

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0611065
Insp Area: 4
Thos Bros: 277-C7

Site Address: 2270 GARDEN GROVE CT SAC
Parcel No: MORELL ESTATES LOT # 15

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

CONTRACTOR
KAT CONSTRUCTION
2947 FULTON AVE
SAC CA 95821

OWNER

ARCHITECT

Nature of Work: MP 1633 2 STORY 9 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 809667 Date 8/15/06 Contractor Signature [Signature]

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. _____ B& PC for this reason: _____
Date _____ Owner Signature _____

PAID
CITY OF SACRAMENTO
AUG 15 2006

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 8-15-06 Applicant/Agent Signature [Signature]

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 STATE FUND Policy Number 1820034 Exp Date 01/01/2007

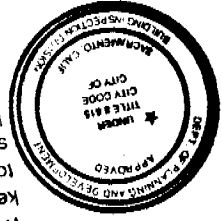
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become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

Date 8-15-06 Applicant Signature [Signature]

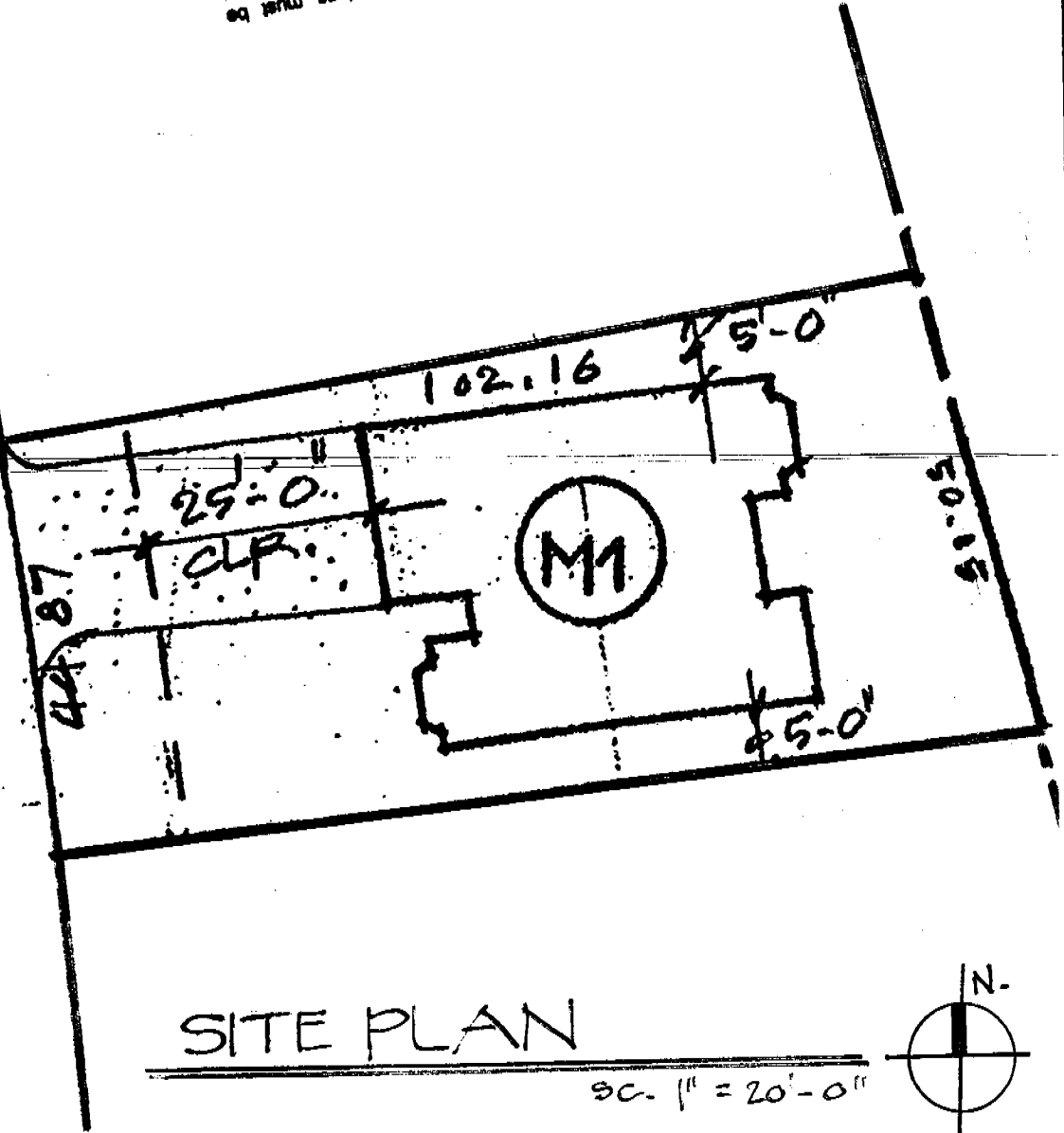
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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

This 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.

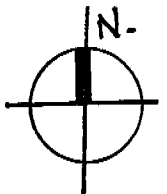


GARDEN GROVE CT.



SITE PLAN

1/8" = 20'-0"



LOT # 15

PLAN # M1

OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

ICBO Report # 4004

Builder : **KAT CONSTRUCTION**

Project Name : *Morell Estates*

Lot Number: *15 (2270 Garden grove st
Sec, CA #0611065)*

Date of Job Completion: MARCH 6, 2007

PLASTERING CONTRACTOR:

Name: STUCCO WORKS, INC.

Address: 5900 WAREHOUSE WAY- SACRAMENTO, CALIFORNIA 95826

Telephone No: (916) 383-6667

Contractor Number of Diamond Wall System: 2175

This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's Inspections.

AUGUST 9, 2007

Date


Signature of authorized representative of Plastering Contractor

This installation card must be presented to the building inspector after completion of work and before final inspection.

INSTALLATION CERTIFICATE

Site Address

2270 Garden Grove Ct
 Suite 10A Lot 15

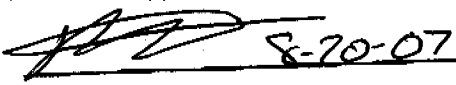
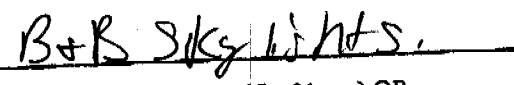
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FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Value* (U, CP-1R value) ¹	Product SHGC* (SHGC, CF-1R value) ²	# of Panels	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. HORIZONTAL SLIDER	0.36	0.33	2				
2. SINGLE HUNG	0.36	0.33	2				
3. PICTURE	0.33	0.36	2				
4. SLIDING GLASS DOOR	0.34	0.34	2				
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

- Manufactured fenestrations products use the values from the product label. Field fabricated fenestrations products use the default values from Section 116 of the Energy Efficiency Standards.
- 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-Value 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.

1-4	 Signature, Date	 Installing Subcontract (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item #s (if applicable)	Signature, Date	Installing Subcontract (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item #s (if applicable)	Signature, Date	Installing Subcontract (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

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

DUCT LEAKAGE AND DESIGN DIAGNOSTICS

INSULATION CERTIFICATE

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH THE CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATION CODE. TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

SITE ADDRESS 2270 Garden Grove Ct Sac, CA SACRAMENTO CA
 NUMBER # 0611065 CITY STATE

CEILINGS:

BLOW:	MANUFACTURER	<u>KNAUF</u>	THICKNESS	<u>16"</u>	R/VALUE	<u>38</u>
	MANUFACTURER	<u>GREEN FIBER</u>	THICKNESS		R/VALUE	
BATTS:	MANUFACTURER	<u>KNAUF</u>	THICKNESS	<u>13"</u>		<u>38</u>
		<u>KNAUF</u>				

EXTERIOR WALLS:

MANUFACTURER	<u>KNAUF</u>	THICKNESS	<u>3.5"</u>	R/VALUE	<u>13</u>
	<u>KNAUF</u>				

FLOOR INSULATION

MANUFACTURER	<u>KNAUF</u>	THICKNESS	<u>6.25"</u>	R/VALUE	<u>19</u>
	<u>KNAUF</u>				

AIR INFILTRATION:

(TITLE 24)

YES XXX NO

OTHER: _____

GENERAL CONTRACTOR: KAT CONSTRUCTION LICENSE # _____

BY: _____ TITLE _____ DATE _____

INSULATION CONTRACTOR: WESTERN INSULATION LP LICENSE # 784484

BY: Becky Guthertz TITLE AUTH. AGENT DATE 5/16/2007
 BECKY GUTHERZ