Planning and Building Department

Building Division

CITY OF SACRAMENTO
CALIFORNIA

Downtown Permits Center
1231 I Street, #200
Sacramento, CA 95814-2998

North Permits Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

ADDRESS 3216 P ST MANOR **PERMIT NO.** 0506544

INSPECTION COMMENTS	PERMIT DOCUMENTS
6905 B10, 40 AP SSS	
62305 B11,12 AP SSS	
7-6-05 P-42-43 AP cortm	
07-1-05 E67 CN S.K.	
8/10/05 B17/26 AP SJS	
8-17-05 E67 AP MDP	-348 47
8 24 05 B81-18 CN Vic	Grunder
8/26/5 B18/81- AP - SJS	Safety Glazing only item (ck. Final)
B14 AP OK to	Dry Wall
9-1-05 P47 AP SSS	
10-27-05 Final AP	MDP

FINAL APPROVALS	
BUILDING	
ELECTRICAL	MDP 10-27-05
PLUMBING	
MECHANICAL	
FIRE	
SITE	

INSTALLATION CERTIFICATE

CF-6R

3216 Savannah Wy
Site Address

0806544
Permit Number

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

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 Component 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. Pan/Leaf/Dist)	If Recirculation, Control Type	# of Identical Systems	Rated[3] Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency[2] (EF, RE)	Standby[2] Loss (%)	External Insulation R-value[3]
Storage	A.O. Smith		Aqua		Direct	50	.62		
Tankless	Lochinvar								

2. For small gas storage (rated input not more 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.
3. R-12 external insulation is mandatory for all gas 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.

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

Signature, Date 7-12-05

K.C.L. Companies
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

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

INSTALLATION CERTIFICATE

CF-

3216 Paomarok Wy, — 0506544

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 Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1. Pella	.35	.24	2				low e2
2.	.31	.30	2				
3.	.34	.30	2				
4.	.34	.30	2				
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 applicable requirements for manufactured devices (Form 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 final

3216 Laramoor Wy

0506544

INSTALLATION CERTIFICATE

CF-6R

LOT PLAN # KB HOME - SCHUMACHER ALLEY

Site Address

Permit Number

An installation certificate is required to be posted at the building site and must be 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 (see section 104.4 of the building permit ordinance) per Section 104.10(5).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (pkg. Heat pump)	CEC Certified Mfr Name and Model #	# of Identical Systems	Efficiency (AFUE and PUE-IR value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)	
FURNACE	Carrier 58STX070-12	1	80%	ATTIC	6	26,501	53,000	PLAN 1699
FURNACE	Carrier 58STX070-12	1	80%	ATTIC	6	26,368	53,000	PLAN 1717
FURNACE	Carrier 58STX070-12	1	80%	ATTIC	6	26,387	53,000	PLAN 1846
FURNACE	Carrier 58STX090-16	1	80%	ATTIC	6	29,738	70,000	PLAN 2013
FURNACE	Carrier 58STX090-16	1	80%	ATTIC	6	31,615	70,000	PLAN 2251

Cooling Equipment

Equip. Type (pkg. Heat pump)	CEC Certified Compressor* Unit Mfr Name and Model #	# of Identical Systems	Efficiency (SEER, and / or EER Rating)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)	
A/C	Carrier 38BRC030*	1	13.0	ATTIC	6	19,864	47,600	PLAN 1699
A/C	Carrier 38BRC036*	1	13.0	ATTIC	6	21,175	33,100	PLAN 1717
A/C	Carrier 38BRC036*	1	13.0	ATTIC	6	20,815	33,100	PLAN 1846
A/C	Carrier 38BRC042*	1	13.0	ATTIC	6	25,509	38,600	PLAN 2013
A/C	Carrier 38BRC042*	1	13.0	ATTIC	6	27,401	38,600	PLAN 2251

* = TXV valve installed as part of coil

(1) R-values greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) the same as that specified on the plans and specifications submitted, 2) equivalent to or more efficient than that specified on the certificate of compliance (Form CF-1R) submitted for compliance with the *Energy Efficiency Standards* for residential buildings, or 3) equipment that qualifies as an exception to the requirements for manufactured devices (from the *Appliance Efficiency Regulations*) (see Section 151 (a) of Title 20), where applicable.

Signature, Date

BEUTLER CORPORATION

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

INSULATION CERTIFICATE

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

SITE ADDRESS LOT 86 HAMPTONS (ALLEY) (**NUMBER**) NATOMAS (**CITY**) CA (**STATE**)

CEILINGS:

BLOW:	**MANUFACTURER**	GREEN FIBER	**THICKNESS**	10.3"	**R/VALUE**	38
BATTS:	**MANUFACTURER**	KNAUF	**THICKNESS**	13"		38
		KNAUF				
		KNAUF				

EXTERIOR WALLS:

	MANUFACTURER	KNAUF	**THICKNESS**	3.5"	**R/VALUE**	13
		KNAUF				

FLOOR INSULATION:

	MANUFACTURER	KNAUF	**THICKNESS**	6.5"	**R/VALUE**	19
		KNAUF				

AIR INFILTRATION: **(TITLE 24)**

YES XXX **NO** _____

OTHER: _____

GENERAL CONTRACTOR: KB HOMES **LICENSE #** _____

BY: _____ **TITLE** _____ **DATE** _____

INSULATION CONTRACTOR: WESTERN INSULATION LP **LICENSE #** 794484

BY: Becky Gutierrez **TITLE** AUTH. AGENT **DATE** 9/20/2005

BECKY GUTIERREZ