

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: **0507085**

Insp Area: **4**
Thos Bros: **277G5**

Site Address: **115 ARCADE BL SAC**
Parcel No: **263-0051-012**

Sub-Type: **NSFR**
Housing (Y/N): **N**

CONTRACTOR
OLENKA BUILDERS
1400 BELL AVE
SACRAMENTO CA 95838

OWNER
MAZNIK NATALIYA
3617 MARCONI AV
SACRAMENTO CA 95821

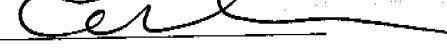
ARCHITECT

Nature of Work: **NEW 1509 SF SFR W/432 SF ATTACHED GARAGE AND 43 SF PORCH**

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.

X License Class **B** License Number **811768** Date **06/20/05** Contractor 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 _____

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.


X Date **6/20/05** Applicant/Agent 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.

X X 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 FUND** Policy Number **1727295-04**

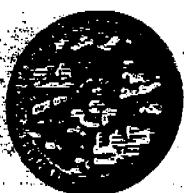
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

X Date **6/20/05** Applicant 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.

PAID
CITY OF SACRAMENTO
JUN 20 2005
NORTH PERMIT
EXPIRES 01/01/2006



Downtown Permit Center
 1231 I Street, Suite 200
 Sacramento, CA 95814
 Help Line: 1-916-264-5656

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DEPARTMENT
 BUILDING DIVISION
www.cityofsacramento.org

North Permit Center
 2101 Arena Blvd., Suite 200
 Sacramento, CA 95834
 Inspection: 1-916-808-4677

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 263 - 0051 - 012 PERMIT # 0507086
 SITE ADDRESS 115 Arcade Bl. ACREAGE _____

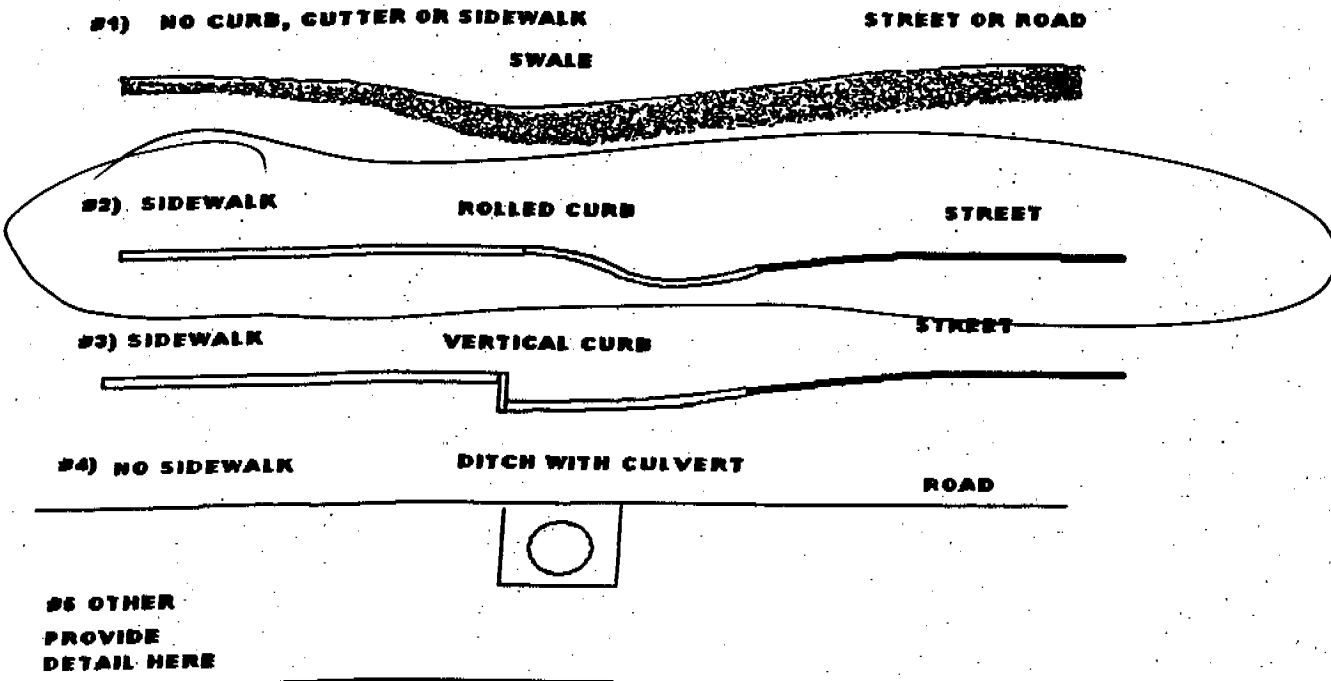
The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All questions must be answered.

- | | | | |
|--|------------------------------------|------------------------------------|--------------------------------------|
| 1. Are there existing structures on the site? | Y | <input checked="" type="radio"/> N | |
| 2. Is there an existing concrete or paved driveway to this parcel from the street? | Y | <input checked="" type="radio"/> N | |
| 3. Will the existing access to this parcel be changed in any way for this project? | *Y | <input checked="" type="radio"/> N | |
| 4. Are all portions of the lot higher than the crown of the street? | <input checked="" type="radio"/> Y | *N | |
| 5. Are all portions of the lot higher than the back of the sidewalk? | <input checked="" type="radio"/> Y | *N | |
| 6. Is there a curb and gutter at the street level? | <input checked="" type="radio"/> Y | N | |
| 7. Is there a sidewalk with a curb and gutter at the street? | <input checked="" type="radio"/> Y | N | |
| 8. Is the curb at the street square? | *Y | N | <input checked="" type="radio"/> N/A |
| 9. Is there a rolled curb at the street? | <input checked="" type="radio"/> Y | N | N/A |
| 10. Is there a drainage ditch or culvert at the street? | Y | *N | <input checked="" type="radio"/> N/A |
| 11. Does the lot drain from back to front? | <input checked="" type="radio"/> Y | *N | |
| 12. Does the lot drain from front to rear? | Y | <input checked="" type="radio"/> N | |
| 13. Does another lot drain across this parcel? | *Y | <input checked="" type="radio"/> N | |
| 14. Does the lot drain from side to side? | *Y | <input checked="" type="radio"/> N | |
| 15. Does the site have an existing low area or drainage swale? | *Y | <input checked="" type="radio"/> N | |
| 16. Does the drainage swale drain to an adjacent parcel? | *Y | N | <input checked="" type="radio"/> N/A |
| 17. Does the drainage swale drain to the street? | <input checked="" type="radio"/> Y | *N | N/A |
| 18. Will existing drainage be re-routed? | *Y | <input checked="" type="radio"/> N | |
| 19. Will drainage ditches or culverts be constructed or modified? | <input checked="" type="radio"/> Y | N | N/A |
| 20. Did this project require approval from the Zoning Administrator? | *Y | <input checked="" type="radio"/> N | |
| 21. Did the project require approval from the Planning Administrator? | *Y | <input checked="" type="radio"/> N | |

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

- 22. Is there any tree, telephone pole, guy wire or similar obstruction located at the front of the property adjacent to the street or road? *Y N
- 23. Is this a corner lot? *Y N
- 24. Is the posted speed limit on this street greater than 25 MPH? *Y N
- 25. Is this parcel located on a four-lane street? *Y N
- 26. If site is greater than 1/2 acre has an erosion and sediment control plan been submitted? Y *N N/A
- 27. If site disturbs 1 acre or more has a copy of the State General Permit NOI and SWPPP been submitted? Y *N N/A
- 28. If site is part of a larger subdivision greater than 1 acre has a copy of the State General Permit NOI and SWPPP been submitted? Y *N N/A

CIRCLE THE DRAWING NUMBER BELOW THAT BEST ILLUSTRATES THE EXISTING CONDITION AT THE LOCATION OF THE PROPOSED DRIVEWAY OR SITE ACCESS.



The information provided on this document is accurate. I understand that if this form is incomplete, contains inaccurate or misleading information, the project located at this address may be delayed until any drainage or encroachment issues are resolved to the satisfaction of the City of Sacramento.

GNED *[Signature]* DATE 06/16/05

LE *Contractor*
PHONE NO. 339-1267

Downtown Permit Center
 1231 I Street, Suite 200
 Sacramento, CA 95814
 Help Line: 1-916-264-5656

CITY OF SACRAMENTO
 DEVELOPMENT SERVICES DEPARTMENT
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SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 263 - 0051 - 012 PERMIT # 0507085
 SITE ADDRESS 115 Arcade Bl. ACREAGE _____

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- | | | | |
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N.S.

Certification of Compliance School District Development

Part I--To be completed by the APPLICANT

Owner's Name/Address Nataliya HAZUK
 Project Address 115 Arroyo Blvd
 Parcel Number _____ Lot No. _____
 Subdivision Name _____ No. of Units _____
 Applicant's Signature [Signature] Title _____
 Phone No. (714) 211-1111 Date 7/1

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II--To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0507085
 Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area 1509
 Signature/Title Jay Giff Building Inspector Date 6-10-05

Part III--To be completed by the SCHOOL DISTRICT

School District Grant Joint Union Certificate No. 05-1371
 Exempt Comments _____
 Residential/Apartment/etc. 1509 Square ft. x \$ 2,241 = \$ 3380.16
 Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
 Total fees collected..... = \$ 3380.16

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

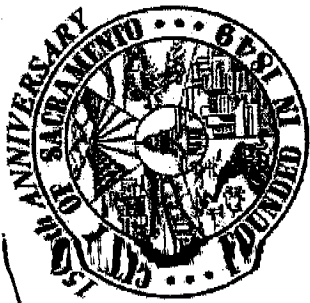
As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 6/15/05

White & Canary - School District • Pink - Building Department • Goldenrod - Applicant

City of Sacramento
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 115 Arcade Blvd.	APN: 263-0051-012
DRPB AREA / PUD / SPD: Expanded North DRD	ZONING: R-1
EXISTING LAND USE: Vacant	
PROPOSED USE: New SFR with attached garage	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB
Required Planning application must be approved <i>before</i> project can be submitted for plan check	
<input type="checkbox"/>	Application(s) IN PROGRESS: File Number:
Application must be approved before project can be submitted for plan check.	
<input checked="" type="checkbox"/>	Application(s) COMPLETED: File Number & approval date: ER05-100 (Approved 5-12-05)
Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.	
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input checked="" type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Route to SITE for inspection only, plan check not required.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
CONDITIONS AND COMMENTS:	
Approx. footprint of house with garage is 1985'/5000' lot area (Assessor's Map) = 40% maximum lot coverage. Min. 25' front yard setback. Min. 5' interior side yard setback. Min. 15' rear yard setback. Not more than 40% of front setback is covered with paving for driveway. 10% additional walkway allowed. Min. interior garage dimensions are 10' X 20'. Min. driveway dimensions are 10' X 20'.	
Plans must comply with conditions of approval of ER05-100 attached to plans.	
DATE: 5-12-05	BY: Sally Shore



0507085

DATE: 05-19-08

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
FAXED PERMIT APPLICATION (certain restrictions apply)
Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work day.
Note: Contractors must have a current certificate of Worker's Compensation Insurance.

Note: Work started before a Building Permit is issued will be subject to quad fee

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

RESIDENTIAL APARTMENTS (+/- units per building) COMMERCIAL (limited)

JOB ADDRESS: 115 Arcade Blvd.

UNIT # 1

CONTRACT PRICE \$

CONTACT PERSON: Elena or LEO

CONTACT PHONE: (916) 339-1267

Property Owner: Nataliya Marknik

Contractor: Olenica Building #

Address: 3617 Markoni Ave.

Address: 6525 32nd St. #A

City/State/Zip: Sacramento CA 95821

City/State/Zip: North Highlands, CA 95660

Phone: 339-1267

Phone: 339-1267 FAX: 404-5325

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE GARAGE <input type="checkbox"/> # SQUARES Material: <input type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> vinyl <input type="checkbox"/> stucco Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> HVAC INSTALLATIONS (residential ONLY) <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> NEW <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Cut-in: \$ Note: Design Review approval may be required for rooftop units.	<input type="checkbox"/> WATER HEATER (residential ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR (Describe locations below) Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY) <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PGE *NOTE: Correction Notice items will require an additional building permit
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DESCRIPTION OF WORK:

S.F.D.
living area — 1509
garage — 432
porch — 43

CITY OF SACRAMENTO
CALIFORNIA

PLANNING AND
BUILDING DEPARTMENT
PLANNING DIVISION

1231 I STREET, ROOM 200
SACRAMENTO, CA
95814-2998

WATER DEVELOPMENT FEE WAIVER

Applicant: Elena Phone: 339-1247

Property Address: 115 Arcade Blvd

APN: 263-0051-012 Zoning: R-1 No. of Units: 1

This project qualifies for the fee waiver because it is in a:

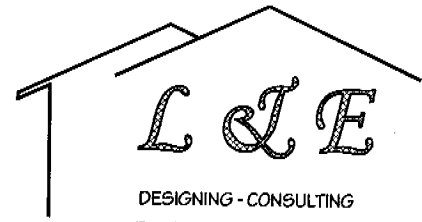
- REDEVELOPMENT AREA; or
- DESIGNATED INFILL AREA; or
- QUALIFIED INFILL AREA, meeting all of the following requirements:

- 1. The site is located in a neighborhood where the median year of housing construction is 1965 or earlier as shown on the Neighborhood Statistics Boundary Map, or the applicant has proof to the satisfaction of the Planning Director that the median age of housing within 500 feet of the site was developed prior to 1965; and
- 2. The lot is surrounded on three sides by existing or approved development; and
- 3. The project is consistent with the General Plan or more specific plan designation; and
- 4. The site is no more than 5 acres in size for single family development, or 2 acres in size for multiple family development; and
- 5. The site has City sewer, water, and drainage services, or is within proposed or existing assessment district for these services; and the services provided are capable of serving the proposed development to the satisfaction of the Public Works Director.

Fee Waiver Denied by: _____ Date: _____

Fee Waiver Approved by: Emilie J. Limeri Date: 6/2/05

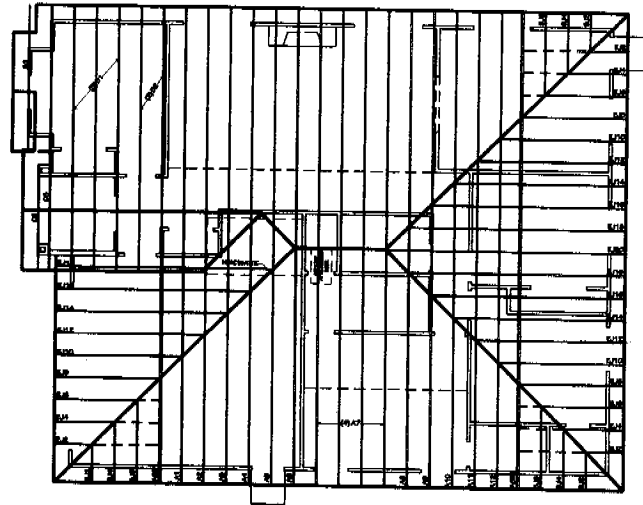
WD No: _____



DESIGNING - CONSULTING
 Email: leolenaus@yahoo.com
 Leo Melnychuk
 Telephone: (916) 641 - 5564
 fax (916) 404 - 5395

REVISED ATTICE VENTILATION CALCULATIONS FOR:

115 Arcade Blvd.
 Sacramento, CA 95815



ATTIC VENTILATION CALCULATIONS

VENTILATION REQUIRED			
<u>AREA VENTILATED</u> 1,509 SQ FT.	<u>VENTILATION RATE</u> 150TH	<u>REQUIRED AREA</u> 1,449 SQ IN.	<u>TOTAL AREA PROVIDED</u> 1,616 SQ IN.
VENTILATION PROVIDED			
<u>TRUSS BLOCKING</u> 3-1.5" HOLES	<u>NO. BLKGS</u> 20	<u>AREA / UNIT</u> 5.3 SQ IN.	<u>AREA PROVIDED</u> 106 SQ IN.
<u>ROUND GABLE VENT</u> 22" DIAMETER	<u>QUANTITY</u> 1	<u>AREA / UNIT</u> 380 SQ IN.	<u>AREA PROVIDED</u> 380 SQ IN.
<u>DORMER VENT</u> 12"x24" HALF-ROUND	<u>QUANTITY</u> 5	<u>AREA / UNIT</u> 226 SQ IN.	<u>AREA PROVIDED</u> 1,130 SQ IN.

Date: 8-22-05

To: Mr. Leo Melnychuk
L & E Design/Consulting
1400 Bell Avenue
Sacramento, CA. 95838

Re: Field Clarification
115 Arcade Blvd.
Sacramento, CA.

CS Engineering

2420 K Street, Suite 220
Sacramento, CA. 95816
(916) 658-8600 (office)
(916) 658-8601 (fax)
(916) 690-1458 (cell)

csengineering0704@sbcglobal.net

Per your request, CS Engineering is submitting this letter in response to the proposed framing modifications at the subject project. In particular, I shall address the A7 roof truss that has part of the G.W plate cut (at joint 19), see attached sketch.

It is my professional opinion, based upon a review of the drawings and calculations, that the proposed framing modifications are structurally acceptable as long as the following criteria are met:

- Add a 2 x 4 block each side of joint 19 - extend approx. 2'-8" to joint 20.
- Add 2-SDS V4 x 3 screws each member each side. (A total of 4 screws).

Please call if you have any questions/concerns regarding the items above. For your convenience, two additional, stamped and signed, copies are enclosed for review by the Building Inspector.

Sincerely,

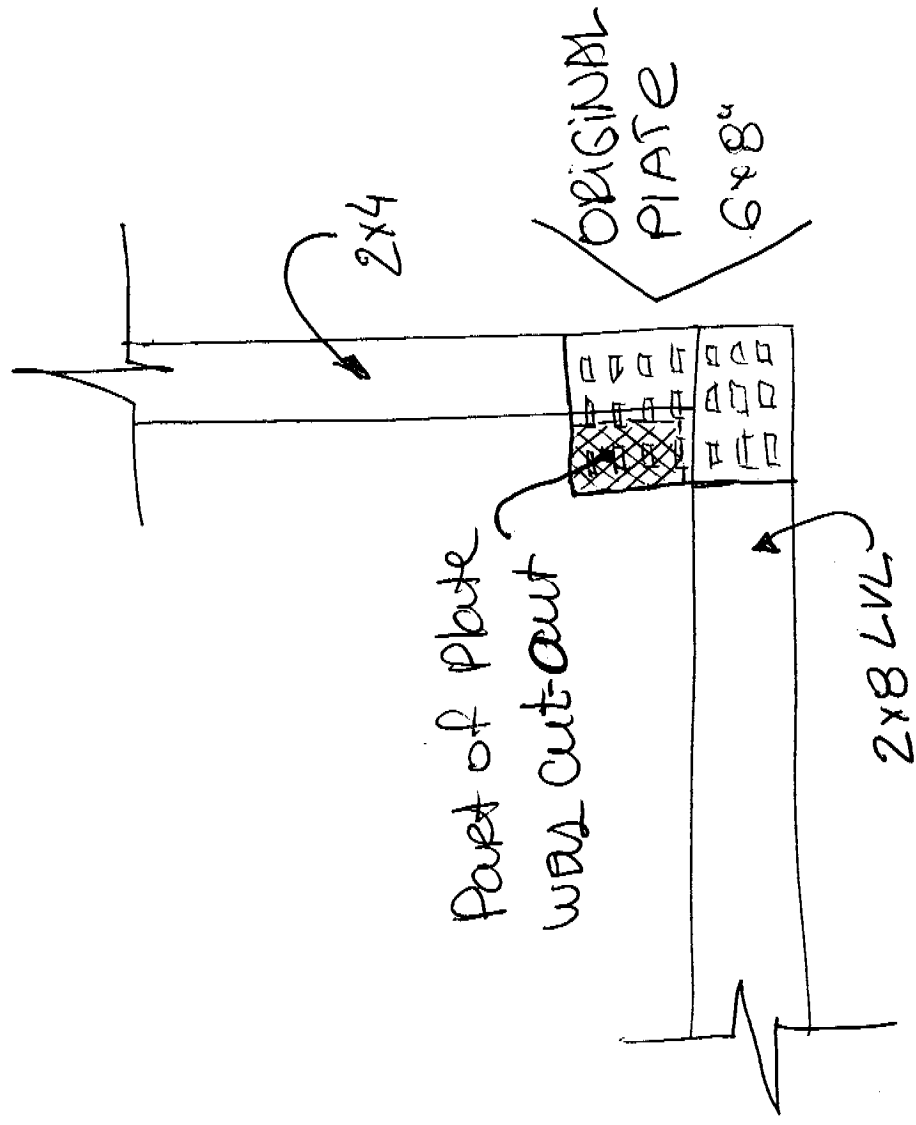


Charles Sinkey Jr. S.E.



Repair for truss: A7

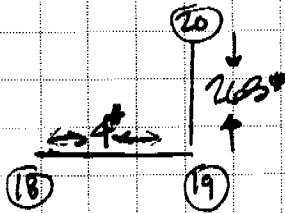
For: 115 AREADE BUD, Sacramento CA 95838



TRUSS

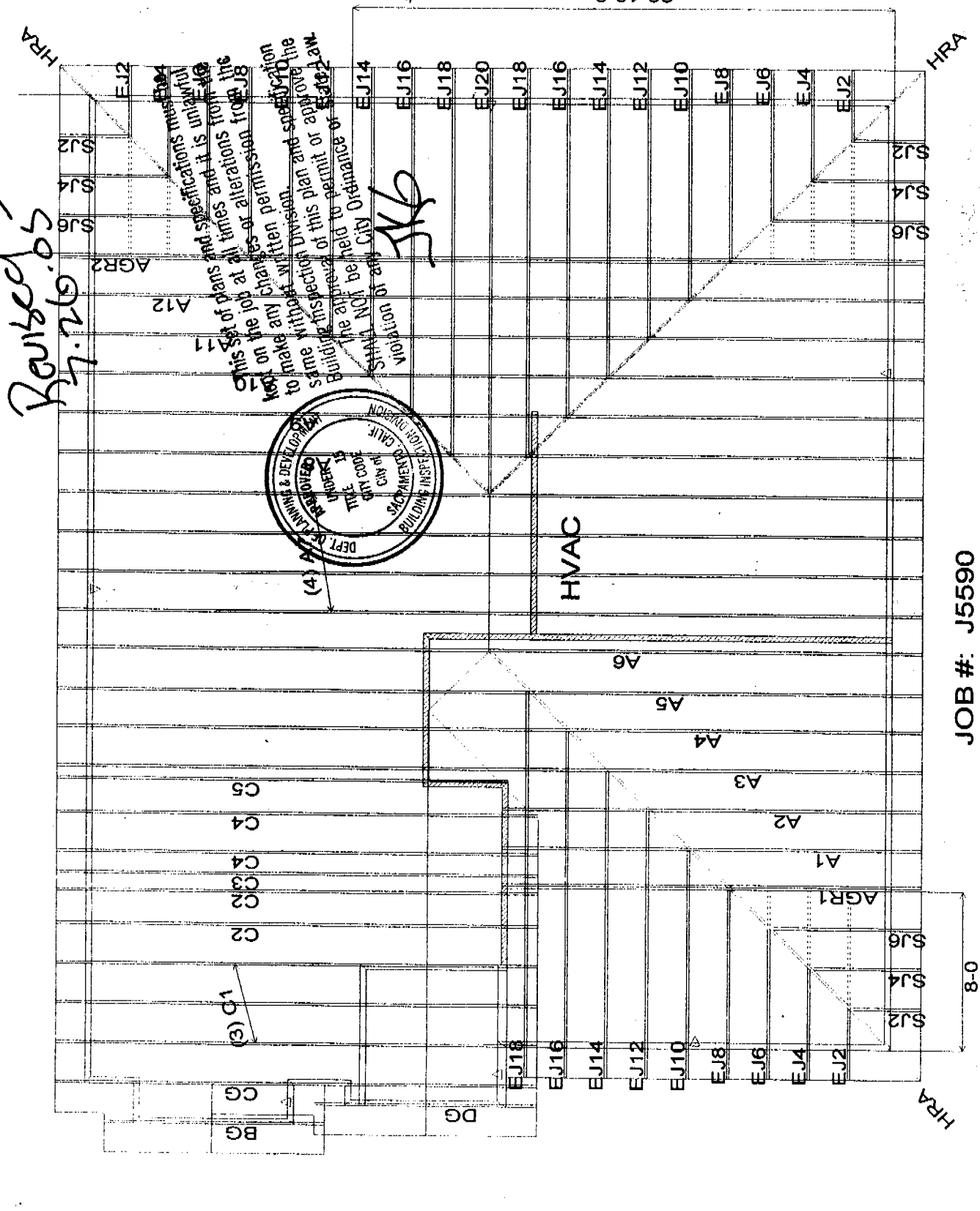
JOINT 19

ACCORDING TO TRUSS ANALYSIS BY WESTERN WOOD:



USE 2x4 EA. SIDE W/ 2-SDS 1/4x3 SCREWS (2x240=480)
PER MEMBER.

Revised
7.20.05



JOB #: J5590
 DATE: 12 JULY 2005
 FV5076
 115 ARCADE BLVD
 SACRAMENTO

JOB SITE COPY
 0507085

See standard details (TX01087001-001 rev1).
 Piling spec: ANSUTM - 1995
 Attic room load = 50 psf, plus any added loads indicated. Room LL Def = L/360
 THIS DESIGN IS THE COMPOSITE RESULT OF MULTIPLE LOAD CASES.
 Loaded for 10 PSF non-concurrent BCLL. Install interior support(s) before erection.
 PLATING BASED ON GREEN LUMBER VALUES.

BC 2x4 DFL #1
 2x4 DFL STANDARD 16-4, 19-8
 2x8 LVL 1.6SETSLSL 16-19
 FILL CHD 2x4 DFL STANDARD
 WEB 2x4 DFL STANDARD
 PLATE VALUES PER ICBO RESEARCH REPORT #1607.
 Mark all interior bearing locations.
 ABC collar tie requires lateral bracing shown plus bracing at the panel points of the collar tie (unless noted otherwise), or rigid sheathing is required.

1	0-1-12	497	3.50"	1.50"
2	17-9-4	2298	3.50"	1.60"
3	39-10-4	742	3.50"	1.50"

BRG REQUIREMENTS shown are based ONLY on the truss material at each bearing

TC	FORCE	AXL	BND	CSI
1-2	-760	0.00	0.53	0.53
2-3	468	0.06	0.53	0.60
3-4	530	0.07	0.10	0.18
4-5	530	0.08	0.27	0.35
5-6	758	0.10	0.54	0.64
6-7	579	0.07	0.54	0.61
7-8	518	0.04	0.09	0.14
8-9	521	0.04	0.25	0.29
9-10	-752	0.00	0.25	0.25
10-11	-785	0.00	0.46	0.46
11-12	-1905	0.07	0.49	0.56

BC	FORCE	AXL	BND	CSI
13-14	673	0.10	0.30	0.40
14-15	598	0.09	0.11	0.21
15-16	916	0.37	0.13	0.50
16-17	18	0.00	0.30	0.30
17-18	-615	0.00	0.47	0.47
18-19	-615	0.00	0.23	0.23
19-20	263	0.11	0.05	0.16
20-21	614	0.09	0.14	0.23
21-22	1734	0.26	0.18	0.44
22-23	1746	0.26	0.23	0.49

WB	FORCE	CSI	WEB	FORCE	CSI
15-4	-130	0.14	7-18	-836	0.95
20-8	-182	0.05	18-20	-711	0.23
2-14	267	0.11	7-20	812	0.33
2-15	-907	0.43	9-20	-783	0.28
5-15	849	0.35	9-21	481	0.20
15-17	-910	0.11	11-21	-1061	0.64
5-17	-939	0.49	11-22	104	0.06
6-18	-578	0.60			

TB FORCE AXL BND CSI 8-7-15

UBC-97 Code.
 Bldg Enclosed = Yes, Importance Factor = 1.00
 Truss Location = Not End Zone
 Hurricane/Ocean Line = No, Exp Category = C
 Bldg Length = 40.00 R, Bldg Width = 40.00 R
 Mean roof height = 12.39 R, mph = 70
 UBC Special Occupancy, Dead Load = 21.0 psf
 LOAD CASE #1 DESIGN LOADS

Dk	LPH	LLoc	RPH	RLoc	LL/JL
TC Vert	74.00	0-0-0	74.00	0-0-0	0.15
TC Vert	60.00	0-0-0	60.00	13-10-4	0.53
TC Vert	80.00	13-10-4	80.00	19-1-12	0.40
TC Vert	60.00	18-1-12	60.00	40-0-0	0.53
TC Vert	74.00	40-0-0	74.00	41-6-0	0.15
BC Vert	14.00	0-0-0	14.00	13-10-4	0.00
BC Vert	34.00	13-10-4	34.00	19-1-12	0.80
BC Vert	14.00	19-1-12	14.00	40-0-0	0.00

...Type...
 Ebs XLoc LL/JL
 TC Vert 0.0 0-1-12 1.00
 BC Vert 0.0 39-10-4 1.00
 BC Vert 48.3 13-10-4 0.00
 BC Vert 48.0 13-10-4 0.43
 BC Vert 48.3 19-1-12 0.00
 BC Vert 48.0 19-1-12 0.43

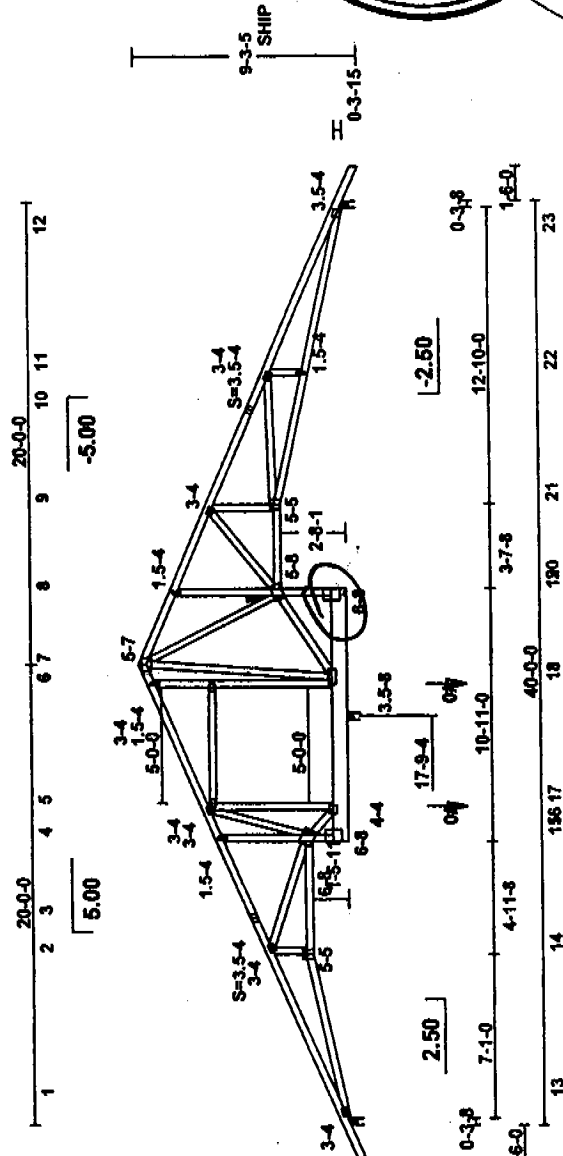
MAX DEFLECTION (span) :
 L/999 IN MEM 22-23 (LIVE)
 L = 0.10" D = 0.14" Y = 0.24"

Joint Locations

1	0-0-0	13	0-0-0
2	7-4-8	14	7-4-8
3	8-0-7	15	12-5-12
4	12-5-12	16	12-5-12
5	13-10-4	17	13-10-4
6	19-1-12	18	19-1-12
7	20-0-0	19	23-1-4
8	23-1-4	20	23-1-4
9	26-10-8	21	26-10-8
10	30-11-9	22	32-7-5
11	32-7-5	23	40-0-0
12	40-0-0		



7/25/2005
 Scale: 1/8" = 1'



OVER 3 SUPPORTS
 All plates are 20 gauge Truswal Connectors unless preceded by "MX" for HS 20 gauge or "H" for 16 gauge, positioned per Joint Detail Reports available from Truswal software, unless noted.

WARNING Read all notes on this sheet and give a copy of it to the Erecting Contractor.

This design is for an individual building component not a truss system. It has been based on specifications provided by the component manufacturer and does not conform to the current versions of TPI and AFPA design standards. No responsibility is assumed for dimensional accuracy. Dimensions are to be verified by the component manufacturer and building designer prior to fabrication. The building designer must ascertain that the loads utilized on this design meet or exceed the loading imposed by the local building code and the particular application. The design assumes that the top chord is laterally braced by the roof or floor sheathing and the bottom chord is laterally braced by a rigid sheathing material directly attached, unless otherwise noted. Bracing should be for lateral support of components members only to reduce buckling length. This component shall not be placed in any environment that will cause the moisture content of the wood to exceed 19% and/or cause connector plate corrosion. Fabricate, handle, install and brace this truss in accordance with the following standards: JOINT DETAILS by Truswal, ANSUTM 11, WPTCA 11, Wood Truss Council of America Standard Design Responsibilities, HANDLING, INSTALLING AND BRACING METAL PLATE CONNECTED WOOD TRUSSES (HIB-91) and HIB-91 SUMMARY SHEET by TPI. The Truss Plate Institute (TPI) is located at D'Onofrio Drive, Madison, Wisconsin 53719. The American Forest and Paper Association (AFPA) is located at 1111 19th Street, NW, Ste 800, Washington, DC 20004.

WESTERN WOOD FABRICATORS
 3700 RIEGO ROAD, ELVERTA, CA 95628

Eng. Job: E.J.	JOB#: J5590
Chk: CM	TRUSS ID: A7
Degrn: FV	Durfaces L=1.25 P=1.25
TC Live 16.00 psf	Rep Mbr Bnd 1.00
TC Dead 14.00 psf	O.C.Spacing 2-0-0
BC Live 0.00 psf	Design Spec UBC-97
BC Dead 7.00 psf	Seqn T6.4.22 - 20926
TOTAL 37.00 psf	

ENGEL INSULATION, INC.

CALIFORNIA CONTRACTOR'S LICENSE #745646

460 Roseville Road • Roseville, CA 95678

(916) 786-2088 / (916) 969-6191

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

TRACT _____ LOT _____

STREET 115 N. Main St CITY San Mateo

EXTERIOR WALLS: MANUFACTURER _____ THICKNESS 0.5 R-VALUE 1.3

CEILING AREA BATT'S MANUFACTURER _____ THICKNESS _____ R-VALUE _____

MANUFACTURER _____ THICKNESS 10 R-VALUE 30

CEILINGS BLOWN IN MANUFACTURER _____ THICKNESS 1.5 R-VALUE 3.8

SQUARE FOOTAGE 1512 NUMBER OF BAGS USED 30

FLOOR AREA: MANUFACTURER _____ THICKNESS _____ R-VALUE _____

EXTERIOR KNEEWALL: MANUFACTURER _____ THICKNESS _____ R-VALUE _____

MANUFACTURER _____ THICKNESS _____ R-VALUE _____

INTERIOR KNEEWALL: MANUFACTURER _____ THICKNESS 3.5 R-VALUE 13

APPLIED CAULK & SEALANT TO ALL EXTERIOR OPENINGS & PENETRATIONS

YES NO

GENERAL CONTRACTOR _____

CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONT. SIGNATURE Barbara Miller TITLE 10/1/85 DATE _____

Site Address _____

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>WINDOW</u>	<u>.49</u>	<u>.63</u>	<u>2</u>		<u>109.8</u>	<u>NA</u>	<u>KAD</u>
2. <u>SL. DOOR</u>	<u>.49</u>	<u>.63</u>	<u>2</u>		<u>82</u>	<u>NA</u>	<u>KAD</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.

<u>1 & 2</u>		
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
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

January 4, 2001

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

Project Address

115 ARCADE BLVD
SACRAMENTO CA

ICBO Evaluation Service, Inc.
Report ER-4004

Date Completed 10-25-05

Plastering Contractor

Name:

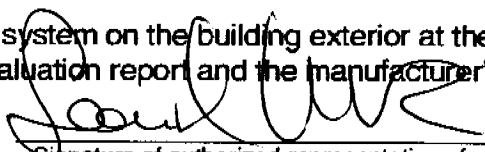
Address:

Telephone No.

OLENKA BUILDERS
6525 32nd #A North Highlands
(916) 339-1267

Approved contractor number as issued by Omega Products Int'l, Inc. _____

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

10-25-05
Date

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