## CITY OF SACRAMENTO 1231 I Street, Sacramento, CA 95814

Site Address: 10 BRONCO CREEK CT SAC

Parcel No:

NATOMAS PARK COMMONS LOT # 4

<u>OWNER</u>

Thos Bros: Sub-Type: NSFR

Permit No: 0508124

Housing (Y/N): N <u>ARCHITECT</u>

Insp Area:

CONTRACTOR
LENNAR RENAISSANCE INC
1075 CREEKSIDE RIDGE DR #100 ROSEVILLE, CA 95678

N

CONSTRUCTION LENDING AGENC the work for which this permit is issued (Sec. 30	Y: I hereby affirm under penalty of perjury that there is a 1997, Civ. C).	construction lending agency for the performance of
Lender's Name	dnder's Address	
(commencing with section 7000) of Division 3 of License Class License Number 7323	ARATION: I hereby affirm under penalty of perjury of the Business and Professions Code and my license is in finds.  Date Office Contractor Signature	The and effect.
reason (Sec. 7031.5, Business and Professions prior to its issuance, also requires the applicant License Law (Chapter 9 (commencing with Sec.	I hereby affirm under penalty of perjury that I am exemple Code; any city or county which requires a permit to construction for such permit to file a signed statement that he or she is listen 7000) of Division 8 of the Business and Professions of Section 7031.5 by any applicant for a permit subjects to	ict, alter, improve, demolish, or repair any structure, densed pursuant to the provisions of the Contractors Code) or that he or she is exempt therefrom and the
sale (Sec. 7044, Business and Professional Cod who does such work himself or herself or throu	ployees with wages as their sole compensation, will do the le: The Contractors License Law does not apply to an own 19th his/her own employees, provided that such improvement 19th year of completion, the owner-builder will have the burden	er of property who builds or improves thereon, and ts are not intended or offered for sale. If, however
The Contractors License Law does not apply to licensed pursuant to the Contractors License La	vely contracting with licensed contractors to construct the an owner of property who builds or improves thereon, and w).	who contracts for such projects with a contractor(s
I am exempt under Sec.	B& PC for this reason:	N. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Date	Ower Signature	A Comment of the Comm
measurements and locations shown on the apprivate agreement relating to permissible or primprovement or the violation of any private agree.  I certify that I have read this application and stabuilding construction and herby authorize representation.  Date  ORKER'S COMPENSATION DECI	the applicant represents, and the city relies on the represent plication or accompanying drawings and that the improver ohibited locations for such improvements. This building perment relating to location of improvements.  In the that all information is correct. I agree to comply with all sentative(s) of this city to enter upon the abovementioned properties.  Applicant/Agent Signature  Applicant/Agent Signature  ARATION: I hereby affirm under penalty of perjury on the consent to self-insure for workers' compensation as provided.	nent to be constructed does not violate any law or cermit does not authorize any illegal location of any city and county ordinances and state laws relating to coperty for inspection purposes.  When the constructed does not violate any law or cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not violate any law or cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not authorize any illegal location of any cermit does not always and cermit does not always any cermit does not always and cermit does
performance of work for which the permit is iss	ensation insurance, as required by Section 3700 of the Lab	
Carrier OLD REPUBLIC INS. CO.	Policy Number MWC11114500	Exp Date 02/28/2007
not employ any person in any manner so as to	ne permit is for \$100 or less) I certify that in the performant become subject to the workers' compensation laws of Califo 700 of the Labor Code, I shall forthwith comply with those papers applicant Signature	ornia/and agree that if I should become subject to the
<del></del>	KER'S COMPENSATION COVERAGE IS UNLAWFU	I 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.





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MANUFACTURER	THICKNESS/TYPEINCHES THICKNESS/TYPEINCHES	VALUE VALUE R- VALUE	

GENERAL CONTRACTOR	
CALIFORNIA CONTRACTORS LICENSE #	
	DATE
SIGNATURE	TITLE
INSULATION CONTRACTOR ARCADE INSULATION	ULATION
CALIFORNIA CONTRACTORS LICENSE #815286	
NEVADA CONTRACTORS LICENSE #55201	1.1. DATE (1/4/ 1/05
	J/45/1
SIGNATURE	TITLE



## Installation Card

Job Address			Stucco System Tradename: KWIK KOTE	
COMMONS AT NATOMAS	Lot: 00004-	1	Name of Stucco Manufacturer: KWIK KOTE CORP.	
10 BRONCO CREEK COURT			ICC Evalutaion Service, Inc. Evaluation Report ESR-1711	
SACRAMENTO			Date of Job Completion	<del></del>
	Stucco C	ontractor		<del>.</del>
	Name:	KENYON PLASTERIN	IG, INC.	_
	Address:	PO BOX 2077		_
		North Highlands CA, 9	95660	_
	Telephor	e Number: 916/349-81	91	_
	<u>Approve</u>	Contract Number as is	ssued by KWIK KOTE. 1001	
This is to certify that the stucco sys	tem on the b	uilding exterior at the ab s.	pove address has been installed in accordance with the evaluation $1/-8-05$	utation report
Signature of authorized representa	tive of stucco	contractor	Date	
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InstCard.frx

STALLATION CERTIFICATE					page 2 of	4) 201255====	
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e Address : _//	grange	2 (10)	<u> </u>			#+#+C II	0508124
MESTRATION/GLAZING:							, •
	•	Manufactured					
	Operator	Products	g: b_:11	i handanka		Total	
	Type (e.g.,	Labelled		t Products Default	Quantity	Square	Comments/
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nufacturer/Brand Name	slider)	CF-IR value)2	Panes	fi-ASTOR-	(Ohcroner)	. tear	
ROUP LIKE PRODUCTS)						9.0	
WINDFORD WINDOW	Fixed	0_320					
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I, the undersigned, verify that the fenestration/glazing listed above my signature (1) is the actual fenestration product installed; (2) is the 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) 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
Item #s (if applicable)	Signature, Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner
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<sup>\*</sup> Product mix and u-values reflect plan changes as of 11/08/05

NSTALI	LATION CERT	IFICAL					
					Permit N	umber 05	- 0 5%
information p	n certificate is required to rovided on this form is ref final inspection, a copy or Section 10-103(b).	be posted at quired; howe must be provi	the building site of over, use of this for ided to the building	r made avail m to provide g departmen	able for all ap e the informati t (upon reques	propriate inspection is optional.) and the build	etions. (The After ling owner at
HVAC SYS' Heating Equip.	TEMS:	# of blenucal	Efficiency (AFUE, etc.) <sup>1</sup> (2CF-1R yalus)	Once Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/ht) _17.810	Heating Capacity (Biwhr) 51,000
Type (pkg.	Bryant 310JAV036070	Systems	80	_Attic			
Cooling Equip. Type (pkg. hrat pump.) Split A/C	CEC Certified Compressor Unit Mir Name and Model Number Bryant 53/GNX030	# of ldenucal Systems	Efficiency (SEER, etc.) ICT-IR valuel 14.0	Duet Location (atric. re.) Affic	Duct R.value 6	Cooling Load (Bruthr) 20036	Cooling Capacity (Biwh) 28,80
1. ≥ re I, the i cfficie Efficie manuf	ads greater than or equal indersigned, verify that early than that specified in the many Standards for resident actured devices (from the later, Date	to.  quipment list he certificate nial building Appliance E	s, and 3) equipments, and 3) equipments	ons or Part 6	echanical, Ir	ic.	
efficie Efficie manu	actured devices (from the latter, Date	nial building Appliance E 10/17/05  Distribution	s, and 3) equipality  Efficiency Regulation  If Recirculation.	ons or Part 6  Deal M  Installing Sub  OR General C  # of Members	Mechanical, Ir Mechanical, Ir Mechanical, Ir Mechanical (Co Contractor (Co Rated) Ta Input (kW Vol or Buylar) (gal	ic.	Standby' li
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Cificie Efficie manuf  WATE  Heater Type  LGS  2 For For I For I 3. R-12  Fauc All fa	actured devices (from the latting Date  R HEATING SYSTEMS  CEC Certified Mfr.  Name & Model Number	Distribution Type (Ste Point-of-U for storage was a stalled are constructed in the construction of the con	on If Recirculation, Country Type  Control T	Deal M Installing Sut IN General (  # of Identical Systems  # description of Identical Systems  # of I	Rated Tainput (kW Void or Biu/hr) (gall void see and heat pure rery Efficiency, Sies than 0.58.  Trust to Title  1) the actual of Form CF-1R) signment that Regulations or	o. Name)  o. Name)  o. Name)  o. Name)  or O  onk  Efficiency,  floors)  (EF, RE)  or water heaters, litandby Loss and Ra  24, Part 6, Sect  quipment instal  submitted for	Standby' In Loss (%)  ist Energy Factor ated Input.  tion 111.  Illed: 2) equiva- compliance weeds the appr applicable.

