

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0400772
Insp Area: 4
Thos Bros: 257-B4

Site Address: 2326 BAY HORSE LN SAC
Parcel No: 201-0960-062
N

Sub-Type: N1/2PLEX
HERITAGE @ NATOMAS PARK VIL 19 LOT 72 Housing (Y/N):
N

CONTRACTOR
US HOME
2366 GOLD MEADOW DR STE 100
GOLD RIVER, CA 95670 77041

OWNER

ARCHITECT

Nature of Work: MP1296 1 STORY 5 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 License Number 451839 Date 1/26/4 Contractor Signature Don McCluskey

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).

____ 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 1/26/4 Applicant/Agent Signature Don McCluskey

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 OLD REPUBLIC INS. CO. Policy Number MWC10815000 **PAID** **CITY OF SACRAMENTO** **JAN 26 2004** Exp Date 11/01/2004

____ (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 I shall become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 1/26/4 Applicant Signature Don McCluskey

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.

CERTIFICATION OF INSULATION

US Home LOT # *376*
Duplexes
Heritage
2326 Bay Horse

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1831, RENO, NV 89505 LIC. #10675
- 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

DATE INSULATION COMPLETED

PART I GENERAL

PART II AREAS INSULATED

PART III CERTIFICATION

CELLS			CEILING			FLOORS		
(SQUARE FEET)			(SQUARE FEET)			(SQUARE FEET)		
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.		
CT	OC	JM	CT	OC	JM	CT	OC	JM
13	346	38	19	516	14			

MATERIAL FIBERGLASS	FORM BATTS	R VALUE	MANUFACTURER		
			CT	OC	JM
MATERIAL <i>FOAM</i>		MANUFACTURER			
		HILTI		HANDY FOAM	

INSULATION SHALL BE INSTALLED IN CONFORMANCE WITH THE FOLLOWING MATERIAL STANDARDS AND TEST METHODS:

SIGNATURE — INSULATION CONTRACTOR	TITLE MANAGER	DATE
SIGNATURE — GENERAL CONTRACTOR <i>J. L.</i>	TITLE	DATE <i>7-8-04</i>

REMARKS

ATTIC COPY

INSTALLATION CERTIFICATE

CREATIVE WINDOW CONCEPTS

916 638 0882 P.01/01

Lot 374 2326 Bay Horse Ln

Site Address

Form Number

WINDSTATION GLAZING:



Manufacturer Brand Name (GROUP LIKE PRODUCTS)	Operator Type (4-6- ft/ft)	Manufacturer Labeled U-value (2 CF-IR value) ¹	Site Built Product # of Panels	Default U-Value ¹	Quantity (Optional)	Total Square Feet	Comments/ Special Features
1. Philips 800N	SH	.38	2	NO T			Performance Plus LowE
2.	HS	.38	2	NO T			
3.	Fix	.36	2	NO T			
4.	SGD	.35	2	NO T			
5.	Radius	.35	2	NO T			
6.				NO T			
7.				NO T			
8.				NO T			
9.				NO T			
10.				NO T			
11.				NO T			
12.				NO T			
13.				NO T			
14.				NO T			
15.				NO T			

¹ Installed U-value must be less than or equal to value from CF-IR. Alternatively, installed weighted average U-value for the total fenestration area is less than or equal to value from CF-IR.

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-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]
Signature, Date

Creative Window Concepts
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

Item #s
(if applicable)

Signature, Date

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

COPY TO: Building Department
Building Owner at Occupancy

Revised March 1, 1996



TOTAL P.01

LOT 372 2326 Bay Horse Ln
 BEUTLER CORPORATION 7 2003040

NO. 873 8013

INSTALLATION CERTIFICATE

US Home Corporation - Heritage Park Product Line 4 - Sacramento - Plan 1296

CF-6R

Site Address

Permit Number

An installation certificate is required to be posted in 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 or occupancy, per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (Furnace, Heat pump)	CBC Certified Mfg Name and Model #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-18 value	Duct Location (Attic, etc.)	Duct or Flange R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	TRK #P411/A12.048	1	0.80	Attic	4.2	18,265	40,000

Cooling Equipment

Equip. Type (A/C, Heat pump)	CBC Certified Compressor Unit Mfg Name and Model #	# of Identical Systems	(1) Efficiency (SEER, etc.) > CF-18 value	Duct Location (Attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
A/C	York #HFC024	1	12.0	Attic	4.2	17,171	23,000

(1) > equals 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-18) 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
 Signature, Date

Beutler Corporation
 Installing Subcontractor (Co. Name)
 OR Owner Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Water Type	CBC Certified Mfg Name & Model #	Distribution Type (hot, cold, etc.)	# Recirculation Control Type	# of Identical Systems	(1) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(2) Efficiency (EF, UEF)	(3) Standby Loss (%)	External Insulation R-value
GAS	Rheem #11-V40M	STH	NA	0	40,000	40	.56		R-6.7

(1) For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, the Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), the Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, the Recovery Efficiency and Rated Input.
 (2) R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

Fixtures & Shower Heads:

All fixtures and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 111.

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-18) 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 04-04-03
 Signature, Date

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

COPY TO: Building Department
 MERS Provider (if applicable)
 Building Owner or Occupancy

NO. 1312 P. 8/19

APR 3 2003 3:33PM Mail U.S. HOME HERITAGE PARK

1-910-513-5407, From: Gary Herzig