

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0412102
Insp Area: 2
Thos Bros: 337-D4

Site Address: 7667 BETH ST SAC
Parcel No: BETH ESTATES LOT # 16 Housing (Y/N):

Sub-Type: NSFR
N

CONTRACTOR
GRAY CONSTRUCTION

OWNER

ARCHITECT

Nature of Work: MP 1320 1 STORY 6 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 _____ License Number 800671 Date 8-16-04 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 16 2004

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 8-16-04 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 _____ Policy Number _____ Exp Date _____

____ (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 8-16-04 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.

0413102

ROOFING QUESTIONNAIRE

Applicant's name: Roberta Brodnamsky Phone: 916-649-0365
Project Address: 2992 Davenport (APN: 262-0320-037)

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

1. ROOFING TYPE

a. The existing roofing material is composition shingle, wood shake or shingle, tile or metal. The new roofing material shall be:

Existing	Proposed	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	30 year laminated dimensional composition
<input checked="" type="checkbox"/>	<input type="checkbox"/>	wood shake or shingle
<input type="checkbox"/>	<input type="checkbox"/>	tile
<input type="checkbox"/>	<input type="checkbox"/>	metal that simulates one of the above listed materials

b. The existing roofing material is built up, foam or membrane with a roof pitch of 2:12 or less. The new roofing material shall be:

Existing	Proposed	
<input type="checkbox"/>	<input type="checkbox"/>	Built up
<input type="checkbox"/>	<input type="checkbox"/>	Foam
<input type="checkbox"/>	<input type="checkbox"/>	Membrane

2. GUTTERS

a. The existing gutters are fascia gutters.
 There is no change proposed to existing gutters.
 New fascia gutters shall be provided.
 Gutters shall be repaired and/or replaced to match existing.

b. The existing gutters are Ogee gutters.
 There is no change proposed to existing gutters.
 New Ogee gutters shall be provided.
 Gutters shall be repaired and/or replaced to match existing.

c. There are no existing gutters.
 No new gutters are proposed.
 New Ogee gutters shall be provided.

Dry ROT REPAIR
AS NEEDED

3. RAFTER TAILS

a. There are no exposed rafter tails.
b. There are exposed rafter tails.
 There is no change or cutting proposed to existing rafter tails.
 Rafter tails shall be repaired and replaced to match existing.

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature: Roberta Brodnamsky Date: 8-12-04

For City Staff use only

Counter Staff B. Sweeney

- In a DR District Meets DR criteria? Yes No (route to DR staff)
- In a P area or listed (route to P staff)
- Not in DR/P area

Expanded North
R-1

0413102

OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

ICBO Report #4004

JOB ADDRESS:

7667 Beth st

Date of Job Completion 2/3/05

PLASTERING CONTRACTOR:

Name:

Quality Plastering Inc

Address:

4111 82nd St, Sacramento, CA 95826

Telephone No:

(916) 454-0840

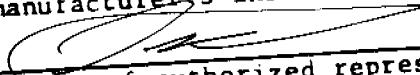
Contractor Number of Diamond Wall System

2417

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 instructions.

Date

4/1/05


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

(page 1 of 4)

CF-6R

7667. Beth St
Site Address

0412102
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 (Cat. No.)	CSC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (NCEUR value)	Duct Location (Attic, etc.)	Duct or Piping Details	Heating Load (Btu/h)	Heating Capacity (Btu/h)

Cooling Equipment

Equip. Type (Cat. No.)	CSC Certified Component Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) (NCEUR value)	Duct Location (Attic, etc.)	Duct Details	Cooling Load (Btu/h)	Cooling Capacity (Btu/h)

1. 2 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	CSC-Certified Mfr Name & Model Number	Distribution Type (Hot Water/Inst)	Recovery/Control Type	# of Identical Systems	Rated Input (kW or Btu/h)	Tank Volume (gallons)	Efficiency (EF, EUE)	Standby Loss (%)	External Insulation R-value
CFE	RUID PRO-40N SD	SD	N/A	1	40,000	50	61	N/A	N/A

2. For small gas storage (total input of less than or equal to 75,000 Btu/h), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (total input of greater than 75,000 Btu/h), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.

Faucets & Shower Heads

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment 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 equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature/Date

BIANCHI PLUMBING CO., INC
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

COPY TO: Building Department
Building Owner at Occupancy

INSTALLATION CERTIFICATE

Site Address 7667 Beth st

Permit Number
0412102

WENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (CF-1R value) ²	Product SHGC ² (CF-1R value) ²	# of Pans	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. <u>Pan. P.C.</u>	<u>.35</u>	<u>SH</u>	<u>2</u>				<u>lowe²</u>
2. <u>J</u>	<u>.35</u>	<u>XC</u>	<u>2</u>				
3. <u>J</u>	<u>.34</u>	<u>PW</u>	<u>2</u>				
4. <u>J</u>	<u>.35</u>	<u>PD</u>	<u>2</u>				
5.							
6.							
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.

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

E₂

This form is to be filled out completely & signed by applicant/owner/contractor responsible for Title 24 Energy Compliance & returned to the field inspector at final.

INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

Lot 16 (1)

Site Address 7667 BETH STREET

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 (p/g heat source)	CBC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) [≥CF-1R value]	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
SPLIT TRANE	TPE880936	1	82%	ATTIC	R4.2	35000	38000

Cooling Equipment

Equip. Type (p/g heat source)	CBC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) [≥CF-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
SPLIT TRANE	ATB90361000A	1	12-SEER	ATTIC	R4.2	24506	36000

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.

Paul D. ... 4/18/05
Signature, Date

D.P. HEATING & A/C
Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CBC Certified Mfr Name & Model Number	Distribution Type (Rad, 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

- 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, Date

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

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

ABC INSULATION & SUPPLY CO.

11386 AMALGAM WAY
RANCHO CONDOVA, CA 95670

Phone (916) 635-7171
Fax (916) 635-7717
State License No. 369263

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:

LOT# 18 TRACT Pinebluffs

STREET 71022 Bell Street CITY Sacramento

EXTERIOR WALLS:

Manufacturer CertainTeed Thickness 3 1/2" R Value 13

CEILING:

Batts Manufacturer Knauf Thickness 12" R Value 38

Brown In Manufacturer Greenfiber Thickness 10.3" R Value 38

Square footage covered 1296

Garage ceiling - living space above
Manufacturer CertainTeed Thickness 6 1/4" R Value 19

FLOORS:

Manufacturer DIA Thickness _____ R Value _____

POLYSEALCAULK PER TITLE 24: Yes

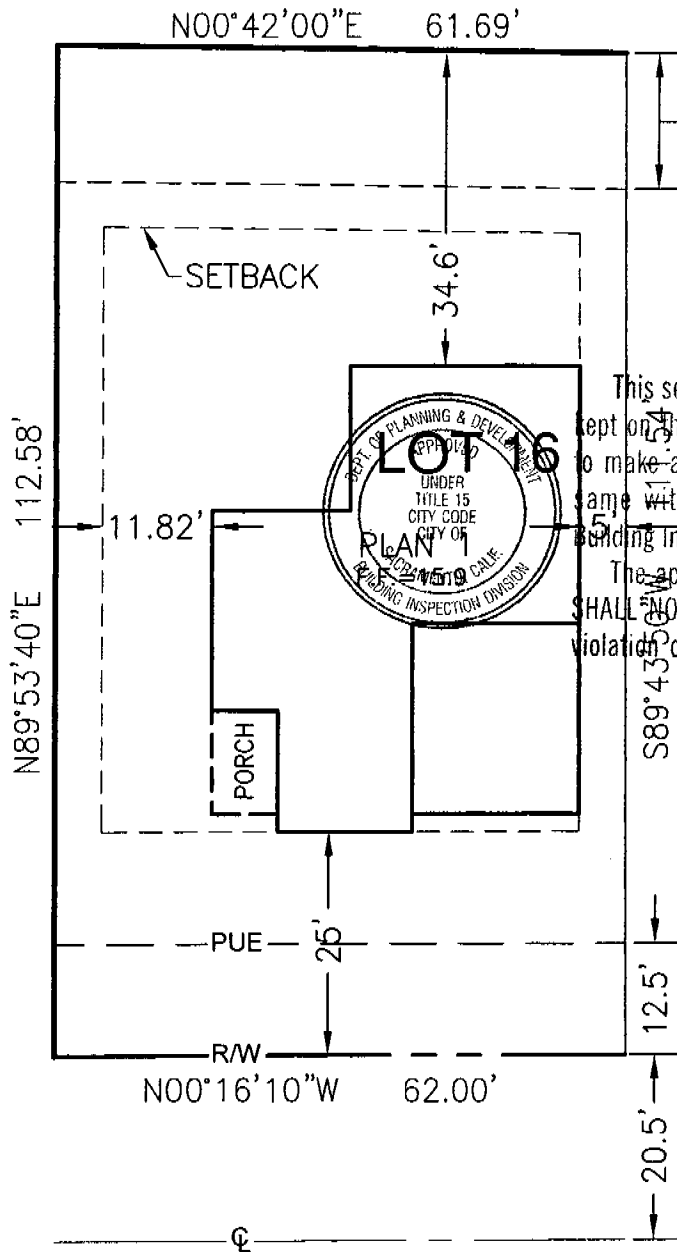
GENERAL CONTRACTOR _____

CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR ABC INSULATION & SUPPLY CO. DATE 4/11/05

Steve Plummer Steve Plummer
SIGNATURE TITLE

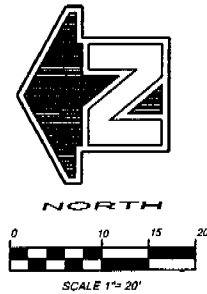


15' DRAINAGE EASEMENT
CITY OF SACRAMENTO

LOT:

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.



BETH STREET

ROSE'S ENGINEERING
ENGINEERING PLANNING SERVICES

9152 ELK GROVE BLVD. ELK GROVE, CA 95624
BUS. (916) 686-5445 FAX (916) 685-8900



BETH ESTATES
PLOT PLAN
LOT 16

CITY OF SACRAMENTO, CALIFORNIA

DATE:
6/29/04
SCALE:
1"=20'

SHEET
1
OF
1