CITY OF SACRAMENTO 1231 I Street, Sacramento, CA 95814

Site Address: 3324 PAUMANOK WY SAC

Parcel No:

HAMPTONS VILLAGE 1 ALLEY LOT #65

OWNER

Permit No: 0506200 Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

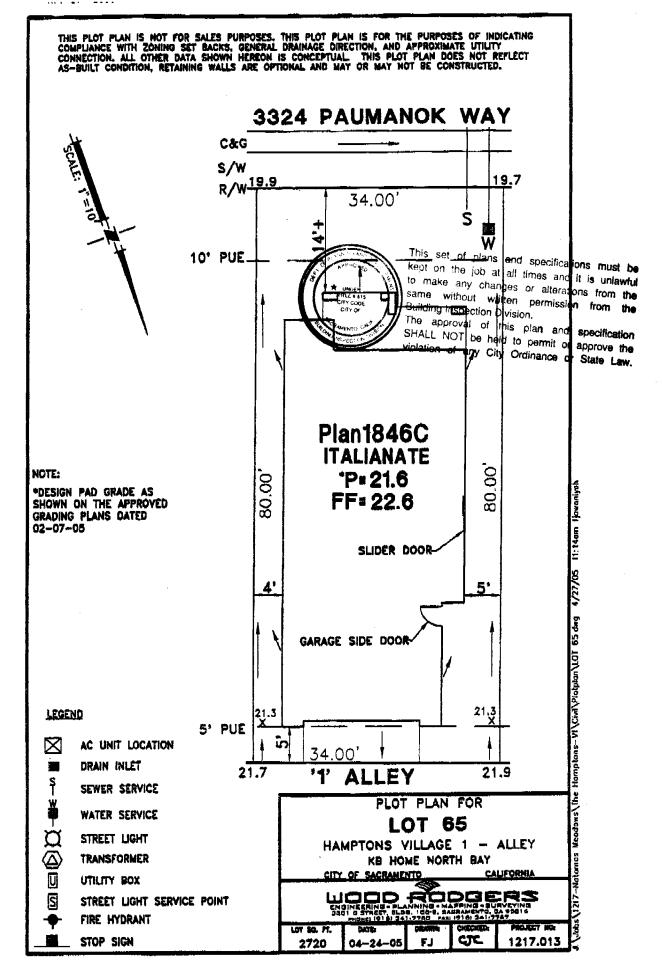
KB HOME NORTH BAY INC.

611 ORANGE DR VACAVILLE CA. 95687

ARCHITECT

the work for which this permit is issued (S	ENCY: I hereby affirm under penalty of perjury ec. 3097, Civ. C).	that there is a construction lending agency for the performance of
Lender's Name_	dnder's Address_	
(commencing with section 7000) of Divisi	CLARATION: I hereby affirm under penalty on 3 of the Business and Professions Code and my l	of perjury that I am licensed under provisions of Chapter 9 icense is in full force and effect.
prior to its issuance, also requires the appli License Law (Chapter 9 (commencing with	ions Code; any city or county which requires a pern cant for such permit to file a signed statement that he he Section 7000) of Division 8 of the Business and l	I am exempt from the contractors License Law for the following nit to construct, alter, improve, demolish, or repair any structure, ne or she is licensed pursuant to the provisions of the Contractors Professions Code) or that he or she is exempt therefrom and the nit subjects the applicant to a civil penalty of not more than five
who does such work himself or herself or the building or improvement is sold within	Code: The Contractors License Law does not app through his/her own employees, provided that such one year of completion, the owner-builder will hav	will do the work, and the structure is not intended or offered for ly to an owner of property who builds or improves thereon, and improvements are not intended or offered for sale. If, however, e the burden of proving that he/she did not build or improve for
I, as owner of the property, am exc The Contractors License Law does not app licensed pursuant to the Contractors Licens	lusively contracting with licensed contractors to colly to an owner of property who builds or improves to ELAW).	ns Call Thy project (Sec. 17044). Business and Professions Code: thereon, and who contracts for such projects with a contractor(s)
I am exempt under Sec.	B& PC for this reason:	
Date	Ower Signature	CENTER
private agreement relating to permissible of improvement or the violation of any private I certify that I have read this application and building construction and herby authorize re	application or accompanying drawings and that the r prohibited locations for such improvements. This agreement relating to location of improvements.	the representation of the applicant, that the applicant verified all the improvement to be constructed does not violate any law or so building permit does not authorize any illegal location of any apply with all city and county ordinances and state laws relating to the property for inspection purposes.
WORKER'S COMPENSATION DI I have and will maintain a certificat performance of work for which the permit is	ECLARATION: I hereby affirm under penalty of e of consent to self-insure for workers' compensation is issued.	on as provided for by Section 3700 of the Labor Code, for the
this permit is issued. My workers' compens	mpensation insurance, as required by Section 3700 ation insurance carrier and policy number are:	of the Labor Code, for the performance of the work for which
Carrier	Policy Number	Exp Date
		performance of the work for which this permit is issued, Ishall

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.



INSULATION CERTIFICATE

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

SITE ADDRES	3324 formess LOT 65 HAM	MOK WY	/. NATOMAS		0506	2 <i>0</i> 0
	NUMBER		CITY		STATE	
CEILINGS:						
BLOW:	MANUFACTURER	GREEN FIBER	_ THICKNESS	10.3"	R/VALUE	38
b .:			_			
BATTS:	MANUFACTURER	KNAUF	THICKNESS _	13"	_ _	38
		KNAUF	<u> </u>			
EXTERIOR WA	ALLS:				_	<u> </u>
	MANUFACTURER	KNAUF KNAUF	_THICKNESS	3.5"	_R/VALUE	13
FLOOR INSUL	ATION:	NAOI		<u> </u>	_	
	MANUFACTURER	KNAUF KNAUF	_THICKNESS _	6.5"	_R/VALUE	19
AIR INFILTRAT	FION: (TITLE 24)				_	
	YES XX	X NO				
OTHER:	 -					
			<u> </u>			
GENERAL CONT	FRACTOR: KB HON	/IES	LICENSE #	.,,		<u> 8'</u>
BY:		TITLE		DATE		
INSULATION CO	NTRACTOR: WESTER	RN INSULATION LP	LICENSE#	7944	484	
BY: DIME BECKY GUTA		TITLE AUTH. AGE	NT	_DATE	8/11/2	005
,						

Parmarok WY

0506200

Permit Number

An installation certificate is required to be posted at the building site of made available for all appropriate inspections. (The information An installation contained is required; however, use of this form to provide the information is employed.) 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)	and Model ≓	# of Identical Systems	iR value	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Bru/hr)	Heating Capacity (Bm/hr)	
	Camer 58STX070-12		<u>%08</u>	ATTIC	6	25,501	53,000	TT: 431 + 444
FURNACE :	Carrier 58STX070-12	<u> </u>	80%	ATTIC	6	25,363		PLAN 1699
FURNACE 1	Carrier 58STX070-12	1 "	80%	ATTIC	 _		53,000	PLAN-1717
FURNACE	Carrier 58STX090-16	7	80%	ATTIC	- 0	26,387	53,000	PLAN 1846
FURNACE (Carrier 58STX090-16	1	80%	ATTIC	6	29,738 31.616	70,000 70,000	PLAN 2013 PLAN 2251
								
Cooling Equ	uipment '							,

Equip. Type (pkg. Heat pump)		FOUNDAMENTALE;	(1. Efficiency (SEER, etc.) > CF/IR Value	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/ar)	Cooling Capacity (Btu/hr)	
A/C	Carrier 38BRC030*	1	13.0				(Buller)	
A/C	Camer 38BRC036*		13.0	ATTIC	<u> 6</u>	19,564	27,600	PLAN 1699
	Came: 38BRC036*	1	13.0	ATTIC	<u> 6 </u>	21,175		PLAN 1717
	Carrier 385RC042	 -	13.0	ATTIC	5	20,815		PLAN 1846
	Carrier 3SBRC042*	1	13.0	ATTIC ATTIC	- 6	25,809	38,600	PLAN 2013
						27,401		PLAN 2251

* = DXV valve installed as part of coll

(1) > reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: () is the actual equipment installed. 2) equivalent to or more I, the three significant value of the confliction of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings, and 3) equipment that made or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations of Part 6), where applicable.

BEUTLER CORPORATION

installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

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).

	STEMS: uipment							:	
Equip. Type (pkg. seat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc [≥CF-1R_yal	.)¹ Loc	ouct cation c. etc.)	Duct or Piping R-value	Heatin Load (Btu/hr	,	Heating Capacity (Btu/hr)
Cooling Eq								<u> </u>	
Equip. ype (pkg. eat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc. [≥CF-1R val) Loc	uct ation etc.)	Duct R-value	Cooling Load (Btu/hr)	=	Cooling Capacity (Btu/hr)
Efficience	dersigned, verify that equation that specified in the Vision of the Visi	al buildings	and 2) acrim	c (roint Cr	-ik) subm	itted for e	ompliance	with the requireme	Energy ents for
						11			·
	Nota			Installing 9	Subcontract	tor (Co. N	ame)	<u></u>	
Signature	, 17416			********************************					
_	ATING SYSTEMS:			OR Genera	al Contracto	or (Co. Na	me) OR O	wner	
VATER HI eater Type N	CEC Certified Mfi arns & Model Number I	Distribution Type (Std., Point-of-U5e)	If Recir- culation, Control Type	OR General # of Identical Systems	Rated ² Input (kW or Btu/hr)	or (Co. Na Tank Volume (gallons)	Effi- ciency ² (EF, RE)	Standby ²	Externa Insulatio R-value
VATER HI	CEC Certified Mfi	Type (Std.	culation,	OR General # of Identical	al Contracto Rated ² Input (kW	or (Co. Na Tank Volume	Effi- ciency ²		

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 thore 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

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

COPY TO: Building Department

HERS Provider (if applicable) Building Owner at Occupancy

January 4, 2001

(Page 2 of 13)

CF-61

3324 farmanok Wy

ies Address

Permit Number

FENESTRATION/GLAZING:

Manufacturar/Brand Name	Product U-Factor ⁱ (≲ CF- R value) ²	Product SHGC¹ (≤ CF-1 R value)²	# of Panes	Total Quantity of Like Product (Optional)	Square Peet	Exterior Shading Device or Overhang	Comments/Location/
(GROUP LIKE PRODUCTS)	سسنع ج		~			<u> </u>	Special Features
1. Pacific	- 	<u>54</u>	Phylinds Springs				12
2 ·	<u> </u>	XU	\geq				-10WE
3		Piv	2				
4	<u>. 35</u>	<u> PD</u>	2				
3							——————————————————————————————————————
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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.

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 regardements for manufactured devices (from Part 6), where applicable.

Amount Done

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 在"我"的

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.