

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0414896

Insp Area: 4

Thos Bros: 277F3

Site Address: 3608 WESTERN AV SAC

Parcel No: 250-0030-014

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR
OWNER BUILDER

OWNER
ROMO JOSE G
3608 WESTERN AV
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: NSFD- 1704 sf, 564 sf Garage, 17 sf porch covr

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 _____ License Number 0 _____ Date _____ Contractor 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 Professional 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 11/4/04 Owner Signature John R Johnson

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 11/4/04 Applicant/Agent Signature John R Johnson

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 _____ Policy Number _____ Exp Date _____

(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 11/4/04 Applicant Signature John R Johnson

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.

PAID
CITY OF SACRAMENTO
NOV 14 2004
NORTH PERMIT CENTER

RECORDING REQUESTED BY

ORIGINAL
Accepted for Recording
COPY-NOT CERTIFIED

WHEN RECORDED MAIL TO

NAME *Nancy Rono*
MAILING ADDRESS *11 South Ave*
CITY, STATE ZIP CODE *Sacramento, CA 95838*

200501142305

JAN 14 2005

Sacramento County
Clerk-Recorder

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

TITLE(S) OF DOCUMENT

*3608 Western
0414896*

EASEMENT AGREEMENT

Grantor, Jose G. Romo, hereby grants to Grantee, Nancy Romo, a non-exclusive easement for a four inch sewer line under a strip of land 100 feet long affecting property known as 11 South Avenue in Sacramento County, California described therein as follows:

Assessor's parcel number 250-0030-015-0000, that area's boundary being 62 feet in width, north and adjacent to South Avenue; 101.33 feet east and adjacent to Western Avenue; 75 feet south and adjacent to 3608 Western Avenue; and 100 feet west and adjacent to 21 South Avenue as said boundary is shown on City of Sacramento Assessor's Map Bk.250-Pg.03, County of Sacramento, California.

The easement is described as follows:

A 100 foot strip of land, 3 feet wide bordered on the east, by the length of the east boundary, the west boundary extending from South Avenue to APN 250-0030-014-0000. Please see Attachment A for an illustration that does not supercede this agreement.

The easement is for the purpose of a extending and maintaining a four inch sewer line the length of the easement for the benefit of APN 250-0030-014-0000.

The easement shall exist as long as necessary for providing APN 250-0030-014-0000 a connection to the public sewer system.

IN WITNESS HEREOF THE PARTIES HERETO EXECUTE THIS AGREEMENT on or before this the December 26, 2004.

By: _____

By:

Jose G. Romo
JOSE G. ROMO, Grantor

State of California
County of Sacramento

Jose G. Romo
Subscribed and sworn to me before
this 26 day of December, 2004.

[Signature]
(Signature of Notary)



STATE OF CALIFORNIA

COUNTY OF Sacramento

ss

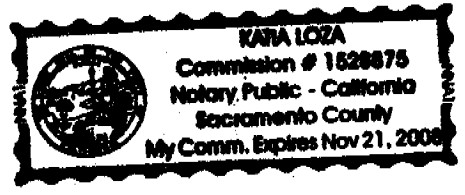
On this 6 day of January, in the year 2005,

before me Jose G. Romo, personally appeared

Jose G. Romo,
personally known to me (or proved to me on the basis of satisfactory
evidence) to be the person(s) whose name(s) is/~~are~~ subscribed to the
within instrument and acknowledged to me that he/~~she~~/~~they~~ executed the
same in his/~~her~~/~~their~~ authorized capacity(~~ies~~), and that by his/~~her~~/~~their~~
signature(s) on the instrument the person(s), or the entity upon behalf
of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

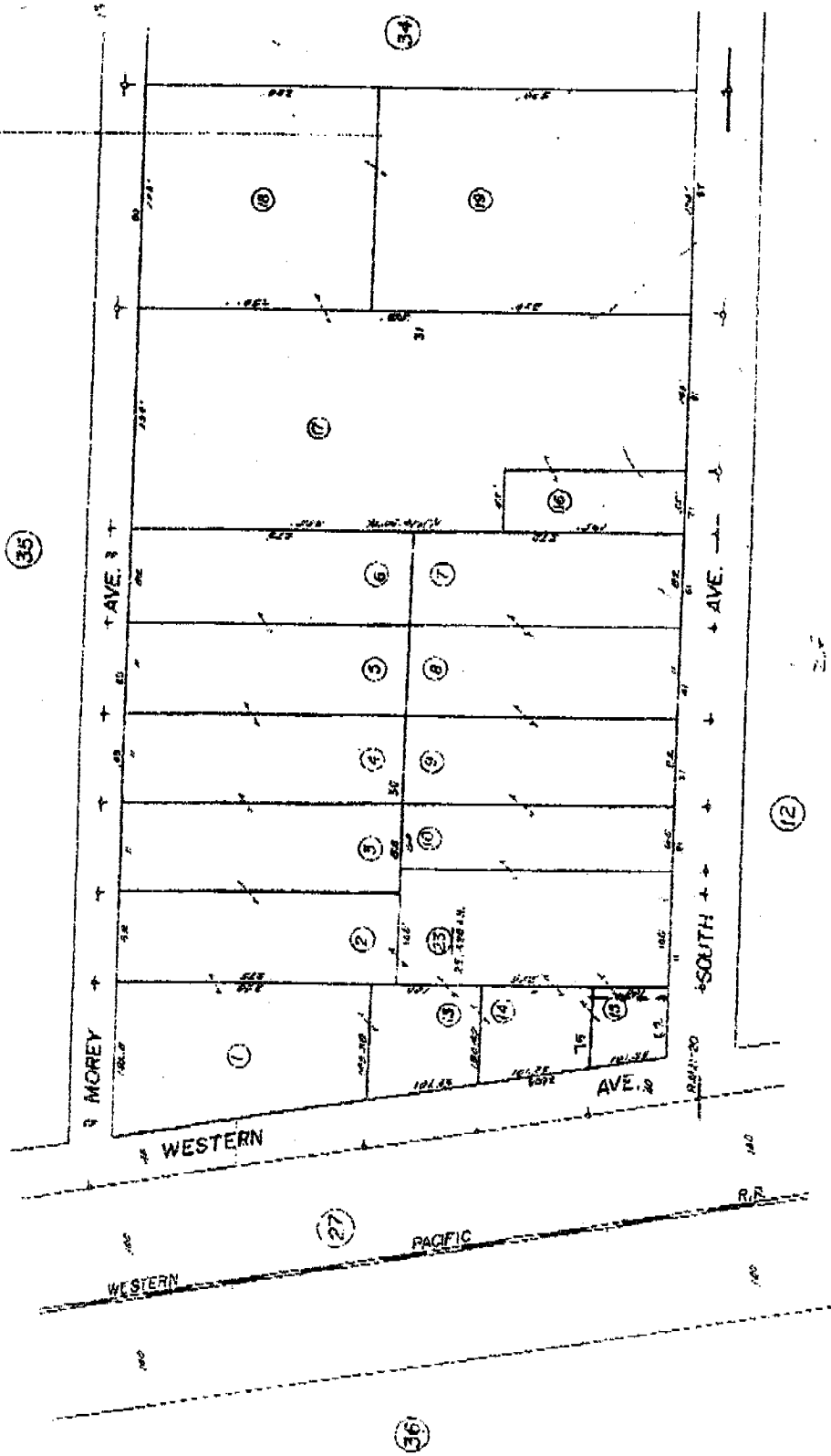
Signature Katia Loza



POR SEC. 3, RANCHO DEL PASO

Tax Area Code

250-C



PARCEL # 250-0030-015-0000
 11 SOUTH AV SACRAMENTO 95833
 PARCEL # 250-0030-014-0000
 3608 WESTERN AV SACRAMENTO 95833

Oak Knoll Sub., R.M. Bk. 11, Pg. 20

NOTE-Assessor's Block Numbers Shown in Ellipses.
Assessor's Parcel Numbers Shown in Circles

CITY OF SACRAMENTO
Assessor's Map Bk. 250-Pg. 03
County of Sacramento, Calif.

ATTACHMENT A



**CITY OF SACRAMENTO
CALIFORNIA**

1231 I STREET, ROOM 200
SACRAMENTO, CA 95814-2998
FAX 916-808-5543

PLANNING AND
BUILDING DEPARTMENT
PHONE 916-808-5381

STAFF LEVEL PROJECT REVIEW

DR Number: DR04-210
Address: 3608 Western Ave
Description: New Single Family Home
Staff Contact: Melinda Coy, 808-8048

Applicant/Owner: John Johnson
Date Filed: July 23, 2004
Date Approved: September 1, 2004
APN: 250-0030-014

STAFF ACTION AND CONDITIONS OF APPROVAL:

Staff has reviewed the proposed project, and approves it with the following conditions of approval:

1. All windows at front elevations shall be single hung vinyl windows. All street-facing windows shall have decorative trim and sills. All windows and doors shall have decorative trim (at minimum).
2. Front entry door and garage doors shall have a decorative raised panel sunburst design.
3. Provide stucco siding with smooth finish at all four sides of house per approved drawings.
4. Provide 6' high wood fence at sides and rear.
5. Any woodwork shall be smooth finish. No rough sawn.
6. Provide band around the front elevation, wrapping two feet at side elevations.
7. Front yard landscaping (including lawn, shrubs, and a minimum of one tree) and automatic irrigation shall be provided.
8. Roofing shall be tile roof as indicated on approved plans.
9. Gutters and downspouts shall be provided.
10. Provide decorative light fixtures as indicated on drawings.
11. No roof-mounted mechanical equipment is allowed.
12. All other notes and drawings on the final plans as submitted by the applicant are deemed conditions of approval. Any changes to the final set of plans stamped by Design Review staff shall be subject to review and approval prior to any changes.
13. No building permit shall be issued until the expiration of the 10-day appeal period. If an appeal is filed, no permit shall be issued until final approval is received. The applicant and the owners of all properties adjoining the subject property have the right to appeal this decision to the Design Review and Preservation Board. Appeals must be filed within 10 days of the staff action.


Melinda Coy



**CITY OF SACRAMENTO
BUILDING INSPECTION
DIVISION**

PERMIT OFFICES
Downtown (916) 264-7619
1231 I St., Rm. 200, Sacramento 95814
Natomas Center (916) 808-2534
2101 ARENA BL., Sacramento 95834
http://www.sacto.org

**RESIDENTIAL PLAN REVIEW
2001 CBC Adopted Codes
Effective November 1st, 2002**

**CITY OF SACRAMENTO
NORTH PERMIT
CENTER**

**OCT 19 2004
PERMIT**

**PROJECT ADDRESS
& DESCRIPTION**

3608 WESTERN AV. NEW SFR W/ ATT. GARAGE

RECEIVED
No. 04-14896

These sheets, when attached to a set of plans, become part of those plans and must remain attached thereto. The approval of this plan and the specifications shall not be held to permit or approve the violation of any City ordinance or State or Federal law. (Note: Authorized agent must provide a letter from Owner verifying Authorization.) (The code requirements circled do not limit the code requirements for this project.)

I have read and will comply with the items in this document and as marked on the plans.

Signature of: John Johnson Date 10/2/04
 Owner Authorized Agent Contractor Architect/Engineer

BUILDING CODE REQUIREMENTS

- B-1 **Smoke detector location within dwelling units.** In dwelling units, a detector shall be installed in each sleeping room and at a point centrally located in the corridor or area giving access to each separate sleeping area. When the dwelling unit has more than one story and in dwellings with basements, a detector shall be installed on each story and in the basement. In dwelling units where a story or basement is split into two or more levels, the smoke detector shall be installed on the upper level except that, when the lower level contains a sleeping area, a detector shall be installed on each level. When sleeping rooms are on an upper level, the detector shall be placed at the ceiling of the upper level in close proximity to the stairway. In dwelling units where the ceiling height of a room open to the hallway serving the bedrooms exceeds that of the hallway by 24 inches (610 mm) or more, smoke detectors shall be installed in the hallway and in the adjacent room. Detectors shall sound an alarm audible in all sleeping areas of the dwelling unit in which they are located. In new construction, required smoke detectors shall receive their primary power from a commercial source and have a battery back up. 2001 CBC, Section 310.9.1.
- B-2 When **alteration, repairs, or additions having a value in excess of \$1,000** are made, provide an approved smoke detector to protect existing sleeping rooms. The detector may be battery operated as per 2001 CBC, Section 310.9.1.2.
Exception: Repairs to the exterior surfaces of a Group R occupancy are exempt from the requirements of this section.
- B-3 **Emergency escape and rescue.** Basements in dwelling units and every sleeping room below the fourth story shall have at least one operable window or door approved for emergency escape or rescue that shall open directly into a public street, public way, yard, or exit court. Escape or rescue windows shall have a minimum net clear openable area of 5.7square feet / 821 SQ. inches. The minimum net clear openable height dimension shall be 24 inches. The minimum net clear openable width dimension shall be 20 inches. Emergency escape or rescue windows shall have a finished sill height not more than 44 inches above the floor. 2001 CBC, Section 310.4.
- B-4 **All Group U occupancies attached to Group R, Division 3 occupancies shall be separated by** materials approved for one-hour fire-resistive construction. The separation may be limited to the garage side only and requires a self-closing, tight fitting solid wood door 1 3/8 inches in thickness or a self-closing, tight fitting door having a fire protection rating of not less than 20 minutes. CBC, Section 302.4. Exception 3. **Note:** All members supporting such separation shall be equivalent fire-resistive construction as per 2001 UBC, Section 302. All electrical outlet boxes on opposite sides of the walls shall be separated by a horizontal distance on not less than 24 inches per 2001 CBC 709.7, Exception

OFFICE COPY

Department of Planning and Development
Building Inspection Division

Grading and Erosion Control Questionnaire
To be completed for all residential new construction and additions

PART I (To be completed by applicant)

Site Address 3608 Western AV. A.P.N. 250-0030-014

Applicant Information

Name _____
Address _____
Phone _____

Project Information (Check One)

Single Family Dwelling
Duplex _____
Triplex _____
Deep Lot Development _____

PART II (To be completed by the applicant when the project is not a part of a larger subdivision)

Are there existing structures on site? Y N
Does the site front on a paved road? Y N*
Is the site higher than the crown of adjacent road? Y N*
Is the proposed building site higher than the back of the sidewalk or curb? Y N*

Describe existing frontage improvements along road.

Ditch * Curb and Gutter Curb, Gutter, and Sidewalk

The direction of drainage on this site is:

Front to Rear * Rear to Front Side to Side *

Does an adjacent site drain across this parcel?

Y* N
 Y* N
 Y N

Does this site have an existing low area or drainage swale?

Will construction require cut or fill on site? (* >50FT3 or >2FT)

- How much cut? _____ Yards
- How much fill? _____ Yards

Depth Y* N
Depth Y* N
Depth Y* N

Has building site been previously been filled?

Will existing drainage be re-routed?

Do you plan to construct or modify culverts or drainage ditches?

Print Name JOHN JOHNSON Title AGENT

Signature John Johnson 916-214-5146 Date 9/28/04
Owner or Contractor

PART III (To be completed by staff)

What is the acreage of the parcel to be built on? _____ Acres.

If greater than 1/2 acre has an approved erosion and sediment control plan been provided? Y N

If greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N

Is the parcel to be built on part of a larger subdivision? Y N
Subdivision Name: _____

If yes has an approved erosion and sediment control plan been provided? Y N

If the original subdivision is greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N

Is grading and drainage approval required prior to permit issuance? Y N

Approved by: C Boyd Date: 10-4-04

Building permit #: 0414896

White Copy - Permit Jacket
Yellow - Utilities
Pink - Bldg. Div.

MICROFILM THIS DOCUMENT



CITY OF SACRAMENTO
CALIFORNIA

PLANNING AND
BUILDING DEPARTMENT
PLANNING DIVISION

1231 I STREET, ROOM 200
SACRAMENTO, CA
95814-2998

WATER DEVELOPMENT FEE WAIVER

Applicant: Nancy Pomo Phone: 206-6789
Property Address: 3608 Western Av
APN: 250-0030-014 Zoning: R-1 Number of Units: 1

This project qualifies for the waiver because it is in a:

- REDEVELOPMENT AREA; or
- DESIGNATED INFILL AREA; or
- QUALIFIED INFILL AREA, meeting all of the following requirements:

1. The site is located in a neighborhood where the median year of housing construction is 1965 or earlier as shown on the Neighborhood Statistics Boundary Map, or the applicant has proof to the satisfaction of the Planning Director that the median age of housing within 500 feet of the site was developed prior to 1965; and
2. The lot is surrounded on three sides by existing or approved development; and
3. The project is consistent with the General Plan or more specific plan designation; and
4. The site is no more than 5 acres in size for single family development, or 2 acres in size for multiple family development; and
5. The site has City sewer, water, and drainage services, or is within proposed or existing assessment district for these services; and the services provided are capable of serving the proposed development to the satisfaction of the Public Works Director.

CITY OF SACRAMENTO
NORTH PERMIT
CENTER

OCT 10 2004

RECEIVED

Fee Waiver Denied by: _____ Date: _____

Fee Waiver Approved by: R/H Date: 9/10/04
as per Bonnie

WD No: _____

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 3608 WESTERN AVENUE	APN: 250-0030-014
DRPB AREA / PUD / SPD: STRAWBERRY MANOR	ZONING: R-1
EXISTING LAND USE: Vacant	
PROPOSED USE: New SFR	
<p>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s): PC ZA IR ER DR PB</p> <p style="margin-left: 20px;">Required Planning application must be submitted <i>before</i> project can be submitted for plan check.</p> <p><input type="checkbox"/> Application(s) IN PROGRESS:</p> <p style="margin-left: 20px;">Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.</p> <p><input checked="" type="checkbox"/> Application(s) COMPLETED: DR04-210 Approved 09-01-2004</p> <p style="margin-left: 20px;">Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.</p> <p><input checked="" type="checkbox"/> Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.</p> <p><input checked="" type="checkbox"/> Meets setback & lot coverage requirements as shown on site plan provided.</p> <p><input checked="" type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>COMMENTS: LOT: 8157 SQ FT PER ZIPS, FOOTPRINT APPRX. 77 X 33 = 2541 & 72 = 2613 / 8157 = 32% LOT COVERAGE. MIN. 25' FRONT SETBACK. DOES NOT EXCEED 40% PAVING FOR DRIVEWAY IN FRONT SETBACK AREA. MEETS MIN. D & W FOR INTERIOR GARAGE. NO PLANNING ISSUES APPARENT.</p> <p>Building permit must conform to approved plans and comply with all conditions of approval DR04-210. Do NOT issue building permit prior to end of 10 day appeal period.</p>	
DATE: 07-26-2004 / 09-01-2004	BY: PCALDWELL / Elise Gumm

Certification of Compliance School District Development Fees

PART 1 To be completed by APPLICANT

Owner's Name & Address _____
 Project Address 3608 Western AV.
 Parcel Number 250-0030-014 Lot No. _____
 Subdivision Name _____ Number of Units one
 Applicant's Signature & Title John R Johnson Agent
 Date 10/18/04 Phone No. 916 214 5146

NOTICE TO APPLICANT: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

PART 2 To be completed by BUILDING DEPARTMENT

Plan Identification Number 0414896 Building Type (CHECK ONE)
 Residential
 Apartment/Condominium
 Commercial/Industrial
 Square Feet of Chargeable Building Area 1704 sq ft
 Signature Craig Boyd Date 9-23-04
 Title B.I. III

PART 3 To be completed by SCHOOL DISTRICTS

Grant Joint Union High School District
 District Certification No. 05-0630
 EXEMPT _____
 Comments RESIDENTIAL / APARTMENT / CONDOMINIUM
1704 Sq.Ft. x \$ 2.24 = \$ 3816.96
 COMMERCIAL / INDUSTRIAL
 _____ Sq.Ft. x \$ _____ = \$ _____
 OTHER FEE: TYPE _____
 _____ Sq.Ft. x \$ _____ = \$ _____
 TOTAL FEES COLLECTED = \$ 3816.96

Robla Elementary School District
 District Certification No. _____
 EXEMPT _____
 Comments _____
 RESIDENTIAL / APARTMENT / CONDOMINIUM
 _____ Sq.Ft. x \$ _____ = \$ _____
 COMMERCIAL / INDUSTRIAL
 _____ Sq.Ft. x \$ _____ = \$ _____
 OTHER FEE: TYPE _____
 _____ Sq.Ft. x \$ _____ = \$ _____
 TOTAL FEES COLLECTED = \$ _____

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.
 As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

GRANT Authorized School District Official **ROBLA**

Signature <u>[Signature]</u> Title _____ Date <u>10/18/04</u>	Signature _____ Title _____ Date _____
---	--

Original: Grant Joint Union High School District,
 Robla Elementary School District
 1st Copy: Building Department
 2nd Copy: Applicant

GJUHS: Facilities Planning and Construction Department
 Certificate of Compliance Form (rev. 10/02) bep

CERTIFICATION OF INSULATION

PART I GENERAL

John Johnson

LOT #
3609

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1631, RENO, NV 89505 LIC. #10675
- 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

3609 Western Ave

DATE INSULATION COMPLETED

PART II AREAS INSULATED

WALLS			ROOFING			FLOORS		
SQUARE FEET)			SQUARE FEET)			SQUARE FEET)		
MATERIAL FIBERGLASS			MATERIAL FIBERGLASS			MATERIAL FIBERGLASS		
FORM BATTS			FORM BATTS & BLOW			FORM BATTS		
MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.		
CT	OC	JM	CT	OC	JM	CT	OC	JM
APPLIED THICKNESS			APPLIED THICKNESS			APPLIED THICKNESS		
13			3.5			30		
			9"-12"					
MATERIAL FIBERGLASS			FORM BATTS			R VALUE		
						MANUFACTURER		
						CT OC JM		
MATERIAL Foam			MANUFACTURER HILTI			MANUFACTURER HANDY FOAM		
						N/A APPLICABLE		

PART III CERTIFICATION

SIGNATURE — INSULATION CONTRACTOR	B.G.	TITLE MANAGER	DATE 3/8/06
SIGNATURE — GENERAL CONTRACTOR		TITLE	DATE
REMARKS			

INSTALLATION CERTIFICATE

JOHN JOHNSON

Permit Number

Site Address **3608 WESTERN AVE-SACRAMENTO, CA**

FENESTRATION/GLAZING: CUSTOM

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (S CF-1R value) ²	Product SHGC ¹ (S CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. PHILIPS WHITE							
2. VINYL WINDOWS							
3. W/ LOWE2 GLASS							
4.				5	74		
5. XO	35			6	105		
6. SH	35			3	46		
7. PW	32			0	0		
8. SGD	33						
9.							
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-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.

 Item #s (if applicable) Signature, Date

 Item #s (if applicable) Signature, Date

 Item #s (if applicable) Signature, Date

Sacramento Building Products
 Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner
 OR Window Distributor

 Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner
 OR Window Distributor

 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

Site Address _____

Permit Number _____

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Pans	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. _____	_____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____	_____	_____	_____
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-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.

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

INSTALLATION CERTIFICATE

CF-6R

Permit Number

Site Address

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	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) [CF-1R value]	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
GAS	GIBSON			ATTIC	R-6	90TH	
Cooling Equipment	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) [CF-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
GAS	GIBSON		12	ATTIC	R-6	48	

1, 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
 Installing Subcontractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation, Control Type	# of Identical Systems	Rated Input (kW or Btu/hr)	Tank Volume (gallons)	EM-2 Efficiency (EF, RE)	Standby Loss (%)	Insulation R-value	External
GAS	CF				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. 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 111.

1, 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
 HEKS Provider (if applicable)
 Building Owner at Occupancy

Department of Planning and Development
Building Inspection Division

Grading and Erosion Control Questionnaire

To be completed for all residential new construction and additions

PART I (To be completed by applicant)

Site Address 3608 Western AV.

A.P.N. 250-0030-014

Applicant Information

Name _____
Address _____
Phone _____

Project Information (Check One)

Single Family Dwelling
Duplex _____
Triplex _____
Deep Lot Development _____

PART II (To be completed by the applicant when the project is not a part of a larger subdivision)

Are there existing structures on site? Y N
Does the site front on a paved road? Y N *
Is the site higher than the crown of adjacent road? Y N *
Is the proposed building site higher than the back of the sidewalk or curb? Y N *

Describe existing frontage improvements along road.

Ditch * Curb and Gutter Curb, Gutter, and Sidewalk

The direction of drainage on this site is:

Front to Rear * Rear to Front Side to Side *

Does an adjacent site drain across this parcel?

Does this site have an existing low area or drainage swale? Y * N

Will construction require cut or fill on site? (* >50FT³ or >2FT)

- How much cut? _____ Yards
- How much fill? _____ Yards

Has building site been previously been filled? Y * N

Will existing drainage be re-routed? Y * N

Do you plan to construct or modify culverts or drainage ditches? Y * N

Print Name JOHN JOHNSON

Title AGENT

Signature John Johnson 916-214-5146
Owner Contractor

Date 9/28/04

PART III (To be completed by staff)

What is the acreage of the parcel to be built on? _____ Acres.
If greater than 1/2 acre has an approved erosion and sediment control plan been provided? Y N
If greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N
Is the parcel to be built on part of a larger subdivision? Y N
Subdivision Name: _____
If yes has an approved erosion and sediment control plan been provided? Y N
If the original subdivision is greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N
Is grading and drainage approval required prior to permit issuance? Y N

Approved by: C. Boyd

Date: 10-4-04

Building permit #: 0414896

White Copy - Permit Jacket
Yellow - Utilities
Pink - Bldg. Div.

MICROFILM THIS DOCUMENT