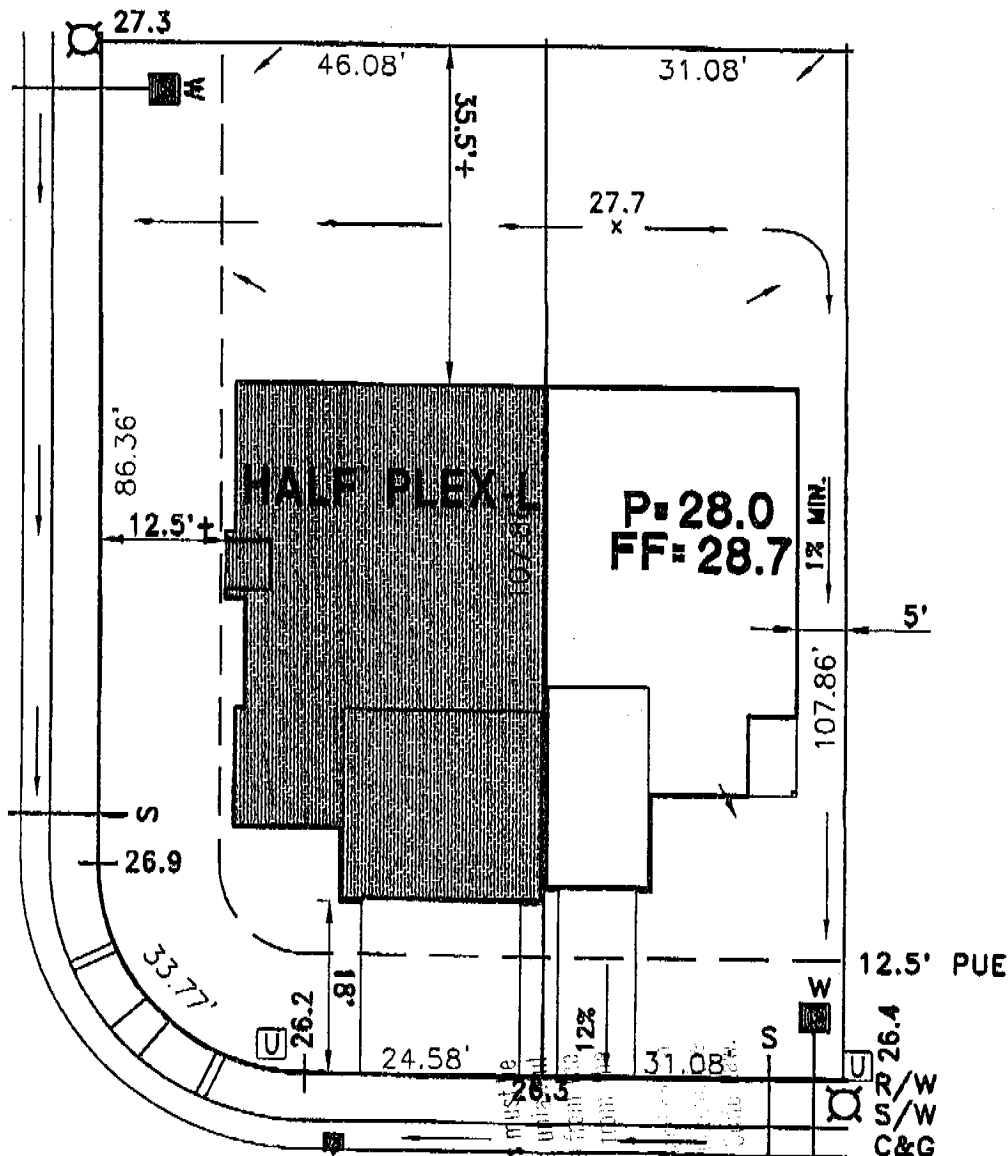
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION. RETAINING WALLS ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.











SCALE: 1"=20'



SPLENDID WAY

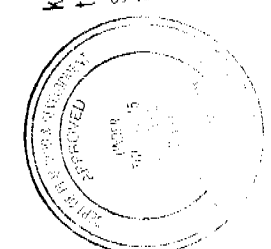


LEGEND

-  AC UNIT LOCATION
-  DRAIN INLET
-  SEWER SERVICE
-  WATER SERVICE
-  STREET LIGHT
-  TRANSFORMER
-  UTILITY BOX
-  STREET LIGHT SERVICE POINT
-  FIRE HYDRANT
-  STOP SIGN

STATUE WAY

This set of plans and specifications must be kept on the job at all times and it is the responsibility of the contractor to make any changes or alterations to the same without written permission from the engineer. The approval of this plan is given on the condition that the contractor shall hold up the minimum of 12% slope to any City Ordinance of Statute.



SHELDON WHITEHOUSE - PHASE 1
CENTEX HOMES
PLOT PLAN FOR LOT 36

APN:XXX-XXXX-XXX
LOT AREA: 4871 S.F.
ADDRESS: 8607 STATUE WAY
CITY OF SACRAMENTO, CALIFORNIA

WOOD RODGERS
ENGINEERING • PLANNING • MAPPING • SURVEYING
8801 O STREET, BLDG. 100-9, SACRAMENTO, CA 95816
PHONE: (916) 341-7760 FAX: (916) 341-7267

5/17/2005	DAM	1212.003
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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 at occupancy, per Section 10-103(b).

HVAC SYSTEMS:
Heating Equipment

Equip. Type (pkg. Heat pump)	CBC Certified Mfr name and Model #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-IR value	Duct Location (atdc, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

Cooling Equipment

Equip. Type (pkg. Heat pump)	CBC Certified Compressor Unit, Mfg Name and Model #	# of Identical Systems	(1) Efficiency (SEER, etc.) > CF-IR value	Duct Location (atdc, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

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

Signature, Date _____ Installing Subcontractor (Co. Name) _____
 OR General Contractor (Co. Name) OR Owner _____

WATER HEATING SYSTEMS:

Heater Type	CBC Certified Mfr Name & Model #	Dimension Type (but. point of use)	If Recirculation Control Type	# of Identical Systems	(1) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(2) Efficiency (EF, RE)	(3) Standby Loss (M)	External Insulation R-value
Gas	BRADFORD WHITE SM-4-SDSLFRM		N/A	N/A	40,000	50	0.67	N/A	N/A

(2) For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery efficiency and Rated Input.
 (3) R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.5K.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 111.
 I, the undersigned, verify that equipment listed above my signature is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-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.

Signature, Date _____ **BZ Plumbing Co., Inc.**
 Installing Subcontractor (Co. Name)
 OR General Contractor (Co. Name) OR Owner _____

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

INSTALLATION CERTIFICATE

CF-6R

Centex - Sonoma

Permit Number

Site Address

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

Table with 8 columns: Equip. Type (pkgs. Heat pump), CBC Certified Mfr name and Model #, # of Identical Systems, (1) Efficiency (AFUE, etc.) > CF-1R value, Duct Location (attic, etc.), Duct or Fiping R-value, Heating Load (Btu/hr), Heating Capacity (Btu/hr). Rows include Furnace models like Lennox G40UH-38A-70, G40UH-48B-90, G40UH-60C-110.

Cooling Equipment

Table with 8 columns: Equip. Type (pkgs. Heat pump), CBC Certified Compressor Unit Mfr Name and Model #, # of Identical Systems, (1) Efficiency (SEER, etc.) > CF-1R value, Duct Location (attic, etc.), Duct R-value, Cooling Load (Btu/hr), Cooling Capacity (Btu/hr). Rows include Condenser models like Lennox 13ACC-038, 13ACC-048, 13ACC-060, 13ACC-024, 13ACC-030.

*TXV - Indicates Thermal Expansion Valve On Coil

(1) ≥ reads greater than or equal to. I, the undersigned, verify that equipment listed above is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Handwritten signature and date: Mary King 3-29-05

Beutler Corporation

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Table with 8 columns: Heater Type, CBC Certified Mfr Name & Model #, Distribution Type (Std. point of use), If Recirculation Control Type, # of Identical Systems, (1) Rated Input (kW or Btu/hr), Tank Volume (gallons), (2) Efficiency (EF, RE), (3) Standby Loss (%), External Insulation R-value.

(2) For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery efficiency and Rated Input. (3) R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

Facets & Shower Heads:

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

I, the undersigned, verify that equipment listed above by signature is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

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

Site Address: Center Homes - Serenade 0508047
8607 Statue Way Plan 936 Permit Number

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Operator Type (e.g., fixed, sliding)	Manufactured Products Labelled U-value (or CF-1R value) ¹	Site Built Products # of Panels	Default U-Value ²	Quantity (Optional)	Total Square Feet	Comments/ Special Features
1. <u>6220</u>	<u>HV</u>	<u>.35</u>				<u>20</u>	
2. <u>9121</u>	<u>3D</u>	<u>.34</u>				<u>40</u>	
3. <u>6230</u>	<u>3H</u>	<u>.34</u>				<u>52</u>	
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

¹ Installed U-value must be less than or equal to value from CF-1R. Alternatively, installed weighted average U-value for the total fenestration area is less than or equal to value 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 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 product meets or exceeds the appropriate requirements for manufactured devices (from Part 6), where applicable.

3
Item #s
(if applicable)

[Signature] 7/20/05
Signature, Date

Michael M. P.
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

Compliance Forms

July 1, 1995

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 8607 Statue Way Assessor Parcel # _____
 Lot Number: 36 Subdivision Sheldon Whitehouse - Phase 1

OWNER INFORMATION:

0508047

Legal Property Owner: Center Homes Phone# 788-9087
 Owner Address: 3700 Douglas Blvd *150 City Roseville State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor: Center Homes Lic. # 825943 Phone # 788-9087 Fax 788-9012

PROJECT INFORMATION:

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of Stories: 1 No. of Rooms: _____ Street Width: _____
 1st Floor Area 936 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living	<u>936</u>
Garage/Storage	<u>237</u>
Decks/Balconies	<u>—</u>
Carports	<u>—</u>

SCOPE OF WORK: New Home Construction -
mp# 2129 Halb-plex

<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 checked="" 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) Assessors Parcel Number	c) Owners Name
b) New Floor Area	d) Project Address

Date: _____ Received by: (staff) _____ Permit # _____

ATTIC INSULATION

10/1
See

PO. BOX 111, NEW BRUNSWICK, NJ 08901
 1908
 PO. BOX 111, NEW BRUNSWICK, NJ 08901 #202026
 PO. BOX 111, NEW BRUNSWICK, NJ 08901
 3326 & PONDERS ROAD, NEW BRUNSWICK, NJ 08910 #10076

DATE INSULATION COMPLETED

SQUARE FEET

MATERIAL CLASS R-VALUE
 FOAM BLOWN IN PLACE BATTES
 MANUFACTURER'S PRODUCT ID

BT	OC	AM	BT	OC	AM

1/1

BT	OC	AM

MATERIAL CLASS R-VALUE
 HANDY FOAM

SIGNATURE - GENERAL CONTRACTOR DATE
T.C. *10/1/05*

REMARKS