

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No:** 0417679  
**Insp Area:** 4  
**Thos Bros:** 257C4

**Site Address:** 5600 BRIDGECROSS DR SAC  
**Parcel No:** 201-0780-030  
N

NORTHPOINT PARK VIL. 30A LOT #56

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

CONTRACTOR  
LENNAR RENAISSANCE INC  
2240 DOUGLAS BL  
ROSEVILLE, CA 95661

OWNER

ARCHITECT

**Nature of Work:** MP323X 2 STORY 10 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 732348 Date \_\_\_\_\_ 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**  
JAN 10 2005  
NORTH PERMIT

**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 1-10-05 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 OLD REPUBLIC INS. CO. Policy Number MWC10845400 Exp Date 11/1/2004

(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.

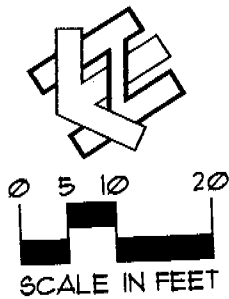
Date 1-10-05 Applicant Signature [Signature]

**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.**

# plot plan

THIS PLOT PLAN IS FOR THE PURPOSE OF SHOWING THE HOUSE TO BE CONSTRUCTED ON THE LOT AND MAY NOT REPRESENT THE FINAL AS-BUILT CONFIGURATION OF THE PROPERTY OR IMPROVEMENTS THEREON. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED, NOR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS, OTHER THAN MINIMUM ORDINANCE, MAY VARY OR CHANGE WITHOUT PRIOR NOTICE, DUE TO ACTUAL SITE CONDITIONS.

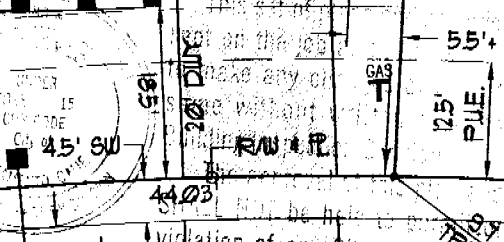


HOMESITE  
**55**  
PAD = 125

HOMESITE  
**56**  
8711± SQ. FT.

PLAN 323X-2R  
35'-0" X 47'-6"  
2-STORY  
ELEV. - A  
1487± LOT COVERAGE  
GARAGE

CVRD PORCH



BRIDGECROSS DRIVE

### lot coverage

LOT AREA: 8711± #  
BUILDING: 1487 #  
BLDG./ LOT AREA: 17 %

### retaining wall

HEIGHT: \_\_\_\_\_  
LENGTH: \_\_\_\_\_  
DISTANCE FROM P.L.: \_\_\_\_\_

### symbols legend

- DROP INLET:
- ELECTRIC SERVICE BOX:
- FIRE HYDRANT:
- FLOW LINE HIGH POINT: FL=23.4
- GAS SERVICE:
- PAD-MOUNT TRANSFORMER:
- SEWER SVC.:
- STREET LIGHT:
- TOP-BACK OF SIDEWALK ELEV.: 123.4 TSW
- SWALE (FLOW DIRECTION):
- WATER SVC.:
- EXTENTS OF 2ND STORY LEVEL:

- general notes**
- 1) DIMENSIONS ALONG CURVED LINES ARE ARC LENGTHS, U.O.N.
  - 2) SETBACK DIMENSIONS ARE ROUNDED DOWN TO NEAREST HALF UNIT, U.O.N.
  - 3) MAXIMUM ALLOWABLE LOT COVERAGE IS 45 PERCENT FOR 1-STORY HOMES AND 40 PERCENT FOR 2-STORY HOMES.
  - 4) FOOTPRINT AREA CALCULATION (#) DOES NOT INCLUDE FRONT PORCH AREA.

8.1	BCB	10/04/04	20:1
phase	drawn by	issue	scale



### AMBER LANE

A REGENCY PARK COMMUNITY

## home site #56

### 5600 Bridgecross Drive

NORTHPOINTE PARK VILLAGE 30A  
CITY OF SACRAMENTO, CALIFORNIA  
a.p.n. 201-0780-030

**INSTALLATION CERTIFICATE**

5600 Bridgecross Dr  
Site Address

0417679  
Permit Number


**VENTILATION/GLAZING:**

Manufacturer/Brand Name (or U-Factor Product)	Product U-Factor <sup>1</sup> (or CF-1R value) <sup>2</sup>	Product SHGC <sup>1</sup> (or CF-1R value) <sup>2</sup>	# of Panels	Total Quantity of Like Product (Columns)	Square Foot	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1. CASCADE XO	0.35	0.34					
2. Pw	0.33	0.31					
3. P/O	0.33	0.34					
4. SH	0.35	0.34					
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

<sup>1</sup> 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.

<sup>2</sup> 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.

Item # (if applicable)	2-22-05 Signature, Date	 Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item # (if applicable)	Signature, Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item # (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

Site Address 5600 Bridgecross Dr.

Permit Number 0417679

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.) <sup>1</sup> (>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.) <sup>1</sup> (>CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

<sup>1</sup> ≥ 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, 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 <sup>2</sup> Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency <sup>3</sup> (EF, RE)	Standby <sup>2</sup> Loss (%)	External Insulation R-value <sup>3</sup>
Inst. Gas	41VRSOF	STD	N/A	1	40,000	50	.62	N/A	R-20
Inst. Gas	41VR4OF	STD	N/A	1	40,000	40	.62	N/A	R-20

- 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] 12-16-03  
Signature, Date

D&J Plumbing  
Installing Subcontractor (Co. Name) OR  
General Contractor (Co. Name) OR Owner

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

5600 Bridgacross Dr.  
Site Address

0417679  
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 source)	CBC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) <sup>1</sup> (≥CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	Brvant 3101AV036070	1	80	Attic	4.2	27578	51000

**Cooling Equipment**

Equip. Type (pkg. heat source)	CBC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) <sup>1</sup> (≥CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
Split A/C	Brvant 537ANX036	1	4.2	Attic	4.2	28103	35800

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, Date

Deal Sheet Metal, Inc.  
Installing Subcontractor (Co. Name)  
OR General Contractor (Co. Name) OR Owner

**WATER HEATING SYSTEMS:**

Heater Type	CBC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation Control Type	# of Identical Systems	Rated <sup>1</sup> Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency <sup>2</sup> (EF, RE)	Standby <sup>2</sup> Loss (%)	External Insulation R-value <sup>3</sup>

- 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.
- R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

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\_\_\_\_\_  
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



INSULATION CONTRACTORS ASSOCIATION OF AMERICA

INSULATION CERTIFICATE  
56683

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

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

Winncrest LOT # 56 TRACT # Resency

STREET 5600 Bridgecross Dr CITY Sae  
0417679

EXTERIOR WALLS:

MANUFACTURER F/b THICKNESS TYPE R-13 VALUE 13/19

CEILINGS:

BATTIS: MANUFACTURER F/6 THICKNESS TYPE R-38 VALUE 38  
BLOWN IN: MANUFACTURER CT MINIMUM THICKNESS 1 1/4 R-38 VALUE 38

SQUARE FOOTAGE COVERED 1358 NUMBER OF BAGS USED 31

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 CALIFORNIA CONTRACTORS LICENSE # DATE

SIGNATURE TITLE

INSULATION CONTRACTOR ARCADE INSULATION

CALIFORNIA CONTRACTORS LICENSE #815286  
NEVADA CONTRACTORS LICENSE #0055201

Signature: [Handwritten Signature] TITLE: Inspector  
DATE: 8/1/05

Installation Card

Job Address

Stucco System Tradename: KWIK KOTE

AMBER LANE @ REGENCY PARK

Name of Stucco Manufacturer: KWIK KOTE CORP.

5600 BRIDGECROSS DRIVE lot 56-30A

ICC Evaluation Service, Inc.

SACRAMENTO 0417679

Evaluation Report ESR-1711

Date of Job Completion \_\_\_\_\_

Stucco Contractor

Name: KENYON PLASTERING, INC.

Address: PO BOX 2077

North Highlands CA, 95660

Telephone Number: 916/349-8191

Approved Contract Number as issued by KWIK KOTE. 1001

This is to certify that the stucco system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the KWIK KOTE instructions.

*Julian A. Alvarez*  
Signature of authorized representative of stucco contractor

7-21-05  
Date