

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0301582

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Site Address: 5411 CALABRIA WY SAC

Parcel No: 201-0690-019

NORTHPOINTE PARK 20 LOT 19 Housing (Y/N): N

CONTRACTOR

LENNAR RENAISSANCE INC
2240 DOUGLAS BL
ROSEVILLE, CA 95661

OWNER

ARCHITECT

Nature of Work: MP426 2 STORY 10 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 732348 Date 2/28/05 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 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
FEB 24 2003
NORTH PERMIT CENTER

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 2-24-03 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 OLD REPUBLIC INS. CO. Policy Number MWC10845400 Exp Date 11/01/2003

____ (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 2-24-03 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.

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 5411 CALABRIA WAY Assessor Parcel # 201-0690-019
Lot Number: 19 Subdivision NORTHPOINTE PARK VILLAGE 20

OWNER INFORMATION:

Legal Property Owner: WINNCREST HOMES Phone# 773-7471
Owner Address: 2240 DOUGLAS BLVD City ROSEVILLE State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor WINNCREST HOMES Lic. # 732348 Phone # 773-7471 Fax _____

PROJECT INFORMATION:

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of Stories: TWO No. of Rooms: _____ Street Width: 40'
 1st Floor Area 1335 2nd Floor Area 1012 Basement N/A Roof Material TILE

AREA IN SQUARE FOOT OF:

Dwelling/Living	<u>2347</u>	<u>0301582</u>
Garage/Storage	<u>580</u>	
Decks/Balconies	<u>96</u>	
Carports	_____	

SCOPE OF WORK: NEW SFD
M.P. # 426

- Information Above Complete
- Violation Files Checked
- Standard Setbacks
- County Sewer
- AR Flood Waiver Required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply:

→THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT←

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION
 - a) Assessor's Parcel Number
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

FOR OFFICE USE ONLY

ENGEL INSULATION, INC.

CALIFORNIA CONTRACTOR'S LICENSE #745646
460 Roseville Road • Roseville, CA 95678
(916) 786-2088 / (916) 786-2064

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 CASTLEMAN SW. 261 LOT C17 RAN 1126
STREET 5411 Calabria CITY SILVERADO

EXTERIOR WALLS: MANUFACTURER _____ THICKNESS _____ R-VALUE 13

CEILING AREA: BATS MANUFACTURER _____ THICKNESS _____ R-VALUE 13

CEILINGS: BLOWN IN MANUFACTURER _____ THICKNESS _____ R-VALUE 38

MANUFACTURER INSUL-JOB THICKNESS _____ R-VALUE 38

SQUARE FOOTAGE 782 NUMBER OF BAGS USED 24

~~FLOOR AREA~~ MANUFACTURER _____ THICKNESS _____ R-VALUE 19

MANUFACTURER CT THICKNESS _____ R-VALUE 19

MANUFACTURER CT THICKNESS _____ R-VALUE 19

INTERIOR KNEEWALL: MANUFACTURER _____ THICKNESS _____ R-VALUE 13

APPLIED CAULK & SEALANT TO ALL EXTERIOR OPENINGS & PENETRATIONS

YES NO _____

GENERAL CONTRACTOR _____

CALIFORNIA CONTRACTORS _____

LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONT. SIGNATURE _____ TITLE _____

DATE _____

Steve Adams W. Pat. Joe Mack Wagner Whitby

INSULATION CONT. SIGNATURE _____ TITLE _____

DATE _____

OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

ICBO Report # 4004

Job Address:

WINNCREST HOMES-GOSAMER SPRINGS

Date of Job Completion: September 29, 2003

Lot Number: 19

PLASTERING CONTRACTOR:

Name: STUCCO WORKS, INC.

Address: 5900 WAREHOUSE WAY - SACRAMENTO, CALIFORNIA 95826

Telephone No: (916) 383-6667

Contractor Number of Diamond Wall System: 2175

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 specified above and the manufacturer's inspections.

October 29, 2003

Date



Signature of authorized representative of Plastering Contractor

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

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6B

H/S19

5411 CALABRIA WAY
 Site Address

0301582
 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), building owner at occupancy per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

Type (See Part 6)	CSC Certified Mfr Name & Model Number	# of Identical Units	Efficiency (AFUE, etc.) (a) (CFR 610.30)	Unit Location (b) (CFR 610.30)	Unit or Piping Status	Heating Load (BTU/hr)	Heating Capacity (BTU/hr)

Cooling Equipment

Type (See Part 6)	CSC Certified Compressor Unit Mfr Name and Model Number	# of Identical Units	Efficiency (SEER, etc.) (a) (CFR 610.30)	Unit Location (b) (CFR 610.30)	Unit Status	Cooling Load (BTU/hr)	Cooling Capacity (BTU/hr)

I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-13) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date

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

WATER HEATING SYSTEMS:

Model No.	CSC Certified Mfr Name & Model Number	Disturbance Type (See Part 6)	# Reinstallations (See Part 6)	# of Identical Units	Rated Input (kW or BTU/hr)	Rated Output (kW or BTU/hr)	Efficiency (a) (CFR 610.30)	Standby Loss (a) (CFR 610.30)	Internal Efficiency (a) (CFR 610.30)
	HILFSON	STD	N/A	N/A	40,000 BTU/hr	40	62	62%	R-20
	HILFSON	STD	N/A	N/A	40,000 BTU/hr	30	62	62%	R-20

For small gas storage water heaters rated input at 75,000 BTU/hr, check standby and heat pump water heaters, list Energy Factor.
 For large gas storage water heaters rated input > 75,000 BTU/hr, list Recovery Efficiency, Standby Loss and Rated Input.
 For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-13) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date

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

COPY TO: Building Department

4/3/19

INSTALLATION CERTIFICATE

5411 CALABRIA WAY

0301582

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

Table with 8 columns: Equip. Type, CEC Certified Mfr Name and Model Number, # of Identical Systems, Efficiency (AFUE, etc.), Duct Location, Duct or Piping R-value, Heating Load (Btu/hr), Heating Capacity (Btu/hr). Row 1: Furnace, Bryant 310JAV036070, 1, .80, Attic, 4.2, 20824, 51000.

Cooling Equipment

Table with 8 columns: Equip. Type, CEC Certified Compressor Unit Mfr Name and Model Number, # of Identical Systems, Efficiency (SEER, etc.), Duct Location, Duct R-value, Cooling Load (Btu/hr), Cooling Capacity (Btu/hr). Row 1: Split AC, Bryant 537A030, 1, 14.0, Attic, 4.2, 24504, 29800.

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: [Signature] 4.30.03

Deal Sheet Metal Inc. Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Table with 10 columns: Heater Type, CEC Certified Mfr Name & Model Number, Distribution Type, If Recirculation Control Type, # of Identical Systems, Rated Input (kW or Btu/hr), Tank Volume (gallons), Efficiency (EF, RE), Standby Loss (%), External Insulation R-value.

- 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.

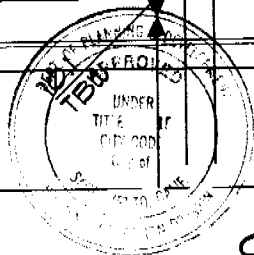
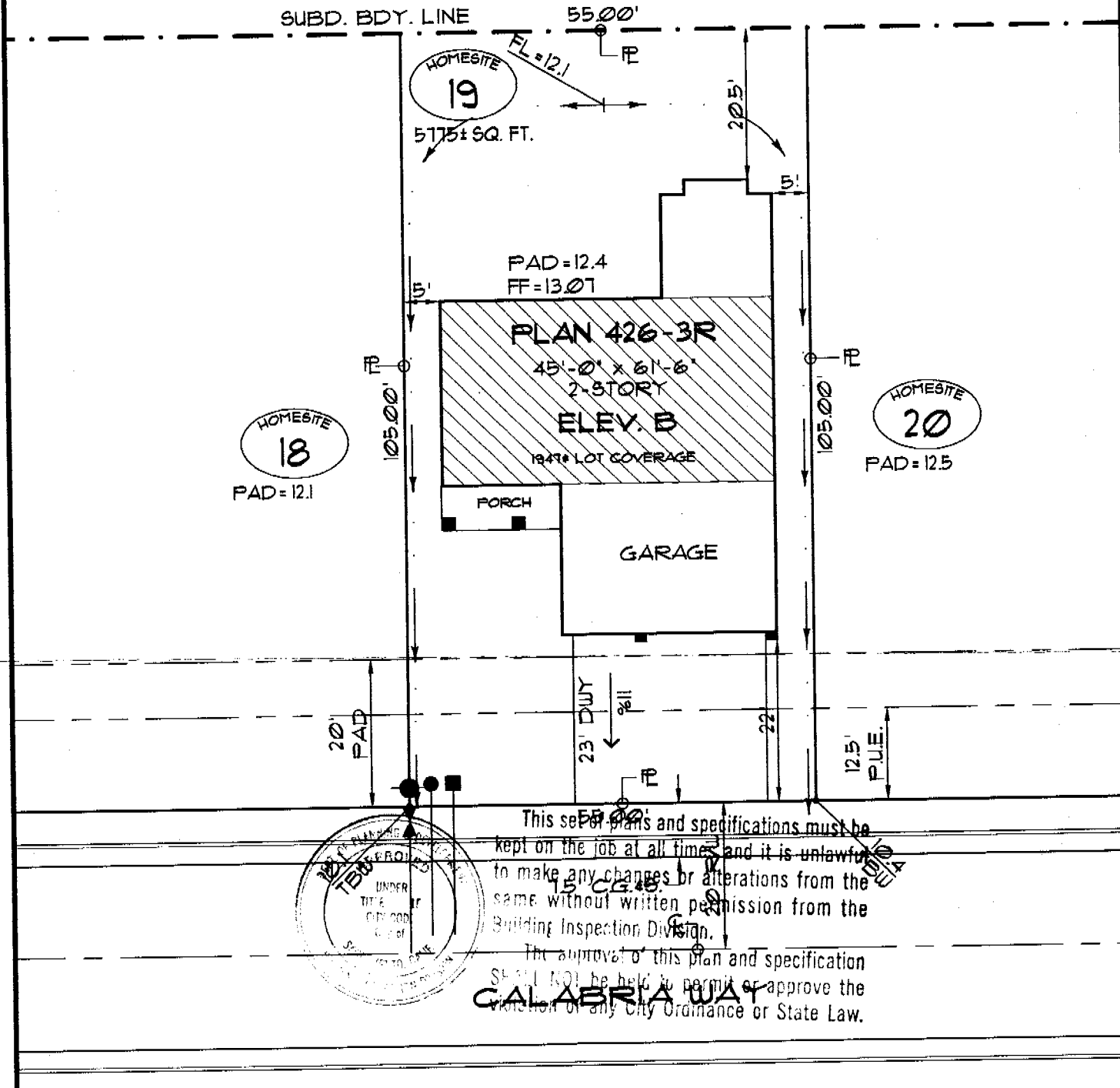
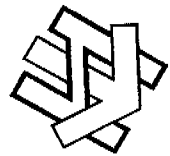
Signature, Date

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

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

plot plan

THIS PLOT PLAN IS FOR THE PURPOSE OF SHOWING THE HOUSE TO BE CONSTRUCTED ON THE LOT AND MAY NOT REPRESENT THE FINAL AS-BUILT CONFIGURATION OF THE PROPERTY OR IMPROVEMENTS THEREON. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED, NOR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS, OTHER THAN MINIMUM ORDINANCE, MAY VARY OR CHANGE WITHOUT PRIOR NOTICE, DUE TO ACTUAL SITE CONDITIONS.



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 from the same without written permission from the Building Inspection Division. The approval of this plan and specification shall NOT be held to permit or approve the violation of any City Ordinance or State Law.

lot coverage	
LOT AREA:	5775± #
BUILDING:	1947 #
BLDG./ LOT AREA:	34 %

retaining wall	
HEIGHT:	_____
LENGTH:	_____
DISTANCE FROM P.L.:	_____

symbols legend	
DROP INLET:	
ELECTRIC SERVICE BOX:	
FIRE HYDRANT:	
FLOW LINE HIGH POINT:	
GAS SERVICE:	
PAD-MOUNT TRANSFORMER:	
SEWER SVC.:	
STREET LIGHT:	
TOP-BACK OF SIDEWALK ELEV.:	
SWALE (FLOW DIRECTION):	
WATER SVC.:	
EXTENTS OF 2ND STORY LEVEL:	



GOSSAMER SPRINGS
A REGENCY PARK COMMUNITY

home site #19
5411 Calabria Way
NORTHPOINTE PARK VILLAGE 20
CITY OF SACRAMENTO, CALIFORNIA
a.p.n.: 201-0690-019

general notes

- 1) DIMENSIONS ALONG CURVED LINES ARE CHORD LENGTHS, U.O.N.
- 2) SETBACK DIMENSIONS ARE ROUNDED DOWN TO NEAREST HALF UNIT, U.O.N.
- 3) FOOTPRINT AREA CALCULATIONS (#) ARE BASED ON PLAN DIMENSIONS ONLY AND DO NOT INCLUDE COVERED ENTRIES, PORCHES OR ARCHITECTURAL PROJECTIONS.

22	BCB	1/27/03	20:1
phase	drawn by	issue	scale