

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0511931

Insp Area: 2

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 8566 WEST WING DR SAC
Parcel No: SHELDON WHITEHOUSE LOT # 23

CONTRACTOR
CENTEX HOMES
2527 CAMINO RAMON STE. #250
SAN RAMON, CA 94583

OWNER

ARCHITECT
RITNER ARCHITECTURAL GROUP
20201 SW BIRCH ST. STE. 150
NEWPORT BEACH, CA 92660

Nature of Work: MP2242 2 STORY 8 RM 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 N/A 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 825943 Date 8/29/05 Contractor Signature Debbi Stowers

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. 7024, 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 _____

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 8/29/05 Applicant/Agent Signature Debbi Stowers

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 ZURICH AMERICAN INSUR Policy Number WC8322097-08 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 8/29/05 Applicant Signature Debbi Stowers

WARNING: FAILURE TO SECURE WORKERS' 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.

PAID
CITY OF SACRAMENTO
AUG 29 2005
NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 8566 West Wing Dr. Assessor Parcel # _____
Lot Number: 23 Subdivision Sheldon Whitehouse - Phase 1

OWNER INFORMATION:

Legal Property Owner: Center Homes Phone# 788-9087
Owner Address: 3700 Douglas Blvd. #150 City Roseville State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor: Center Homes Lic. # 825943 Phone # 788-9087 Fax 788-9012

PROJECT INFORMATION:

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of Stories: 2 No. of Rooms: _____ Street Width: _____
 1st Floor Area 1102 2nd Floor Area 1140 Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living	<u>2242</u>
Garage/Storage	<u>495</u>
Decks/Balconies	<u>87</u>
Carports	<u>—</u>

SCOPE OF WORK: New Home Construction
MP # 2242

- | | | |
|---|---|---|
| <input type="checkbox"/> Information Above Complete | <input type="checkbox"/> AR Flood Waiver Required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation Files Checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval |
| <input type="checkbox"/> Standard Setbacks | <input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Special Fee Districts Apply: |
| <input type="checkbox"/> County Sewer | | |

~THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT~

2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE

11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION

a) Assessors Parcel Number	c) Owners Name
b) New Floor Area	d) Project Address

Date:

Received by: (staff)

Permit #

INSTALLATION CERTIFICATE

Permit Number
6511931

Site Address

566 WEST WIND DR

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 #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-IR value	Duct Location (at/c, 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 #	# of Identical Systems	(1) Efficiency (SEER, etc.) > CF-IR value	Duct Location (at/c, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

(1) > means 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-IR) 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 Part 6), where applicable.

Signature, Date

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

WATER HEATING SYSTEMS:

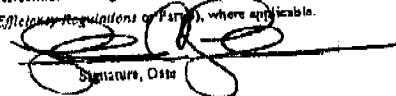
Water Heater Type	CEC Certified Mfr Name & Model #	Disturbance Type (Std. points of use)	If Recirculation Control Type	# of Identical Systems	(2) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(3) Efficiency (EF, RE)	(4) Standby Loss (%)	External Insulation R-value
Gas	BRADFORD WHITEHORN M-1-50S6FPA	SA	N/A	N/A	40,000	50	0.67	N/A	N/A

(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.

Facets & Shower Heads:

All facets 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-IR) 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 Part 6), where applicable.


Signature, Date

BZ Plumbing Co., Inc.
Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

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

INSTALLATION CERTIFICATE

(page 2 of 4)

CF-6R

Site Address: **Centex Homes - Serenade**
8566 West Wing Plan 2242
 FENESTRATION/GLAZING:

Permit Number
0511931

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Operator Type (e.g., fixed, slider)	Manufactured Products Labeled U-value \leq CF-1R value ²	Site Built Products # of Panels	Default U-Value ²	Quantity (Colored)	Total Square Feet	Comments/Special Features
1. 6130	HV	.35				21	
2. 7031	3D	.34				48	
3. 6320	PD	.33				56	
4. 6130	3H	.34				8	
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

² Installed U-value must be less than or equal to value from CF-1R. Alternatively, installed weighted average U-value for the total fenestration area is less than or equal to value 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 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 product meets or exceeds the appropriate requirements for manufactured devices (from Part 5), where applicable.

<u>4</u> Item #s (if applicable)	<u>[Signature]</u> 7/2/05 Signature, Date	<u>Milgard Mfg.</u> Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner
<u> </u> Item #s (if applicable)	<u> </u> Signature, Date	<u> </u> Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner
<u> </u> Item #s (if applicable)	<u> </u> Signature, Date	<u> </u> Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 Building Owner at Occupancy

Compliance Forms

July 1, 1995

INSTALLATION CERTIFICATE

CF-6R

Centex - Serenada

Site Address

8566 WEST WIND DR

Permit Number

0511931

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).

HYAC SYSTEMS:

Heating Equipment

Table with columns: Equip. Type (pkg. Heat pump), CBC Certified Mfr Name and Model #, # of Identical Systems, (1) Efficiency (AFUE, etc.) > CF-1R Value, Duct Location (attic, etc.), Duct or Piping R-value, Heating Load (Btu/hr), Heating Capacity (Btu/hr), and Plan Reference.

Cooling Equipment

Table with columns: Equip. Type (pkg. Heat pump), CBC Certified Compressor Unit Mfr Name and Model #, # of Identical Systems, (1) Efficiency (SEER, etc.) > CF-1R Value, Duct Location (attic, etc.), Duct R-value, Cooling Load (Btu/hr), Cooling Capacity (Btu/hr), and Plan Reference.

TXV - Indicates Thermal Expansion Valve On Coil

(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.

Handwritten signature and date: Mary King 3-29-05

Beutler Corporation

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Table with columns: Heater Type, CBC Certified Mfr Name & Model #, Distribution Type (Std. point of use), If Recirculation Control Type, # of Identical Systems, (2) Rated Input (kW or Btu/hr), Tank Volume (gallons), (2) Efficiency (EF, RE), (3) Standby Loss (%), and External Insulation R-value.

(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.

Facets & Shower Heads:

All facets 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

DATE: 11-29-05
PROJECT NO. 2007
PROJECT: CV/CENTEX HOMES
LOCATION: SERENADE LOT-23

DSA FILE/APPL. NO. _____
OSHPD NO. _____
PERMIT NO. _____
WEATHER: _____ TEMP: _____

PROOF LOAD TORQUE WITNESSING

Testing was performed on the following items. All tests were performed with the following calibrated equipment:

RAM: _____ GAGE: _____ TORQUE WRENCH: _____
RAM: _____ GAGE: _____ TORQUE WRENCH: _____

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST

Type of epoxy / grout used: SIMPSON SET-22 / EXP / 07 Method of application / cleaning: AIR BRUSH
 Visual inspection was performed on THE PLACEMENT OF TWELVE 5/8" DIA ANCHOR BOLTS IN A PRE-DRILLED AND CLEANED HOLE 3/4" DIA X 12" EMBED AT SHEARWALL LOCATIONS

Show up / Stand by time. Job Canceled / Delayed due to: _____
 All non-compliance items were brought to the attention of: _____ at the job site.

NON-COMPLIANCE REPORT ATTACHED ADDITIONAL TESTS ATTACHED

NOTES: _____

To the best of my knowledge, the above ~~WAS~~ WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: _____ Inspector: 

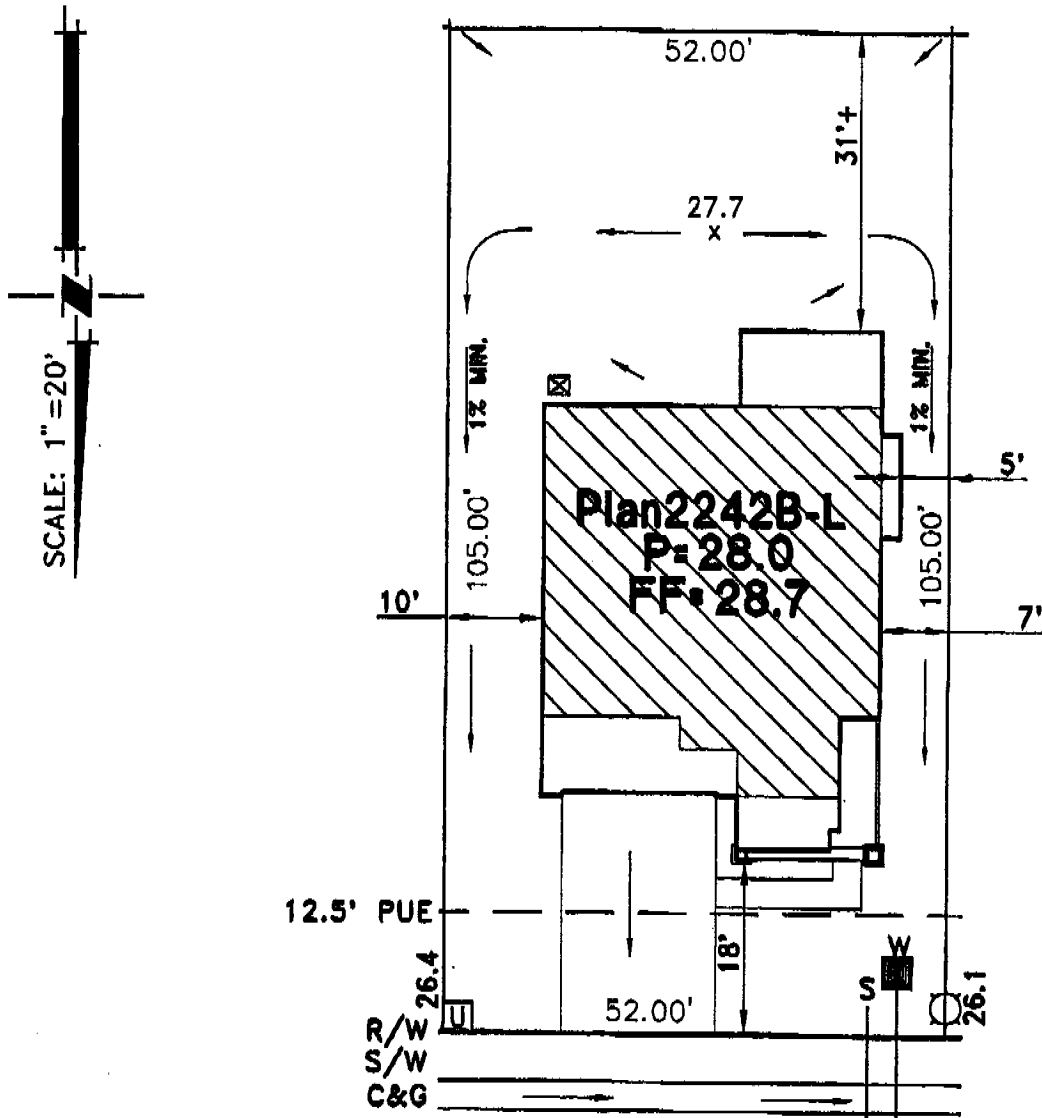
3121 Diablo Avenue
Hayward CA 94545

4741 Pell Drive #8
Sacramento CA 95838

520 Mercantile Street #A
Cotati, CA 94931

310 W 5th Street #203
Santa Ana CA 92701

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALLS ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.

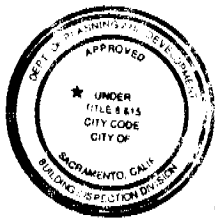


PAID CITY OF SACRAMENTO WEST WING DRIVE AUG 29 2005

NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES

LEGEND

- ☒ AC UNIT LOCATION
- DRAIN INLET
- S SEWER SERVICE
- W WATER SERVICE
- ☉ STREET LIGHT
- ▲ TRANSFORMER
- UTILITY BOX
- ⊞ STREET LIGHT SERVICE POINT
- FIRE HYDRANT
- STOP SIGN



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.

SHELDON WHITEHOUSE - PHASE 1 CENTEX HOMES PLOT PLAN FOR LOT 23

APN:
LOT AREA: 5,460 S.F.
ADDRESS: 8566 WEST WING DRIVE
CITY OF SACRAMENTO, CALIFORNIA

WOOD RODGERS
ENGINEERING • PLANNING • MAPPING • SURVEYING
3501 O STREET, BLDG. 100-B, SACRAMENTO, CA 95816
PHONE: (916) 841-7799 FAX: (916) 841-7797
7/13/2005 1212.003

J:\Jobs\1212-Sheldon-Whitehouse\Sheldon-Whitehouse Phase 1\Civil\Plotplan\LOT 23.dwg 7/13/05 10:53am dmerlo

CERTIFICATION OF INSULATION

ADDRESS		SACRAMENTO BUILDING PRODUCTS							
<p style="font-size: 2em; font-family: cursive;">CENTEX</p> <p style="font-size: 2em; font-family: cursive;">SERVAGE</p>		LOT # <p style="font-size: 2em; font-family: cursive;">7023</p>		<input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026 <input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675 <input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675					
		DATE INSULATION COMPLETED							
WALLS			CEILING			FLOORS			
(SQUARE FEET)			(SQUARE FEET)			(SQUARE FEET)			
TYPE OF INSULATION			TYPE OF INSULATION			TYPE OF INSULATION			
MATERIAL FIBERGLASS			MATERIAL FIBERGLASS			MATERIAL FIBERGLASS			
FORM BATTS			FORM BATTS & BLOW			FORM BATTS			
MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.			
MANUFACTURER			MANUFACTURER			MANUFACTURER			
CT	OC	JM	CT	OC	JM	CT	OC	JM	
BAGS									
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	
13 19	3.5 5.5	38	12"-4.75"	—	—	—	—	—	
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE									
MATERIAL FIBERGLASS		FORM BATTS		R VALUE			MANUFACTURER		
							CT	OC	JM
MATERIAL FOAM						MANUFACTURER			
						HILTI	HANDY FOAM		
THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.									
SIGNATURE — INSULATION CONTRACTOR				TITLE MANAGER		DATE 1/3/06			
SIGNATURE — GENERAL CONTRACTOR				TITLE		DATE			
REMARKS									