

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0310039

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 12 PUFFIN CT SAC

Parcel No: 225-1920-011

PARKVIEW VIL. 9 LOT 11

CONTRACTOR

BECK HOMES
3114 WEST HAMMER LANE
STOCKTON CA. 95209

OWNER

ARCHITECT

Nature of Work: MP2180 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 478421 Date 8-21-03 Contractor Signature J Halley

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

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

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

____ I am exempt under Sec. _____ B & PC for this reason: _____

Date _____ Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 8-21-03 Applicant/Agent Signature J Halley

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:

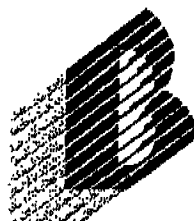
Carrier FREMONT COMPENSATION Policy Number WN99591990-06 Exp Date 07/29/2003

____ (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 8-21-03 Applicant Signature J Halley

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.



BECK

3114 W. Hammer Lane
Stockton, CA 95209
(209) 957-0331
Fax (209) 957-0363

February 4, 2004

David Hay
City of Sacramento
Planning and Building Department
2101 Arena Blvd., Ste. 200
Sacramento, CA 95834

*Perm. #
0310039*

Re: Sandpiper Cove Subdivision
Lot #11
12 Puffin Court
Sacramento, CA 95834

When the Sandpiper Cove subdivision is sold out, Beck Properties, Inc. will convert the above mentioned model home back to a single family residence at which time Beck Properties, Inc. will contact the building department for final inspection.

Sincerely,

Thomas Sani
Director of Construction
Beck Properties, Inc.

CONVERSION complete

RLB

6-305

TS:ag

BECK PROPERTIES: SANDPIPER COVES

Permit Number

Site Address 12 Puffin Cat

0310039

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:

Heating Equipment

Equip. Type (pkg. Heat pump)	CEC Certified Mfr name and Model #	# of Identical Systems	(1) Efficiency (ΔFUR , etc.) > CF-1R value	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)	
Furnace	York #P4HUA12L0480	1	0.80	Attic	R-4.2	32,817	70,000	Plan 1
Furnace	York #P4HUB16L8401	1	0.80	Attic	R-4.2	36,876	80,000	Plan 2
Furnace	York #P4HUB16L8401	1	0.80	Attic	R-4.2	40,901	80,000	Plan 3
Furnace	York #P4HUB16L8401	1	0.80	Attic	R-4.2	41,314	80,000	Plan 4

Cooling Equipment

Equip. Type (pkg. Heat pump)	CEC 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)	
Condenser	York #H*RC036	1	12.0	Attic	R-4.2	29,104	34,400	Plan 1
Condenser	York #H*RC042	1	12.0	Attic	R-4.2	31,706	39,000	Plan 2
Condenser	York #H*RC042	1	12.0	Attic	R-4.2	33,772	39,000	Plan 3
Condenser	York #H*RC042	1	12.0	Attic	R-4.2	34,695	39,000	Plan 4

*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.

[Signature] 7-1-03
Signature, Date

Beutler Corporation

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model #	Distribution Type (Std. point of use)	If Recirculation Control Type	# of Identical Systems	(2) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(2) Efficiency (BF, 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 my 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
117D & 117E (if applicable)

PLAN
INSTALLATION CERTIFICATE

Every 1/2
(Page 1 of 7)

CF-6R

Site Address 12 Puffin Ct

Permit Number
0310039

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:

Heating Equipment

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

Cooling Equipment

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

1. \geq reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) 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 Appliances 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 (EF, RE)	Standby Loss (%)	External Insulation R-value ³
STORAGE	<u>GE 56-50 X DCT-6 STATE</u>	<u>Home</u>			<u>48,000</u>	<u>50</u>	<u>0.62</u>	<u>2%</u>	<u>R 17</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.
- 3. 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.

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-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 Appliances Efficiency Regulations or Part 6), where applicable.

M. Webb
Signature, Date

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

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

July 1, 1999

INSTALLATION CERTIFICATE

(Page 2 of 13)

CF-6R

Site Address Sandpiper #2

Permit Number

0310039

FENESTRATION/GLAZING:

12 Ruffin Ct

Manufacturer/Brand Name	Product U-Factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
(GROUP LIKE PRODUCTS)							
1. HS W/Grid	.36	.30	2	2	55		
2. HS W/No Grid	.36	.33	2	8	218		
3. Fix W/Grid	.33	.34	2	3	15		
4. Fix W/No Grid	.33	.37	2	9	74		
5. VS W/No Grid	.36	.33	2	2	12		
6. PD W/No Grid	.35	.29	2	1	48		
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.

1-6	Re: T. Mall 1-24-05	Gilwin Company
Item #s (if applicable)	Signature, Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item #s (if applicable)	Signature, Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item #s (if applicable)	Signature, Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

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

CERTIFICATION OF INSULATION

PART I GENERAL	ADDRESS OR TRACT		SACRAMENTO BUILDING PRODUCTS						
	<p style="font-size: 1.5em; margin: 0;">Beck Prop -</p> <p style="margin: 0;">STAND PIPEX CUBE</p> <p style="margin: 0;">12 PUFFIN CT</p>		LOT # 11		<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						
	R-VALUE INSTALLED	APPLIED THICKNESS		R-VALUE INSTALLED	APPLIED THICKNESS		MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
13	3 1/2		38	12 1/4					
	19	5 1/2		38	14 3/4				
(ONCE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE)									
MATERIAL FIBERGLASS		FORM BATTS		R VALUE			MANUFACTURER		
							CT	OC	JM
AIR INFILTRATION SEALANT									
MATERIAL					MANUFACTURER				
<i>form</i>					HILTI		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		DATE		
<i>etc.</i>					MANAGER		1/2/04		
SIGNATURE — GENERAL CONTRACTOR					TITLE		DATE		
REMARKS									

Northwest Inspection and Testing, Inc.

11440 Sunrise Gold Circle, Suite 23, Rancho Cordova, CA 95742

(916) 631-9181 • Fax (916) 631-9781

NWIT Job No.	Date <i>10/20/03</i>
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REGISTERED INSPECTORS'S DAILY REPORT

TYPE OF INSPECTION REQUIRED <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Post Tensioned Concrete <input type="checkbox"/> Reinforced Masonry	<input type="checkbox"/> Structural Steel Assembly <input type="checkbox"/> Fire Proofing <input type="checkbox"/> Asphalt	<input type="checkbox"/> Quality Control <input checked="" type="checkbox"/> Other
Job Address <i>Beek Inspections</i>		City
Job Name <i>San Diego Cove</i>	Permit No.	Issued By
Type of Structure <i>CF</i>	Architect	
Material Description (type, grade, source) <i>Full Testing</i>	Engineer	
Inspector(s) Name	Contractor	
	Subcontractor	

TESTS PERFORMED

TYPE OF SAMPLE	SLUMP	QUANTITY IN SET	ADDITIONAL REMARKS ON SAMPLES

INSPECTION SUMMARY — LOCATIONS OF WORK INSPECTED, TEST SAMPLES TAKEN, WORK REJECTED, JOB PROBLEMS, PROGRESS, REMARKS, ETC. INCLUDES INFORMATION ABOUT - AMOUNTS OF MATERIAL PLACED OR WORK PERFORMED, NUMBER, TYPE & IDENT. NO'S OF TEST SAMPLES TAKEN: STRUCT. CONNECTIONS (WELD MADE H.T. BOLTS TORQUED) CHECKED, ETC.

Inspection at Beek Inspections performed on testing on epoxy embeds and cut bolts.

LOT 12	6 Pullin ST.	(7 tests)	
LOT 11	12 Pullin ST	(1 test)	
LOT 10	18 Pullin ST	(3 tests)	
LOT 9	20 Pullin ST	(1 test)	

1/8 - 5950"
3/4 - 4450"
5/8 - 3650"

All testing was completed on this date with no failures.

CERTIFICATION OF COMPLIANCE

I HEREBY CERTIFY THAT I HAVE OBSERVED TO THE BEST OF MY KNOWLEDGE ALL OF THE ABOVE REPORTED WORK UNLESS OTHERWISE NOTED. I HAVE FOUND THIS WORK TO COMPLY WITH THE APPROVED PLANS, SPECIFICATIONS, AND APPLICABLE SECTIONS OF THE GOVERNING BUILDING LAWS.

[Signature]
 SIGNATURE OF REGISTERED INSPECTOR

SPECIALTY NO. AGENCY

CONTINUED ON NEXT PAGE PAGE _____ OF _____

TIME IN	TIME OUT	REG. HOURS	O.T. HOURS	CYLINDERS
All inspections based on a minimum of 4 hours and over 4 hours - 8 hour minimum. In addition, any inspection extending past noon hour will be an 8 hour minimum.				
Approved by <i>[Signature]</i>		Project Superintendent		

WHITE - OFFICE COPY CANARY - ACCOUNTING COPY PINK - INSPECTOR'S COPY GOLDENROD - JOB SITE COPY

CITY OF SACRAMENTO
RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 12 PUFFIN COURT

Assessor Parcel #: 225-1920-011

Lot Number: 11

Subdivision: PARKVIEW, VILLAGE 1
(AKA SANDPIPER/PLAN 2)

OWNER INFORMATION:

Legal Property Owner: BECK PROPERTIES, INC. Phone Number: 209-957-0331
Owner Address: 3114 West Hammer Lane, City: Stockton, State: CA Zip: 95209

CONTRACTOR INFORMATION:

Contractor: BECK PROPERTIES, INC. License: 474821 Phone: 209-957-0331 Fax: 209-957-0363

PROJECT INFORMATION:

0310036

Land Use Zone: R1A Occupancy Group: R3 Construction Type: R3 Fed Code: 1A
No. of Stories: 2 No. of Rooms: 9 Street Width:
1st Floor Area: 1154 2nd Floor Area: 1026 Basement: Roof Material:

AREA IN SQUARE FOOT OF:

DWELLING/LIVING: 1832 SF
GARAGE/STORAGE: 437 SF
DECKS/BALCONIES: 85 SF
CARPORTS:



SCOPE OF WORK: MP: 2180 (2 STORY/9 ROOM/SFR)
MP W/ OPT:

(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) Assessor's Parcel Number
 - b) New Floor Plan
 - c) Owner's Name
 - d) Project Address

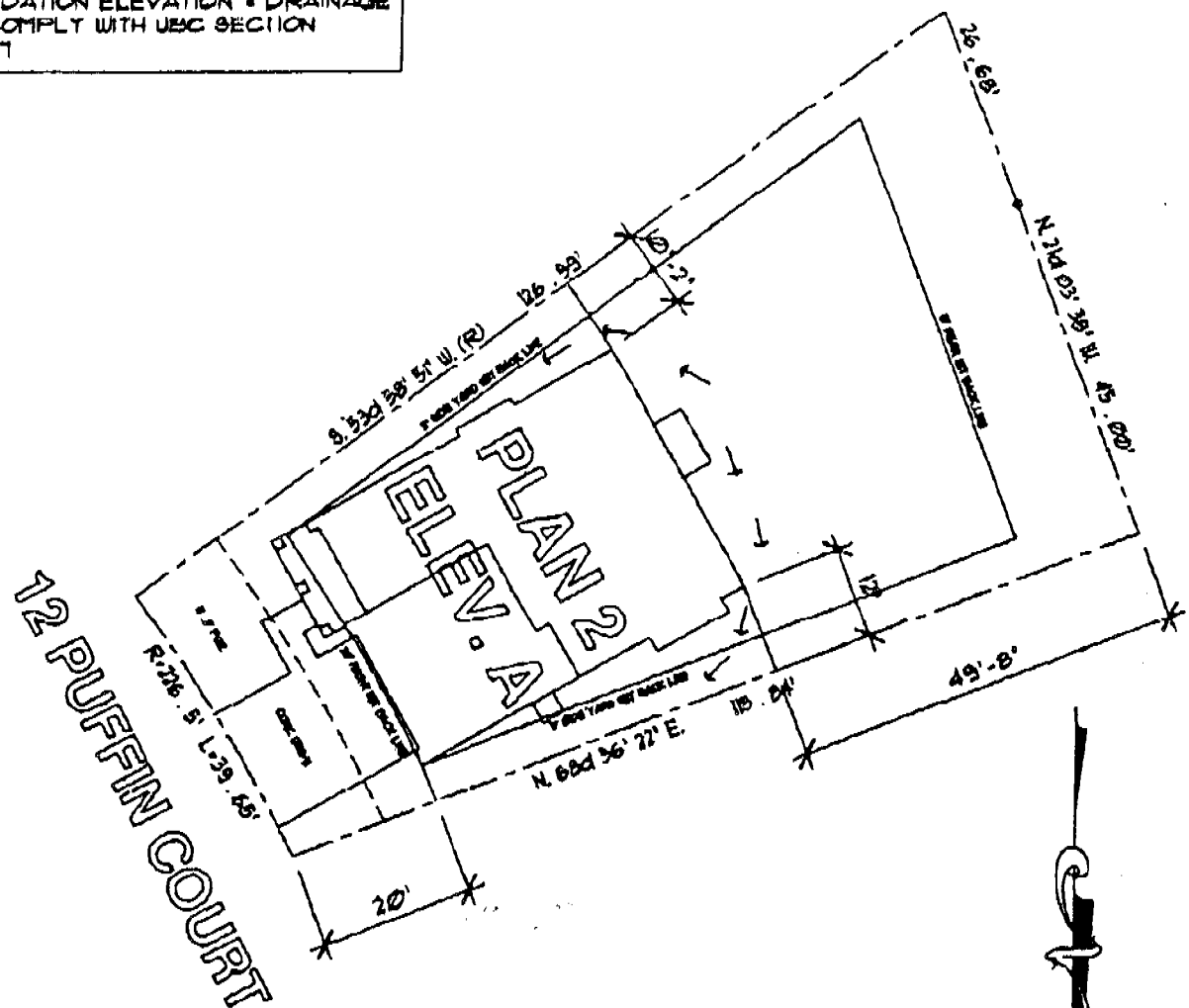
Date: _____ Received by: (staff) _____ Permit #: _____

6/26/2003

THIS PLOT PLAN IS PRESENTED TO SHOW THE APPROXIMATE LOCATION OF THE HOME UPON THE LOT. IT DOES NOT ACCURATELY REFLECT THE EXACT LOCATION OF THE HOME WHEN BUILT. IT IS NOT A GUARANTEE NOR SHOULD IT BE CONSTRUED AS A GUARANTEE THAT THE HOME WILL BE BUILT UPON THE EXACT LOCATION AS DEPICTED IN THIS PLOT PLAN.

SANDPIPER COVE

FOUNDATION ELEVATION & DRAINAGE TO COMPLY WITH USC SECTION 1804.7

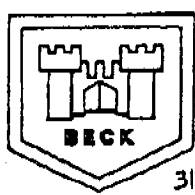


kept on the...
 to make any...
 same with...
 Building...
 The...
 SHALL NOT...
 violation of any...
PLOT PLAN



SCALE : 1"=20'-0"

LOT NO. 11 OF PARKVIEW VILLAGE #5 CITY OF SACRAMENTO, CA



BECK PROPERTIES

3114 W. HAMMER LANE, STOCKTON, CA. 95210 PH: 951-0331

APN NUMBER: _____