

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0512482

Insp Area: 4

Thos Bros: 277J3

Site Address: 3821 MAY ST SAC

Parcel No: 251-0061-008

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

JETER ENTERPRISE CORPORATION JEC
9521 FOLSOM BL
SACRAMENTO CA 95827

OWNER

OFFICE MARLOWE
1117 NOGALES ST
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: NEW 1534 SF SFR W 440 SF ATTACHED GARAGE AND 72 SF PORCH--IN DESIGN REVIEW AREA--

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 10 License Number 844712 Date 10-12-05 Contractor Signature Joseph E. Sami V.P.

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 _____

PAID
CITY OF SACRAMENTO
OCT 12 2005
NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

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 10-12-05 Applicant/Agent Signature Joseph E. Sami V.P.

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 _____ Policy Number _____ 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 10-12-05 Applicant Signature Joseph E. Sami

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 Compliance
School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address MARINE OFFICE
Project Address 3821 MAY ST Sacto CA 95834
Parcel Number 51-06118-00 Lot No. _____
Subdivision Name N/A No. of Units _____
Applicant's Signature Joseph E. Jamin Title CEO
Phone No. _____

Notice to Applicant: Pursuant to Government Code Section 66020(d), which you may protest the fees or other payment identified above will begin this project is issued or on which they are paid to the district(s) or to another, whichever is earlier.

CONFIRMED PAID
By RICK KEOMANIVONG period in permit for district(s),
286-4946
AT GRANT

Part II - To be completed by the BUILDING DEPARTMENT

Plan Identification Number 051242
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 1534
Signature/Title Jay W. Building Inspector III Date 9-8-05

Part III - To be completed by the SCHOOL DISTRICT

School District Grant / Del Paso Certificate No. 06-0103
 Exempt Comments _____
Residential/Apartment/etc. 1534 Square ft. x \$ 2.24 = \$ 3436.16
Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
Total fees collected..... = \$ 3436.16

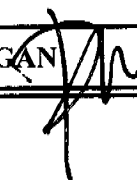
This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

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 9/19/05

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

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

ADDRESS: 3821 MAY STREET	APN: 251-0061-008
DRPB AREA / PUD / SPD: DEL PASO HEIGHTS	ZONING: R-1
EXISTING LAND USE: VACANT	
PROPOSED USE: NEW CONSTRUCTION RSF 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: DR05-200 (08-08-2005 APPROVED) 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:	Building permit must conform to approved plans and comply with all conditions of approval DR05-200. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period. SITE PLAN REVISED TO SHOW 25' FRONT SETBACK TO FRONT PORCH. 28' TO FRONT OF GARAGE. REVISED TO SHOW 36' IN REAR. APPROXIMATE LOT AREA = 6000. PROPOSED FOOTPRINT = 1998 / 6000 = 33% TOTAL LOT COVERAGE. MEETS ALL SETBACK AND LOT COVERAGE REQUIREMENTS. UNDER 40% PAVING IN FRONT SETBACK AREA. ANY TREES THAT NEED TO BE REMOVED MUST GET PRIOR APPROVAL FROM CITY ARBORIST. NO ADDITIONAL PLANNING ENTITLEMENTS APPARENT AT THIS TIME.
DATE: 05/27/05 & 08-08-2005	BY: BONNIE SURGEON & PMORGAN 

Site Address _____

Permit Number _____

INSTALLER COMPLIANCE STATEMENT FOR DUCT LEAKAGE

Copies to: Builder, HERS Rater, Building Owner at Occupancy and Building Department

INSTALLER COMPLIANCE STATEMENT

The building was: Tested at Final Tested at Rough-in

INSTALLER VISUAL INSPECTION AT FINAL CONSTRUCTION STAGE:

- Remove at least one supply and one return register, and verify that the spaces between the register boot and the interior finishing wall are properly sealed.
- If the house rough-in duct leakage test was conducted without an air handler installed, inspect the connection points between the air handler and the supply and return plenums to verify that the connection points are properly sealed.
- Inspect all joints to ensure that no cloth backed rubber adhesive duct tape is used

DUCT LEAKAGE REDUCTION

Procedures for field verification and diagnostic testing of air distribution systems are available in RACM, Appendix RC4.3

NEW CONSTRUCTION:

Duct Pressurization Test Results (CFM @ 25 Pa)		Measured Values	
1	Enter Tested Leakage Flow in CFM:	61 CFM	
2	Fan Flow: Calculated (Nominal: <input checked="" type="checkbox"/> Cooling <input checked="" type="checkbox"/> Heating) or <input checked="" type="checkbox"/> Measured If Fan Flow is Calculated as 400 cfm/ton x number of tons or as 21.7 cfm/(kBtu/hr) x Heating Capacity in Thousands of Btu/hr, enter total calculated or measured fan flow in CFM here:	1200	✓ ✓
3	Pass if Leakage Percentage ≤ 6% for Final or ≤ 4% at Rough-in: [100 x [(Line # 1) / (Line # 2)]]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
ALTERATIONS: Duct System and/or HVAC Equipment Change-Out			
4	Enter Tested Leakage Flow in CFM from Pre-Test of Existing Duct System Prior to Duct System Alteration and/or Equipment Change-Out.		
5	Enter Tested Leakage Flow in CFM from Final Test of New Duct System or Altered Duct System for Duct System Alteration and/or Equipment Change-Out.		
6	Enter Reduction in Leakage for Altered Duct System [(Line # 4) Minus (Line # 5)] - (Only if Applicable)		
7	Enter Tested Leakage Flow in CFM to Outside (Only if Applicable)		✓ ✓
8	Entire New Duct System - Pass if Leakage Percentage ≤ 6% for Final or ≤ 4% at Rough-in [100 x [(Line # 5) / (Line # 2)]]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
TEST OR VERIFICATION STANDARDS: For Altered Duct System and/or HVAC Equipment Change-Out Use one of the following four Test or Verification Standards for compliance:			
9	Pass if Leakage Percentage ≤ 15% [100 x [(Line # 5) / (Line # 2)]]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
10	Pass if Leakage to Outside Percentage ≤ 10% [100 x [(Line # 7) / (Line # 2)]]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
11	Pass if Leakage Reduction Percentage ≥ 60% [100 x [(Line # 6) / (Line # 4)]]		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
12	Pass if Sealing of all Accessible Leaks and Verification by Smoke Test and Visual Inspection		<input type="checkbox"/> Pass <input type="checkbox"/> Fail
		Pass if One of Lines # 9 through # 12 pass	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

I, the undersigned, verify that the above diagnostic test results and the work I performed associated with the test(s) is in conformance with the requirements for compliance credit. I, the undersigned, also certify that the newly installed or retrofit Air-Distribution System Ducts, Plenums and Fans comply with Mandatory requirements specified in Section 150 (m) of the 2005 Building Energy Efficiency Standards.

Signature: *[Handwritten Signature]* Date: 1-12-06

Installing Subcontractor (Co. Name) OR General Contractor (Co. Name): *Boo Steelmetal + HEATING*

INSULATION CERTIFICATE

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

SITE ADDRESS 3821 MAY ST SACRAMENTO CA
NUMBER CITY STATE

CEILINGS:

BLOW: MANUFACTURER GREEN FIBER THICKNESS 10.3" R/VALUE 38

BATTS: MANUFACTURER KNAUF THICKNESS 13" R/VALUE 38
KNAUF

EXTERIOR WALLS:

MANUFACTURER KNAUF THICKNESS 3.5" R/VALUE 13
KNAUF

FLOOR INSULATION:

MANUFACTURER KNAUF THICKNESS N/A R/VALUE N/A
KNAUF

AIR INFILTRATION: (TITLE 24)

YES XXX NO

OTHER: _____

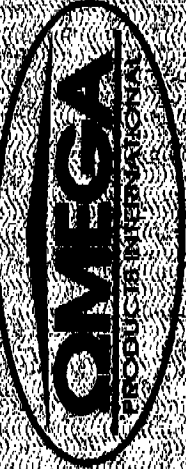
GENERAL CONTRACTOR: JEC HOMES LICENSE # _____

BY: _____ TITLE _____ DATE _____

INSULATION CONTRACTOR: WESTERN INSULATION LP LICENSE # 794484

BY: Becky Gutherz TITLE AUTH. AGENT DATE 12/2/2005
 BECKY GUTHERZ

Attn: Joe



OMEGA PRODUCTS INTERNATIONAL, INC.

REPRESENTS THAT

Ray Lath & Plaster

IS AN APPROVED APPLICATOR OF THE

DIAMOND WALL ONE-COAT SYSTEM

Omega's approval of Ray and Ray's other approved applicators, represents only that Omega has been provided with accurate information of approved applicators of the approved applicator's qualifications to apply Diamond Wall System materials, and Omega's Diamond Wall One-Coat System materials. Omega will not be responsible for the use of its materials by any applicator, approved applicator, or other person, who does not comply with the terms and conditions of the applicable contract or system. Omega reserves the right to revoke this certificate at any time.

Approved this 26th day of September, in the year 2004

Expires this 7th day of September, in the year 2005

Certificate No. 5249

INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

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 [≥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 [≥CF-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

1. ≥ 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, 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 ²
TANK GAS	A.O. SMITH GVR 40 100	S. P.O.U.	N/A	1	40,000	40	.62	2%	R=16

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.

Signature, Date

FRACK PLUMBING
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
Steve Frack

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



CITY OF SACRAMENTO

www.cityofsacramento.org
Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-7622

Downtown Permit Center
1231 I Street, Suite 200
Sacramento, CA 95814

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

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 251 - 0061 - 008 PERMIT # 0512482
SITE ADDRESS 3821 May St ACREAGE _____

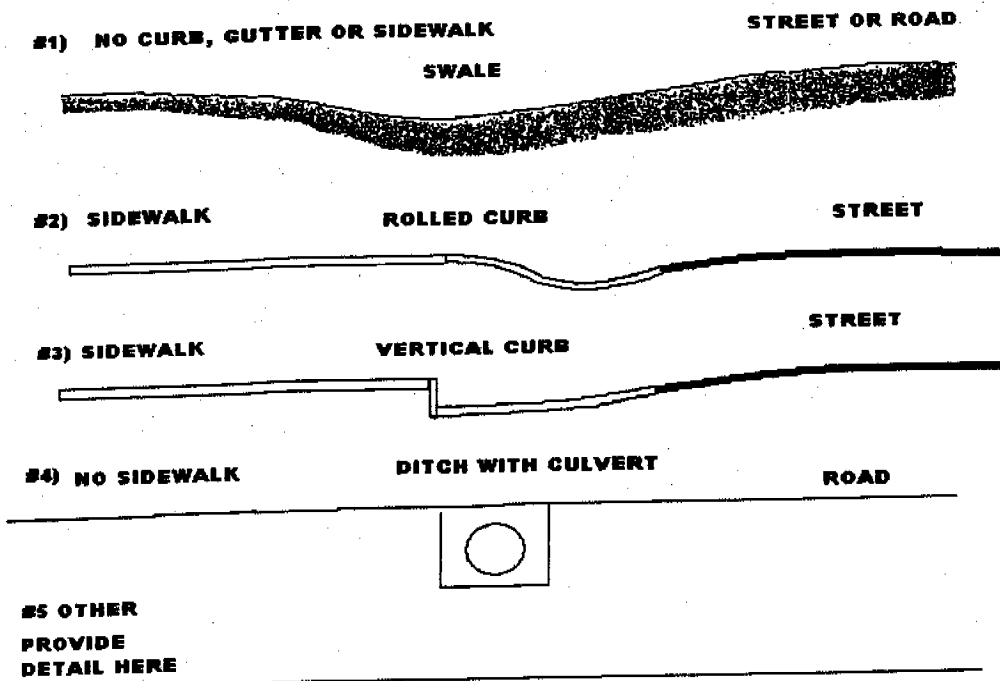
The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All 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 | <input checked="" type="radio"/> N | 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 | <input checked="" type="radio"/> N | N/A |
| 17. Does the drainage swale drain to the street? | Y | <input checked="" type="radio"/> *N | N/A |
| 18. Will existing drainage be re-routed? | <input checked="" type="radio"/> Y | N | |
| 19. Will drainage ditches or culverts be constructed or modified? | *Y | <input checked="" type="radio"/> 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 | <input checked="" type="radio"/> N | |
| 23. Is this a corner lot? | *Y | <input checked="" type="radio"/> 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 | <input checked="" type="radio"/> 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.

SIGNED Joseph E. Lewis DATE _____
 TITLE Vice President
 PHONE NO. 916-275-7795