

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0512883  
Insp Area: 2  
Thos Bros: 336J3

Site Address: 7615 RUSH RIVER DR SAC  
Parcel No: 031-1440-024  
N

REFLECTIONS @ RUSH RIVER LOT 3

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

CONTRACTOR  
JOHN E JOHNSON  
10598 COMBIE RD,  
AUBURN, CA. 95602

OWNER

ARCHITECT

Nature of Work: MP 1740 1 STORY 7 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-1 License Number 349108 Date 8-25-05 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).

PAID  
CITY OF SACRAMENTO  
AUG 25 2005  
NEIGHBORHOOD PLANNING  
AND DEVELOPMENT

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 a 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 8-25-05 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 STATE FUND Policy Number 431-0000226 Exp Date 10/01/2005

(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 8-25-05 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.



Planning and Building Department

Building Division

CITY OF SACRAMENTO  
CALIFORNIA

Downtown Permits Center  
1231 I Street, #200  
Sacramento, CA 95814-2998

North Permits Center  
2101 Arena Blvd., Suite 200  
Sacramento, CA 95834

ADDRESS 7615 Rush River PERMIT NO. 0512883

INSPECTION COMMENTS	PERMIT DOCUMENTS
8-30-05 810.11 P40 AP MWW/BL	
9-7-05 812 AP MWW/BL	
9-19-05 P.42 P.43 AP PBL	
10-5-05 B17 AP TM	
10-6-05 B-26 JRC CN	
10-17-05 8107 AP JBB # 39392	
10/20/05 826 AP JBB	
10/27/05 818 AP JBB	
10/27/05 881 CN - 04 TO INSULATE - JBB	
10-31-05 B-81, 14 AP JBB	
11-7-05 471 Conn JBB	
11/8/05 P47 AP JBB	
12-1-3-06 B29-CN-FRE	

FINAL APPROVALS	
BUILDING	1-6-06 JBB
ELECTRICAL	
PLUMBING	
MECHANICAL	
FIRE	
SITE	

10-19-05

Adhesive Product Name	msd	Expiration Date	11/06



INSULATION CONTRACTORS ASSOCIATION OF AMERICA

INSULATION CERTIFICATE

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:

IF Johnson Const LOT # 3 TRACT # Reflection  
 STREET 7615 Rush River Dr CITY SAR

EXTERIOR WALLS: MANUFACTURER F/6 THICKNESS/TYPE \_\_\_\_\_ R-VALUE 13

CEILINGS: BATT: MANUFACTURER F/6 THICKNESS/TYPE \_\_\_\_\_ R-VALUE 38

BLOWN IN: MANUFACTURER CT THICKNESS 10 3/4 R-VALUE 38

SQUARE FOOTAGE COVERED 1606 NUMBER OF BAGS USED 37

FLOORS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R-VALUE \_\_\_\_\_

SLAB ON GRADE: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R-VALUE \_\_\_\_\_

WIDTH OF INSULATION \_\_\_\_\_ INCHES R-VALUE \_\_\_\_\_

FOUNDATION WALLS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R-VALUE \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_ CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_  
 INSULATION CONTRACTOR **ALCAL ARCADE CONTRACTING**  
 CALIFORNIA CONTRACTORS LICENSE #815286 DATE 10/19/05  
 NEVADA CONTRACTORS LICENSE #0055201

SIGNATURE [Signature] TITLE \_\_\_\_\_

AAC2000

Kevin Johnson  
 Technician

Stockton Office: (209) 234-7722

Rocklin Office: (916) 435-9722

West Sacramento Office: (916) 372-1434

**INSTALLATION CERTIFICATE**

CF-6R

Site Address 7615 Rush River Dr. Permit Number \_\_\_\_\_  
Lot 3

**FENESTRATION/GLAZING:**

MANUFACTURER/BRAND NAME (GROUP LIKE PRODUCTS)	Product U-Factor <sup>1</sup> (a CF-1R value) <sup>2</sup>	Product SHGC <sup>1</sup> (a CF-1R Value) <sup>2</sup>	Number of Panes	Total Quantity of like product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1 <u>Certianteed 400/500 Series</u>							
2 SH	<u>.34</u>	<u>.29</u>	<u>2</u>	<u>6</u>			
3 XO	<u>.34</u>	<u>.31</u>	<u>2</u>	<u>9</u>			
4 PW	<u>.30</u>	<u>.33</u>	<u>2</u>	<u>1</u>			
5 CASEMENT/AWNING	<u>W/A</u>						
6 CASEMENT-FX	<u>W/A</u>						
7 SLIDING GLASS DOOR	<u>.32</u>	<u>.30</u>	<u>2</u>	<u>2</u>			
8							
9							
10							
11							
12							
13							
14							
15							

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.

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 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; 3) the product meets or exceeds the appropriate requirements for manufactured devices (from part 6), where applicable.

0  
 Item #'s  
 (if applicable)

[Signature]  
 Signature, Date

Pro Set Window and Door  
 Installing Subcontractor (Co. Name) or  
 General Contractor (Co. Name) or Owner  
 or Window Distributer

Item #'s  
 (if applicable)

Signature, Date

Installing Subcontractor (Co. Name) or  
 General Contractor (Co. Name) or Owner  
 or Window Distributer

Item #'s  
 (if applicable)

Signature, Date

Installing Subcontractor (Co. Name) or  
 General Contractor (Co. Name) or Owner  
 or Window Distributer

COPY TO:

Building Department  
 HERS Provider (if applicable)  
 Building Owner at Occupancy

Site Address **7615 Rush River Drive**  
**Reflections @ Rush River Lot #3**  
**DUCT LEAKAGE AND DESIGN DIAGNOSTICS**

Permit Number

**DUCT LEAKAGE REDUCTION**

Pressurization Test Results (CFM @ 25 PA)

Test Leakage (CFM) 70

Fan Flow

If Fan Flow is Calculated as  $400 \text{ cfm/ton} \times \text{number of tons}$ , or as  $21.7 \times \text{Heating Capacity}$  in Thousands of Btu/hr, enter calculated value here 84

If fan flow is measured, enter measured value here

Leakage Fraction =  $\text{Test Leakage} / (\text{Measured or Calculated Fan Flow}) =$

Pass if leakage fraction  $\leq 0.05$

Pass  Fail

For AEROSOL TYPE SEALANTS ONLY - The following diagnostic testing was completed:

Duct Fan Pressurization at rough-in measured leakage (CFM):

CHECK AFTER FINISHING WALL:

- Yes  No  Pressure pan test or House pressurization test
- Yes  No  Visual Inspection of Duct Connections

Pass  Fail

**THERMOSTATIC EXPANSION VALVE (TXV)**

Yes  No Thermostatic Expansion Valve is installed and Access is provided for inspection

Yes is a pass

Pass  Fail

**DUCT DESIGN**

1.  Yes  No ACCA Manual D Design calculations have been completed, Duct Design is on the plans and duct installation matches plans.

2.  Yes  No TXV is installed or Fan flow has been verified. If no TXV, verified fan flow matches design from CF-1R.

Measured Fan Flow = \_\_\_\_\_

Yes for both 1 and 2 is a Pass

Pass  Fail

I, the undersigned, verify that the above diagnostic test results and the work I performed associated with the test(s) is in conformance with the requirements for compliance credit. [The builder shall provide the HERS provider a copy of the CF-6R signed by the builder employees or sub-contractors certifying that diagnostic testing and installation meet the requirements for compliance credit.]

\_\_\_\_\_  
Signature, Date 12-21-05

AN Design  
Installing Subcontractor (C.G. Name) OR  
General Contractor (C.G. Name)

Tests performed copy to: Building Department  
HBKs provided if appropriate  
Building Department/Contractor

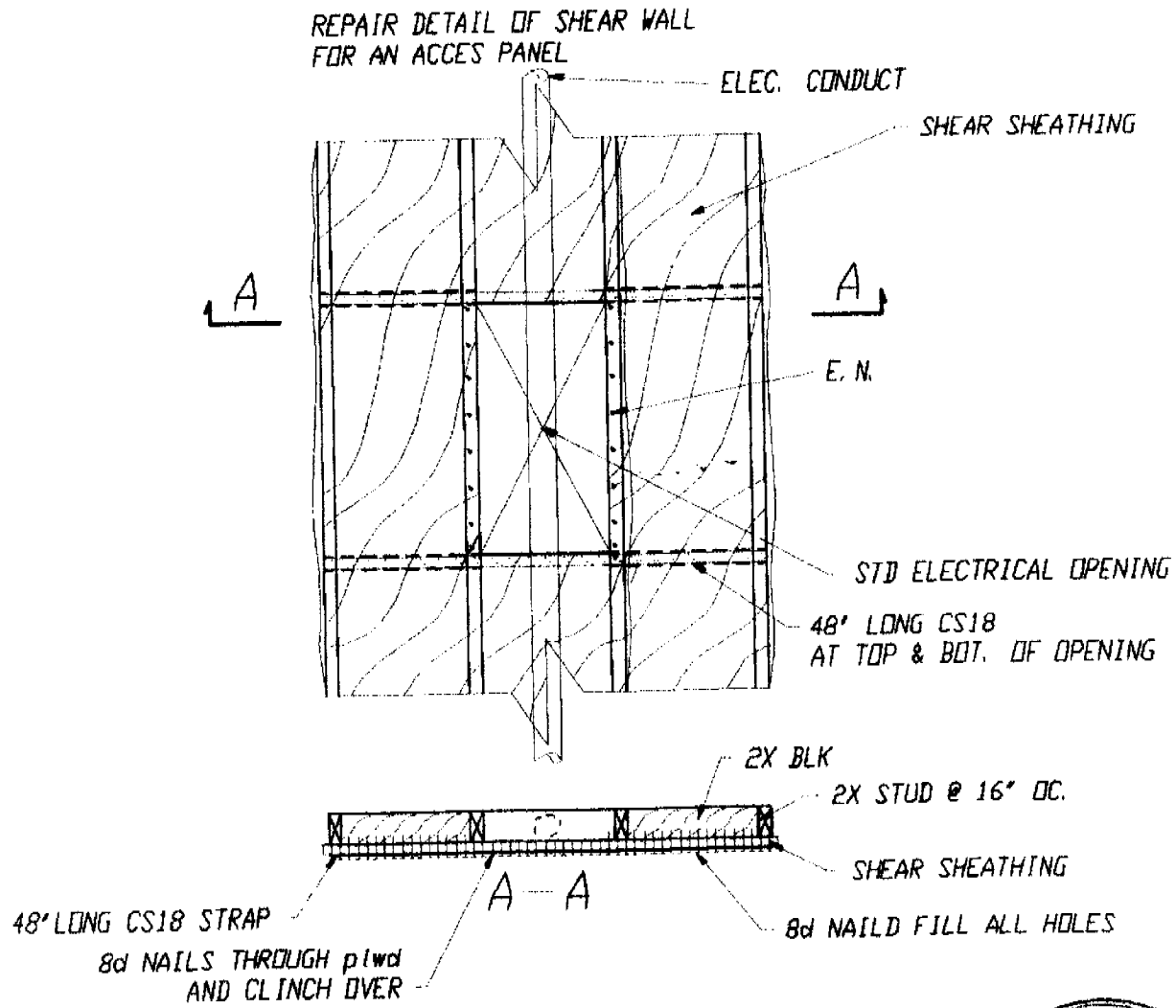
**T-NIE Engineering**

333 Sunrise Ave. #337  
Roseville, CA 95661,

Phone: (916) 677-1577  
Fax: (916) 677-1566

Date: 09/07/2005

RE: Electrical panel opening repair.  
Project: Rush River Reflection, all plans.  
For: John E Johnson Construction

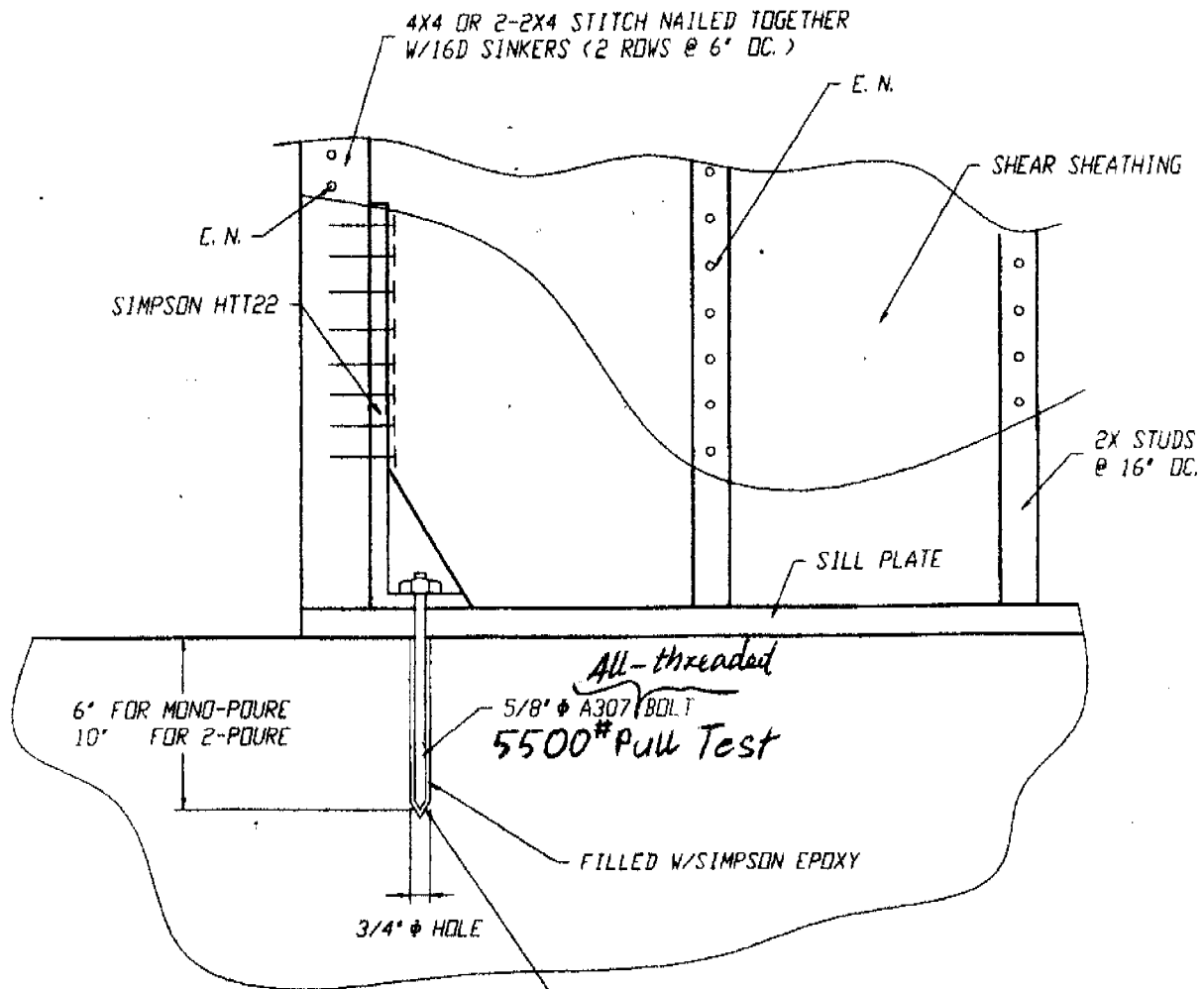


Date: 10/04/05

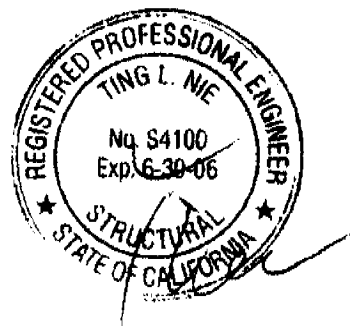
RE: Holdown replacement detail  
Project: Reflections at Rush River

HOLDOWN REPLACEMENT DETAIL

(NOTE: THIS DETAIL CAN BE USED FOR MISSING/MIS-PLACED  
HTT22, HPAHD22, PAHD42 HOLDDOWNS)



REMOVE DUST FROM HOLE/OIL-FREE  
COMPRESSED AIR, CLEAN AND BLOW OUT  
ALL DUST PRIOR TO APPLYING EPOXY



**INSTALLATION CERTIFICATE**

(page 1 of 4)

**CF-6R**

Site Address \_\_\_\_\_

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 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)

1.  $\geq$  reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) is 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>1</sup> Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency (EF, RE)	Standby Loss (%)	External Insulation R-value
GAS	A.O. Smith SUR-40-100	STD	N/A	1	40,000	40	.62	N/A	N/A

1 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.

**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

(Page 1 of 3)

CF-6R

1-1740

Site Address **Reflections @ River Rush**

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 pump)	CEC 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)
FAU	#GMS90904CXA	1	93%	ATTIC	4.2		80,000
GOODMAN							

#### Cooling Equipment

Equip. Type (pkg. Heat pump)	CEC 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)
A/C	#CLJ42	1	12.00	ATTIC	4.2		42,000
GOODMAN							

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 certification 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

*Betty Martino*  
Signature, Date 8-31-05

*Air Design, 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 <sup>2</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

### 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 certification 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

Compliance Forms

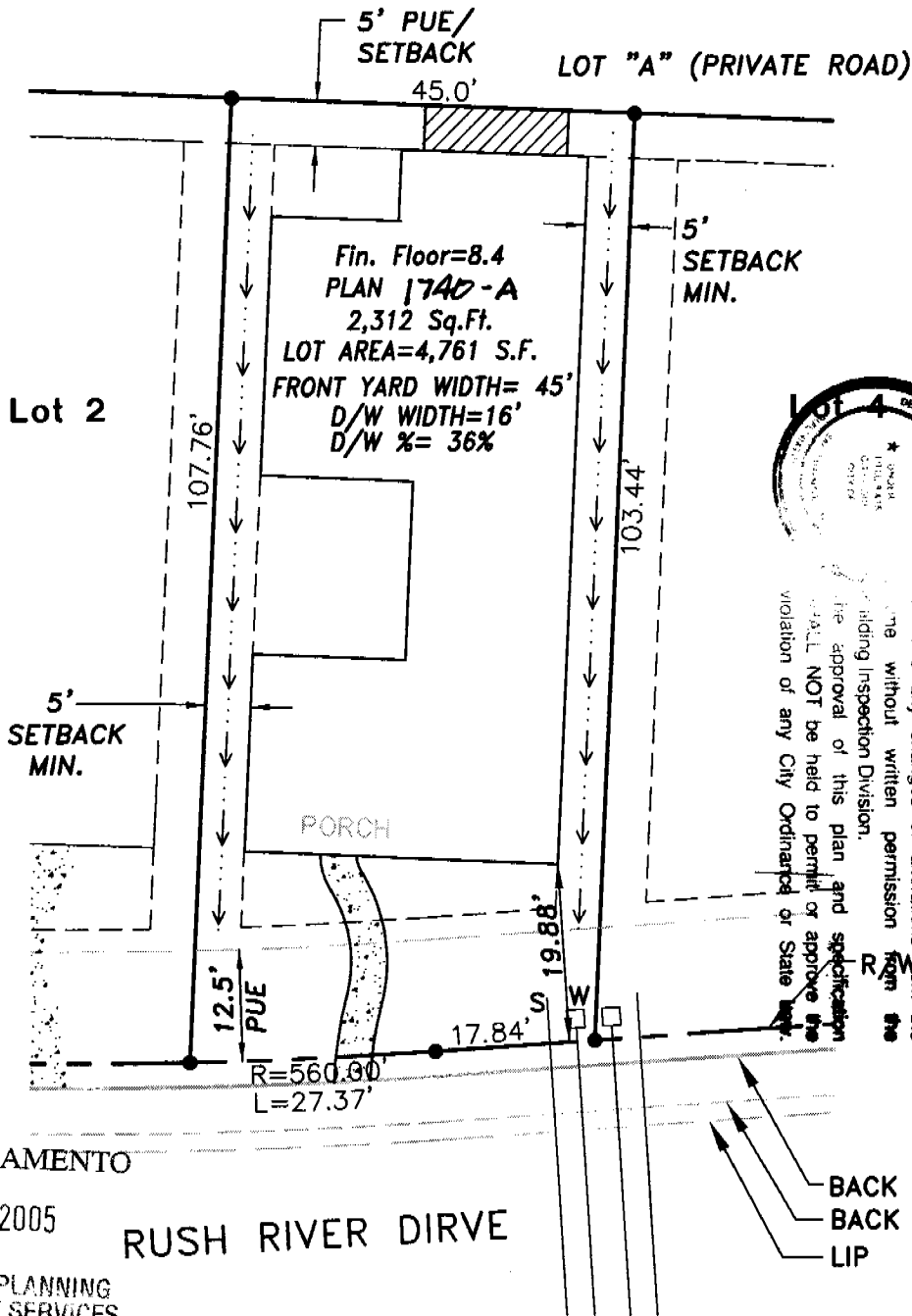
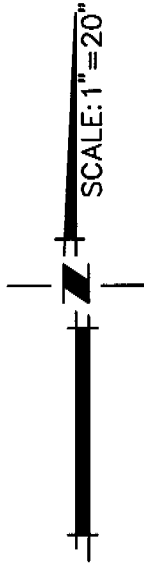
August 200

A-23

P. 02/05

FAX NO.

JAN-06-2006 FRI 09:21 AM



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.

PAID  
 CITY OF SACRAMENTO

AUG 25 2005

RUSH RIVER DRIVE

NEIGHBORHOODS PLANNING  
 AND DEVELOPMENT SERVICES

**NOTICE TO BUYER:** THIS PLOT PLAN IS PROVIDED AS A GENERAL LAYOUT OF THE PROPERTY, AND ALL INFORMATION ON THIS PLAN, INCLUDING TREE LOCATIONS AND SIZES, SETBACK DIMENSIONS, DRIVEWAY GRADES, AND WALL HEIGHTS AND LOCATIONS, ARE APPROXIMATE AND MAY VARY OR CHANGE WITHOUT PRIOR NOTICE.

**Plot Plan for  
 RUSH RIVER DRIVE**

Lot 3

**LEGEND:**

- W - WATER
- S - SEWER
- FH - FIRE HYDRANT
- C - CABLE PEDESTAL



**CLAYBAR ENGINEERING**

9354 ELK GROVE-FLORIN ROAD  
 ELK GROVE, CA 95624  
 Ph: 916-684-7301  
 Fax: 916-684-2627