

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0402292**  
**Insp Area: 4**  
**Thos Bros: 256J3**

**Site Address: 27 ELLERTON PL SAC**  
Parcel No: 201-0910-029  
N

HERITAGE @ NATOMAS PARK VIL. 6 LOT 7  
Sub-Type: NSFR  
Housing (Y/N):

CONTRACTOR  
LENNAR RENAISSANCE INC  
2240 DOUGLAS BL  
ROSEVILLE, CA 95661

OWNER

ARCHITECT

**Nature of Work: MP1142 1 STORY 5 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 732348 Date 3/12/04 Contractor Signature Kin Mase

**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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 3/12/04 Applicant/Agent Signature Kin Mase

**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:

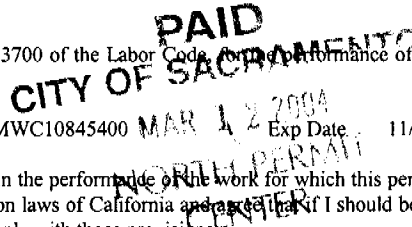
Carrier OLD REPUBLIC INS. CO. Policy Number MWC10845400 Exp Date 11/01/2004

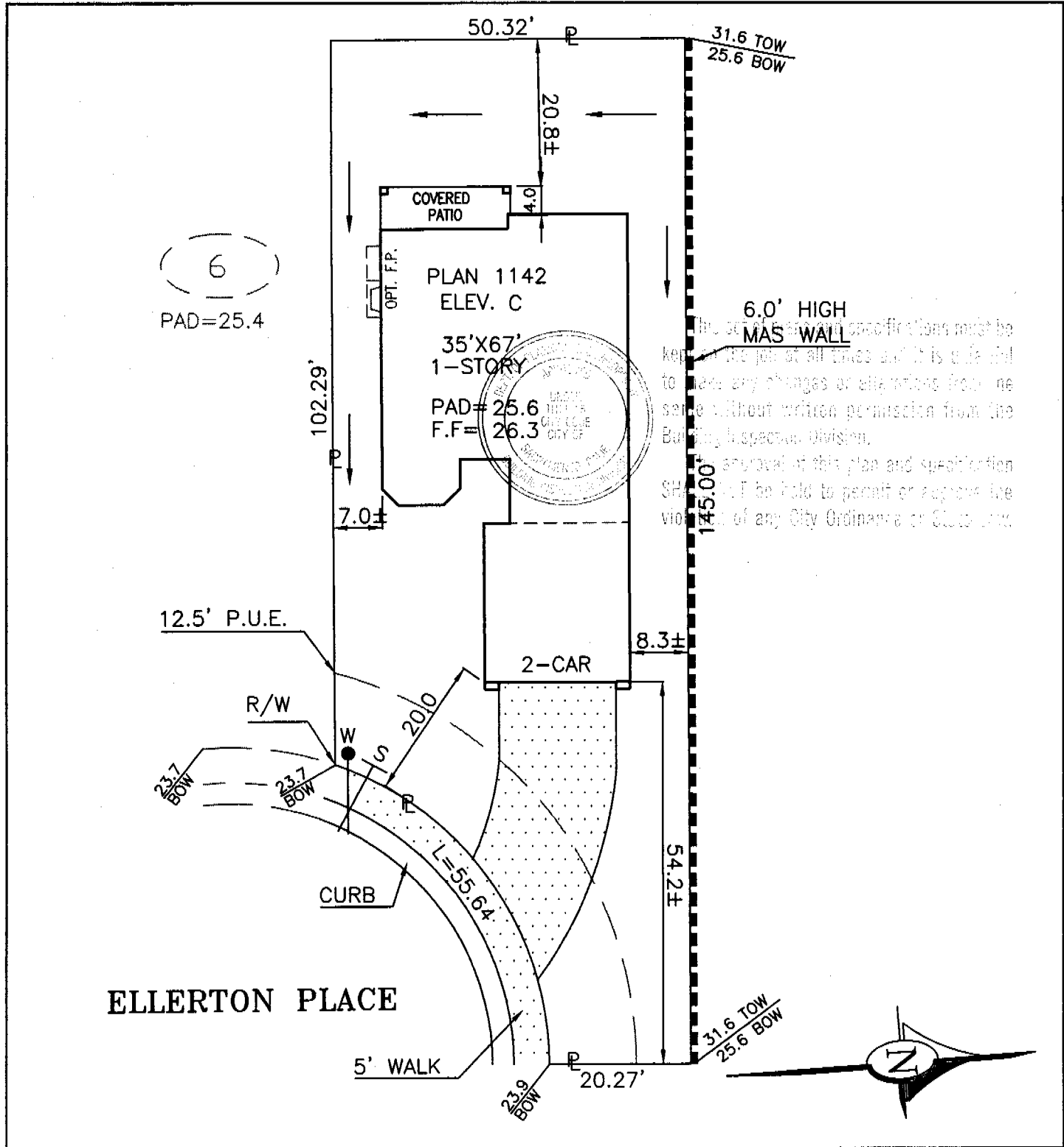
\_\_\_\_ (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should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

Date 3/12/04 Applicant Signature Kin Mase

**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.**





The applicant's specifications must be kept as-is for all times and it is the duty to make any changes or alterations from the same without written permission from the Building Inspection Division. Approval of this plan and specification shall not be held to permit or approve in violation of any City Ordinance or State Law.

DIMENSIONS SHOWN ARE APPROXIMATE EXCEPT FOR MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS AND MAY VARY FROM THIS PLAN.

<h1>RENAISSANCE</h1> <h2>HOMES</h2> <p>1075 CREEKSIDE RIDGE DR. SUITE 100. ROSEVILLE, CA. 95678 PHONE (916) 773-4083 FAX (916) 773-4086</p>	<b>MENDOCINO</b>		<b>PLOT PLAN</b> NOTES:
	<b>HERITAGE PARK VILLAGE 6</b>		
<b>ADDRESS:</b> 21 ELLERTON PLACE		<b>SACTO. COUNTY, CALIFORNIA</b>	
<b>PLAN NO.:</b> 1142-C		<b>LOT COV:</b> 31.0%	
<b>LOT SQ. FT.:</b> 6,357.7		<b>ROOF PITCH:</b> A & B ELEVS.= 4/12 PITCH C ELEV.= 7/12 PITCH	
<b>DRAWN BY:</b> R.P.		<b>DATE:</b> 1/29/04	
<b>APPROVED BY:</b> MB		<b>SCALE:</b> 1"=20'	
<h1>LOT 7</h1>			



**INSULATION CONTRACTORS  
ASSOCIATION  
OF AMERICA**

INSULATION  
CERTIFICATE

44531

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

**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:**

Renaissance Homes LOT # 7-6 TRACT # Mendo Cell

STREET 27 Elckerly Pl. CITY SACRA

**EXTERIOR WALLS:**

MANUFACTURER FG THICKNESS/TYPE 3/4 R- VALUE 13

**CEILINGS:**

BATTS: MANUFACTURER FG THICKNESS/TYPE 12 R- VALUE 38

**BLOWN IN:**

MANUFACTURER CT MINIMUM THICKNESS 1 1/4 R- VALUE 38

SQUARE FOOTAGE COVERED 1272 NUMBER OF BAGS USED 29

**FLOORS:**

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

**SLAB ON GRADE:**

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

WIDTH OF INSULATION \_\_\_\_\_ INCHES

**FOUNDATION WALLS:**

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_

CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

INSULATION CONTRACTOR **ARCADE INSULATION**

CALIFORNIA CONTRACTORS LICENSE #815286

NEVADA CONTRACTORS LICENSE #55201

A. J. ... SIGNATURE

TITLE \_\_\_\_\_

DATE 8-27-01

**INSTALLATION CERTIFICATE**

CF-6R

**27 EVERETT PLACE RENAISSANCE - Heritage Park Mendocino**

**0402292**  
Permit Number

Site Address

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 #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-1R value	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)	
Furnace	Carrier 58MVP040-14	1	0.94	Attic	R-8	22,532	40,000	Plan 1141
Furnace	Carrier 58MVP040-14	1	0.94	Attic	R-8	25,020	40,000	Plan 1142
Furnace	Carrier 58MVP040-14	1	0.94	Attic	R-8	25,595	40,000	Plan 1143
Furnace	Carrier 58MVP040-14	1	0.94	Attic	R-8	30,198	40,000	Plan 1144

**Cooling Equipment**

Equip. Type (pkg. Heat pump)	CEC Certified Compressor Unit Mfr Name and Model #	# of Identical Systems	(1) Efficiency (SEER, etc.) > CF-1R value	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)	
Condenser	Carrier 38TDB036-3 *	1	18.0	Attic	R-8	22,053	36,000	Plan 1141
Condenser	Carrier 38TDB036-3 *	1	18.0	Attic	R-8	23,238	36,000	Plan 1142
Condenser	Carrier 38TDB036-3 *	1	18.0	Attic	R-8	23,151	36,000	Plan 1143
Condenser	Carrier 38TDB036-3 *	1	18.0	Attic	R-8	26,728	36,000	Plan 1144

**\*TXV - Indicates Thermal Expansion Valve On Coil**

(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.

*Hy Jones 8-20-03*  
Signature, Date

**Beutler Corporation**

OR General Contractor ( Co. Name) OR Owner:

**WATER HEATING SYSTEMS:**

Heater Type	CEC Certified Mfr Name & Model #	Distribution Type (Std. point of use)	If Recirculation Control Type	# of Identical Systems	(1) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(2) Efficiency (EF, RE)	(2) Standby Loss (%)	External Insulation R-value
GAS	RHEEM 41VRS0-40TF	STD	N/A	N/A	40,000	50			19.2

(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.

**Facets & Shower Heads:**

All facets 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.

*Hy Jones 9/2/04*  
Signature, Date

**BEUTLER CORP./RENAISSANCE HOMES**  
Including Subcontractor (Co. Name)  
OR General Contractor ( Co. Name) OR Owner

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

# KwikKote

No. 200-920216

## Stucco System Installation Card

Job Name: MENDOCINO COLLECTION  
Address: 27 ELLERTON PLACE  
SACRAMENTO, CA  
Lot #: 00007-6

Stucco System Trade Name: KWIK KOTE  
Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.  
Report No. 3607  
Date of Job Completion: 8/1/04

Home Builder: LENNAR RENAISSANCE  
Address: 1075 Creekside Ridge Dr. #100  
ROSEVILLE, CA

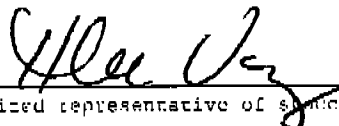
Stucco Contractor: KENYON PLASTERING, INC.  
Address: PO BOX 2077  
North Highlands, CA

Telephone Number: 916/349-8191

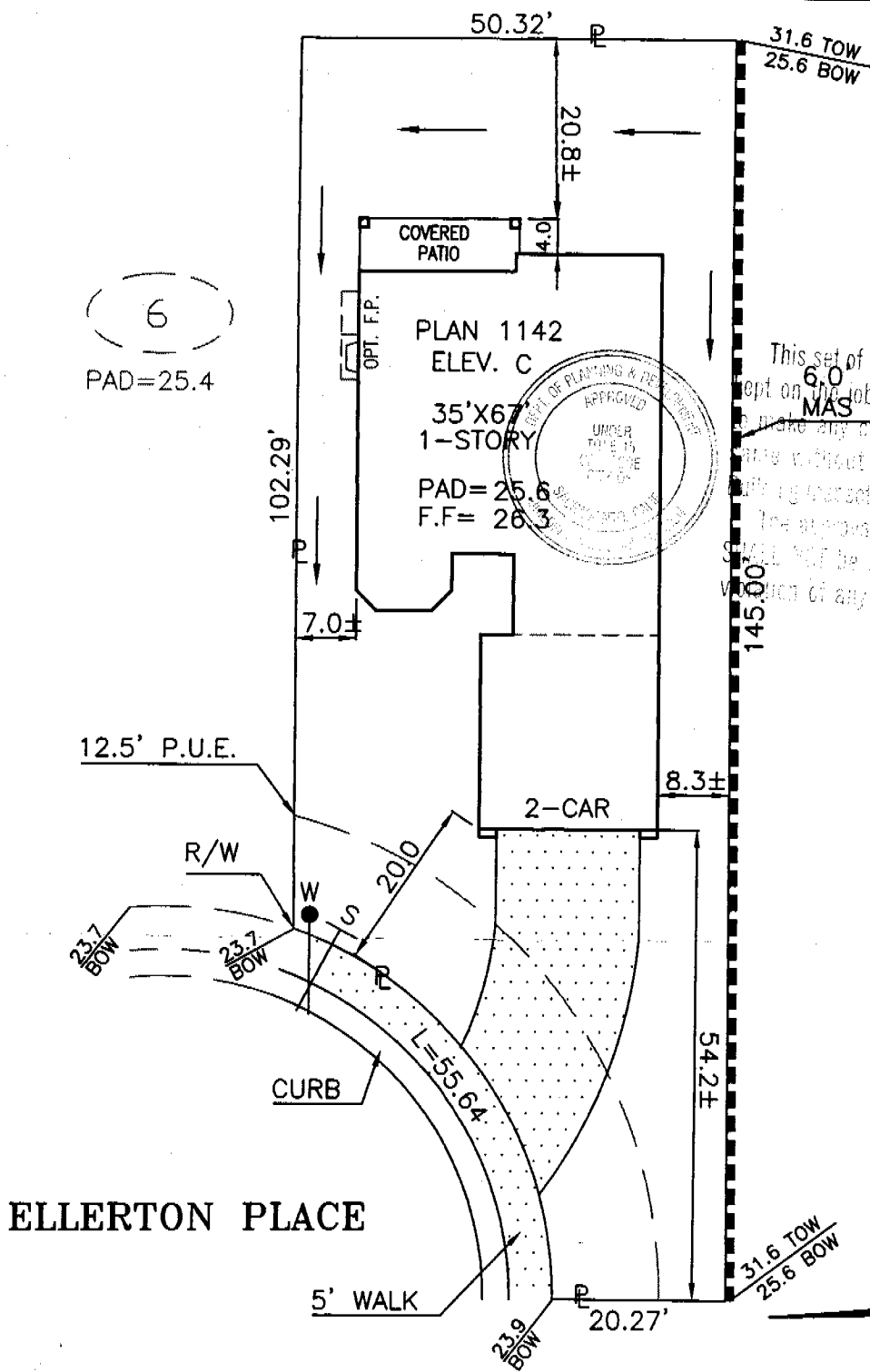
Approved Contractor Number as  
issued by the Stucco Manufacturer: 1001

Card Print Date: 08/02/2004

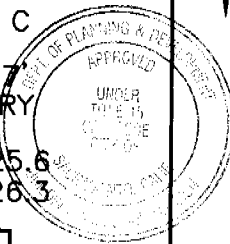
This is to certify that the stucco system on the building exterior at the above address had been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

  
\_\_\_\_\_  
Signature of authorized representative of stucco contractor

8/2/04  
\_\_\_\_\_  
Date



6  
PAD=25.4



This set of plans and specifications may be kept on the job at all times and it is intended to make any changes or alterations from the same without written permission from the Planning & Development Division. The approval of this plan and specifications shall not be held to permit or excuse the violation of any City Ordinance or state law.

DIMENSIONS SHOWN ARE APPROXIMATE EXCEPT FOR MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS AND MAY VARY FROM THIS PLAN.

<b>RENAISSANCE HOMES</b> 1075 CREEKSIDE RIDGE DR. SUITE 100. ROSEVILLE, CA. 95678 PHONE (916) 773-4083 FAX (916) 773-4086	<b>MENDOCINO</b>		<b>PLOT PLAN</b> NOTES:	
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<b>DRAWN BY:</b> R.P.	<b>APPROVED BY:</b> M.B.			<b>DATE:</b> 1/29/04

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 27 Elletton Place Assessor Parcel # 201-0910-029-00  
Lot Number: 7 Subdivision HERITAGE PARK Village 6

OWNER INFORMATION:

Legal Property Owner: LENNAR RENAISSANCE INC. Phone# 916-773-4083  
Owner Address: 2240 DOUGLAS BLVD, SUITE City ROSEVILLE State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor: LENNAR RENAISSANCE INC. Lic. # 732348 Phone # 916-773-4083 Fax 773-4086

PROJECT INFORMATION:

Land Use Zone R/A Occupancy Group R3 Construction Type VN Fed Code 1A  
No. of Stories: 1 No. of Rooms: 5 Street Width: 40 ft  
1<sup>st</sup> Floor Area 1399 2<sup>nd</sup> Floor Area N/A Basement N/A Roof Material TILE  
AREA IN SQUARE FOOT OF:  
Dwelling/Living 1399  
Garage/Storage 440  
Decks/Balconies \_\_\_\_\_  
Carports \_\_\_\_\_  
SCOPE OF WORK: MP # 1142  
NEW CONSTRUCTION SFD

FOR OFFICE USE ONLY

- 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

Date: \_\_\_\_\_ Received by: \_\_\_\_\_