

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0601846

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 2348 DONNER PASS AV SAC

Parcel No: NATOMAS PARK COTTAGES LOT #70

CONTRACTOR

LENNAR RENAISSANCE INC
1075 CREEKSIDE RIDGE DR #100
ROSEVILLE, CA 95678

OWNERSHIP OF SACRAMENTO

MAR 01 2006

ARCHITECT

Nature of Work: MP1805 2 STORY 8RM SFR

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

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 732348 Date 3-1-06 Contractor Signature K Stone

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 3-1-06 Applicant/Agent Signature K Stone

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 OLD REPUBLIC INS. CO. Policy Number MWC11114500 Exp Date 02/28/2007

____ (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 3-1-06 Applicant Signature K Stone

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.



INSULATION CONTRACTORS ASSOCIATION OF AMERICA

INSULATION CERTIFICATE

46930

Permit # 0601846

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT THE INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENGINEERING PRACTICES AND CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA.

Renaissance LOT # 70 TRACT # 92
STREET 2348 Downer CITY Sac

EXTERIOR WALLS:

MANUFACTURER F/G THICKNESS/TYPE _____ R-VALUE _____

CEILING:

BATTS: MANUFACTURER CF THICKNESS/TYPE 10 R-VALUE 30

BLOWN IN: MANUFACTURER Falsafy MINIMUM THICKNESS 12 R-VALUE 30

SQUARE FOOTAGE COVERED 488 NUMBER OF BAGS USED 16

FLOORS:

MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

SLAB ON GRADE:

MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS:

MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

GENERAL CONTRACTOR Lennar

CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

H. O. L. SIGNATURE CM TITLE

INSULATION CONTRACTOR **ARCADE INSULATION**

CALIFORNIA CONTRACTORS LICENSE #815286

NEVADA CONTRACTORS LICENSE #55201

Shawn Brady SIGNATURE 9-14-06 DATE Insulator TITLE

INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

Site Address 2348 Donner Pass

Permit Number 0601846

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)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ [\geq CF-1R value]	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	Bryant 310JAV036070	1	80	Attic	6	17,810	51,000

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ [\geq CF-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
Split A/C	Bryant 537GNX030	1	14.0	Attic	6	20036	28,800

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 *Appliance Efficiency Regulations* or Part 6), where applicable.

Ronald Deal 10/17/05
Signature, Date

Deal Mechanical, Inc.
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 Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency (EF, RE)	Standby Loss (%)	External Insulation R-value ¹
Gas	Heinemann 41V150-90TF	STD	N/A	N/A	26,000	50			19.2

- 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.

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 *Appliance Efficiency Regulations* or Part 6), where applicable.

[Signature]
Signature, Date

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

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

Plan : 164A;164(REV)

Work Order :

175688

Builder :

RENAISSANCE - THE COMMONS

Site Address : 2348 Donner Pass

Permit # 0601846

FENESTRATION/GLAZING:

Manufacturer/Brand Name	Operator Type (e.g., fixed, slider)	Manufactured Products	Site Built Products		Quantity (optional)	Total Square Feet	Comments/Special Features
		Labelled U-value (≤ CF-1R value) ²	# of Panes	Default U-Value ²			
GROUP LIKE PRODUCTS)							
1. WINDFORD WINDOW	Fixed	0.320				41.8	
2. WINDFORD WINDOW	S/Hung	0.350				104.5	
3. WINDFORD WINDOW	P/Door	0.350				48.0	
4. WINDFORD WINDOW	H/Slider	0.350				61.0	
5. * Weighted Average	----->	0.345	----	----	----	255.3	-----
6.							
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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 the 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.

 #s applicable)
 Signature, Date

 #s applicable)
 Signature, Date

 #s applicable)
 Signature, Date

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

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

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

Product mix and u-values reflect plan changes as of 02/13/06

KwikKote

No. 200-914943

Stucco System Installation Card

Job Name: *RENAISSANCE COMMONS AT NATOMAS PARK*
Address:

SACRAMENTO, CA

Lot #: 70

PERMIT# 0601846

Stucco System Trade Name: KWIK KOTE
Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.

Report No. 3607

Date of Job Completion:

Home Builder: LENNAR RENAISSANCE

Address: 2240 DOUGLAS BLVD #250
ROSEVILLE, CA

Stucco Contractor: KENYON PLASTERING, INC.

Address: PO BOX 2077

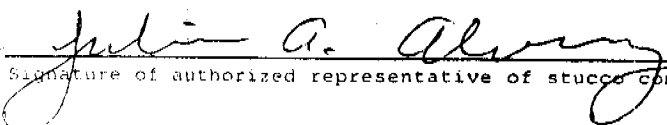
North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 04/25/2003

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


Signature of authorized representative of stucco contractor

Date

10/30/06