CITY OF SACRAMENTO	Permit No:	0613961
New City Hall, 915 I St., 3rd Floor, Sacramento, CA 95814	Insp Area:	2
	Thos Bros:	358C2
Site Address: 7515 SHELDON RD SAC		NAPT
Parcel No: 117-0212-010 #11	Housing (Y/N)	:N Markan de
CONTRACTOR D. R. HORTON INC. 11919 FOUNDATION PL GOLD RIVER CA 95670 CONTRACTOR D. R. HORTON INCORPORATE 4401 HAZEL AV FAIR OAKS, CA 95628	ARCHITECT	1
Nature of Work: BLDG # 11 - 5,640 S.F 2 STORY TRI-PLEX - NAPT COMPLEX		
CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is a consthe work for which this permit is issued (Sec. 3097, Civ. C).	truction lending agenc	y for the performance of
Lender's Name dader's Address		
10. 1911 (10.	· C	
LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full for	and effect.	provisions of Chapter 9
License Class A License Number 750190 Date 101006 Contractor Signature	(The state of the s
OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, a prior to its issued, also requires the applicant for such permit to file a signed statement that he or she is license License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the aphundred dollars (\$500.00);	er, improve, demolish d pursuant to the prov or that he or she is ex	n, or repair any structure, risions of the Contractors kempt therefrom and the
I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of who does such work himself or herself or through his/her own employees, provided that such improvements are the building or improvement is sold within one year of completion, the owner-builder will have the burden of property of sale.) 1, as owner of the property, am exclusively contracting with licensed contractors to construct the project. The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who licensed pursuant to the Contractors License Law).	property who builds of e not intended or offer oving that he/she did t (Sec. 7044, Business	or improves thereon, and red for sale. If, however, not build or improve for
I am exempt under Sec. B& PC for this reason:	SACTE	- 1
Date Ower Signature CTTY C.	CI TO SOUR	A CONTRACT OF THE CONTRACT OF
IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation measurements and locations shown on the application or accompanying drawings and that the improvement private agreement relating to permissible or prohibited locations for such improvements. This building permit improvement or the violation of any private agreement relating to location of improvements. Lecrify that I have read this application and state that all information is correct. I agree to comply with all city a building construction and herby authorize representative(s) of this city to enter upon the above then consequently representative (s).	of the applicant that to be constituted give to be applicated give to be all thorize are to be applicated and county ordinances	the applicant verified all snot violate any law or ny illegal location of any and state laws relating to
Date 10 10 06 Aplicant/Agent Signature	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to the state of th
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjuty the of the I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for performance of work for which the permit is issued. X I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Countries permit is issued. My workers' compensation insurance carrier and policy number are:	r by Section 3700 of	the Labor Code, for the
Carrier AMERICAN CASULTY CO Policy Number WC247856876	Exp Date	07/01/2007
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of not employ any person in any manner so as to become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forth with comply with those provisions of Section 3700 of the Labor Code, I shall forth with comply with those provisions of Section 3700 of the Labor Code, I shall forth with comply with those provisions.	ind agree that if I shou	s permit is issued, Ishall ald become subject to the
Date 10 00 Applicant Signature WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AN CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED TMOUSAND DOLLARS (\$100 COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTERES	0,000) IN ADDITIO	N TO THE COST OF

	PERMICESTALE CONTRACTOR	
The state of	PALO	3 N+
	2773	4
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	RESIDENTIAL SED MEM RESIDE	
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	Lust 1992-19	
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	· Ahinthismulcz	
	BY BILLING (1982 DALLY	
ACCI	INPUT START	
	RECEPT	

e.

Case Fee Summary

Page 1 of 1

Case Number: SWD2006-00774

Location: CITY OF SACRAMENTO

Job Address: 7515 SHELDON RD

Fee Type

SRCSD Sewer Fees

Status: ACT

Issue Date: 9/28/2006

Date Printed:

9/28/2006 *

Fee Due

Fee Paid

Date Paid

15750.00

0.00

	Sacramento County	Total		
Fees Due	15,750.00	15,750.00		
Fees Paid	0.00	0.00		
Balance	15,750.00	15,750.00		

County of Sacramento Accounting & Fiscal Services

*** Customer Receipt ***

Receipt #:

32006000000000010401

9/28/2006 12:21:3074

Date / Time:

Care # :

SMD2006-00774

Fee Type

SRCSO Sewer Fees

15,780.00

\$15,750.00

Total: Check

Berk #: Check #/Acct#:

16-66

Received:

100947

Confirm No:

In Person

Amount Tendered:

\$15,750.00

Certification of Compliance School District Development

Part I—To be completed by the APPLICANT	
Owner's Name/Address	
Project Address 7515 Sheldon Road	
Parcel Number 117-1480-001	Lot No
Subdivision Name 1 Lagung 1014	No. of Units*
Applicant's Signature Www. The Silving Control of the Control of t	Title _ Quatrus Sylvis
Phone No. 417-1600	Date
Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve which you may protest the fees or other payment identified above will begin to run on the dathis project is issued or on which they are paid to the district(s) or to another public entity autwhichever is earlier.	te in which the building or installation permit for
Part II-To be completed by the BUILDING DEPARTMENT	
Plan Identification Number # 06/37/61 75/5 5/16	Howkel Blog !!
Building Type (check one) Residential Apartment/Condor	minium Commercial/Industrial
Square Feet of Chargeable Building Area 44/	
Signature/Title Color Constant Control of The	11 Date 9/21/16
Part III-To be completed by the SCHOOL DISTRICT	
School District	Certificate No
☐ Exempt Comments	60000
Residential/Apartment/etc. 44/8 Square ft. x \$_	= \$ J2,310.10
Commercial/Industrial Square ft. x \$_	=\$
Total fees collected	= \$22.310.74

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address:	7515 SHELDON RD BLD 1/1	Permit No.:	0613961
Building Use:	TRI-PLEX/NEW APTS	Occupancy:	R1
Building Owner:	DR HORTON INC	Construction Type:	
Owner Address:	FAIR OAKS, CA	Sprinkled? [X] Yes	[] No
Portion of Building	Occupied: ENTIRE	Area: 5640	Sq. Ft.
3/30/07 Ca	rolin Cooper	CARL HEFNI	ER
Date By	: (Print) Sign	DEPUTY CHIEF BUILD	ING OFFICIAL

[Finaled By:CED,GRS,JS]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the Chief Building Official. No changes shall be made in the character of occupancy or use without approval of the Chief Building Official.

POST IN A CONSPICUOUS PLACE

CERTIFICATION OF INSULATION

	ADDRESS OR TRACT					SACRAMENTO BUILDING PRODUCTS					
PART I GENERAL	DR Horton LOT#11 Laguna Pointe 7515 Sheldon Billy Bldsll. Fermit # 0413961 Elk grove ca					PO. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 PO. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026 PO. BOX 1631, RENO, NV 89505 LIC. #10675 100 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675 DATE INSULATION COMPLETED					
		WALLS			LEILINGS			FLOC	RS	<u> </u>	
	(YPE OF INSULA	SQUARE FEET)	(SI YPE OF INSULA	QUARE FEET)	(TYPE OF IN		RE FEET)	
	MATERIAL	FIBERGLAS		MATERIAL	FIBERGLASS		MATERIAL	FIBERO			
P A	FORM	BATTS		FORM	ATTS & BLO	w	FORM	BAT	TS		
R	MANUFACTURERS	S PRODUCT I.D.		MANUFACTURER'S	PRODUCT I.D.		MANUFACTURI	ER'S PRODUC	T I.D.		
II	, 1	MANUFACTURE	R		AANUFACTURE	R		MANUFAC	TURER		
A R E	СТ	ос	JM	СТ	ос	JM	ст	oc		JM	
AS	Ci			BAGS			CI			OIVI.	
- 2 s	R - VALUI INSTALLE		APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - V/ INSTA		APPI THICK		
ULA	0.12/0	19 35	155	30	911						
Ε	V-151 K-	<u> </u>	KAN	EN WALLS IF R-VA		! Than Walls ab	OVE				
D	MATERIAL		FORM		R VALUE			N.	IANUFACTURE		
	FIBE	RGLASS		BATTS				СТ	ос	JM	
	MATERIAL			AIR INI	FILTRATION SEA	NLANT	MANUFACT	TURFR	<u>.</u>		
	F	oam				HILTI		HA	NDY FOA		
P	THIS IS TO	CERTIFY THA	T INSULATION PARDE AND RE	AND/OR SEAL	ANT HAS BEI	EN INSTALLED	IN CONFO	RMANCE	WITH APP	LICABLE	
ART	SIGNATURE — INS			25	TITLE	MANAGEF	R	DATE 3	-2-7		
	SIGNATURE — GE	NERAL CONTRAC	TOR	110.00.00	TITLE			DATE			
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GEOTECHNICAL ENVIRONMENTAL WATER RESOURCES CONSTRUCTION SERVICES

7515 SHELDON RA. Bldg. 11

LOTS 31 # 11101 32 # 11102 33 # 11103 Fernit # 0613961

Project No. 6735.5.001.02

March 22, 2007

D.R. Horton 11919 Foundation Place, Suite 200 Gold River, CA 95670

Subject:

North Laguna Pointe Condominiums Lot #11

Sheldon Road

Elk Grove, California

FINAL CONSTRUCTION CONFORMANCE REPORT

For D.R. Horton:

With your authorization, ENGEO Incorporated performed special inspections related to the post-tensioned foundation slabs for the subject building in Elk Grove, California. The inspections were performed from November through December 2006. This report is submitted in accordance with Chapter 17 of the Uniform Building Code.

Pad moisture testing of subject building was performed before placement of the water vapor retarder.

To the best of our knowledge and based on our observations and test results, the work requiring special inspection is in general conformance with the approved plans and specifications, field recommendations of the Structural Engineer, and the applicable workmanship provisions of the Uniform Building Code. Results of the concrete compression testing and clongation measurements from stressing of post-tensioned tendons for the subject building are attached.

We make no representation as to the accuracy of dimensions, calculations, or any portion of the design for this project. If you have any questions or comments, please contact us.

Very truly yours,

ENGEO Incorporated

Zhuo George Hu, PE

Attachments: Concrete Sampling and Stressing Reports

Dan Haynosch, GE

QOF ESSION

INSTALLATION CERTIFICATE					(Page	CF-6R	
DR HUZTON	LAGUNA	r	PLAN	AB	lela I		
Site Address 7515	SHELDOW Rd.	B129. 11	Lon	13 31 #	11101	Permit Number	0613961
FENESTRATION/GL				32#1	11102		•
	Product	Product		Total Quantity of Like	÷	Exterior Shading	
Manufacturer/Brand Name	U-Factor¹ (≨ CF-)R value)²	SHGC¹ (≤ CF-1R value) ²	# of Panes	Product (Optional)	Square Feet	Device or Overlang	Comments/Location/ Special Features
(GROUP LIKE PRODUCT:							
2. CLASSIC SGD	-38	.35	\mathcal{I}_{ϱ}	_3_	130		
3 STYLEHHE HV	138	30	30	15	221		
4. STYLELINE SH 5. STYLELINE PUS	<u>.34</u> .35	. 30 30	32315	_15_	72		
6. <u>'</u>	-						
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15							
Manufactured fenestre default values from S					el. Field fat	ricated fenestration	products use the
Installed U-Factor may from CF-1R, or a shad weighted average U-F I, the undersigned, vinstalled; 2) is equive (Form CF-1R) submared product meets or except.	ling device (exter actors for the total verify that the fendlent to or has a louitted for complia code the appropria	ior or overhaul fenestration estration/glaz wer U-Factor nee with the te requirement	ng) is in a carea ar	stalled as species than of the stalled above my wer SHGC to Efficiency	pecified on or equal to y signature than that spe Standards	the CF-1R. Altern values from CF-1R. 1) is the actual fe ecified in the certification residential bui	atively, installed mestration product cate of compliance ldings; and 3) the
42	tee 10	VIST 5	135/0	6	MIL	GARD MAN	I UFACTURING
Item #s (if applicable)	Signature, Date		7	(cneral Con	ubcontractor (Co. N utractor (Co. Name v Distributor	Iame) OR) OR Owner
Item #s (if applicable)	Signature, Date	<u> </u>		(ieneral Con	ubcontractor (Co. N ntractor (Co. Name Distributor	
			·	<u> </u>			
Item #s (if applicable)	Signature, Date			C	General Con	abcontractor (Co. Name v Distributor	
HERSP	g Department Frovider (if applica g Owner at Occup					4	
	•	-				d.	

August 2001

Compliance Forme

A-24

INSTALLATION CARD

WESTERN ONE STUCCO SYSTEM SACRAMENTO STUCCO PRODUCTS CO., INC.

Job Address:	ICBO Evaluation Services, Inc.
D.R. HORTON - LAGUNA POINTE	Report No. 3899
BLDG# 11 -UNIT# 31 - 7515 SHELDON RD # 11101 Per mit # 0613961	Date of Job Completion: 1. 191-07
Plastering Contractor	
Name: TOLIVER PLASTERING, INC.	<u></u>
Address: 3158 Luyung Dr., Rancho Cordov	a, CA 95742
Telephone Number: (916) 631-9844	
Approved Applicator's License Number as Issued by Western Stucco Products5	07
This is to certify that the plastering system on the building exterior accordance with the evaluation report specified above and the management of the control of the contr	or at the above address has been installed in anufacturer's instructions.
Signature of authorized representative of plastering contractor	<u>3-/5-0</u> 7 Date
Installation card must be presented to the building inspector After completion of work and before final inspection.	No. DRH-31

INSTALLATION CARD

WESTERN ONE STUCCO SYSTEM SACRAMENTO STUCCO PRODUCTS CO., INC.

ICBO Evaluation Services, Inc. Job Address: Report No. 3899 D.R. HORTON - LAGUNA POINTE Date of Job Completion: 2-14-07 BLDG# 11 -UNIT# 32 - 7515 SHELDON RD # 11102 Parmit # 0613961 **Plastering Contractor** TOLIVER PLASTERING, INC. Name:_ 3168 Luyung Dr., Rancho Cordova, CA 95742 Address:_ Telephone Number:___ (916) 631-9844 Approved Applicator's License Number as Issued by Western Stucco Products_____ 507 This is to certify that the plastering system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

375-07 Installation card must be presented to the building inspector After completion of work and before final inspection.

No. DRH-32

INSTALLATION CARD

WESTERN ONE STUCCO SYSTEM SACRAMENTO STUCCO PRODUCTS CO., INC.

Job Address:

ICBO Evaluation Services, Inc.

D.R. HORTON - LAGUNA POINTE

Report No. 3899

BLDG# 11 -UNIT# 33 - 7515 SHELDON RD # 11103

Date of Job Completion: 2-14-0

Permit # 0613961

Plastering Contractor

Name: TOLIVER PLASTERING, INC.	
Address: 3158 Luvung Dr., Rancho Cordova	n, CA 95742
Telephone Number: (916) 631-9844	
Approved Applicator's License Number as Issued by Western Stucco Products50	· •
This is to certify that the plastering system on the building exterior accordance with the evaluation report specified above and the ma	
Signature of authorized representative of pleatering contractor	3-/5-07 Date
Installation card must be presented to the building inspector After completion of work and before final inspection.	No. DRH-33

3rd Generation

Heating & Air Conditioning 4120 Cameron Park Dr. Suite 200A Cameron Park, CA 95682 530-677-9873

7515 SHELDON Ld. Bldg. 11 LOT 31 # 11101

Permit # 0413961

Installation Certificate

Site Address: Laguna Pointe Plan: All

HVAC SYSTEM: Heating Equipment

Equi pment (pkg. – hem pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (APUE, etc.)	Duot Location	Duct/Piping R-Value		Heuting Capacity
Ges LY8S040A12U Coil - ACE36A3X145		1	90%	Conditioned Space	8 R-6	40000	40000
Cooling Equips	hent					:	
Equipment (pkg. – heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct 13	hict/Piping R-Value	Cooling Lond	Conling Capacity
Elect - H2RIX)36S06	York Fy that comment fisted store	t	13 SEER	Conditioned Space	R-6	i	3 Ton

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.

Stand Blake 09/15/06

3rd Generation Heating & Air Conditioning Installing Subcontractor

3rd Generation

Heating & Air Conditioning 4120 Cameron Park Dr. Suite 200A Cameron Park, CA 95682 530-677-9873

7515 SHELDON Rd. Bldg. 11 LOT 32#11102

Permit # 0613961

Installation Certificate

Site Address: Laguna Pointe Plan: All

HVAC SYSTEM: Reating Equipment

Equi pment (pkg. – hem pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duot Location	Duct/Piping R-Value		Heating Capacity
Gns LY85040A12U Coll ACE36A3X145		1 1	80%	Conditione Space	# R-6	40000	40000
Cooling Equips	nent					1	
Equipment (pkg. – heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Dust D	hict/Piping R-Value	Cooling Lord	Cooling Capacity
Elect - H2RIX036S06	York	1	13 SEER	Conditioned	R-6		3 Ton
I, the undersigned, veri	fy that equipment listed she	rve is: 1) the actua	of equipment inst	Space illed, 2) caniva	lent to or mo	re efficier	then that

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,

Shared Z Barre 09/15/06

3rd Generation Heating & Air Conditioning Installing Subcentractor

3rd Generation

Heating & Air Conditioning 4120 Cameron Park Dr. Suite 200A Cameron Park, CA 95682 530-677-9873

7515 SHELLOON Rd. Bldg. 11 LOT 33 # 11103

Permit # 0613961

Installation Certificate

Site Address: Laguna Pointe Plan: All

HVAC SYSTEM: Heating Equipment

Equipment (pkg. – hem pump)	CEC Certified Mfr Na & Model Number	me # Identical Systems	Efficiency (AFUE, etc.)	Duot Location	Duct/Piping R-Value	Heating Lond	Heating Capacity
Gns LY85040A12U Coll ACE36A3X145		1	90%	Conditione Space		40000	40000
Cooling Equips	nent						
Equipment (pkg. – hest pump)	CEC Certified Mfr Na & Model Number	me # Identical Systems	Efficiency (AFUE, cto.)	Duer D	hict/Piping R-Value	Cooling	Cooling Capacity
Elect - H2RD036806	York	1	13 SEER	Conditioned	R-6		1 Tan
I, the undersigned, veri specified in the certific	A that equipment listed are of compliance (Form	shove is: 1) the actual	d equipment insta	Space illed, 2) equiva	lent to or mor	e efficien	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 Ale Base 09/15/06

3rd Generation Heating & Air Conditioning Installing Subcontractor

INSTALLATION	CERTIFICATE

De 11.	(page 1 of 4) CF-6R
Site Address 7515 SHELDON QQ. BI		1 agrees Pro
A TO SHEETING EM. BI	dy. 11 #11101 LOT 31 Fermit	Rumber Oli 300 inte

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

HYAC	<u>\$Y5</u>	TEMS:
E/ 17		

HYAC SYSTEMS: Heating Equipment				7	Plans 1,	2 and 3
Equip. Type (ptg. CEC Certified Mir Name heat pump) and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ [2CF-1 R value]	Duci Location (allic, atc.)	Duct or Piping R-value	Heating Load (Buuhr)	Heading Capacity (Blufte)
Cooling Equipment						
Equip. CEC Certified Compressor Type (ptg. Unit Mill Name and heat pump) Model Number	# of Identical Systems	Efficiency (SEER, etc.) ^t [SCF-IR Value]	Duct Location (stile, etc.)	Duce R-value	Cooling Load (Biwari	Cooting Capacity (Bruthe)

1. ≥ reads 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-IR) submitted for compliance with the Energy Efficiency Standards for residential buildings, and 3) equipment that meets of 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

WATER HEATING SYSTEMS:

Distribution Heater If Recha. # a(CEC Certified Mile Rated Took Type (Sid. EM. Type cultion. Identical External Input (EW ianie & Model Nuciber Volunte oisteaf-Use) cleacy) Standby Insulation Syllem or Blu/hr) (gallons) GAS Smi (Sr. RE) Luss (%) R-Yaluc STD ALA <u>40,00</u>0 50 <u>- 67</u> N/A B-20

Foucets & Shower Hends:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed: 2) is 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) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable,

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

COPY TO: Building Department

Building Owner at Occupancy

For amali gas atorage (rated input of less than or equal to 73,000 Biwhr), electric resistance and heat pump water heaters, list Energy Factor, For Investigationage traces input by less main or equal in 10,000 blungs, electric restrance and next pump mater neeters, the anergy For Investigation (see Recovery Efficiency, Standoy Low and Raied Input, For Instanceous gas water heaters, list Recovery Efficiency and Rated Input,

INSTALLATION CERTIFICATE

(page 1 of 4)

Do 11.		Bldg. 11#1110ZLOT 32	1014)	CF-6R
Site Address	orton		1	
7515	SHELDON QD.	Bld. 11#111071 07 73	- Lagun	Lointa
A = 5 = 1 + 1 + 1		J 11	SELUTE LAND CON COL	3.00

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

HYAC	SYSTEMS:
Efaati	

Healing Equipment

Plans 1,2 and 3 Equip, Type (peg. # of Efficiency CEC Centified Mile Name Duce Duct or identical Heating (AFUE, etc.) heal pump) and Model Number Heading Location Piping Systems (2CF-IR value) Lord (allie, etc.) Сарацісу R-valu <u>(מַנעיתר)</u> (Biu/h/)

Cooling Equipment

Equip. CEC Conflied Compressor # of Efficiency Type (pkg Unit Alle Name and Duct Identical Cooling Load (SEER, etc.) heat pump) Model Number Location Ç∞ilag Duce Systems ZCF-IR value Capacity (attic, etc.) R-value <u>(</u>9,whr) (Bim/hr)

1. ≥ reads 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-IR) submitted for compliance with the Energy Efficiency Standards for residential buildings, and 3) equipment that mosts of 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

Tank

WATER HEATING SYSTEMS:

Heaver CEC Certified N/A Type anie & Model Numbe

neirodintiO Type (514. Pointof-Use)

If Recht. cultian. ontal Type

of Rated [dentical Juhat (F.M. Systems or Bluthe) (gallans)

Effi. Volunte ciency (57, P.E)

External Standby Insulation R-Yoluc

GAS

Smith -

STD

40,000 50

. GZ N/A

B-20

For small gas storage (rated input of less than et equal to 75,000 Bluchs), electric resistance and heat pump water heaters, list Energy Factor, for large gas alorage mater heaters (rated input of greater than 75,000 Bluchs), but Recovery Efficiency, Standay Lots and Rated Input, For Instantaneous gas water heaters, list Recovery Efficiency and Rated Input.

Faucets & Shower Heads:

All faucets and showerheads installed are eartified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed: 2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-IR) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable,

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

COPY TO: Building Department

Building Owner at Occupancy

TIV2 Y STIT	ATION CERTI	ጀ ፐ <i>ር</i> ለ ጥኮ	<u>.</u>	
		LICAIE	(page 1 of 4)	ረ ገር ረ
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Va Ken	Hartan	•	4	

Site Address 7515 SHELMOND QQ. Bldg. 11#11103 LOT 33

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

patiey	per section 10-103(6).			- •		4 A BUILD THE DO	nding owner at
HYAC SY, Heating Eq Equip. Type (ptz.	STEMS: pulpment CEC Cenified Mili Name	# of [dentica]	Efficiency	Ducc	Duct or	Plans 1,	
heat pump)	and Model Number	Systems	(AFUE, e(c.) ^l [2CF-1R value)	Location(attic, ste.)	Piping R-value	Load	Heading Capacity
					- Variat	(B(m/hr)	(Blu/h/)
				-			
Cooling Equip. Equip. Type (pkg. heat pump)	Upment CEC Centified Compressor Unit Milt Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.)¹ [≥CF-IR value]	Duct Location (attic, etc.)	Duct R-value	(amply) Cooling	Cooling Capacity (Blu/hr)
I. > reads	greater than or equal to.						
I, the und	craigned verify that anua		dabove is: 1) is n	r acolal ancie			
L]]ICIENCY	Standards for residential	Physill I have		111 Ot - 110 20	ommed for	compliance with	the Engage
กลกเปลอน	Standards for residential street devices (from the Ap	pliance Effi	zna 3) cquipment ciency Regulation	that meets of (5 or Part £), w	exceeds the a	appropriate requi	rements for
				7		-14.	

Signature, Date

Installing Subcontractor (Co. Name)

WATER HEATING SYSTEMS:

OR General Contractor (Co. Name) OR Owner

Ficaler Type	CEC Certified Mile Name & Model Number	Distribution Type (Sid. Point-of-Use)	([Recis- culation, Control Type	# al Identical Systems	Rated ¹ Input (kW: or 8te/hr)	Tank Volume	ETTI Siency ²	Standbyl	Ezternal Insulation
GAS	A.O. Smith	STD	_N/A_	1	40,000	(gallons) 50	ST. REI	_N/A	R-value

² For small gas storage (rated input offices than or equal to 73,000 Bloths), electric resistance and heat pump water heaters, list Energy Factor. For large gas alonge water heaters (rated input of greater than 73,000 Bloths), list Recovery Efficiency, Standay Lots and Rated Input.

For instanceous gas water heaters, list Repovery Efficiency and Rated Input.

Faucets & Shower Hends:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24. Part 6, Subchapter 2, Section

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed: 2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-IR) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable,

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

COPY TO: Building Department Building Owner at Occupancy