CITY OF SACRAMENTO 1231 I Street, Sacramento, CA 95814

Site Address: 11 ENCLAVE PL SAC

Parcel No:

THE HAMPTONS VIL. 2 LOT #191

CONTRACTOR KB HOME NORTH BAY INC. 611 ORANGE DR

VACAVILLE CA. 95687

OWNER

Insp Area:

Permit No: 0510228

Thos Bros:

Sub-Type:

NSFR

Housing (Y/N): N

ARCHITECT

Nature of Work: MP1722	2 STORY 7RM 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	<u>d</u> nder's Address				
(commencing with section 7000) of	RS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 f Division 3 of the Business and Professions Code and my license is in full force and effect. umber _ Date _ 7/21/05 _ Contractor Signature				
reason (Sec. 7031.5, Business and prior to its issuance, also requires the License Law (Chapter 9 (commence)	RATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors sing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five				
who does such work nimself or her	y, or my employees with wages as their sole compensation, will do the work, an the titre is not intended or offered for essional Code: The Contractors License Law does not apply to an owner of properly who builds or improves thereon, and self or through his/her own employees, provided that such introduction are not intended or offered for sale. If, however, within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for				
I, as owner of the property, The Contractors License Law does licensed pursuant to the Contractors	am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) License Law).				
I am exempt under Sec	B& PC for this reason:				

Date Ower 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 7/21/05 Aplicant/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:

Policy Number

(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, Ishall 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.

Aplicant Signature 7/21/05

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

CITE ADDRESS	LOT 191 HA	MPTON (CLUSTER)	NATOMAS	CA			
SHE ADDITEO	NUMBER		CITY	STATE			
ocu ince							
CEILINGS:					00		
BL.OW:	MANUFACTURER	GREEN FIBER	THICKNESS _	10.3" R/VALUE	38		
BATTS:	MANUFACTURER	KNAUF	THICKNESS _	13"	38		
		KNAUF					
			_				
EXTERIOR WA	LLS:						
	MANUFACTURER		THICKNESS _	3.5" R/VALUE	13		
		KNAUF					
FLOOR INSUL	ATION:						
		Phiaist	THICKNESS	6.5" R/VALUE	19		
	MANUFACTURER	KNAUF		4,0			
AIR INFILTRA	TION: (TITLE 2	4)					
	YES	XXX NO					
OTUED.							
OTHER							
GENERAL CON	ITRACTOR: KE	HOMES	(LICENSE #				
BY:		TITLE		DATE			
INSULATION C	ONTRACTOR:/ W	ESTERN INSULATION LP	LICENSE	# 794484			
, 2	1 4-7			DATE1			
BY:	rydulhe	TITLE AUTH. A	GENT	DATE1	1/8/2005		
BECKY GU	THERZ	\mathcal{L}					
		//					

Size Address 11 Enclave Place

Permit Number

FENESTRATION/GLA	/Y Y B. T. / T
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Tuesd Name	Product U-Factor¹ (≤ CF-1R value) î	Product SHGC¹ (≤ <u>C7-1R value)²</u>	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhane	Comments/Location/ Special Features
Manufacturer/Brand Name (GROUP LIKE PRODUCTS)		 -	ń				10.62
1. Pacific		<u>54</u> <u>XJ</u>	=======================================				10mE
2	<u> </u>	100 PW	2				
3	-39	PD					
4	3. d. d	<u></u>					
3. 13/							
7							
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*	 						

- 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.
- 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 regarderments for manufactured devices (from Part 6), where applicable.

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

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 A CONTRACTOR

CF-6R KB HOME - HAMPTONS (CLUSTER) LOT (A) Permit Numbe sted at the building site or made available for all appropriate inspections. (The information An installation certificate is 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 Heating Duct Equip. Duct or Piping Heating Load Capacity # of Identical (1) Efficiency (AFUE, CEC Certified Mfr name Location Type (pkg. Heat pump) (Btu/hr) (Btu/hr) etc.) > CF-1R value (attic, etc.) and Model # Systems 28,313 70,000 **PLAN 1708** 80% ATTIC 6 FURNACE Carrier 58STX070-12 **PLAN 1722** 6 27,627 70,000 80% ATTIC FURNACE Carrier 58STX070-12 31,392 70,000 **PLAN 1848** ATTIC 6 80% FURNACE Carrier 58STX070-12 1 90,000 PLAN 1922 27,627 1 80% ATTIC 6 FURNACE Carrier 58STX090-16 Cooling Equipment Cooling CEC Certified Compressor Duct Cooling Load # of Identical (i) Efficiency (SEER, Location Duct R-value Capacity Type (pkg. Unit Mfr Name and (Btu/hr) Systems etc.) > CF-1R value (attic, etc.) (Btu/hr) Model # Heat pump) 22,792 33,100 PLAN 1708 13.0 ATTIC 6 Carrier 38BRC036* A/C 23,526 PLAN 1722 13.0 ATTIC 6 33,100 A/C Carrier 38BRC036* 13.0 26,043 33,100 **PLAN 1848** ATTIC Carrier 38BRC036* A/C 6 23,526 38,600 **PLAN 1922** 13.0 Carrier 38BRC042* ATTIC A/C

* = TXV valve installed as part of coil

(1) zreads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) is 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 manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable

J4/05

Signature, Date

BEUTLER CORPORATION

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

מטטע אס:	1P: NA	9258469	7 25	CAN AM						PAGE
TEXCULA	Lot	-	for		1,80	122		18	Plan	_
	LLATIO			11E	ra Ch	(Page	l of 13)	2 = 1 =		CF-6R
	tons Clust	_		C	LET !		Permit	OS LC Number	790	Ď
informatio completion	ation certificat in provided on n of final inspe- r, per Section	this form is ection, a cop	required; hos	wever, use of t	this form to	provide th	e informa	tion is opt	ional.) Aft	сг
HVAC SY Heating E				-			_			
Equip. Type (pkg. heat pump)		ed Mfr Name of Number	# of Identical Systems	Efficiency (AFUE, etc.) (≥CF-1R value	Loca	ation 1	Duct or Piping t-value	Hesting Load (Btu/hr)		Heating Capacity (Btu/hr)

Cooling E Equip, Type (pkg. heat pump)	CEC Certific Unit Mft I	od Compressor Name and Number	# of Identical Systems	Efficiency (SEER, etc.)' [≥CF-1 R val o	Loca		Duct L-value	Cooling Load (Btu/hr)		Cooling Capacity (Btu/hr)
Efficien manufa	ndersigned, ve at than that spe acy Standards ctured devices are, Date	for residenti	e certificate c al buildings,	of compliance and 3) equipm iciency Regula	(Form CF) nent that m ations or Pa	-1R) submineets or excurrence of the contract	itted for co cods the ap applicable	ompliance opropriate le.	with the	Fasses
····	HEATING S	YSTEMS:			OR Genera	Subcontract al Contracto	tor (Co. Na or (Co. Na	ame) nie) OR G	wner	
Heater Type	CEC Certified	i Mfr	Distribution Type (Std. Point-of-Use)	If Recir- culation, Control Type	# of Identical Systems	Rated ² Input (kW or Btu/hr)	Tank Volume (galions)	EM- cioncy ² (EF, RE)	Standby ² Loss (%)	External Insulation R-value ³
GAS	AO Smith GV	/R-50	STD	n/a	1	40,000	50	.62	n/a	R16
For instan	gns stornge (rated gas storage water tancous gas water nal insulation is m	r heaters (rated r heaters, list l	input of greater Recovery Efficie	man 75,000 Btti/ ncv and Rated Inc	hr), list Recov	cry Efficiency	pump water y, Standby L	heaters, list	Energy Fact d Input.	 -
Faucets & All faucets	Shower Head and showerhe	ds: eads installed	i are certified	to the Comm	ission, pur	suant to Tit	le 24, Part	6, Section	ı [1],	
I, the ut or more <i>Energy</i>	ndersigned, ver efficient than Efficiency Standards for manu	rify that equ that specifi andards for	ipment listed ed in the cert residential	above my sign	nature is: 1) the actual orm CF-IR	equipments	t installed d for corr	; 2) equiva	

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

2800

07-07-05

1217.013

STREET LIGHT SERVICE POINT

FIRE HYDRANT STOP SIGN