

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

Permit No: **0306880**  
Insp Area: 4  
Thos Bros: 257-C4

Site Address: **240 PELICAN BAY CR SAC**

Sub-Type: NSFR

Parcel No: 201-0730-119  
N

HERITAGE @ NATOMAS PARK 1B LOT 57

Housing (Y/N):

CONTRACTOR

US HOME  
2366 GOLD MEADOW DR STE 100  
GOLD RIVER, CA 95670 77041

OWNER

ARCHITECT

Nature of Work: MP1454 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 B License Number 451839 Date 6/6/03 Contractor Signature Don McCleary

**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 \_\_\_\_\_

**PAID**  
**CITY OF SACRAMENTO**  
JUN 06 2003  
NORTH PERMIT CENTER

**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 6/6/03 Applicant/Agent Signature Don McCleary

**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 MWC10815000 Exp Date 11/01/2003

\_\_\_\_ (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 6/6/03 Applicant Signature Don McCleary

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.**

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 240 Pelican Bay Cir.  
 Lot Number: 57

Assessor Parcel # 201-0730-119  
 Subdivision Heritage @ Natomas Park Village **1B**

OWNER INFORMATION:

0306880

|   |   |
|---|---|
| Legal Property Owner: <u>US Ecme</u>      | Phone# <u>(916) 858-3900</u>                            |
| Owner Address <u>2366 Gold Meadow Way</u> | City <u>Gold River</u> State <u>ca</u> Zip <u>95670</u> |

CONTRACTOR INFORMATION:

|                            |                      |                               |                           |
|----------------------------|----------------------|-------------------------------|---------------------------|
| Contractor: <u>US Ecme</u> | Lic. # <u>451839</u> | Phone # <u>(916) 858-3900</u> | Fax <u>(916) 858-3925</u> |
|----------------------------|----------------------|-------------------------------|---------------------------|

Don McCloskey (916) 719-9050

PROJECT INFORMATION:

|  |                                  |                             |                     |
|--|----------------------------------|-----------------------------|---------------------|
| Land Use Zone <u>R1A</u>               | Occupancy Group <u>R3</u>        | Construction Type <u>VN</u> | Fed Code <u>1A</u>  |
| No. of Stories: <u>1</u>               | No. of Rooms: _____              | Street Width: _____         |                     |
| 1 <sup>st</sup> Floor Area <u>1454</u> | 2 <sup>nd</sup> Floor Area _____ | Basement _____              | Roof Material _____ |
| AREA IN SQUARE FOOT OF:                |                                  |                             |                     |
|  | Dwelling/Living <u>1454</u>      | _____                       |                     |
|  | Garage/Storage <u>455</u>        | _____                       |                     |
|  | Decks/Balconies _____            | _____                       |                     |
|  | Carports _____                   | _____                       |                     |
| SCOPE OF WORK: _____                   |                                  |                             |                     |
| _____                                  |                                  |                             |                     |

FOR OFFICE USE ONLY

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Information Above Complete | <input type="checkbox"/> AR Flood Waiver Required             | <input type="checkbox"/> Planning Approval            |
| <input type="checkbox"/> Violation Files Checked    | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval       |
| <input type="checkbox"/> Standard Setbacks          | <input type="checkbox"/> Water Development Infill Area        | <input type="checkbox"/> Special Fee Districts Apply: |
| <input type="checkbox"/> County Sewer               | _____   |   |

-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 | c) Owners Name     |
| b) New Floor Area           | d) Project Address |

**HARRIS & SLOAN** CONSULTING GROUP, INC.  
STRUCTURAL ENGINEERING CONSULTANTS AND DESIGNERS

PROJECT: HERITAGE NATOMAS PAV 1  
CLIENT: USHOME

DATE: 10-16-03 JOB # US394  
BY: TH PAGE: 1 OF 1

PRODUCT 1 - HERITAGE NATOMAS PAV

PLANS 1297, 1454, 1538, 1797

HEADER SUBSTITUTION, BEAM SUBSTITUTION, & PLYWOOD INSTALLATION.

1. IT IS O.K. TO USE A 6XB#1 DF HEADERS IN LIEU OF THE PLAN-SPECIFIED 4X2#2 DF HEADERS FOR TYPICAL HEADERS UP TO 6'-0" SPAN.

2. IT IS O.K. TO USE 4X12 #2 DF BEAMS AT THE PORCH AREAS OF ALL PLANS/ELEVATIONS WHERE 6XB#1 DF OR 8XB#1 DF BEAMS ARE CURRENTLY SPECIFIED ON THE PLANS. USE BC/POST CAPS WHERE SPECIFIED ON THE PLANS - (SPANS UP TO 10'-0")

3. IT IS O.K. TO INSTALL WALK SHEATHING (3/8" CDX/OSB) HORIZONTALLY (8' LONG/4' TALL) OR VERTICALLY (4' LONG/8' TALL) ON SIPS AT 16" O.C. IN ALL CASES, ADJOINING PANEL EDGES REQUIRE EDGE NAILING & BLOCKING PER THE SHEATHING SCHEDULE.

WTS



PROJECT: PRODUCT / HERITAGE AT NATOMAS

DATE: 9-2-03 JOB # US394

CLIENT: USHOME

BY: TH PAGE: 1 OF 1

ALL PLANS

HERITAGE AT NATOMAS

SHEARWALL SPECIFICATION CLARIFICATION

THE SHEARWALL SCHEDULE SPECIFIED "SOLE PLATE NAILING"  
APPLIED TO RAISED FLOOR CONDITIONS ONLY.

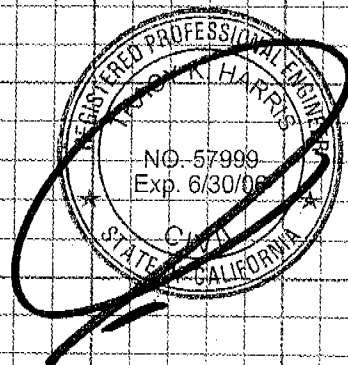
IT IS INTENDED FOR 16d NAILING REQUIREMENTS

FROM THE SOLE PLATE TO THE RIM MATERIAL / FRAMING

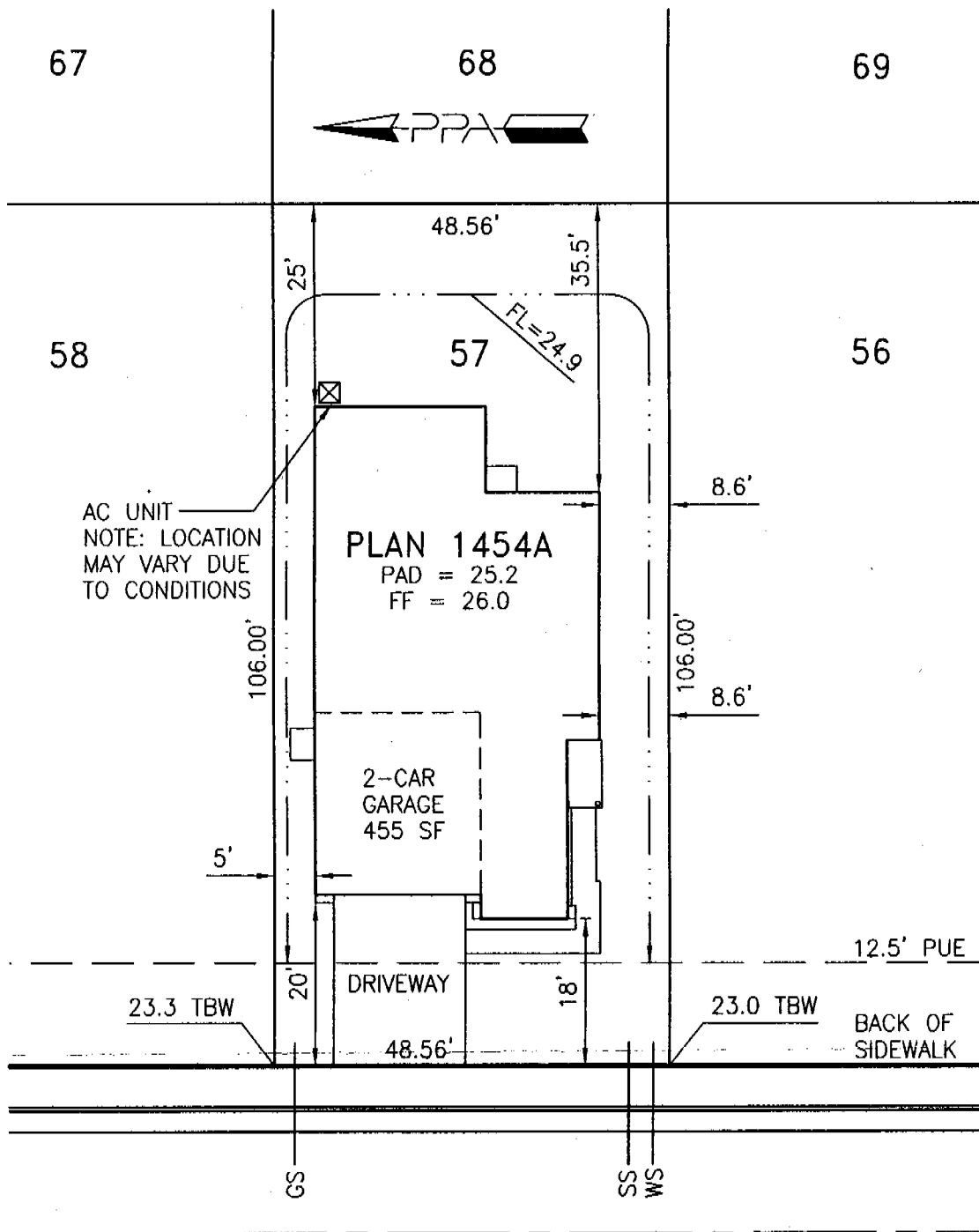
BELOW THE SOLE PLATES AND NOT INTENDED FOR

NAILING FROM SHEARWALL SHEATHING INTO THE BOTTOM PLATES.

WTS  
ST



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.



AC UNIT  
NOTE: LOCATION  
MAY VARY DUE  
TO CONDITIONS

**PLAN 1454A**  
PAD = 25.2  
FF = 26.0

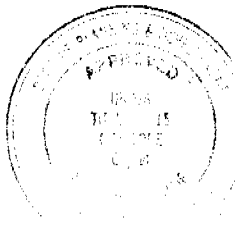
2-CAR  
GARAGE  
455 SF

DRIVEWAY

12.5' PUE

BACK OF  
SIDEWALK

**PELICAN BAY CIRCLE**



This set of plans and specifications must be kept on the job at all times and it is essential to make any change or alterations to the same without the written consent of the architect or engineer.

|              |                    |      |
|--------------|--------------------|------|
| Approved By: | US Home Corp. Rep. | Date |
| Revision     | Approved By        | Date |
| 1            |                    |      |
| 2            |                    |      |

LOT AREA: 5147 SF  
 ALLOWED LOT COVERAGE: 2316 SF = 45.0%  
 ACTUAL LOT COVERAGE: 1909 SF = 37.1%  
 REAR YARD AREA: 1451 SF  
 NUMBER OF BEDROOMS:

It is understood that the drainage areas, slopes and grades shall not be altered, changed, blocked, modified or in any way be reconstructed by Owner contrary to what is depicted on this Plot Plan. THESE CONDITIONS RUN WITH THE LAND AND ARE BINDING ON ALL SUBSEQUENT OWNERS. All setback dimensions and elevations as shown may be adjusted to fit field conditions.

Plot Plan for Heritage at Natomas Park

PPA Job #006010

**Village 1B**

**Lot 57**

240 Pelican Bay Circle, Sacramento, CA 95835

APN. 201-0730-119

**US Home Corporation - Sacramento Division**

2366 Gold Meadow Way, Suite 200, Gold River, CA 95670 Phone (916) 858-3900 Fax (916) 858-3925

**Plot Plan Associates** www.plotplans.org  
 PO Box 435 Citrus Heights CA 95611-0435 (916) 769-9063

Date Drawn: 05/09/03 Scale: 1"=20'  
 Date Revised: - Drawn By: KLM

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 240 Pelican Bay Cir.  
 Lot Number: 57

Assessor Parcel # 201-0730-119  
 Subdivision Heritage @ Natomas Park Village # 1B

OWNER INFORMATION:

0306880

Legal Property Owner: US Home Phone# (916) 858-3900  
 Owner Address 2366 Gold Meadow Way City Gold River State ca Zip 95670

CONTRACTOR INFORMATION:

Contractor: US Home Lic. # 451839 Phone # (916) 858-3900 Fax (916) 858-3925

Don McCloskey (916) 719-9050

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A  
 No. of Stories: 1 No. of Rooms: \_\_\_\_\_ Street Width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1454 2<sup>nd</sup> Floor Area \_\_\_\_\_ Basement \_\_\_\_\_ Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:

Dwelling/Living 1454  
 Garage/Storage 455  
 Decks/Balconies \_\_\_\_\_  
 Carports \_\_\_\_\_

SCOPE OF WORK: \_\_\_\_\_  
 \_\_\_\_\_

FOR OFFICE USE ONLY

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Information Above Complete | <input type="checkbox"/> AR Flood Waiver Required             | <input type="checkbox"/> Planning Approval           |
| <input type="checkbox"/> Violation Files Checked    | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval      |
| <input type="checkbox"/> Standard Setbacks          | <input type="checkbox"/> Water Development Infill Area        | <input type="checkbox"/> Special Fee Districts Apply |
| <input type="checkbox"/> County Sewer               |   |  |

-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 | c) Owners Name     |
| b) New Floor Area           | d) Project Address |

**HARRIS & SLOAN** CONSULTING GROUP, INC.  
STRUCTURAL ENGINEERING CONSULTANTS AND DESIGNERS

213 E STREET, SUITE B DAVIS, CA 95616  
TEL (530) 753-5300 FAX (530) 753-5380

PROJECT: HERITAGE @ NATOMAS Phase 1  
CLIENT: USHOME

DATE: 10-16-03 JOB # US394  
BY: TH PAGE: 1 OF 1

PRODUCT 1 - HERITAGE @ NATOMAS P&E

PLANS 1297, 1454, 1538, 1797

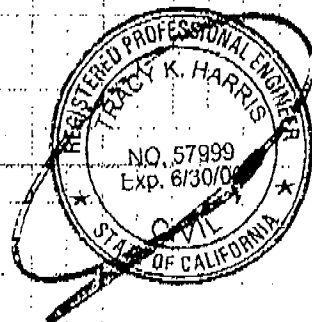
HEADER SUBSTITUTION, BEAM SUBSTITUTION, & PLYWOOD INSTALLATION.

1. IT IS O.K. TO USE A 6XB#1 DF HEADERS IN LIEU OF THE PLAN-SPECIFIED 4X2#2 DF HEADERS FOR TYPICAL HEADERS UP TO 6'-0" SPAN.

2. IT IS O.K. TO USE 4X12 #2 DF BEAMS AT THE PORCH AREAS OF ALL PLANS / ELEVATIONS WHERE 6XB#1 DF OR 8XB#1 DF BEAMS ARE CURRENTLY SPECIFIED ON THE PLANS. USE BC / POST CAPS WHERE SPECIFIED ON THE PLANS. (SPANS UP TO 10'-0")

3. IT IS O.K. TO INSTALL WALL SHEATHING (3/8" CDX/OSB) HORIZONTALLY (8' LONG / 4' TALL) OR VERTICALLY (4' LONG / 8' TALL) ON SIDS AT 16" O.C. IN ALL CASES, ADJOINING PANEL EDGES REQUIRE EDGE NAILING & BLOCKING PER THE SHEATHING SCHEDULE.

WOT  
ST



PROJECT: PRODUCT / HERITAGE AT NATDMAS

DATE: 9-2-03

JOB # US394

CLIENT: USHOME

BY: TH

PAGE: 1 OF 1

ALL PLANS

HERITAGE AT NATDMAS

SHEATHWAY SPECIFICATION CLARIFICATION

THE SHEATHWAY SCHEDULE SPECIFIED "SOLE PLATE NAILING" APPLIES TO RAISED FLOOR CONDITIONS ONLY.

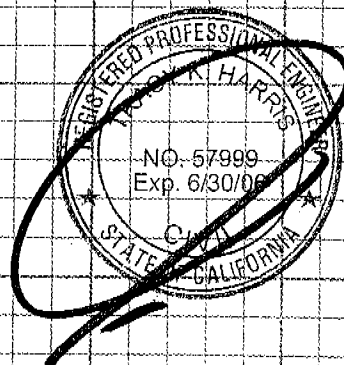
IT IS INTENDED FOR 1/2" NAILING REQUIREMENTS

FROM THE SOLE PLATE TO THE RIM MATERIAL / FRAMING

BELOW THE SOLE PLATES AND NOT INTENDED FOR

NAILING FROM SHEATHWAY SHEATHING INTO THE BOTTOM PLATES.

WOT  
ST



# REINFORCED CONCRETE DAILY FIELD REPORT

**YOUNGDAHL CONSULTING GROUP INC.**  
 GEOTECHNICAL • ENVIRONMENTAL • MATERIALS TESTING  
 1234 Glenhaven Court • El Dorado Hills, CA 95762  
 Ph: 916.933.0633 F: 916.933.6482

|   |                             |
|---|-----------------------------|
| Project Name: <i>Heritage Park Village 1B</i> | Project No.: <i>03230.1</i> |
| Project Location: <i>Atomas</i>               | DSA/O SHPD File No:         |
| Unit #: <i>34-35</i> Lot #: <i>57-55</i>      | DSA Application No:         |
| Client: <i>US Homes</i>                       | Date: <i>10-20-03</i>       |
| Requested By: <i>Raj</i>                      | Copies To:                  |
| Contractor: <i>CVC</i>                        |                             |
| Weather: <i>Clear</i>                         |                             |
| Met With: <i>Raj</i>                          |                             |

| SCOPE OF WORK  | SUBJECT AREAS                                    | STATUS OF PROJECT                                 | SAMPLE AND TEST DATA   |
|--|--|---|--|
| Concrete Placement Inspection <input type="checkbox"/> | Footings <input type="checkbox"/>                | On-Going <input checked="" type="checkbox"/>      | Concrete Mix #(s):   |
| Concrete Testing Only <input type="checkbox"/>         | Slab on Grade <input type="checkbox"/>           | Complete <input checked="" type="checkbox"/>      | Design Strength(s):  |
| Rebar / Tendon Inspection <input type="checkbox"/>     | Structural Slab or Deck <input type="checkbox"/> | Completed For This Phase <input type="checkbox"/> | Yards Placed:  |
| Tendon Stressing Inspection <input type="checkbox"/>   | Slab or Metal Deck <input type="checkbox"/>      | On Hold Due To: <input type="checkbox"/>          | Cast: <input type="checkbox"/> Set(s) of <input type="checkbox"/> Compression Test Cylinders |
| Batch Plant Inspection <input type="checkbox"/>        | Structural Member: <input type="checkbox"/>      | Signed, Stamped, Daily <input type="checkbox"/>   | Slump: <input type="checkbox"/> % Air: <input type="checkbox"/>                              |
| Batch Plant Detection <input type="checkbox"/>         | Cast In Place Walls <input type="checkbox"/>     | Letter To Follow <input type="checkbox"/>         | Sampled Rebar for Bend & Tensile Tests <input type="checkbox"/>                              |
| Sample Reinforcing Steel <input type="checkbox"/>      | Tilt Up Panels <input type="checkbox"/>          |   | Rebar Grade: <input type="checkbox"/> Size(s): <input type="checkbox"/>                      |
| Proof Loading <input type="checkbox"/>                 | Curb and Gutter <input type="checkbox"/>         |   | Other Tests:   |
| Proof Up: <input type="checkbox"/>                     | Sidewalk or Driveway <input type="checkbox"/>    | <b>ATTACHED TO THIS REPORT</b>                    |  |

**NOTES:** I ARRIVED ON SITE AS REQUESTED FOR PROOF LOADING. I PERFORMED PROOF LOADING ON 3/4" WEDGE ANCHORS IN UNITS 34-35 AND 57-58. I LOAD TESTED 3/8 WEDGE ANCHORS TO 6000 LBS WITH NO VISIBLE FAILURES AND THE ANCHORS ARE ACCEPTABLE.

57

**To The Building Official:** Regarding *Special Inspection*

I hereby certify that the noted portions of the work at the above address which required periodic and/or continuous inspection, and which I was employed to inspect, were inspected and, in my opinion, and to the best of my knowledge, comply with the provisions of the approved plans and specifications, except as noted.

**Note:** The verb, "inspect" or "inspection" or "inspector", as used by Youngdahl and Associates, Inc. means observation and monitoring, and does not mean the right to control the contractor's work.

Field Rep (print): *Jim Chapman* Signed: *Paul D. Chapman*

ICBO#: \_\_\_\_\_ Reported To: \_\_\_\_\_ Page \_\_\_\_\_ of \_\_\_\_\_

NOTE: No guarantee or warranty of the contractor's work is made, expressed or implied.





INSTALLATION CERTIFICATE

CF-6R

US Home Corporation - Heritage Park Product Line 1 - Sacramento - Plan 1454

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 15.102(b).

HVAC SYSTEMS:

Heating Equipment

| Equip. Type (pkgs. 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                       | York #D4MUA12L032                  | 1                      | 0.90                                      | Attic                       | R-6                    | 27,603                | 40,000                    |

Cooling Equipment

| 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) |
|-------------------------------|--|------------------------|---|-----------------------------|--------------|-----------------------|---------------------------|
| A/C                           | York #1PR0024                                      | 1                      | 12.0                                      | Attic                       | R-6          | 22,804                | 29,400                    |

(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 compliance Efficiency Regulations Part 6), where applicable.

*Steve Chico*  
Signature, Date

Beutler Corporation  
Installing Subcontractor (Co. Name)  
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

| Water Type | CEC Certified Mfr Name & Model # | Provision Type (1-A value of use) | If Recirculation Control Type | # of Identical Systems | to Rated Input (kW or Btu/hr) | Tank Volume (gallons) | (1) Efficiency (EF, EER) | (2) Standby Loss (%) | External Insulation R-value |
|------------|----------------------------------|-----------------------------------|-------------------------------|------------------------|-------------------------------|-----------------------|--------------------------|----------------------|-----------------------------|
| GM         | Rheem<br>41-1404                 | SFD                               | NA                            | 0                      | 40000                         | 40                    | .56                      |                      | R-6.7                       |

(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 tankless 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

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 131.

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 compliance Efficiency Regulations or Part 6), where applicable.

*Steve Chico* 04-04-03  
Signature, Date

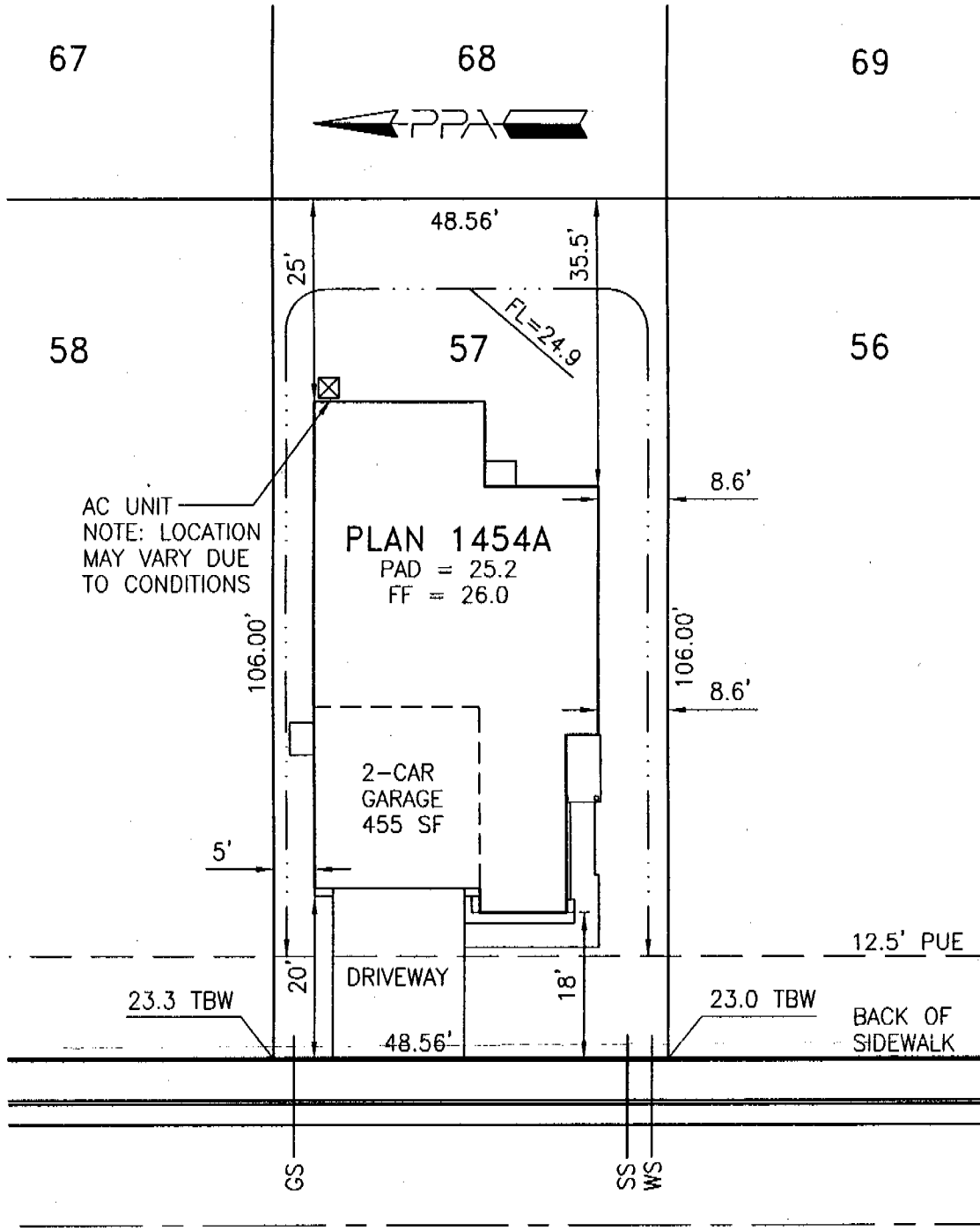
Monarch Plumbing CO., INC  
Installing Subcontractor (Co. Name)  
OR General Contractor (Co. Name) OR Owner

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

NO. 1912 P. 4/19

APR. 3. 2003 3:33PM MAIL U.S. HOME HERITAGE PARK

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.



PELICAN BAY CIRCLE



This set of plans and specifications must be kept on the job at all times and it is intended to make any changes without the same without the approval of the Building Department.

|              |                    |      |
|--------------|--------------------|------|
| Approved By: | US Home Corp. Rep. | Date |
| Revision     | Approved By        | Date |
| 1            |                    |      |
| 2            |                    |      |

LOT AREA: 5147 SF  
 ALLOWED LOT COVERAGE: 2316 SF = 45.0%  
 ACTUAL LOT COVERAGE: 1909 SF = 37.1%  
 REAR YARD AREA: 1451 SF  
 NUMBER OF BEDROOMS:

It is understood that the drainage areas, slopes and grades shall not be altered, changed, blocked, modified or in any way be reconstructed by Owner contrary to what is depicted on this Plot Plan. THESE CONDITIONS RUN WITH THE LAND AND ARE BINDING ON ALL SUBSEQUENT OWNERS. All setback dimensions and elevations as shown may be adjusted to fit field conditions.

Plot Plan for Heritage at Natomas Park PPA Job #006010  
**Village 1B** Lot 57  
 240 Pelican Bay Circle, Sacramento, CA 95835 APN. 201-0730-119

**US Home Corporation - Sacramento Division**  
 2366 Gold Meadow Way, Suite 200, Gold River, CA 95670 Phone (916) 858-3900 Fax (916) 858-3925

**Plot Plan Associates** www.plotplans.org Date Drawn: 05/09/03 Scale: 1"=20'  
 PO Box 435 Citrus Heights CA 95611-0435 (916) 769-9063 Date Revised: - Drawn By: KLM