CITY OF SACRAMENTO 1231 I Street, Sacramento, CA 95814

Site Address: 2241 CASA LINDA DR SAC

Parcel No:

BUENA PARK LOT #52 Housing (Y/N):

<u>CONTRACTOR</u> TIM LEWIS COMMUNITIES

OWNER

ARCHITECT

Permit No: 0509306

Sub-Type: NSFR

Insp Area:

Thos Bros:

5750 SUNRISE BLVD CITRUS HIGHTS 95610

Nature of Work: MP2289 2 STORY 10RM SFR CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C). dnder's Address Lender's Name 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. Contractor Signature Date License Number 492827 License Class OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Scc. 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 projects with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec.

B& PC for this reason:

CITY OF SACRAMA

2005 B& PC for this reason: I am exempt under Sec. Ower Signature IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the publicant 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 abovernentioned property for inspection purposes. Aplicant/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: Policy Number 0401182004 STATE FUND Exp Date 04/01/2005 (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, Ishall 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,

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.

Aplicant Signature

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

CERTIFICATION OF INSULATION

.					SACRAM	ENTO BUILDING	PRODUCTS		
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2241	CASA	LINDA	WK_	3326	A PONDEROS	A WAY, LAS VEGA	AS, NV 89118	LIC. #10675	
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No.: 200-927925



Installation Card	
Stucco System Tradename; KWIK KOTE	
Job Address Name of Stucco Manufacturer: KWIK KOTE CORP.	
LEGACY AT BUENA PARK LOT 52 ICC Evaluation Services, Inc. Evaluation Report ESR-1711 Date of Job Completion	
Stucco Contractor SERMIT + 0501306 Name: KENYON PLASTERING, INC.	
Address: PO BOX 2077	
North Highlands CA, 95660	
Telephone Number: 916/349-8191 Approved Contract Number as issued by KWIK KOTE. 1001 Approved Contract Number as issued by KWIK KOTE. 1001	t
the atticce system on the building exterior at the above address has been material.	
specified above and	
Signature of authorized representative of stucco contractor	

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0509306 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).

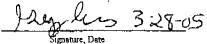
2241 CASA LINDA OR

HYAC SYSTEMS: Heading Equipment

	,					•		
Equip. Type (pkg. Heat pump)	CEC Certified Mir name and Model #	# of Identical Systems	(I) Efficiency (AFUE, etc.) > CF-1R value	Duct Location (attic, etc.)	Duct or Piping	Heating Load (Btwhr)	Herling Capacity (Btu/hr)	
Furnace	York LY85060A12UH11	1	0.80	Attic	R-6.0	29,167	80,000	Plan 1
Furnace	York LY85060A12UH11	1	0.80	Attlc	R-6.0	31,809	60,000	Plan 2
Furnace	York LY8S060A12UH11	<u>· 1</u>	0,80	Attic	R-6.0	31,744	60,000	Plan 3
Furnace	York LY8S080818UH11	1	0.80	Attic	R-6.0	37,988	80,000	Plan 4
Furnace	York LY85080B16UH11	1	08,0	Attic	R-6.0	37,081	80,000	Plan 5
Furnace	York LY85080B16UH11	1	D.BO	Attic	. R-8.0	26,099	80,000	Plan 6
Furnace	York LY8S060A12UH11	1	0,80	Attic	R-6.0	27,428	60,000	Plan 7
Cooling Equ	ulpment	•					•	
Equip. Type (pkg. Heat pump)	CPC Certified Compressor Unit Mft Name and Model #	# of Identical Systems	(I) Efficiency (SEER, etc.) > CF-IR Value	Duct Location (artio, etc.)	Duct R-value	Cooling Load (Bhr/hr)	Cooling Capacity (Btu/ur)	
Condenser	. York H*RC030 *	. 1 .	. 13,0	Attic	R-5.0	23,872	27,800	Plan 1
Condenser	York H*RC030 *	1	13,0	Attić	R-6,0	24,093	27,800	Plan 2
			3414					
Condenser	York H*RE038 *	1	14,0	Attic	R-8,0	26,661	31,600	Plan 3
Condenser Condenser	York H*RE038 * York H*RC042 *	1	· · · · · · · · · · · · · · · · · · ·					Plan 3 Plaп 4
		1 1	14,0	Attic	R-8,0	26,661	31,800	•
Condenser	York H*RC042 *	1 1 1	14,0 13,0	Attic	R-6,0 R-6,0	26,661 33,348	\$1,600 38,600	Plan 4
Condenser Condenser	York H*RC042 * York H*RC042 *	1 1 1	14,0 13,0 13.0	Attic Attic	R-6,0 R-6,0 R-6.0	26,661 33,348 32,249	\$1,600 38,600 38,600	Plan 4 Plan 5

*TXV - Indicates Thermal Expansion Valve On Coil

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.



Beutler Corporation

OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model #	Distribution Type (Std, point of use)	If Recirculation Control Type	# of Identical Systems	(2) Rated Input (kW or Brivtir)	Tank Volume (gallons)	(2) Efficiency (EF,RE)	(2) Standby Loss (%)	External Insulation R-value

⁽²⁾ For small gas storage (rated input of less than or equal to 75,000 Btu/lu), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/lu), list Recovery Efficiency, Standby Loss and Rated Input, For Instantaneous gas water heaters, list Recovery efficiency and Rated Input.

Facets & Shower Heads:

All facets 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

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

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

^{(1) ≥} reads greater than or equal to.

⁽³⁾ R-12 external insulation is mandatory for storage water heaters with an energy factor of less that 0.58.

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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:

COPY TO: Building Department

Building Owner at Occupancy

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

