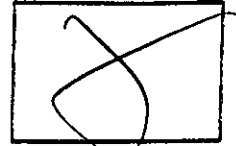


B

Type



Plans

B- 1411048

Permit Number

140

Street Number

Cherie Way

Street Name

BEL

Community Code

125-600-013

APN

COUNTY OF SONOMA - PERMIT AND RESOURCE MANAGEMENT DEPARTMENT
 2550 Ventura Avenue, Santa Rosa, CA 95403 (707) 527-1900 FAX (707) 527-1103

Please Print Your Name: Russell Loewen Date Applied: 2-25-97

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION PRINT CLEARLY

Site Address: 140 Cherie Way City: Santa Rosa ZIP: 95407
 Cross Street: Dutton Ave APN: 125-600-13 Project Phone #: () Project Fax #: ()
 Directions: _____ Subd. Name: _____ Unit #: _____ Lot #: _____
 Describe Project: Garage to Living Space + handicap ramp Living Area: 210 sq ft Garage: _____ Decks: _____ Contract Price: \$6,000

OWNER NAME AND ADDRESS: Name: Russell Loewen Mailing Address: 1767 Windrose Ct. City: Santa Rosa State: CA ZIP: 95403
 APPLICANT NAME AND ADDRESS: Name: _____ Mailing Address: Same City: _____ State: _____ ZIP: _____

CONTRACTOR INFORMATION: Company Name: A.C. Menne Address: 5685 Redwood Dr. City: Redwood Park State: CA ZIP: 94928 Day Ph: 707 524-1877 Fax: () _____
 OTHER PERSONS (ARCHITECT, ENGINEER, ETC.): Name: _____ Address: _____ City: _____ State: _____ ZIP: _____ Day Ph: () _____ Fax: () _____

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 worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
 I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:
 Carrier: _____ Policy No.: _____
 (This section need not be completed if the permit is for one hundred dollars (\$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 worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.
 Exp. Date: _____ Applicant: _____
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 FEES.

CONSTRUCTION LENDING DECLARATION
 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.)
 Lenders Name: _____ Lenders Address: _____
 License No.: _____ Exp. Date: _____

FOR DEPARTMENT USE
 Zoning: R1 File No.: _____ Acres: .13
 Existing Use/Structures: SFO
 Proposed Use/Structures: CONVERT PTN GAR TO Living Space
 Zoning Min. Yard Requirements: Front 10' Right _____ Back _____
 NOTE: Fire Safe Standards require all parcels greater than 1 Acre to have a min. 30' setback unless mitigated. Mitigation Required Address subject to change
 Approval for Permit Issuance: _____ Approval for Occupancy: _____
 By: _____ Date: _____
 By: Walter Chen Date: 2/25/97
 Conditions: _____

OWNER-BUILDER DECLARATION
 I hereby affirm under penalty of perjury that I am exempt from the Contractor's 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 Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 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).)
 I, as 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 Professions Code: The Contractor's 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 or 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 or 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 Contractor's 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 Contractor's License Law.)
 I am exempt under Sec. _____ B & P.C. for this reason _____
 Date: _____ Owner: _____

Sewer Connection: Available Fees Paid _____
 Approved by: Rosa Carter Date: 2-25-97
 Road Encroachment: Fees Paid _____
 Approved by: _____ Date: _____

LICENSED CONTRACTOR'S 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.
 Lic. Class: B Lic. No.: 302654
 Exp. Date: _____ Contractor: A.C. Menne

Septic System Permit/Clearance # _____
 Approved by: _____ Date: _____
 Flood Zone: Yes No 100 Year Flood Elevation: _____
 Site Review: _____

ASBESTOS DECLARATION
 Written asbestos notification pursuant to Part 61 of Title 40 of the Code of Federal Regulations is required when asbestos exists in buildings, or portions thereof, undergoing demolition. I hereby declare that demolition authorized by this permit is from construction that () does () does not contain asbestos, or that () no demolition is authorized by this permit.
 I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State laws relating to building construction. I hereby authorize representatives of the County of Sonoma to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be deemed revoked.

Code Enforcement Violation: Yes No
 Work Authorized: garage conversion
 New Addition Alteration Repair Moving Occ/Chg

NOTICE!! THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. A REQUEST FOR TIME EXTENSION MUST BE SUBMITTED IN WRITING TO THE BUILDING CODE ADMINISTRATOR WITHIN THE FIRST 180 DAYS OF THE PERMIT.
 PERMITTEE SIGNATURE: Russell Loewen
 ADDRESS: 1767 Windrose Ct. Santa Rosa CA 95403
 Contractor Owner Agent for Contractor Agent for Owner

Machine Space for Permit Fee
 Plans Approved No Plans Subject to Field Inspection
 Plancheck Cleared By: JS Date: 2-26-97
 Permit Cleared for Issuance By: [Signature] Date: 02/26/97
 Auto. Fire Sprinklers Req'd: _____ No. of Units: _____ Certificate of Occupancy: _____
 Final Date: _____ Inspector: _____

ERRA	\$308.17
**TTL	\$308.17
CHECK	\$308.17
CHNG	\$0.00

Permit # B141048 Area # 3
 Permit Coordinator: _____

JOB ADDRESS: 140 Cherie Way
 MAP REFERENCE: SR
 PERMIT NUMBER: 141048
 INSPECTION AREA: 3

SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
FOUNDATION				
FORMS/SETBACK				
FOOTING	H/c Ramp	3/28/97	EF	
WALLS				
UFER GROUND #				
CAISSONS/PIERS				
SLAB				
MASONRY				
RETAINING WALLS				
FIREPLACE				
FOOTING				
HEARTH/PROTECTION				
THROAT				
CHIMNEY				
UNDERFLOOR/UNDERSLAB				
U/F ELECTRICAL				
U/F MECHANICAL				
U/F PLUMBING				
U/F FRAMING	PARTIAL 3-5-97	3-6-97	P	
U/F INSULATION				
SHEAR WALLS				
<input type="checkbox"/> INTERIOR				
<input type="checkbox"/> EXTERIOR				
DIAPHRAGMS				
<input type="checkbox"/> ROOF				
<input type="checkbox"/> FLOOR				
SIDING/SHEATHING				
HOLD DOWNS				
CLOSE-IN				
ROUGH ELECTRICAL	3-12-97		P	
ROUGH MECHANICAL				
ROUGH PLUMBING				
ROUGH FRAME	3-12-97		P	
SMOKE DETECTORS	4-18-97		P	
INSULATION				
WALLBOARD	3-14-97		P	
STUCCO/PLASTER				
<input type="checkbox"/> LATH				
<input type="checkbox"/> SCRATCH				
TUB/SHOWER PAN				
SUSPENDED CEILING				
<input type="checkbox"/> ELECTRICAL				
<input type="checkbox"/> MECHANICAL				
<input type="checkbox"/> G				
<input type="checkbox"/> S/HANDRAILS				
<input type="checkbox"/> S				
CORRIDORS/DOORS				
HANDICAP REQUIREMENTS				
ENERGY REQUIREMENTS				
TEMPORARY OCCUPANCY				
TEMPORARY ELECTRICAL				
TEMPORARY GAS				
ELECTRIC METER AUTHORIZATION				
PANEL BOARDS/SERVICE				
GAS METER AUTHORIZATION				
GAS PRESSURE TEST				
HOUSE				
YARD				
MANUF. HOME FOUNDATION				
MANUF. HOME INSTALLATION				
CONTINUITY				FIRE INSPECTION REQUIRED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
STAIRS/SKIRTS				Inspected by: <i>R</i>
RIDGE BOLTING				
SWIMMING POOLS				
PRE-GUNITE				
PRE-DECK				
PRE-PLASTER/FENCE				CLEARANCES:
GRADING FINAL				FIRE <input type="checkbox"/> Local <input type="checkbox"/> County
ELECTRICAL FINAL	3/28/97		EF	HEALTH DEPARTMENT
MECHANICAL FINAL	4-18-97		P	ZONING
PLUMBING FINAL				SANITATION
FINAL				N.C.A.P.C.D.
OCCUPANCY (OK TO OCCUPY)				PLAN RETENTION REQUIRED?
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

PERMIT # 41048



COUNTY OF SONOMA PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 527-1900 FAX (707) 527-1103

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

Plan Check Submittal/ Resubmittal Checklist

Redlined plans must be returned with resubmittals

Project Information:

Submittal

Resubmittal

140 Cherie Way
Project address

Russell Loewen
Owner's Name

Plan check # Building Permit #

Plan Checker's Name

Please check which return procedure is preferred if corrections are needed:

Pickup

Phone# 528-7466 Mail to:

Russell Loewen

Address

1767 Windsor Ct

Contact Name:

City, St Zip

Santa Rosa CA 95403

Comments:

For Department Use Only

Project Coordinator's Name

Residential

3 complete sets of signed Plans
(2 sets for resubmittal)

1 reduced set, Site Plan and Floor Plan Only
(8½"x11" max.)(2 sets if property is served by a septic system)

Commercial

3 complete sets of signed, stamped Plans
(2 sets for resubmittal)

1 reduced set, Site Plan and Floor Plan Only
(11"x17" max.)(2 sets if property is served by a septic system)

Plans

Mandatory Items

Qty. Rcvd.

- Plot/Site Plan
- Floor Plan (Electrical, Plumbing, Mechanical)
- Foundation Plan (Footing Details)
- Elevations
- Framing Plan
- Cross Sections
- Structural Details
- Signed Drawings (Stamped if Engineered)

Optional Items

Peer Review Letter

Other Items Which May be Required

Qty. Rcvd.

- Title 24 Energy Calcs (2 signed, stamped sets)
- Engineering Calcs (2 signed, stamped sets)
- Geotechnical Report (2 signed, stamped sets)
- Truss Calcs & Layout (2 signed, stamped sets)
- Elevation Certificate
- Flood Plain Management (Disposal of excess materials)
- Creek Setback (Distance Delineated)
- Utility Certificate (City of Santa Rosa)
- Architectural Committee Approval
- Special Inspections

Clearances

Permit & Resource Management Dept.

Rqd. Rcvd.

- Zoning Clearance
- Grading Permit
- Residential Traffic Mitigation
- Commercial Traffic Mitigation
- Well & Septic
- Sewer
- Road Encroachment
- Parcel Map Improvement Conditions
- Code Enforcement
- Drainage Review
- Investigation Fees
(Equal to total of bldg.,plmb.,elec.,mech. fees)
- Penalties
(Equal to total of bldg.,plmb.,elec.,mech. fees x _____)

Parks & Recreation Dept.

Rqd. Rcvd.

Park Fee

Dept. Of Health Services

- Food Handling
- Hazardous Materials
- Public Pools & Spas

Special District

Water

Sewer Santa Rosa

Fire Marshall

A

Air Quality Control

School Mitigation Fee

Russell Loewen
Applicant Signature

clu
Staff Signature

2/25/97
Date



COUNTY OF SONOMA PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 527-1900 FAX (707) 527-1103

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

Plan Check Submittal/ Resubmittal Checklist

Redlined plans must be returned with resubmittals

Project Information:

Submittal

Resubmittal

X 140 Cherie Way Santa Rosa
Project address

X Russell Loewen
Owner's Name

Plan check # Building Permit # B141048

X Dave Spiegler
Plan Checker's Name

Please check which return procedure is preferred if corrections are needed:

Pickup Phone # 528-7466 Mail to: _____

Address _____

X Contact Name: Russell Loewen City, St Zip _____

Comments: Amenendment

For Department Use Only

Project Coordinator's Name _____

Residential

- 3 complete sets of signed Plans (2 sets for resubmittal)
- 1 reduced set, Site Plan and Floor Plan Only (8½"x11" max.)(2 sets if property is served by a septic system)

Commercial

- 3 complete sets of signed, stamped Plans (2 sets for resubmittal)
- 1 reduced set, Site Plan and Floor Plan Only (11"x17" max.)(2 sets if property is served by a septic system)

Plans

Mandatory Items

- | | |
|------------|---|
| Qty. Rcvd. | Plot/Site Plan |
| _____ | Floor Plan (Electrical, Plumbing, Mechanical) |
| _____ | Foundation Plan (Footing Details) |
| _____ | Elevations |
| _____ | Framing Plan |
| _____ | Cross Sections |
| _____ | Structural Details |
| _____ | Signed Drawings (Stamped if Engineered) |

Other Items Which May be Required

- | | |
|------------|---|
| Qty. Rcvd. | Title 24 Energy Calcs (2 signed, stamped sets) |
| _____ | Engineering Calcs (2 signed, stamped sets) |
| _____ | Geotechnical Report (2 signed, stamped sets) |
| _____ | Truss Calcs & Layout (2 signed, stamped sets) |
| _____ | Elevation Certificate |
| _____ | Flood Plain Management (Disposal of excess materials) |
| _____ | Creek Setback (Distance Delineated) |
| _____ | Utility Certificate (City of Santa Rosa) |
| _____ | Architectural Committee Approval |
| _____ | Special Inspections |

Optional Items

- _____ Peer Review Letter

Clearances

Permit & Resource Management Dept.

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| Rqd. | Rcvd. | <input type="checkbox"/> | <input type="checkbox"/> | Zoning Clearance |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Grading Permit |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Residential Traffic Mitigation |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Commercial Traffic Mitigation |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Well & Septic |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewer |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Road Encroachment |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Parcel Map Improvement Conditions |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Code Enforcement |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Drainage Review |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Investigation Fees (Equal to total of bldg.,plmb.,elec.,mech. fees) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Penalties (Equal to total of bldg.,plmb.,elec.,mech. fees x _____) |

Parks & Recreation Dept.

- | | | | | |
|------|-------|--------------------------|--------------------------|----------|
| Rqd. | Rcvd. | <input type="checkbox"/> | <input type="checkbox"/> | Park Fee |
|------|-------|--------------------------|--------------------------|----------|

Dept. Of Health Services

- | | | |
|--------------------------|--------------------------|---------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Food Handling |
| <input type="checkbox"/> | <input type="checkbox"/> | Hazardous Materials |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Pools & Spas |

Special District

- | | | |
|--------------------------|--------------------------|-------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Water _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Sewer _____ |

Fire Marshall

- | | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

Air Quality Control

- | | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

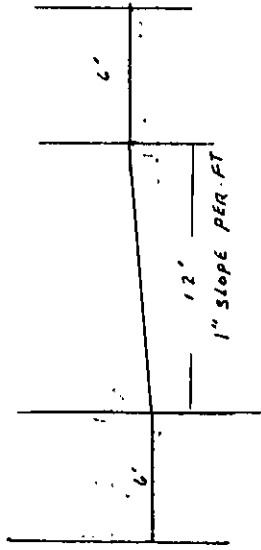
School Mitigation Fee

- | | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

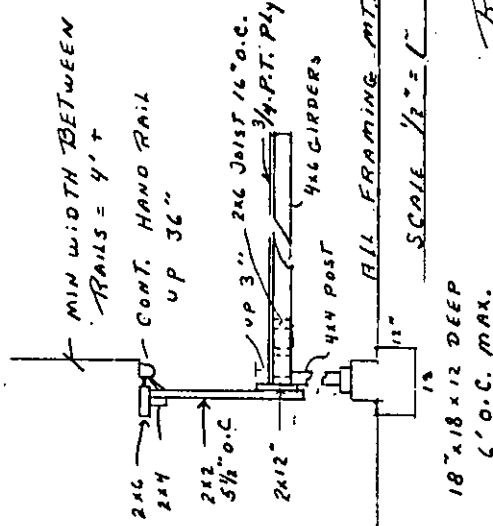
X Russell Loewen
Applicant Signature

Flu
Staff Signature

3/11/97
Date



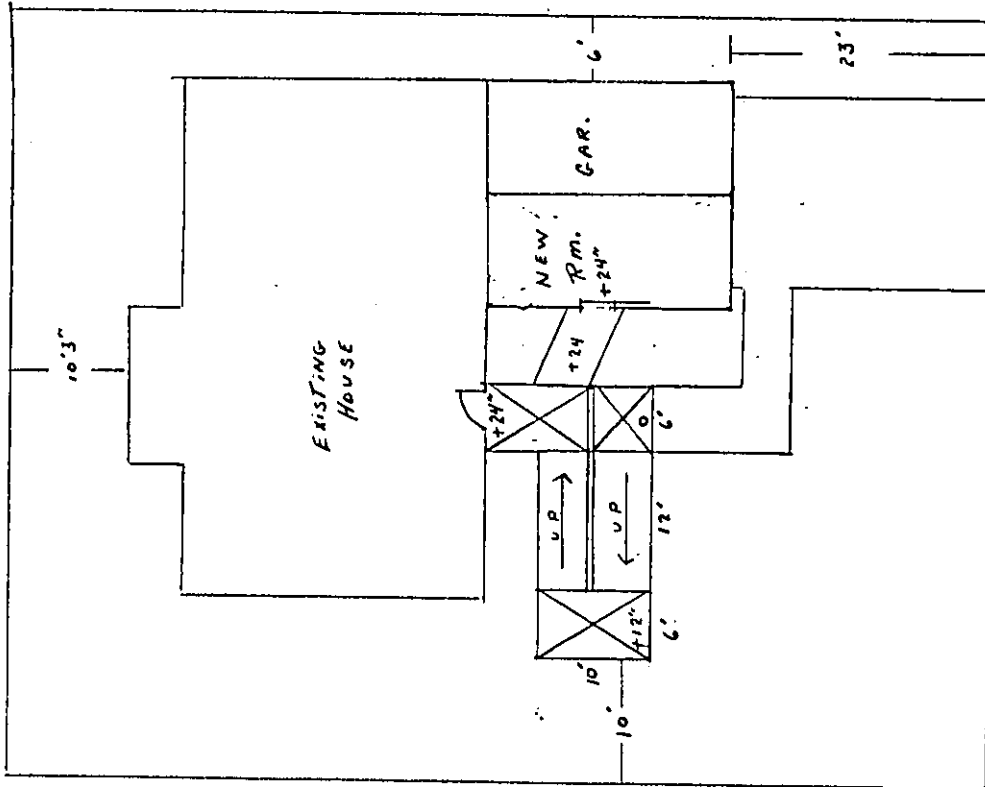
SCALE 1/4" = 1'



SCALE 1/2" = 1'

18" x 18" x 12" DEEP
6" O.C. MAX.

REVISOR FOR
 MR. & MRS. RUSSELL LOEWEN
 140 CHERIE WAY
 SANTA ROSA
 REVISED PAGE 1
 FOR HANDICAP RAMP
 PLANNED BY A.C. MENNE
 B.L.C. # 302654
 A.P. # 125-600-13



SCALE 1/8" = 1'



COUNTY OF SONOMA PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 527-1900 FAX (707) 527-2210

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

PLAN CHECK COMPLETION NOTICE FOR:

B- 141048
Site Address 140 Cherie Way ROS
Date _____

Russell Newman
1767 Windrose Ct
Santa Rosa, CA 95403

Dear Customer:

The building code plan check portion of your building permit application has been completed. Please note the box(es) checked below and the clearance(s) required in order to obtain your building permit. Your permit may be issued when all clearances have been acquired and fees paid. Please allow at least 30 minutes for the time required to obtain your permit.

OUR RECORDS INDICATE YOUR APPLICATION STILL NEEDS THE FOLLOWING CLEARANCES:

OUTSIDE PRMD:

- Architect Review/Homeowners Assn.
- Coastal Commission
- Local Fire Marshal
- School Mitigation fee (payable at School District)
- State Department of Fish & Game
- Other _____

AT PRMD - fee may be required (can be paid when you pay for Building Permit):

- Code Enforcement
- County Fire Marshal
- Drainage Review
- Park Fee
- Road Encroachment
- Septic
- Sewer
- Traffic Mitigation Fee
- Well

AT PRMD - No fee or fee is part of normal Building Permit cost:

- Owner Builder Form
- Workers Compensation (Certificate of Insurance)
- Zoning
- 8 1/2" x 11" Reduced Floor Plan

NO FURTHER CLEARANCES ARE REQUIRED. Your permit is ready to be issued.

If you have any questions regarding permit fees, call (707) 527-1900. If you have any questions regarding the approval process, call (707) 527-2095 (On-duty Plan Check Specialist).

Thank you.

Plan Checker

Russell Loewen
1767 Windrose Ct.
Santa Rosa, CA 95403

```

=====
Project Title..... Loewen                               Date..... 02/20/97
Project Address..... 140 Cherie Way                      *****
                  Santa Rosa                          *v4.50*
Documentation Author... Bill Mattinson                  ***** | _____ |
                  SOL*DATA                             | Building Permit # |
                  401-C College Avenue                 | _____ |
                  Santa Rosa, CA 95401                 | Plan Check / Date |
                  707-545-4440                         | _____ |
                  | Field Check/ Date |
Climate Zone..... 02
Compliance Method..... MICROPAS4 v4.50 for 1995 Standards by Enercomp, Inc.
=====

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| MICROPAS4 v4.50 File-LOE50 Wth-CTZ02S92 Program-FORM CF-1R |
| User#-MP0817 User-SOL*DATA Run-addition |
=====

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GENERAL INFORMATION

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Conditioned Floor Area..... 160 sf
Building Type..... Single Family Detached
Construction Type ..... Addition Alone
Building Front Orientation. Front Facing 0 deg (N)
Number of Dwelling Units... .11
Number of Stories..... 1
Floor Construction Type.... Raised Floor
Glazing Percentage..... 20.6 % of floor area
Average Glazing U-value.... 0.5 Btu/hr-sf-F

```

BUILDING SHELL INSULATION

Component Type	Frame Type	Cavity R-value	Sheathing R-value	Insul R-value	Assembly U-value	Location/Comments
Wall	Wood	R-13	R-n/a	R-13	0.088	
Door	Wood	R-0	R-n/a	R-0	0.330	
Floor	Wood	R-19	R-n/a	R-19	0.037	
Roof	Wood	R-30	R-n/a	R-30	0.031	

FENESTRATION

Orientation	Area (sf)	U-Value	# of Interior Panes	Shading/Description	Exterior Shading	Overhang/ Fins	Framing Type
Door	Left (E)	33.0	0.500	2	Drapes.Std	None	Yes Vinyl

HVAC SYSTEMS

Equipment Type	Minimum Efficiency	Duct Location	Duct R-value	Thermostat Type
Furnace	0.750 AFUE	Attic	R-4.2	Setback
NoCooling	10.00 SEER	Attic	R-4.2	Setback

Project Title..... Loewen

Date..... 02/20/97

MICROPAS4 v4.50 File-LOE50 Wth-CTZ02S92 Program-FORM CF-1R
User#-MP0817 User-SOL*DATA Run-addition

SPECIAL FEATURES/REMARKS

COMPLIANCE STATEMENT

This certificate of compliance lists the building features and performance specifications needed to comply with Title-24, Parts 1 and 6 of the California Code of Regulations, and the administrative regulations to implement them. This certificate has been signed by the individual with overall design responsibility. When this certificate of compliance is submitted for a single building plan to be built in multiple orientations, any shading feature that is varied is indicated in the Special Features/Remarks section.

DESIGNER or OWNER

DOCUMENTATION AUTHOR

Name.... Russell Loewen
Company. owner
Address. 140 Cherie Way
Santa Rosa Ca
Phone... 528-7466

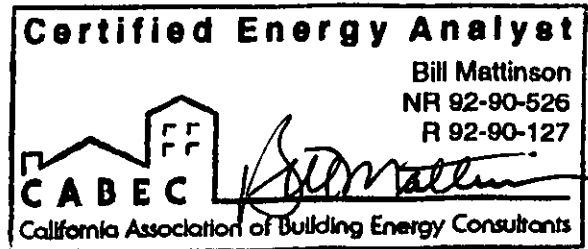
Name.... Bill Mattinson
Company. SOL*DATA
Address. 401-C College Avenue
Santa Rosa, CA 95401
Phone... 707-545-4440

Signed.. [Signature] 2/20/97
(date)

ENFORCEMENT AGENCY

Name....
Title...
Agency..
Phone...

Signed..
(date)



```

=====
Project Title..... _____
Project Address..... _____ *****
Documentation Author... Bill Mattinson          *v4.50*
                        SOL*DATA                *****
                        401-C College Avenue     | _____ |
                        Santa Rosa, CA 95401    | Plan Check / Date |
                        707-545-4440           | _____ |
Climate Zone..... _____ | Field Check/ Date |
Compliance Method..... MICROPAS4 v4.50 for 1995 Standards by Enercomp, Inc.
=====
| MICROPAS4 v4.50                               Program-FORM MF-1R |
| User#-MP0817  User-SOL*DATA                   |
=====
    
```

Lowrise residential buildings subject to the Standards must contain these measures regardless of the compliance approach used. Items marked with an asterisk (*) may be superseded by more stringent compliance requirements listed on the Certificate of Compliance. When this checklist is incorporated into the permit documents, the features noted shall be considered by all parties as binding minimum component performance specifications for the mandatory measures whether they are shown elsewhere in the documents or on this checklist only.

BUILDING ENVELOPE MEASURES

	Design- er	Enforce- ment
*150(a): Minimum R-19 ceiling insulation.	✓	_____
150(b): Loose fill insulation manufacturers labeled R-Value.	✓	_____
*150(c): Minimum R-13 wall insulation in framed walls (does not apply to exterior mass walls).	✓	_____
*150(d): Minimum R-13 raised floor insulation in framed floors; minimum R-8 in concrete raised floors.	✓	_____
150(i): Slab edge insulation - water absorption rate no greater than 0.3%, water vapor transmission rate no greater than 2.0 perm/inch.	_____	_____
118: Insulation specified or installed meets CEC quality standards. Indicate type and form.	✓	_____
116-17: Fenestration Products, Exterior Doors and Infiltration/ exfiltration controls		
a. Doors and windows between conditioned and unconditioned spaces designed to limit air leakage.		
b. Manufactured fenestration products have label with certified U-value, and infiltration certification.		
c. Exterior doors and windows weatherstripped; all joints and penetrations caulked and sealed.	✓	_____
150(g): Vapor barriers mandatory in Climate Zones 14 and 16 only.	_____	_____
150(f): Special infiltration barrier installed to comply with Sec. 151 meets CEC quality standards.	_____	_____
150(e): Installation of Fireplaces, Decorative Gas Appliances and gas logs		
1. Masonry and factory-built fireplaces have:		
a. Closeable metal or glass door		
b. Outside air intake with damper and control		
c. Flue damper and control		
2. No continuous burning gas pilots allowed.	✓	_____

Project Title.....

MICROPAS4 v4.50	Program-FORM MF-1R
User#-MP0817 User-SOL*DATA	

SPACE CONDITIONING, WATER HEATING AND PLUMBING SYSTEM MEASURES

	Design- er	Enforce- ment
110-13: HVAC equipment, water heaters, showerheads and faucets certified by the CEC.	✓	_____
150(i): Setback thermostat on all applicable heating systems.	✓	_____
150(j): Pipe and Tank insulation		
1. Indirect hot water tanks (e.g., unfired storage tanks or backup solar hot water tanks) have insulation blanket (R-12 or greater) or combined interior/exterior insulation (R-16 or greater).		
2. First 5 feet of pipes closest to water heater tank, non-recirculating systems, insulated (R-4 or greater).		
3. All buried or exposed piping insulated in recirculating sections of hot water system.		
4. Cooling system piping below 55 degrees insulated.		
5. Piping insulated between heating source and indirect hot water tank.	✓	_____
*150(m): Ducts and Fans		
1. Ducts constructed, installed and sealed to comply with UMC sections 1002 and 1004; ducts insulated to a minimum installed value of R-4.2 or ducts enclosed entirely within conditioned space.		
2. Exhaust fan systems have backdraft or automatic dampers.		
3. Gravity ventilating systems serving conditioned space have either automatic or readily accessible, manually operated dampers.	✓	_____
114: Pool and Spa Heating Systems and Equipment		
1. System is certified with 78% thermal efficiency, on-off switch, weatherproof operating instructions, no electric resistance heating and no pilot light.		
2. System installed with:		
a. At least 36 inches pipe between filter and heater for future solar heating.		
b. Cover for outdoor pools or outdoor spa.		
3. Pool system has directional inlets and a circulation pump time switch.		
115: Gas-fired central furnace, pool heater, spa heater or household cooking appliance have no continuously burning pilot light (Exception: Non-electrical cooking appliance with pilot < 150 Btu/hr.).	✓	_____

LIGHTING MEASURES

	Design- er	Enforce- ment
150(k): 40 lumens/watt or greater for general lighting in kitchens and rooms with water closets; and recessed ceiling fixtures IC (insulation cover) approved.	✓	_____



CITY OF
SANTA ROSA

UTILITIES DEPARTMENT
69 Stony Circle
Santa Rosa, CA 95401
707-543-3930
FAX 707-543-3936

CITY OF SANTA ROSA
UTILITIES DEPARTMENT
M E M O R A N D U M

DATE: February 25, 1997
TO: Dave Spiegler - Sonoma County Public Works
FROM: Russ Harlan - Utilities Engineering
RE: Building Permit for 140 Cherie Way

Dave,

I met with Russell Loewen and reviewed his plans for the garage to living space conversion. Utilities has no conditions or requirements on this project. Please feel free to contact me at 543-3956 if you have any questions.

Russ Harlan
Civil Engineering Technician III