

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0509035
Insp Area: 4
Thos Bros: 256-H7

Site Address: 3450 LUMLEY LN SAC
Parcel No: CAMBAY WEST UNIT 7 LOT #30

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

CONTRACTOR
GRIFFIN INDUSTRIES
24005 VENTURA BL.
CALABASAS CA. 91302

OWNER

ARCHITECT

Nature of Work: MP 1823 2 STORY 7 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 _____ License Number 684448 Date 8/1/05 Contractor Signature Jerry Peterson

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.

Date 8/1/05 Applicant/Agent Signature Jerry Peterson

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. INS. FUND Policy Number WC 1673452-2003 Exp Date 01/01/2006

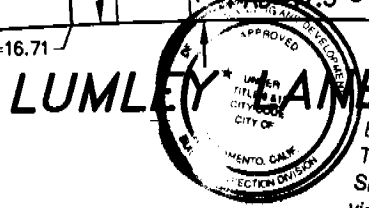
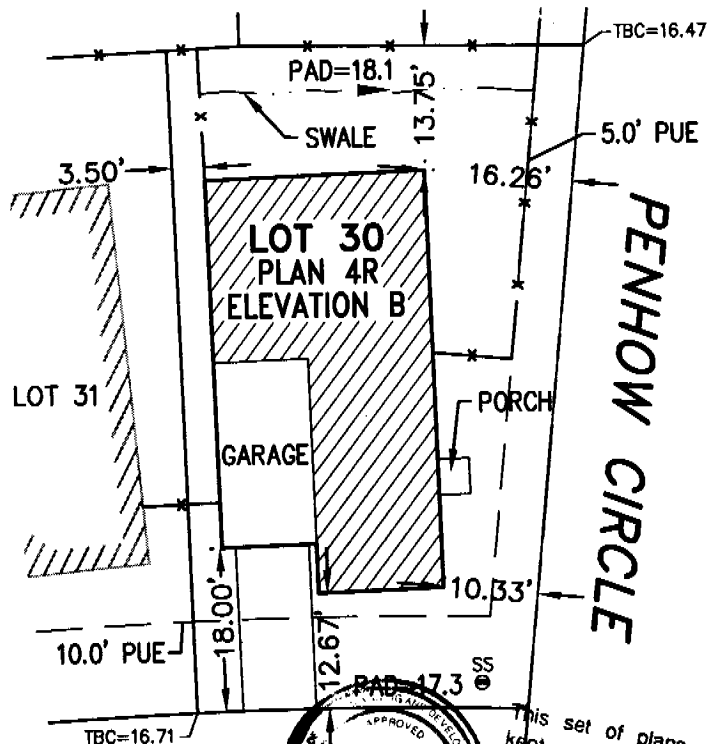
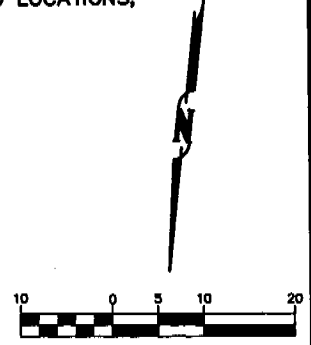
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become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

Date 8/1/05 Applicant Signature Jerry Peterson

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.

THIS PLOT PLAN IS PROVIDED AS A GENERAL LAYOUT OF THE PROPERTY. ALL INFORMATION ON THIS PLAN INCLUDING: SETBACK DIMENSIONS, FENCE LOCATIONS, DRIVEWAY GRADES, SLOPE AND WALL HEIGHTS AND LOCATIONS, ARE APPROXIMATE AND MAY VARY OR CHANGE WITHOUT PRIOR NOTICE.



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.

- LEGEND**
- SBL - SET BACK LINE
 - PUE - PUBLIC UTILITY ESMT.
 - TBC - TOP BACK OF CURB
 - WM - WATER METER
 - SS - SANITARY SEWER
 - TBW - TOP BACK OF WALK
 - x - - FENCE

<p>GRIFFIN INDUSTRIES 4200 DUCKHORN DR. SACRAMENTO, CA 95834 (916) 515-0171</p>	<p>LOT SIZE = 2985 SF BLDG. FOOTPRINT = 1014 SF FRONT SETBACK = 10.0' LEFT SETBACK = 3.5' RIGHT SETBACK = 5.0' REAR SETBACK = 0'</p>	<p>CAMBAY WEST UNIT 7 LOT 30 3450 LUMLEY LANE SACRAMENTO CALIFORNIA</p>
		<p>Carter-Burgess Carter & Burgess Inc.</p>
<p>DRAWN BY: A.J.L. CHECKED BY: R.J.T. W.O. NO.: 333252 DWG.: Phase 5</p>	<p>SCALE: 1"=20'</p>	<p>DATE: 06-14-05</p>

P:\Projects\333252.3\zDrawings\Plot Plans\Phase 5 Lots 11-19, 30-32.dwg 6-17-05 09:19:24 AM moberlyj

3450 Lumley

INSTALLATION CERTIFICATE

CF-6R

3450 Lumley

0509035

Site Address **Maplewood Plan 4**

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)	CBC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (SCF-IR value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
Furnace	Lennox NG4HU40C110X	1	80%	Attic	R6	110,000	

Cooling Equipment

Equip. Type (pkg. heat pump)	CBC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) (SCF-IR value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
Condenser	Lennox #13ACC060	1	13.3 SEER	Attic	R6	60,000	

1. 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] 10-7-05

Blue Mountain Air, Inc
 Installing Subcontractor (Co. Name)
 OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Manufacturer Type	CBC Certified Mfr Name & Model Number	Distribution Type (Hot Water Point-of-Use)	If Reheat, Control Type	# of Identical Systems	Rated Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency (DF, RB)	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.
 2. 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

Plan 4

INSTALLATION CERTIFICATE

(Page 2 of 12) CF-6R

Site Address 3450 Lumley	Permit Number 0509035
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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(a).

FENESTRATION/GLAZING:

Item	Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-factor (CF-1R value)	Product SHGC (CF-1R value)	# of Pieces	Total Quantity of Like Product (Quantity)	Area Square Feet	Exterior Shading Device or Overhang	Comments/Location/Frame Material
1.	710	.43	.35	14		86	NO	
2.	1110	.37	.35	20		176	NO	
3.	1570	.58	.38	4		18	NO	
4.	650	.52	.31	2		48	NO	
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								

1) Use values from a fenestration product's NFRC label. For fenestration products without an NFRC label, 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. If using default table, SHGC values from §116 identify whether tinted or not.

3) 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 (Item Part 6), where applicable.

Item No (if applicable)	Signature	Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
		9/29/05	Milgard Windows
Item No (if applicable)	Signature	Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor
Item No (if applicable)	Signature	Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

Copies to: Building Department, HHSR Rater (if applicable) Building Owner at Occupancy

3450 Lumley

INSTALLATION CERTIFICATE

3450 Lumley

0509035

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).

VACUUM SYSTEMS:

Equip. (pkg. Location)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ (CFR-18 value)	Duct Location (attic, etc.)	Duct or Piping Rating	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

COOLING EQUIPMENT

Equip. (pkg. Location)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ (CFR-18 value)	Duct Location (attic, etc.)	Duct Rating	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) 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:

CEC Certified Mfr Name & Model Number	Distribution Type (Hot, Cold, etc.)	If Restriction, Control Type	# of Identical Systems	Rated ² Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ¹ (EF, UEF)	Standby ¹ Loss (%)	External Insulation ¹ R-value
Rheem 41VRS0	GRS				52	0.68		

1. 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. 2. External insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

Sinks & Shower Heads

Sinks 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: [Signature] 12/4/05

Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner: RCR Companies

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



Walldesign Incorporated

DRYWALL * INSULATION * PAINT * PLASTER * CONTRACTOR

3450 Lumley Lane Sacramento
Street Address City

Sacramento Griffin Industries MapleWood 30
County Builder Project Lot

Description of Insulation :	Thickness	R-Value
Exterior Walls		
Insulation Type: <u>Batts</u>	<u>3 1/2</u>	<u>13</u>
Flat Ceilings		
Insulation Type: <u>Batts</u>	<u>10</u>	<u>30</u>
Cathedral Ceilings		
Insulation Type: <u>Batts</u>		<u>0</u>
Garage Ceilings		
Insulation Type: <u>Batts</u>	<u>6 1/4</u>	<u>19</u>
Interior Walls		
Insulation Type: <u>Batts</u>		<u>0</u>
Interm Ceilings		
Insulation Type: <u>Batts</u>	<u>3 1/2</u>	<u>11</u>
Garage Walls		
Insulation Type: <u>Batts</u>		<u>0</u>
Slab on Grade		
Insulation Type: <u>Batts</u>		<u>0</u>
Blown Ceilings		
Insulation Type: <u>Cellulose</u>		<u>0</u>
Blown Ceilings		
Insulation Type: <u>Insulsafe</u>		<u>0</u>

Declaration

I hereby certify that the above insulation was installed in the building at the above location in conformance with the current Energy Efficient Standards for residential buildings (Title 24, Part 6, California Code of Regulations) as indicated on the Certificate of Compliance, where applicable.

449739
License Number

[Signature] 2-22-06
Signature Date

Walldesign, Inc.
Insulation Subcontractor