

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0512891
Insp Area: 4
Thos Bros: 336J3

Site Address: 7639 RUSH RIVER DR SAC
Parcel No: 031-1440-024
N

REFLECTIONS @ RUSH RIVER LOT 7

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

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

OWNER

ARCHITECT

Nature of Work: MP 2021 2 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 _____

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

I am exempt under Sec. _____ B & PC for this reason: NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES
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 above-mentioned property for inspection purposes.

Date 8-25-05 Applicant/Agent 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

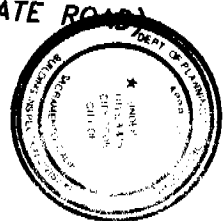
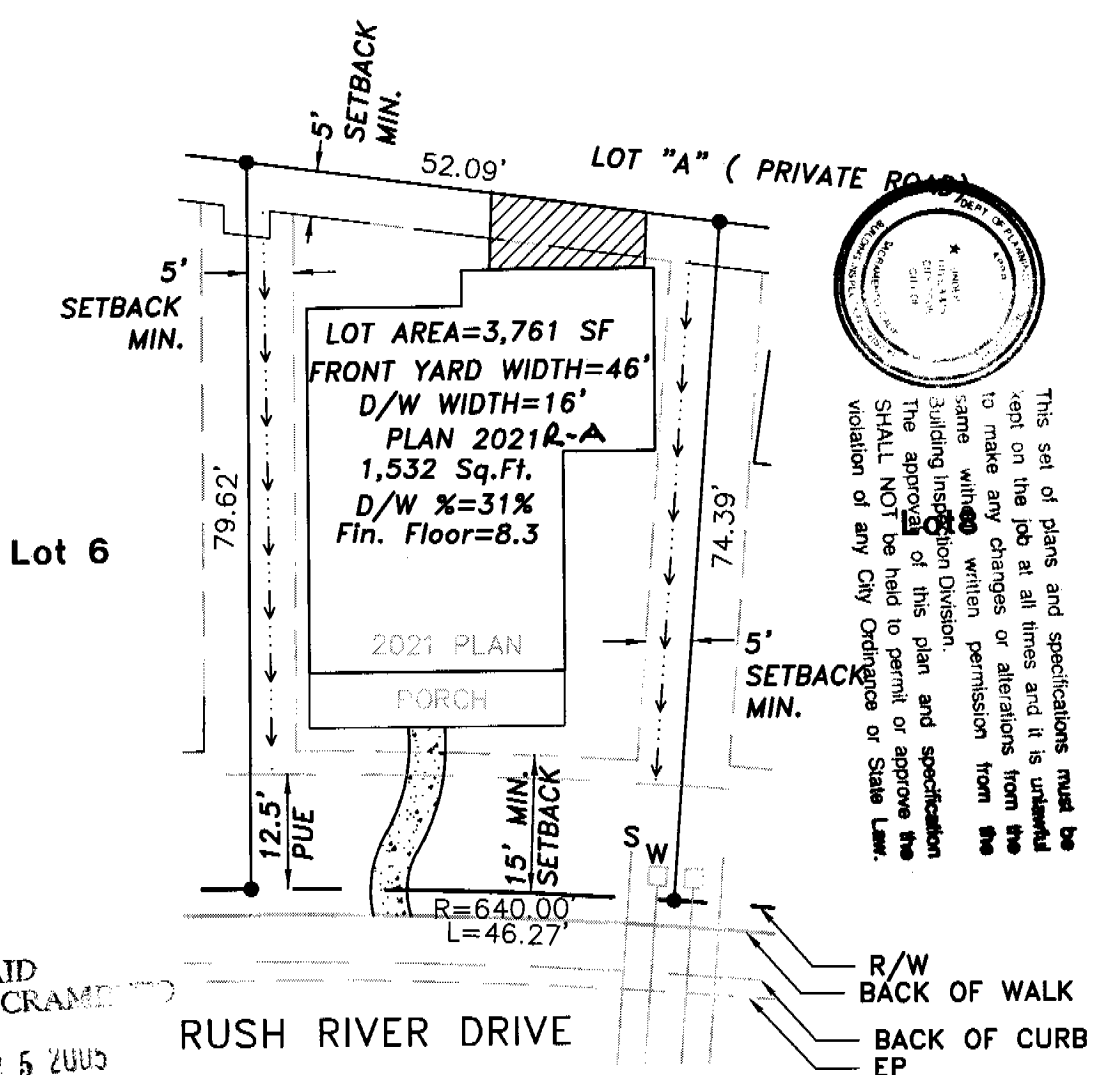
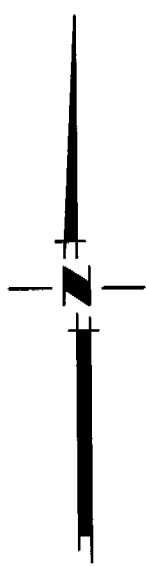
_____, (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should 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 _____

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.

REFLECTIONS AT RUSH RIVER
 ROTATION 1
 AUGUST 2005



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
 NEIGHBORHOOD PLANNING
 AND DEVELOPMENT SERVICES

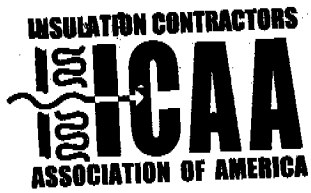
NOTICE TO BUYER: THIS PLOT PLAN IS PROVIDED AS A GENERAL LAYOUT OF THE PROPERTY, AND ALL INFORMATION ON THIS PLAN, INCLUDING TREE LOCATIONS AND SIZES, SETBACK DIMENSIONS, DRIVEWAY GRADES, AND WALL HEIGHTS AND LOCATIONS, ARE APPROXIMATE AND MAY VARY OR CHANGE WITHOUT PRIOR NOTICE.

**Plot Plan for
 RUSH RIVER DRIVE**

Lot 7

- LEGEND:**
 W - WATER
 S - SEWER
 U - UTILITY SERVICE
 C - CABLE PEDESTAL

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



INSULATION CONTRACTORS ASSOCIATION OF AMERICA

INSULATION CERTIFICATE

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

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

John E Johnson LOT # 7 TRACT # Reflections
STREET 7639 Rush River Dr CITY Elk Grove

EXTERIOR WALLS:
MANUFACTURER F/G THICKNESS/TYPE R-VALUE 13

CEILINGS:
BATT'S: MANUFACTURER F/G THICKNESS/TYPE R-VALUE 38

BLOWN IN:
MANUFACTURER CT THICKNESS 14 3/4 R-VALUE 38

SQUARE FOOTAGE COVERED 1212 NUMBER OF BAGS USED 28

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 ALCAL ARCADE CONTRACTING
CALIFORNIA CONTRACTORS LICENSE #815288
NEVADA CONTRACTORS LICENSE #0055201 DATE 12/2/05

SIGNATURE TITLE
Installer

0512891

INSTALLATION CERTIFICATE		(Page 4 of 12) CF-6R
Site Address 7639 Rush River	Permit Number	
Relocations @ Rush River Lot # 7		

INSTALLER COMPLIANCE STATEMENT FOR DUCT LEAKAGE

INSTALLER COMPLIANCE STATEMENT
The building was: Tested at Final Tested at Rough-in

INSTALLER VISUAL INSPECTION AT FINAL CONSTRUCTION STAGE:

I have at least one supply and one return register and verify that the spaces between the register boot and the interior finishing wall are properly sealed.

If the house rough-in duct leakage test was conducted without an air handler installed, inspect the connection points between the air handler and the supply and return plenums to verify that the connection points are properly sealed.

I inspect all joints to ensure that no cloth backed rubber adhesive duct tape is used.

The distribution system is fully ducted (i.e., does not use building cavities as plenums or platforms returns in lieu of duct).

DUCT LEAKAGE REDUCTION
Procedures for field verification and diagnostic testing of air distribution systems are available in RACM, Appendix RC4.3

NEW CONSTRUCTION:		Measured Values	
1	Initial Pressurization Test Results (CFM @ 25 Pa)	54	
2	Initial Test Leakage Flow in CFM: Fan Flow: Calculated (Nominal: <input type="checkbox"/> Cooling <input checked="" type="checkbox"/> Heating) or <input type="checkbox"/> Measured Fan Flow is Calculated as 400 cfm/ton x number of tons or as 21.7 cfm/(kBtu/hr) x Heating Capacity in Thousands of Btu/hr, enter total calculated or measured fan flow in CFM here:	1400	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
3	Final Leakage Percentages $\leq 6\%$ for Final or $\leq 4\%$ at Rough-in: $100 \times [(3.8 \text{ (Line # 1)}) / 54 \text{ (Line # 2)}] / 1400$	3.8	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
ALTERATIONS: Duct System and/or HVAC Equipment Change-Out			
4	Initial Test Leakage Flow in CFM from Pre-Test of Existing Duct System Prior to Duct System Alteration and/or Equipment Change-Out		
5	Final Test Leakage Flow in CFM from Final Test of New Duct System or Altered Duct System for Duct System Alteration and/or Equipment Change-Out.		
6	Reduction in Leakage for Altered Duct System (Line # 4) Minus (Line # 5) (Only if Applicable)		
7	Final Test Leakage Flow in CFM to Outside (Only if Applicable)		<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
8	Final Test Leakage Flow in CFM to Outside (Only if Applicable) New Duct System - Pass if Leakage Percentage $\leq 6\%$ for Final $100 \times [(Line \# 5) / (Line \# 2)]$		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
TEST OUTCOME VERIFICATION STANDARDS: For Altered Duct System and/or HVAC Equipment Change-Out			
9	Final Test Leakage Percentage $\leq 15\%$ [$100 \times [(Line \# 5) / (Line \# 2)]$]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
10	Final Test Leakage to Outside Percentage $\leq 10\%$ [$100 \times [(Line \# 7) / (Line \# 2)]$]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
11	Final Test Leakage Reduction Percentage $\geq 60\%$ [$100 \times [(Line \# 6) / (Line \# 4)]$]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
12	Final Test Leakage Reduction Percentage $\geq 60\%$ [$100 \times [(Line \# 6) / (Line \# 4)]$] Verification by Smoke Test and Visual Inspection		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Pass if One of Lines # 9 through # 12 pass			<input type="checkbox"/> Pass <input type="checkbox"/> Fail

I, the undersigned, verify that the above diagnostic test results were performed in conformance with the requirements for compliance credit. I, the undersigned, also certify that the newly installed or retrofit Air-Distribution System Ducts, Plenums and Registers comply with Mandatory requirements specified in Section 150 (m) of the 2005 Building Energy Efficiency standards.

Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner	Air Design
Signature: <i>[Signature]</i>	Date: 3-12-06

INSTALLATION CERTIFICATE

CF-6R

Site Address 7639 Rush River Dr.

Lot 7

Permit Number

FENESTRATION/GLAZING:

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

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Item #'s
(if applicable)

Signature, Date

[Handwritten Signature]

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