

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0103925  
Insp Area: 4

Site Address: 2917 BERGAMO WY SAC  
Parcel No: 274-0530-004

Sub-Type: NSFR  
UNITY PARKSIDE UNIT 1 LOT 4 Housing (Y/N): N

CONTRACTOR  
REGIS CONTRACTORS  
1425 RIVER PARK DR SUITE 530  
SACRAMENTO CA 95815

OWNER

ARCHITECT

Nature of Work: MP 2043 2 STORY 9 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 B1 License Number \_\_\_\_\_ Date 5-9-01 Contractor Signature Don Moon

**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 & P 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 5-9-01 Applicant/Agent Signature Don Moon

**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 LIBERTY MUTUAL Policy Number WC2-151-030013-019 Date 01/01/2001

\_\_\_\_ (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. 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 5-9-01 Applicant Signature Don Moon

**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.**



**F. RODGERS INSULATION  
RESIDENTIAL, INC.**

Thermal Insulation Contractors  
Residential

**3168**

7775 LAS POSITAS ROAD, SUITE A • LIVERMORE, CA 94550-0216  
(925) 294-9400 • FAX (925) 294-9475  
8541 YOUNGER CREEK DRIVE, SUITE 400 • SACRAMENTO, CA 98828  
(916) 386-9400 • FAX (916) 386-9446

STREET CLUB LOT # 4 TRACT # PRESSURE  
CITY SAC.

EXTERIOR WALLS:

MANUFACTURER ATC THICKNESS/TYPE \_\_\_\_\_ R-  
VALUE 13.19

CEILING:

BATTS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R-  
VALUE 3.50

BLOWN IN: MANUFACTURER \_\_\_\_\_ MINIMUM \_\_\_\_\_ R-  
THICKNESS 3.50 THICKNESS \_\_\_\_\_ VALUE 3.50

SQUARE FOOTAGE COVERED 1000 NUMBER OF BAGS USED 2

FLOORS & OVERHANGS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R-  
VALUE \_\_\_\_\_

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

GENERAL CONTRACTOR \_\_\_\_\_  
CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

INSULATION CONTRACTOR F. RODGERS INSULATION RESIDENTIAL  
CALIFORNIA CONTRACTORS LICENSE #771285

DATE 10-7-01

SIGNATURE [Signature] TITLE \_\_\_\_\_

**KWIKKOTE**  
STUCCO SYSTEM  
INSTALLATION CARD

# 21272  
REGIS CONSTRUCTORS  
PARKSIDE LOT 4  
2917 BERGAMO WAY, SACRAMENTO

Stucco System Trade Name: KWIK KOTE  
Name Stucco Manufacturer: KWIK KOTE CORP  
ICBO Evaluation Service, Inc. Report No. 3607  
Date of Job Completion 10-24-01

Stucco Contractor Kenyon Plastering, Inc.  
Name John W. Kenyon, III  
Address P.O. Box 2077  
North Highlands, CA 95660  
Telephone # (916) 349-8191

Approved Contractor Number as issued by the Stucco Manufacturer: 1

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:

John R. Lyndall

Date: 11-27-01

Builder Copy

789-2005

# INSTALLATION CERTIFICATE

CF-6R

Use of this form to satisfy the requirements of the Administrative Code is optional, but the information must be provided and posted.

Site Address \_\_\_\_\_

Permit Number \_\_\_\_\_

An installation certificate is required to be posted at the building site prior to the issuance of the occupancy permit; this form may be used to meet these requirements. All appliance categories listed below are the actual equipment installed. Note that the efficiency and type of the appliance installed must be equivalent or better than the appliance specified on the certificate of compliance (Form CF-1R). This certificate (or its equivalent) shall be prepared and signed by the person(s) assuming overall responsibility for the appliance installation. Refer to the reverse side of this certificate for an explanation of information required.

I, the undersigned, verify that the equipment listed in the category above my signature is the actual equipment installed and that the equipment meets or exceeds the requirements of the Appliance Efficiency Standards. In addition, I have verified that the equipment is equivalent to or more efficient than the equipment specified on the Certificate of Compliance submitted to demonstrate compliance with the Energy Efficiency Standards for residential buildings.

### HVAC SYSTEMS:

#### Heating Equipment

Heating Equip. Type (Packaged heat pump, etc)	CEC Certified Manuf. Make & Model Number	Actual Efficiency (AEUE, etc.)	Distribution Type and Location	Duct or Piping R-Value	Heating Load Before Over-Sizing (Btu/h)	Heating Equipment Capacity (Btu/h)

#### Cooling Equipment

Cooling Equipment Type (Packaged heat pump, etc)	CEC Certified Compressor Unit Manuf. Make & Model Number	Actual Efficiency (SEER)	Duct Location	Duct R-value

Signature, Date \_\_\_\_\_

\_\_\_\_\_  
HVAC Subcontractor (Co. Name)  
OR General Contractor OR Owner

### WATER HEATING SYSTEMS

Distrib. System	Water Heater Type/#	CEC Certified Manuf. Make & Model #	Energy Factor/Effic.	Tank Volume (gallons)	Insul Wrap R-value	Internal Insul. R-value	Standby Loss (%)	Pilot Light (Btu/h)	Rated Input kW/Btu	Solar/Wood Credits
State	GAS	PRV-50-NEXT	.600	50	12	16	2.2	350	36,000	
State	GAS	PRV-40-NEXT	.602	40	12	16	2.5	350	35,500	

### FAUCETS & SHOWER HEADS:

All faucets and showerheads installed are listed in the Commissions Directory Of Certified Faucets And Showerheads, pursuant to Title-24, Part 6, Subchapter 2, Section 111.

Craig Thomas 10/8/98  
Signature, Date \_\_\_\_\_

Stone Plumbing Co.  
Plumbing Subcontractor (Co. Name)  
OR General Contractor OR Owner

INSTALLATION CERTIFICATE

CF-6R

Regis Contractors - Unity Parkside - Sacramento - Plan 4031 W/Options

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 (pkgs. Heat pump), CEC Certified Mfr Name and Model #, # of Identical Systems, (1) Efficiency (ΔFUE, etc.) > CF-1R value, Duct Location (attic, etc.), Duct or Piping R-value, Heating Load (Btu/hr), Heating Capacity (Btu/hr). Row 1: Furnace, Goodman # GMP075-3, 1, 0.80, Attic, R-4.2, 33,369, 75,000.

Cooling Equipment

Table with 8 columns: Equip. Type (pkgs. 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). Row 1: A/C, Goodman # CK36-1, 1, 10.0, Attic, R-4.2, 28,236, 36,000.

(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 of Part 6), where applicable.

Handwritten signature: Sergio Chicco

Signature, Date

Beutler Heating & Air Conditioning, Inc.

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Table with 9 columns: 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.

- (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 of 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



# O'Connor Freeman & Associates, Inc.

*structural engineering services*

September 27, 2001

Mark Mog  
Regis Homes  
1425 River Park Dr., Suite 530  
Sacramento, CA 95815

Re: Floor Joist Fix @ Plumbing – Plan 4031: Parkside at Riverbend Subdivision  
O'Connor Freeman Job Number: E000903

Mark:

Ken Wiseman contacted our office regarding a problem with the floor joists and the installation of the plumbing pipes for Plan 4031 on lots 1 and 2 in the Parkside at Riverbend subdivision. Specifically, an eight-foot section of floor joists below second floor bathroom was completely removed in order to install the plumbing pipes. This created a problem with the support of the floor and shear transfer of the shear wall below. As a result of this field situation, Ken needed our office to design and detail a fix in order to adjust the structural design in this area.

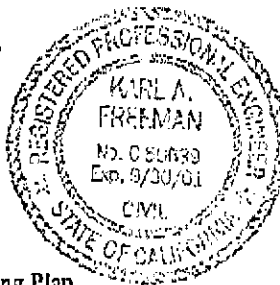
In response to this request, we have designed and detailed how the floor framing is to be adjusted in order to compensate for this field adjustment for the plumbing pipes. See the attached detail and partial plan exhibit for reference and review.

If you should have any further questions or comments please do not hesitate to call.

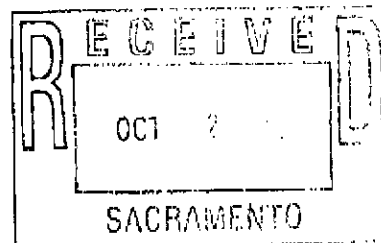
Sincerely,

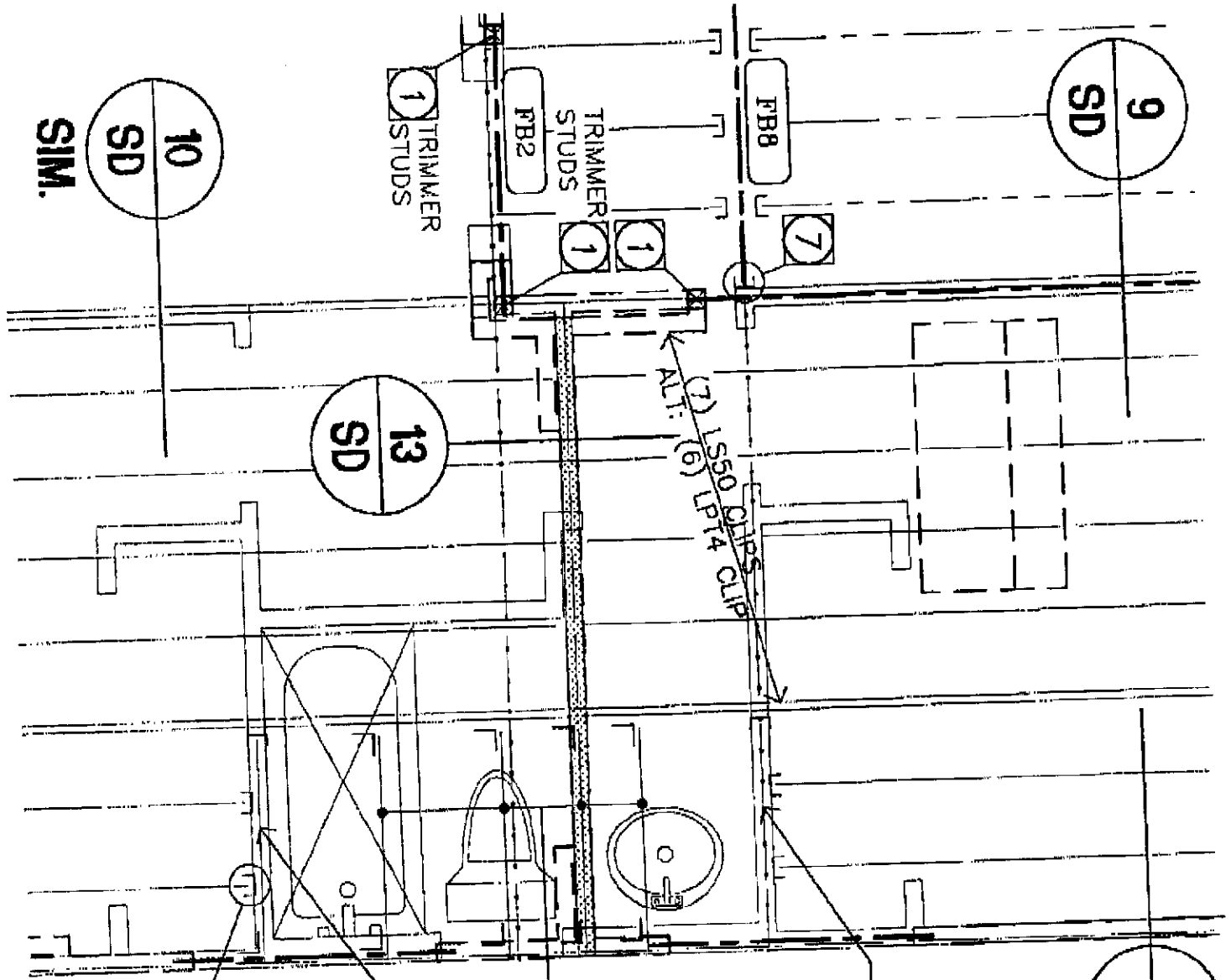
O'Connor Freeman & Associates, Inc.

Karl A. Freeman, P.E.



Enclosures: Detail and Partial Floor Framing Plan  
cc: file





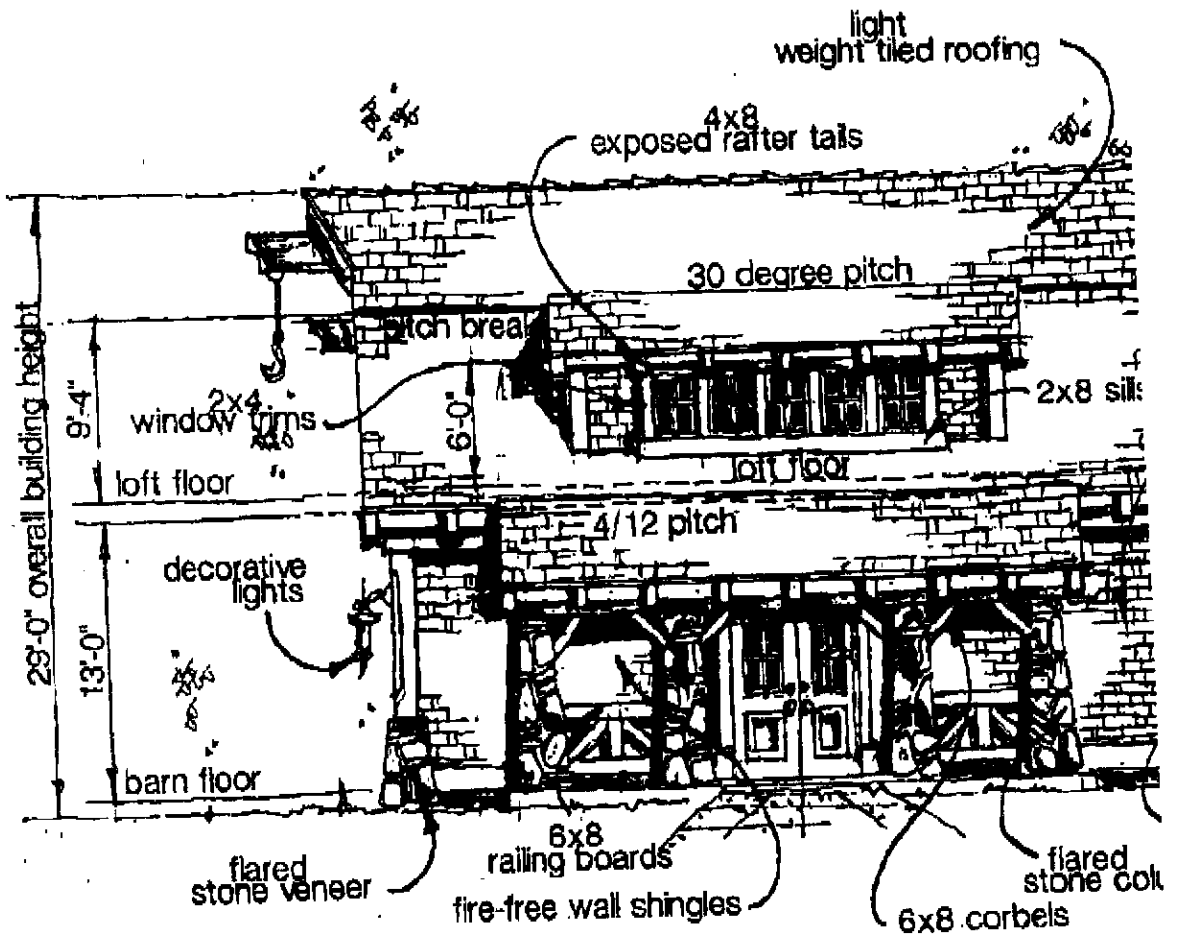
11 7/8" TJ/PRO-250  
JOIST w/ SIMPSON IUT11  
OR EQUIV. HANGER

2x4 DF #2 @ 24" O.C. w/  
A34 CLIPS EA. END

11 7/8" TJ/PRO-250  
JOIST w/ SIMPSON IUT11  
HANGER OR EQUIV.

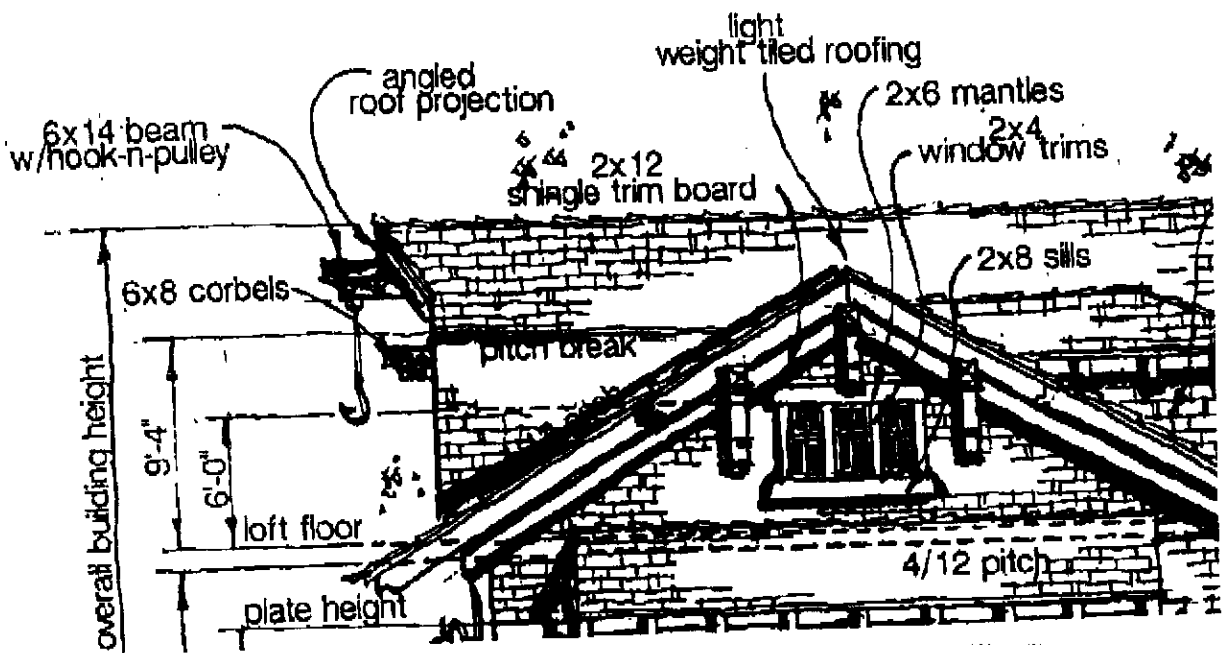
"SIMPSON" IUT11 HANGER  
OR EQUIV. (TYP.)

10 SD  
SIM.

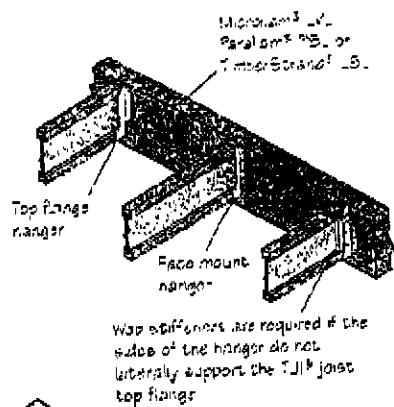


# RIGHT SIDE ELE

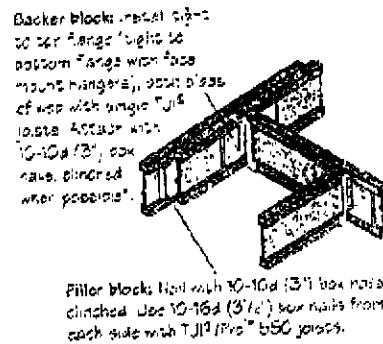
scale 1/8" = 1'-0"



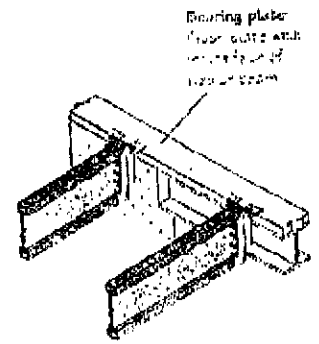




H1



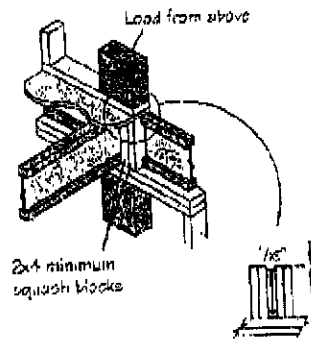
H2



H3

\* With top flange hangers, backer block required only for downward factored loads exceeding 250 lbs. or for uplift conditions

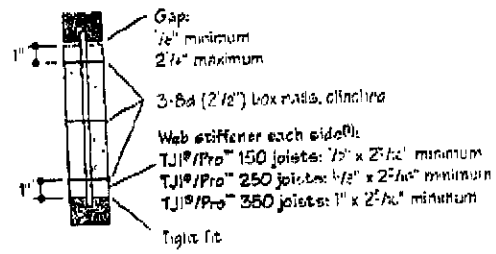
WEB STIFFENER ATTACHMENT



CS

Use 2x4 minimum squash blocks to transfer load from above to bearing plate below

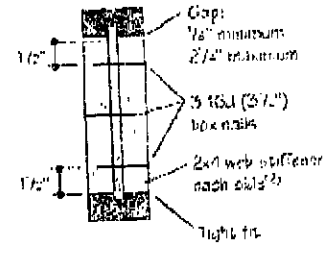
TJI®/PRO™ 150, 250, 350 JOISTS



W

(1) Web stiffener material shall be sheathing meeting the requirements of PS 1 or PS 2 with face grain parallel to long axis  
(2) 2x4 construction grade or better

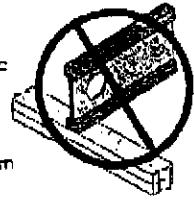
TJI®/PRO™ 550 JOISTS



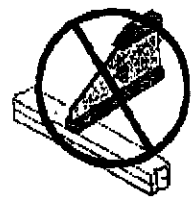
THESE CONDITIONS ARE NOT PERMITTED

DO NOT cut holes too close to support

Refer to hole charts on page 19 for minimum distance from support.

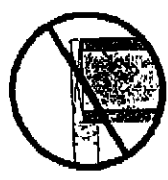


DO NOT bevel cut joist beyond inside face of wall.



DO NOT use solid-sawn dimension lumber for rim board or blocking.

Dimension lumber may shrink after installation.



DO NOT install hanger overhanging face of plate or beam.

Flush bearing plate with inside face of wall or beam.

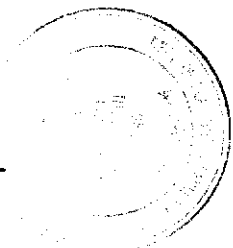
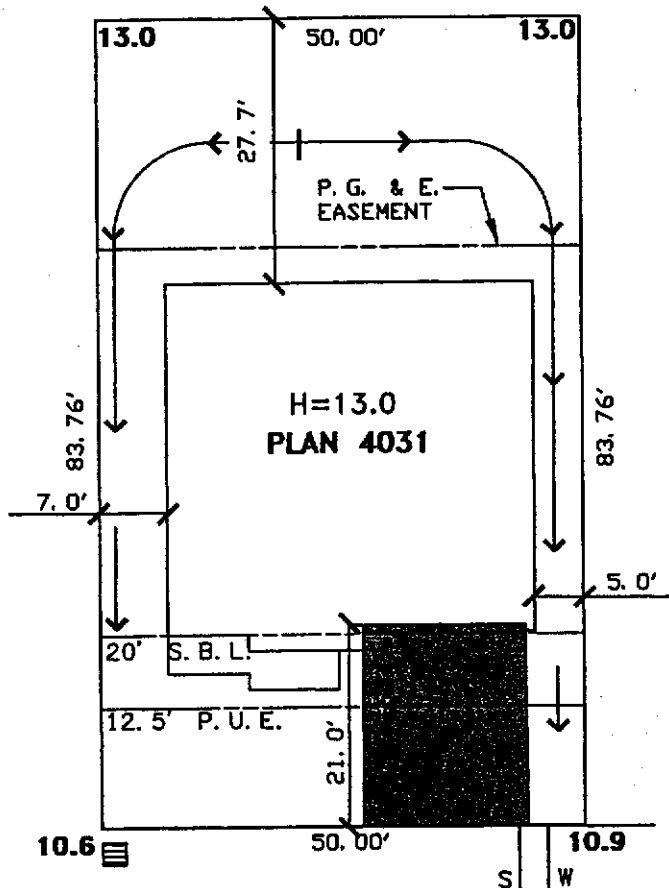


REFER TO PAGE 6 FOR GENERAL NOTES FOR DETAILS

FILLER AND BACKER BLOCK SIZES

TJI®/PRO™	150	250	350	550
DEPTH	9 1/2" or 11 3/8"	9 3/4" or 11 3/8"	14" or 16"	14 1/2" or 16"
FILLER BLOCK (Detail H2)	1 1/2" net	2x6	2x8	2x6 + 1/2" plywood 2x8 + 1/2" plywood
CANTILEVER FILLER (Detail H4)	2x6 4'-0" long	2x6 1'-0" long	2x10 6'-0" long	2x6 + 1/2" plywood 4'-0" long 2x10 + 1/2" plywood 6'-0" long
BACKER BLOCK (Detail H2)	1/2" or 3/4"	3/8" or 1/2"	3/8" or 1/2"	1" ext 1" ext

\* If necessary, increase filler and backer block height for face mount hangers. Maintain 1/8" gap at top of joist, see detail W. Filler and backer block dimension should accommodate required nailing without splitting.



BERGAMO WAY

This set of plans and specifications must be kept on the job at all times and a copy must be maintained in the office of the contractor. The contractor shall be responsible for the accuracy of the information provided on these plans and specifications.

LOT AREA: 4,188 SF  
LOT COVERAGE: 27%

DATE: 11-21-00  
A.P.N.: 274-0530-004  
ADDRESS: 2917 BERGAMO WAY

**The Spink Corporation**  
2590 VENTURE OAKS WAY  
SACRAMENTO, CA. 95833  
PH (916)925-5550 FAX (916)921-9274

UNITY PARKSIDE  
UNIT NO. 1  
LOT 4  
PLAN 4031-B

UNITY PARKSIDE  
CITY OF SACRAMENTO, CA  
REGIS HOMES