

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0405427
Insp Area: 3
Thos Bros: 318-B5

Site Address: 6051 BELLEVIEW AV SAC
Parcel No: 038-0360-030 **BELLEVIEW ESTATES LOT#30**

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

CONTRACTOR
SKYLINE DEVELOPMENT
9340 OAK AVE
ORANGEVALE CA 95662

OWNER

ARCHITECT

Nature of Work: MP 1835 1 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 California Pacific Bank Lender's Address 300 Oak Rd. Walnut Crk.

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 592818 Date 5/12/04 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 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 5/12/04 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 STATE FUND Policy Number 229-0023052 Exp Date 01/01/2004

(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 5/12/04 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.

57'

DRAINAGE

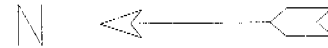
DRAINAGE

18'

A/C

FP

BELLVIEW ESTATES
LOT # 30 PLAN 1835
6051 BELLVIEW AVE.



APN
038-0360-030

RESIDENCE

10'

5'

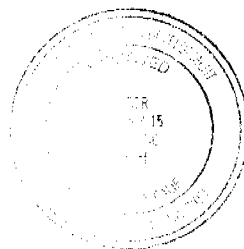
100'

SWALE

SWALE

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 Inspector District.

The project of this lot and subdivision shall not be let to contract until the variation is approved by the Building Inspector District.



GARAGE

PORCH

DRAINAGE

CONCRETE DRIVE

DRAINAGE

25'

ABC INSULATION & SUPPLY CO.
11386 AMALGAM WAY
RANCHO CORDOVA, CA 95670
Phone (916) 635-7171
Fax (916) 635-7717
State License No. 369263

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:

LOT# 3D TRACT Bellview
Estation
STREET 6051 Bellview Ave CITY Sacramento

EXTERIOR WALLS:

Manufacturer Certainford Thickness 3 1/2" R Value 13

CEILINGS:

Batts
Manufacturer Knauf Thickness 12" R Value 38

Blown In
Manufacturer Green Fiber Thickness 10.3" R Value 38

Square footage covered 1249

Garage ceiling - living space above
Manufacturer DIA Thickness _____ R Value _____

FLOORS:

Manufacturer DIA Thickness _____ R Value _____

POLYSEAL/CAULK PER TITLE 24: Yes

GENERAL CONTRACTOR _____

CALIFORNIA CONTRACTORS LICENSE# _____ DATE _____

SIGNATURE TITLE

INSULATION CONTRACTOR ABC INSULATION & SUPPLY CO. DATE 3.7.05

David Roward Site Manager
SIGNATURE TITLE

OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

ICBO Report # 4004

Builder: **SKYLINE DEVELOPMENT**
Project Name: **BELLEVUE ESTATES**Lot Numbers: 29 Date of Job Completion: January 6, 2005**PLASTERING CONTRACTOR:**Name: STUCCO WORKS, INC.Address: 5900 WAREHOUSE WAY - SACRAMENTO, CALIFORNIA 95826Telephone No: (916) 383-6667Contractor 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.

March 28, 2005
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

Site Address: Skyline Development - Plan 1835

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 #	# of Identical Systems	(1) Efficiency (AFUE, etc.) > CF-IR value	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
FAU	Carrier#58STX070-12	1	80	ATTIC	R4.2	30,952	70,000

Cooling Equipment

Equip. Type (pkg. Heat pump)	CEC Certified Compressor Unit Mfr Name and Model #	# of Identical Systems	(1) Efficiency (SEER, etc.) > CF-IR value	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
A/C	Carrier#38BRC036	1	10	ATTIC	R4.2	21,151	31,800

(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

BEUTLER HEATING & AIR

Installing Subcontractor (Co. Name)

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	(2) Rated Input (kW or Btu/hr)	Tank Volume (gallons)	(2) Efficiency (EF, RE)	(2) Standby Loss (%)	External Insulation R-value
GAS	STATE 626504006	✓		1	40,000	50			

(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.

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

Site Address 6051 Bellview Ave

Permit Number _____

FENESTRATION/GLAZING:

Manufacturer Alside

HOUSE			Product	Product	Total Quantity of Units		Shading		
1	Window	Front	(N)	16.0 0.400 0.380	0	90	Standard/0.76	Standard/0.68	
2	Window	Front	(N)	16.0 0.400 0.380	0	90	Standard/0.76	Standard/0.68	
3	Window	Right	(W)	20.0 0.400 0.380	270	90	Standard/0.76	Standard/0.68	
4	Window	Right	(W)	16.0 0.400 0.380	270	90	Standard/0.76	Standard/0.68	
5	Window	Back	(S)	16.0 0.400 0.380	180	90	Standard/0.76	Standard/0.68	
6	Window	Back	(S)	16.0 0.400 0.380	180	90	Standard/0.76	Standard/0.68	
7	Window	Back	(S)	33.3 0.400 0.380	180	90	Standard/0.76	Standard/0.68	
8	Window	Left	(E)	25.0 0.400 0.380	90	90	Standard/0.76	Standard/0.68	
9	Window	Left	(E)	9.0 0.400 0.380	90	90	Standard/0.76	Standard/0.68	
10.									
11.									
12.									
13.									
14.									
15.									

1 Manufactured fenestration products use the values from the product label. Field fabricated fenestration products 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-1F. 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.

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 (from Part 6), where applicable.

Item #s (if applicable)	Signature, Date	<u>Skyline Enterprises, Inc.</u>
		Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

Item #s (if applicable)	Signature, Date	
		Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

Item #s (if applicable)	Signature, Date	
		Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

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