

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0402188
Insp Area: 2
Thos Bros: 337H2

Site Address: 7492 FRANKLIN BL SAC
Parcel No: 049-0293-008

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

CONTRACTOR
BROWN CONSTRUCTION INC
1465 ENTERPRISE BLVD STE 100
WEST SACRAMENTO, CA 95798

OWNER
SHRA / C/O KEVIN ODELL
630 I ST
SACRAMENTO CA 95814

ARCHITECT

Nature of Work: INTERIOR REMODEL PLUS ALL SITE WORK ON PHASE 1

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 396120 Date 2-23-04 Contractor Signature [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).

CITY OF SACRAMENTO

____ I am exempt under Sec. _____ B & PC for this reason: _____
Date _____ Owner Signature FEB 23 2004

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 2-23-04 Applicant/Agent Signature [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 COMP.INSURANCE Policy Number 1625157 Exp Date 03/05/2004

____ (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 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 2-23-04 Applicant Signature [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.

CITY OF SACRAMENTO

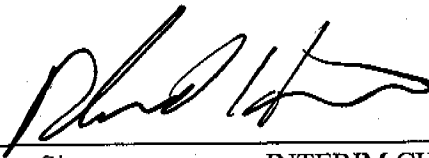
30 DAY TEMPORARY
Certificate of Occupancy
For Information Contact (916) 264-5716

Building Address: 7492 FRANKLIN BLVD. Permit No.: 0402188
Building Use: APARTMENTS Occupancy: R-1
Building Owner: SHRA Construction Type: UNKNOWN
Owner Address: 630 I ST. SACRAMENTO, CA. 95814 Sprinkled? [] Yes [X] No
Portion of Building Occupied: ENTIRE Area: UNKNOWN Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

08-17-04
Date

By: (Print)



Sign

RON BEEHLER
INTERIM CHIEF BUILDING OFFICIAL

[TCO approvals:: SB,SB]

CBC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO

30 DAY TEMPORARY
Certificate of Occupancy
For Information Contact (916) 264-5716

Building Address: 7492 FRANKLIN BLVD. Permit No.: 0402188
Building Use: APARTMENTS Occupancy: R-1
Building Owner: PHOENIX PARK 1 LCC Construction Type: UNKNOWN
Owner Address: 630 I ST. SACRAMENTO, CA. 95814 Sprinkled? [] Yes [X] No
Portion of Building Occupied: ENTIRE Area: UNKNOWN Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

EXTEND TO 11/17/04 MLW
08-17-04

Ron Beehler **RON BEEHLER**
Date By: (Print) Sign INTERIM CHIEF BUILDING OFFICIAL

[TCO approvals:: SB,SB]

CBC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 7492 FRANKLIN BLVD Permit No.: 0402188
Building Use: APARTMENTS Occupancy: R-1
Building Owner: PHOENIX PARK 1 LLC Construction Type: _____
Owner Address: SACRAMENTO, CALIF Sprinkled? Yes No
Portion of Building Occupied: ENTIRE Area: _____ Sq. Ft.
Date: 02/08/05 By: (Print) James Zimmerman Sign RON BEEHLER
INTERIM CHIEF BUILDING OFFICIAL

[Finaled By: SMB, GRS, SB]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE



F. RODGERS INSULATION, INC.
 Thermal Insulation Contractors
 Residential

INSULATION
 CERTIFICATE

09294

7775 LAS POSITAS ROAD • LIVERMORE, CA 94550
 (925) 294-9400 • FAX (925) 294-9475

1300 S. RIVER RD. #125 • W. SACRAMENTO, CA 95691
 (916) 386-9400 • FAX (916) 386-9446

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

Brown Const LOT # 86 TRACT # Phoenix Park II
 STREET _____ CITY Sac.

EXTERIOR WALLS:

MANUFACTURER Oc THICKNESS/TYPE _____ R-VALUE 13

CEILINGS:

BATTS: MANUFACTURER Oc THICKNESS/TYPE _____ R-VALUE 30

BLOWN IN: MANUFACTURER Oc THICKNESS/TYPE _____ R-VALUE 30

SQUARE FOOTAGE COVERED 1764 NUMBER OF BAGS USED 28

FLOORS & OVERHANGS: MANUFACTURER Oc THICKNESS/TYPE _____ R-VALUE 19

OTHER: MANUFACTURER Oc THICKNESS/TYPE _____ R-VALUE 11

GENERAL CONTRACTOR _____
 CALIFORNIA CONTRACTORS LICENSE # _____

DATE _____

SIGNATURE _____

TITLE _____

INSULATION CONTRACTOR F. RODGERS INSULATION RESIDENTIAL
 CALIFORNIA CONTRACTORS LICENSE #771285

[Signature]
 SIGNATURE

DATE 7-21-05
installer
 TITLE

White - Customer Copy Yellow - Invoice Copy Pink - Field Copy Gold - Office Copy

INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

TYPE 3

Site Address 7512 Abiding Place

Permit Number

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 Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ [\geq CF-1R value]	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
	York GY9506 0812 UPII	2	90				
	York GY95 080616 UPII	1	90		4.2	55	60
					4.2	76	80

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ [\geq CF-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
SPLIT	York HIRD 024	1	13 SEER				
"	" " 042	1	" "		4.2	20.8	19
"	" " 030	1	" "		4.2	30.1	37.6
					4.2	22.4	27.5

1. \geq 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.

[Signature] 3/2/05
Signature, Date

BROWN CONSTRUCTION INC.
Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std, Point-of-Use)	If Recirculation, Control Type	# of Identical Systems	Rated ² Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ² (EF, RE)	Standby ² Loss (%)	External Insulation R-value ³
Gas	Rheem 91VR40N	STD	N/A	3	40,000	40	0.62		R-20

- 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.

Faucets & Shower Heads:

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 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]
Signature, Date

BROWN CONSTRUCTION INC.
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

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

TYPE 3

Site Address 7512 Abiding Place

Permit Number

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. <u>ALPINE</u>							
2. <u>Z70 SERIES</u>	<u>.50</u>	<u>.61</u>	<u>2</u>	<u>18</u>	<u>206</u>		
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

¹ 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.

² 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 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 requirements for manufactured devices (from Part 6), where applicable.

Item #s (if applicable)	Signature, Date	<u>BROWN CONSTRUCTION INC.</u> 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

SIGNET

Testing Labs, Inc.

DATE: 5-26-05
 PROJECT NO. 16415
 PROJECT: PHOENIX PARK PHASE II
 LOCATION: S. SAC.

DSA FILE/APPL. NO. _____
 OSHPD NO. _____
 PERMIT NO. 0407188 7492
 WEATHER: _____ TEMP: _____

PROOF LOAD **TORQUE** **WITNESSING**

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

RAM: SMALL DOWNUT GAGE: 0-10000 PSI #494 TORQUE WRENCH: _____
 RAM: -N 3457 GAGE: _____ TORQUE WRENCH: _____

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST
<u>SHEAR HOZDOWNS</u>	<u>3/8" Ø</u>	<u>16</u>	<u>100</u>	<u>3040</u>	<u>1200</u>	<u>16</u>	<u>0</u>	<u>0</u>
<u>BLDG 84</u>	<u>EPOXYED</u>							
	<u>ALL THRU</u>	<u>2 1/2</u>	<u>EMBED</u>					
<u>BLDG 86</u>	<u>5/8" Ø</u>	<u>8</u>	<u>100</u>	<u>3040</u>	<u>1200</u>	<u>8</u>	<u>0</u>	<u>0</u>
	<u>EPOXYED</u>							
	<u>ALL THRU</u>	<u>2 1/2</u>	<u>EMBED</u>					
<u>BLDG 86</u>		<u>4</u>	<u>100</u>	<u>3240</u>	<u>3000</u>	<u>4</u>	<u>0</u>	<u>0</u>
		<u>5"</u>	<u>EMBED</u>					

- Type of epoxy / grout used: _____ Method of application / cleaning: _____
 Visual inspection was performed on _____

 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: TOM EBERS

[Signature]

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

FOR SITE COPY

FORM 301