

CITY OF SACRAMENTO

New City Hall, 915 I St., 3rd Floor, Sacramento, CA 95814

Permit No: 0615481

Insp Area: 2

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 8128 LINDA ISLE WY SAC

Parcel No: ISLANDS @ RIVERLAKE LOT # 102

CONTRACTOR

REGIS CONTRACTORS
1435 RIVER PARK DR SUITE415
SACRAMENTO CA. 95815

OWNER

PAID ARCHITECT
CITY OF SACRAMENTO
NOV 17 2006

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

Nature of Work: MP2034 2 STORY 7 RM SFR

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is no construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name Bank of the West Lender's Address 1800 3rd St #250 SAC CA 95814

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 708694 Date 11/17/06 Contractor Signature [Signature]

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor 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 _____ Applicant/Agent 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 NATIONAL UNION FIRE INS. CO. Policy Number WC0270307 Exp Date 09/01/2006

(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.

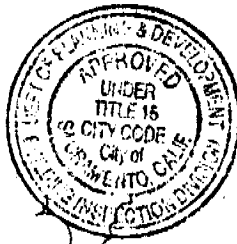
Date 11/17/06 Applicant Signature [Signature]

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.

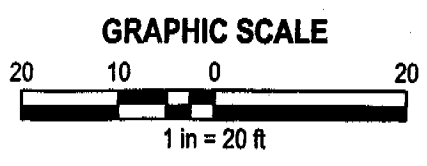
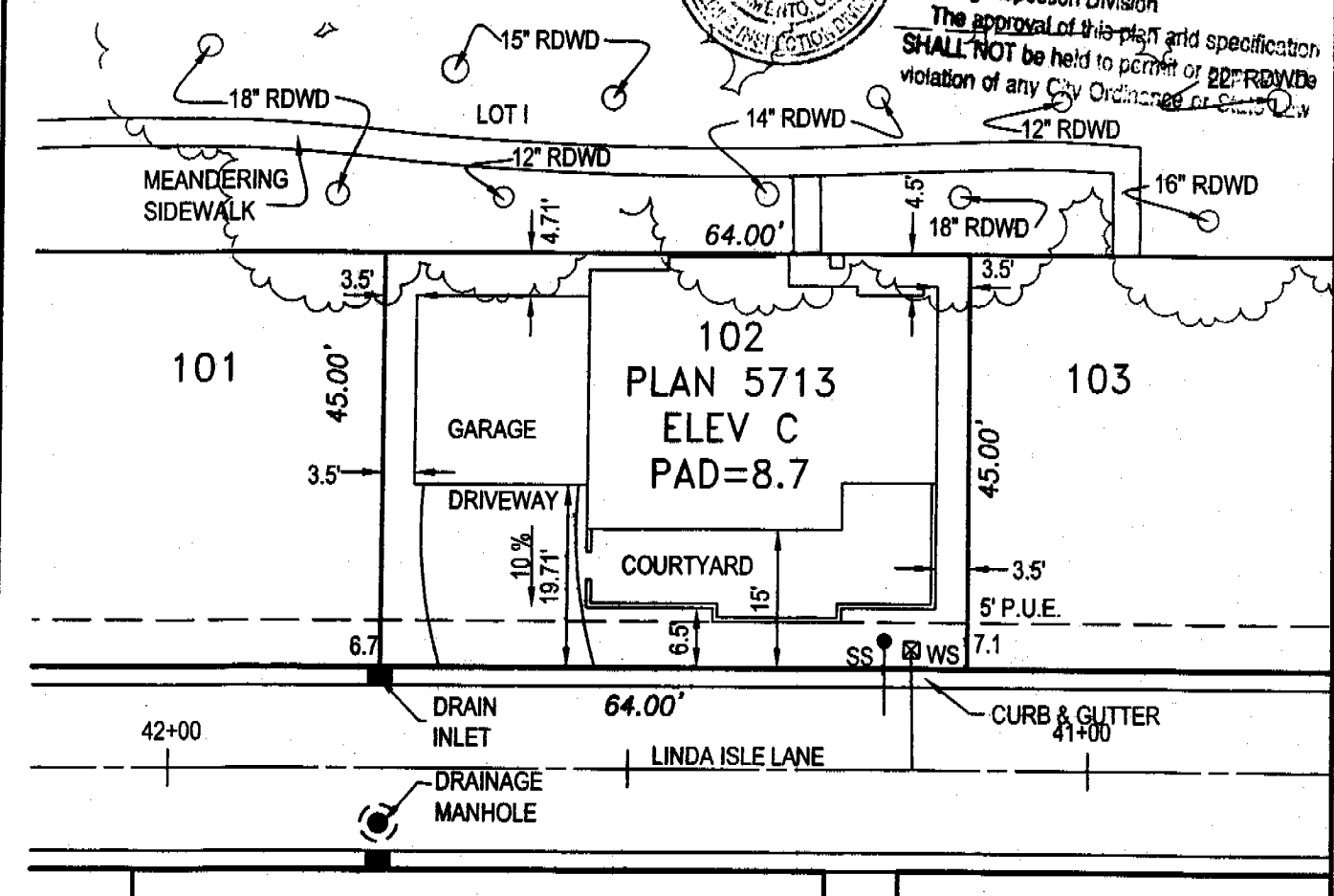
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINES, DRAINAGE CONTROL ELEVATIONS AND DIRECTION OF DRAINAGE FLOW. THIS IS DONE TO CONFORM TO LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN ON THIS PLAN IS APPROXIMATE EXCEPT FOR MINIMUM SETBACKS WHICH ARE REQUIRED BY LOCAL ORDINANCE. THIS PLAN DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.


Dwg: X:\2001\100022\DWG\ENGR\PI\PLANS\10002-C1-01002-102.DWG | Saved: 11-08-06 10:56am MK/MCAD | Ploated: 11-08-06 11:18am MK/MCAD



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 excuse violation of any City Ordinance or State Law.



PRELIMINARY
X
APPROVED BY CLIENT

 MORTON & PITALO, INC. CIVIL ENGINEERING • PLANNING • SURVEYING 1788 Tribute Road, Suite 200 • Sacramento, CA 95815 phone: 916.927.2400 • fax: 916.567.0120 • survey fax: 916.563.6770 email: engr@mpengr.com • web: www.mpengr.com			
DRAWN:	ALP	JOB NO:	01000201
CHECKED:	RWH	DATE:	AUGUST.2006
SCALE:	1"=20'	SHEET:	1 of 1

Plot Plan

LOT 102

8128 LINDA ISLE WAY
THE ISLANDS AT RIVERLAKE
 SACRAMENTO, CALIFORNIA



F. RODGERS

SPECIALTY CONTRACTOR, INC.

Thermal Insulation & Specialty Contractor

INSULATION
CERTIFICATE

14066

1300 S. RIVER ROAD, SUITE 125 • WEST SACRAMENTO, CA 95691
(916) 386-9500 • FAX (916) 386-9446

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATION, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

REGIS Homes LOT # *102* TRACT # *ISLANDS*

STREET _____ CITY *SACRAMENTO*

EXTERIOR WALLS:

MANUFACTURER *OC* THICKNESS/TYPE _____ R-
VALUE *13/19*

CEILINGS:

BATTS: MANUFACTURER *OC* THICKNESS/TYPE _____ R-
VALUE *30*

BLOWN IN:

MANUFACTURER *SM* THICKNESS/TYPE _____ R-
MINIMUM VALUE *30*

SQUARE FOOTAGE COVERED *878* NUMBER OF BAGS USED *16*

FLOORS & OVERHANGS: MANUFACTURER *OC* THICKNESS/TYPE _____ R-
VALUE *19*

OTHER: MANUFACTURER _____ THICKNESS/TYPE _____ R-
VALUE _____

MANUFACTURER _____ THICKNESS/TYPE _____ R-
VALUE _____

GENERAL CONTRACTOR _____

CALIFORNIA CONTRACTORS LICENSE # _____

DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR F. RODGERS INSULATION INC.
CALIFORNIA CONTRACTORS LICENSE #499755

DATE *5-9-07*

SIGNATURE *Max Land* TITLE *INSTALLER*

White - Customer Copy Yellow - Invoice Copy Pink - Field Copy FRI 115-13



Installation Card

Job Address

ISLANDS AT RIVERLAKE | Lot 0000102
8128 LINDA ISLE LANE
SAN MATEO

Stucco System Tradename: KWIK KOTE

Name of Stucco Manufacturer: KWIK KOTE CORP.

ICC Evaluation Service, Inc.
Evaluation Report ESR-1711
Date of Job Completion

Stucco Contractor

Name: KENYON PLASTERING, INC.

Address: PO BOX 2077

North Highlands CA, 95660

Telephone Number: 918/349-8191

Approved Contract Number as issued by KWIK KOTE: 1001

This is to certify that the stucco system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the KWIK KOTE instructions.


Signature of authorized representative of stucco contractor

Date

6-22-07

7851

INSTALLATION CERTIFICATE (Part 2 of 13) CF-6R

SITE ADDRESS: Regis Contractors - Islands @ Riverlakes PERMIT NUMBER:

FENESTRATION/GLAZING:

M1 Home Products Capitol Series Manufacturer/Brand Name

Table with columns: Product U-Factor, Product SHGC, # of Panes, Total Quantity of Like Product, Square Feet, Exterior Shading Device, Comments/Location/Special Features. Includes entries for Single Hung, Picture Window, Horizontal Slider, and Patio Door.

Through House Out the

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-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.

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.

Signature: Mary Huttel 7/13/05 Medallion Industries, Inc. 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

Rev of 3/4/05

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 (AFUE, etc.)	Distribution Type and Location	Duct or Piping R-Value	Heating Load Before Over-Sizing (Btuh)	Heating Equipment Capacity (Btuh)

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 Type	Water Heater Type	CEC Certified Manuf. Make & Model #	Energy Factor Eff.	Tank Volume (gallons)	Insul. Wrap R-value	Internal Insul. R-value	Standby Loss (%)	Pilot Light (Btuh)	Rated Input kW/Btu	Solar/Wood Credits
State	GAS	GS-75 XRBS		75		16	2.85	350	75,100	
State	GAS	GS-50 YRGT		50	12	16	2.2	350	40,000	
State	GAS	GS-40 YRGT		40	12	16	2.5	350	40,000	

FAUCETS & SHOWER HEADS:

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

Signature, Date _____

ADAMS PLUMBING Co.
Plumbing Subcontractor (Co. Name)
OR General Contractor OR Owner

Revised December 1992