

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0516549

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 4820 AMBER LEAF WY SAC

Parcel No: PARUNKN000

SYCAMORE PARK LOT # 15

CONTRACTOR

MAHAL CO.
PO BOX 1082
SAC. CA. 95812

OWNER

SURJIT MAHAL
P.O. BOX 1082
SACRAMENTO, CA 95812

ARCHITECT

Nature of Work: MP 1994 2 STORY 11 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 _____ 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 8 License Number 763251 Date 10-31-05 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).

_____, I am exempt under Sec. _____ B & PC for this reason: _____

Date _____ Owner Signature _____

CITY OF SACRAMENTO

OCT 31 2005

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 improvements to be constructed do 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 10-31-05 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 EXEMPT Policy Number NO EMPLOYEES Exp Date _____

_____, (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 10-31-05 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.



Planning and Building Department
Building Division

CITY OF SACRAMENTO
CALIFORNIA

Downtown Permits Center
1231 I Street, #200
Sacramento, CA 95814-2998

North Permits Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

ADDRESS 4820 AMBER LEAF WAY PERMIT NO. 0516549

INSPECTION COMMENTS	PERMIT DOCUMENTS
11-1-05 B-10 A.P. T.K.	
11-1-05 E-11 A.P. T.K.	
11-1-05 W.G. P-40 P.A. T.K.	
11/4/05 P40 AP JRP	
11/4/05 B12 CW JRP	
11-8-05 B2 AP JK	
1-9-06 B17 AP Vid Grueter	
1-11-06 B26 CW Vid Grueter	
1-17-06 B26-17 AP Mc Grueter	
2-9-06 P-43 AP MDP	
2-10-06 P42 AP JRP	
2-16-06 B-18 & B-81 AP T.K.	
2-21-06 B-14 AP T.K.	
2-24-06 P47 AP Vid Grueter	
3-28-06 267 AP JK	
4-28-06 B29 CW Vid Grueter	

FINAL APPROVALS	
BUILDING	
ELECTRICAL	
PLUMBING	
MECHANICAL	
FIRE	
SITE	

CERTIFICATION OF INSULATION

Lot # 15

PART I GENERAL	ADDRESS OR TRACT			SACRAMENTO BUILDING PRODUCTS							
	<p style="font-size: 24px; margin: 0;">Surj MAHAL</p> <p style="margin: 0;">LOT # 15</p> <p style="margin: 0;">4820 Amber Leaf Way</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							
PART II AREAS INSULATED	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		
	13 19	3.5 5.5		38	(2'-4.75")		—	—	—		
	KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE										
MATERIAL FIBERGLASS			FORM BATTS			R VALUE			MANUFACTURER		
									CT	OC	JM
AIR INFILTRATION SEALANT											
MATERIAL						MANUFACTURER					
<i>Foam</i>						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				B.6.				TITLE MANAGER		DATE 2/2/06	
SIGNATURE --- GENERAL CONTRACTOR								TITLE		DATE	
REMARKS											

Lot # 15

INSTALLATION CARD
Diamond Wall One Coat System
Omega Products International, Inc.

Project Address

PALACE DEVELOPMENT Lot # 15
4820 AMBER LEAF WAY
SACRAMENTO, CA. 95838

ICBO Evaluation Service, Inc.

Report ER-4004


Date Completed: 4/4/06

Plastering Contractor:

Name: Vision Plastering, Inc.
Address: 8874 Greenback Lane, Orangevale, CA 95662
Tele No: (916) 987-3324

Approved contractor number as issued by Omega Products Intl., Inc. 2390

This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report and the manufacturer's instructions.


Signature of authorized representative of
plastering contractor

4/12/06
Date

This installation card must be presented to the building inspector after the completion of work and before final inspection.

INSTALLATION CERTIFICATE

Lot #15

CF-6R

Site Address: 4820 AMBER LEAF WAY, SACRAMENTO, CA

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) 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 (≥CF-IR value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	Carrier #58STX070-12	1	0.80	Attic	R-4.2	33,487	63,000

Cooling Equipment

Equip. Type (pkg. Heat pump)	CEC Certified Mfr. Name and Model Number	# of Identical Systems	Efficiency (SEER or EER) (≥CF-IR value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
A/C	Carrier #38BRC036	1	12.0	Attic	R-4.2	26,613	30,900

1. ≥ reads greater than or equal to what is indicated on the CF-IR value.

Include both SEER and EER if compliance credit for high EER air conditioner is claimed.

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, Date

Beutler Corporation

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Own

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

Residential Compliance Forms

March 2005

Lot #15

Site Address

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)

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)

1. \geq reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) is 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

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
Water	American Water Heaters FF61-50540-3NW	Std	N/A	1	40,000 (input) BTU's	50	EF	58%	R-4

- 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.

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.

Spit Muhl 4/14/05
Signature, Date

Mahl Company
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 7)

Lot #15

CF-6R

Site Address

Permit Number

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Value (≤ CF-IR value) ¹	Product SHGC (≤ CF-IR value) ¹	# of Pans	Total Quantity of Like Product (Quantity)	Square Feet	Interior or Exterior Shading Device or Overhang	Comments/Location/Special Features
1. XO	.36	.34	2	9	174		
2. EE	.32	.37	2	6			
3. SH	.35	.34	2	3	364		
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-value must be less than or equal to values from CF-IR. Installed SHGC must be less than or equal to values from CF-IR, or a shading device (interior, exterior or overhang) is installed as specified on the CF-IR. Alternatively, installed weighted average U-values for the total fenestration area are less than or equal to values from CF-IR.

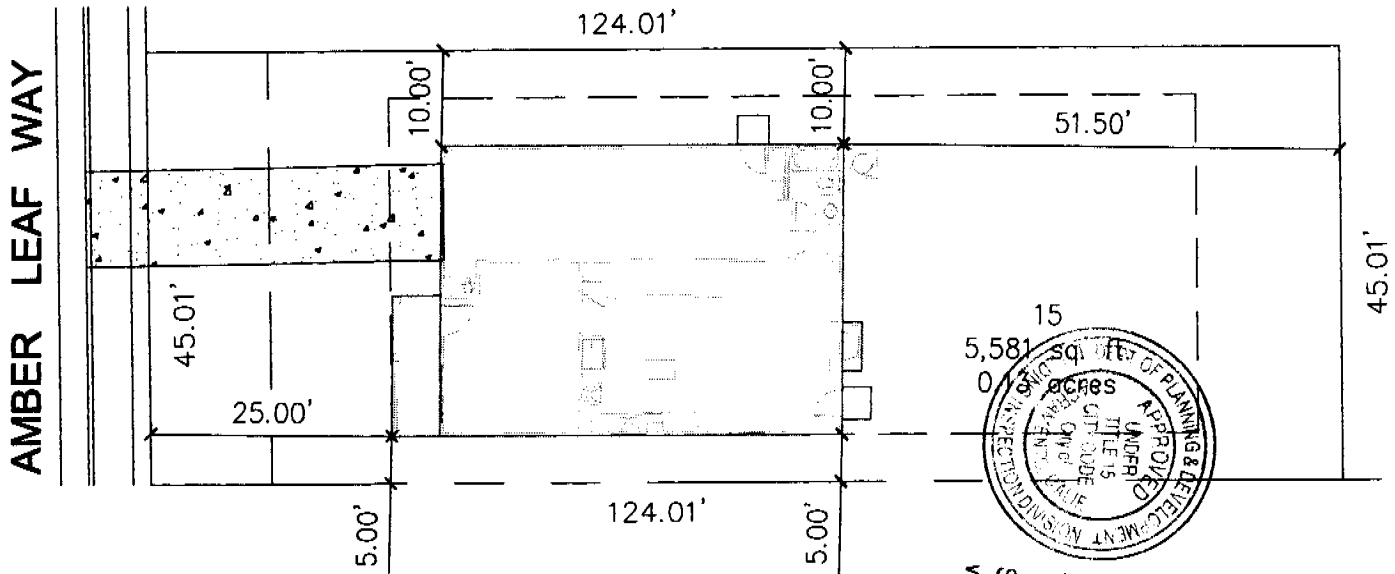
I, the undersigned, verify that the fenestration/glazing listed above my signature: 1) is the actual fenestration product installed; 2) is equivalent to or has a lower U-Value and lower SHGC than that specified in the certificate of compliance (Form CF-IR) submitted for compliance with the Energy Efficiency 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	Alliance Building Products 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
 NERS Provider (if applicable)
 Building Owner at Occupancy

July 1, 1999

FRONT YARD TO PROVIDE FULL LANDSCAPE INCL.
IRRIGATION, GRASS AND SHRUBS.



1332.5 sq. ft. FOOTPRINT
24% COVERAGE

4820 Amber Leaf Way

1994 SQUARE FOOT RESIDENCE W/ 2 CAR GARAGE, *Elevation 1*

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 to the same without written permission from the Building Inspection Division.
The approval of this plan and specifications SHALL NOT be held to permit approval or violation of any City Ordinance.



Sully Street LLC.

P.O. Box 1082
Sacramento CA. 95812
Contact Surj Mahal
Ph. 916.240.5459

Subdivision SULLY HOMES
Lot Number 15
Lot Size 5,581 sq. ft.
Scale 1" = 20'-0"
Date 2-15-05