

CITY OF SACRAMENTO

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

Permit No: 0613963

Insp Area: 2

Thos Bros: 358C2

Site Address: 7515 SHELDON RD SAC

Parcel No: 117-0212-010 #13

Sub-Type: NAPT

Housing (Y/N): N

CONTRACTOR
D. R. HORTON INC.
11919 FOUNDATION PL
GOLD RIVER CA 95670

OWNER
D R HORTON INCORPORATE
4401 HAZEL AV
FAIR OAKS, CA 95628

ARCHITECT

Nature of Work: BLDG # 13 - 5,640 S.F. - 2 STORY TRI-PLEX -NAPT COMPLEX

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 A License Number 750190 Date 10/10/06 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 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 _____

CITY OF SACRAMENTO
OCT 10 2006
NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

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 improvements 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 above mentioned property for inspection purposes.

Date 10/10/06 Applicant/Agent Signature _____

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:
I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier AMERICAN CASUALTY 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 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 10/10/06 Applicant Signature _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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

COUNTY SANITATION DISTRICT 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

FC
 SEPT 19, 2006
SEWER IMPACT FEE
 PERMIT AND CALCULATION

APPLICATION NO. CITY OF SACRAMENTO BLDG PERMIT NO. SND 2006-00740

GENERAL INFORMATION
NORTH LAGUNA POINTE
-TRI PLEX

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER
PAID
SEP 19 2006
10004
 THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION	
INSPECTION	
CSD-1	
SRCSD <u>1.26 ESDs</u>	<u>\$15,750</u>
CONSTRUCTION	
IN-LIEU	
TOTAL FEE	\$15,750

BUILDING USE	
RESIDENTIAL SF <input type="checkbox"/>	MF <input checked="" type="checkbox"/>
COMMERCIAL USE	
<u>BUILDING #13</u>	
<u>UNITS 31 - 38 - 39</u>	

APN: 117-1480-001

DESCRIPTION/SUBDIVISION NORTH LAGUNA POINTE LOT: 1

PROPERTY ADDRESS 7515 SHELDON ROAD

OWNER _____

MAILING ADDRESS _____

CITY-STATE-ZIP _____ PHONE _____

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE Misty Sauerberg

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

RECEIPT

Case Fee Summary

Page 1 of 1

Case Number: SWD2006-00740
Location: CITY OF SACRAMENTO
Job Address: 7515 SHELDON RD

Status: ACT

Issue Date: 9/19/2006

Date Printed: 9/19/2006

Fee Type	Fee Due	Fee Paid	Date Paid
SRCSD Sewer Fees	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 #: 32006000000010004

Transaction: 9/19/2006 3:29:28PM
Date / Time:

Case #: SWD2006-00740

Fee Type	Fee Amount
SRCSD Sewer Fees	15,750.00

Total: Check \$15,750.00

Bank #: 16-66

Check #/Acct#: 100039

Received: In Person

Confirm No: _____

Amount Tendered: \$15,750.00

Certification of Compliance
School District Development

Part I--To be completed by the APPLICANT

Owner's Name/Address LV HULL
 Project Address 7515 Sheldon Road
 Parcel Number 117-115-001 Lot No. 1
 Subdivision Name 1. LAD 1000004 No. of Units 3
 Applicant's Signature [Signature] Title Master Developer
 Phone No. 417-1009 Date 9-18-06

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 II--To be completed by the BUILDING DEPARTMENT

Plan Identification Number 7515 Sheldon Rd Bldg 13
 Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area 4415
 Signature/Title [Signature] Date 9/24/06

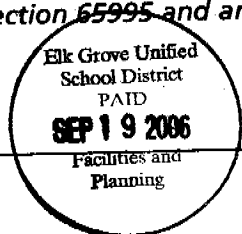
Part III--To be completed by the SCHOOL DISTRICT

School District _____ Certificate No. 51885
 Exempt Comments _____
 Residential/Apartment/etc. 4415 Square ft. x \$ 5.05 = \$ 22310.90
 Commercial/Industrial _____ Square 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 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.

Signature _____ Date _____



White & Canary--School District • Pink--Building Department • Goldenrod--Applicant

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 808-5716

Building Address: 7515 SHELDON RD BLD 13 Permit No.: 0613963
Building Use: APTS/TRI-PLEX Occupancy: R1
Building Owner: DR HORTON Construction Type: _____
Owner Address: FAIR OAKS, CA Sprinkled? Yes No
Portion of Building Occupied: ENTIRE Area: 5640 Sq. Ft.
3/23/07 Carolyn Cooper CARL HEFNER
Date By: (Print) Sign DEPUTY CHIEF BUILDING OFFICIAL

[Finaled By:CHM SIGNED OFF BLD,P,M, & ELECT,MM, GRS]

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

ENGEO

INCORPORATED

GEOTECHNICAL
ENVIRONMENTAL
WATER RESOURCES
CONSTRUCTION SERVICES7515 Sheldon Rd. Bldg. 13 Lots 37 #13101 Permit # 0613963
38 #13102
39 #13103Project No.
6735.5.001.02

March 22, 2007

D.R. Horton
11919 Foundation Place, Suite 200
Gold River, CA 95670Subject: North Laguna Pointe Condominiums Lot #13
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 elongation 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


INSTALLATION CERTIFICATE

(Page 2 of 13)

CF-6R

DR HORTON LAGUNA PT PLAN C 13
 Site Address 7515 SHELDON RD. Bldg. 13 LOTS 37#13101 38#13102 39#13103 Permit Number 0613963


FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (S CF-1R value) ²	Product SHGC ¹ (S 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. CLASSIC 360D	.38	.35	10	3	136		
3. STYLELINE HV	.38	.30	30	15	221		
4. STYLELINE SH	.39	.30	20	14	172		
5. STYLELINE PIN	.35	.30	16	16	92		
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.

42 Item #s (if applicable)	 Signature, Date	MILGARD MANUFACTURING 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

INSULATION

PART I
GENERAL

D R Hort

La

51
1310
1310 3
1310 3

- P.O. BOX 851 WEST SACRAMENTO, CA 95691 LIC. #202026
- 4909 HIGDON ROAD, MARYSVILLE, CA 95901 LIC. #202026
- P.O. BOX 851, FRESNO, CA 93701-9651 LIC. #202026
- P.O. BOX 1834, RENO, NV 89405 LIC. #10675
- 3826 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

INSULATION COMPLETED

FLOORS

SQUARE FEET

SQUARE FEET)

MATERIAL: **FIBERGLASS**
FORM: **BATTS**
MANUFACTURER'S PRODUCT I.D.

MATERIAL: **FIBERGLASS**
FORM: **BATTS**
MANUFACTURER'S PRODUCT I.D.

MATERIAL: **FIBERGLASS**
FORM: **BATTS**
MANUFACTURER'S PRODUCT I.D.

CT

OC

CT

OC

JM

13/19/3

MATERIAL: **FIBERGLASS**

MANUFACTURER

MANUFACTURER
CT OC JM

MATERIAL

MANUFACTURER

MANUFACTURER
HANDY FOAM

SIGNATURE — INSULATION

MANAGER

DATE

SIGNATURE — GENERAL CONTRACTOR

DATE

REMARKS

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6R

D.R. Horton Laguna Pointe
 Site Address 7515 SHELTON RA. Bldg. 13 13102 LOT 30 Permit Number 0613963

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).

Plans 1, 2 and 3

HYAC SYSTEMS:

Heating Equipment

Equip. Type (pkg. heat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ (≥CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ (≥CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/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-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

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	(Recovery) Efficiency Control Type	# of Identical Systems	Rated ¹ Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ² (SF, RE)	Standby ¹ Loss (%)	External Insulation R-value
<u>GAS</u>	<u>A.O. Smith GVR-50</u>	<u>STD</u>	<u>N/A</u>	<u>1</u>	<u>40,000</u>	<u>50</u>	<u>.62</u>	<u>N/A</u>	<u>R-20</u>

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.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

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.

Ivan Chavel 1/2/07
 Signature, Date

J.R. Pierce Plumbing Co.
 Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 Building Owner at Occupancy

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6R

D.P. Horton Site Address 7515 SHELLOW RD. BLDG. 13 13103 LOT 39 Laguna Pointe Permit Number 0613963

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).

Plans 1, 2 and 3

HYAC SYSTEMS:

Heating Equipment

Table with 8 columns: Equip. Type (pkg. heat pump), 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)

Cooling Equipment

Table with 8 columns: Equip. Type (pkg. heat pump), 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)

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-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

WATER HEATING SYSTEMS:

Table with 10 columns: Heater Type, CEC Certified Mfr Name & Model Number, Distribution Type (Std. Point-of-Use), (Recovery, etc.) Control Type, # of Identical Systems, Rated Input (kW or Btu/hr), Tank Volume (gallons), Efficiency (SE, RE), Standby Loss (%), External Insulation R-value

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.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

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.

Ivan Chavel 1/2/07 Signature, Date

J.R. Pierce Plumbing Co. Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner

COPY TO: Building Department Building Owner at Occupancy

INSTALLATION CERTIFICATE

(page 1 of 4)

CF-6R

D.R. Horton
 Site Address 7515 SHELBOURNE RD. Bldg. 13 13101 LOT 37 Permit Number Laguna Pointe 0613963

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).

Plans 1, 2 and 3

HVAC SYSTEMS:

Heating Equipment

Equip. Type (pkg. heat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ (≥CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ (≥CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

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 *Appliance Efficiency Regulations* or Part 6), where applicable.

Signature, Date

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	(Recovery) Control Type	# of Identical Systems	Rated ¹ Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ² (EF, RE)	Standby ¹ Loss (%)	External Insulation R-value
<u>GAS</u>	<u>A.O. Smith GVR-50</u>	<u>STD</u>	<u>N/A</u>	<u>1</u>	<u>40,000</u>	<u>50</u>	<u>.67</u>	<u>N/A</u>	<u>R-20</u>

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.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

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.

Ivan Chavel 1/2/07
 Signature, Date

J.R. Pierce Plumbing Co.
 Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 Building Owner at Occupancy

3rd Generation**Heating & Air Conditioning**

4120 Cameron Park Dr. Suite 200A

Cameron Park, CA 95682

530-677-9873

7515 SHELTON RD. Bldg. 13 Lot 39 #13103 Permit # 0613963

Installation Certificate**Site Address: Laguna Pointe****Plan: All****HVAC SYSTEM:****Heating Equipment**

Equipment (pkg. - heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct Location	Duct/Piping R-Value	Heating Load	Heating Capacity
Gas - LY8S040A12UH11	York	1	80%	Conditioned Space	R-6	40000	40000
Coil - ACE36A3X145	York	1					

Cooling Equipment

Equipment (pkg. - heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct Location	Duct/Piping R-Value	Cooling Load	Cooling Capacity
Elect - H2R1036S06	York	1	13 SEER	Conditioned Space	R-6		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 CE-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.

Sheryl L. Blake 09/15/06
Signature Date

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 SHELTON RD. Bldg. 13 LOT 37 # 13101 Permit # 0013963

Installation Certificate

Site Address: Laguna Pointe
Plan: All

HVAC SYSTEM:
Heating Equipment

Equipment (pkg. - heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct Location	Duct/Piping R-Value	Heating Load	Heating Capacity
Gas - LY8S040A12UH11	York	1	80%	Conditioned Space	R-6	40000	40000
Coil - ACE36A3X145	York	1					

Cooling Equipment

Equipment (pkg. - heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct Location	Duct/Piping R-Value	Cooling Load	Cooling Capacity
Elect - H2R1X036S06	York	1	13 SEER	Conditioned Space	R-6		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 CE-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 G), where applicable.

Sheryl L. Blake _____ 09/15/06
 Signature Date

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 SHELLOW RD. Bldg. 13 LOT 38 # 13102 Permit # 0613963**Installation Certificate****Site Address: Laguna Pointe****Plan: All****HVAC SYSTEM:****Heating Equipment**

Equipment (pkg. - heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct Location	Duct/Piping R-Value	Heating Load	Heating Capacity
Gas - LY8S040A12UH11	York	1	80%	Conditioned Space	R-6	40000	40000
Coil - ACE36A3X145	York	1					

Cooling Equipment

Equipment (pkg. - heat pump)	CEC Certified Mfr Name & Model Number	# Identical Systems	Efficiency (AFUE, etc.)	Duct Location	Duct/Piping R-Value	Cooling Load	Cooling Capacity
Elect - H2RD036S06	York	1	13 SEER	Conditioned Space	R-6		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 CE-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.

Sheryl Blake 09/15/06
Signature Date

3rd Generation Heating & Air Conditioning
Installing Subcontractor

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# 13 - UNIT# 37 - 7515 SHELDON RD # 13101 Date of Job Completion: 2-2-07
Permit # 0613963

Plastering Contractor

Name: TOLIVER PLASTERING, INC.
Address: 3158 Luyung Dr., Rancho Cordova, CA 95742
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.

Mary Allen 3-15-07
Signature of authorized representative of plastering contractor Date

Installation card must be presented to the building inspector
After completion of work and before final inspection. No. DRH-37

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# 13 - UNIT# 38 - 7515 SHELDON RD # 13102
Permit # 0613963

Date of Job Completion: 2-2-07

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 Luyung Dr., Rancho Cordova, CA 95742

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.

Mary Allen
Signature of authorized representative of plastering contractor

3-15-07
Date

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

No. DRH-38

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# 13 -UNIT# 39 - 7515 SHELDON RD # 13103

Date of Job Completion: 2-2-07

Permit # 0613963

Plastering Contractor

Name: TOLIVER PLASTERING, INC.

Address: 3158 Luyung Dr., Rancho Cordova, CA 95742

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.

Mary Allen
Signature of authorized representative of plastering contractor

3-15-07
Date

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

No. DRH-39