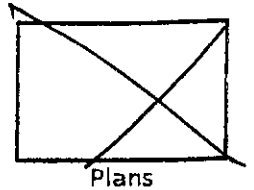




Type



Plans

B- 153893

Permit Number

1420

Street Number

Cunningham Rd

Street Name

TWI

Community Code

043-090-023

APN

COUNTY OF SONOMA - PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403 (707) 565-1900 FAX (707) 565-1103

Please Print
Your Name:

VINCENT SAUNDERS

Date
Applied:

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION: PRINT CLEARLY

Site Address: 1420 CUNNINGHAM ROAD		City: SEBASTOPOL		ZIP: 95472									
Cross-Street: SCHAEFFER ROAD		APN: 063-090-023	Project Phone #: (823-5468)	Project Fax #: ()									
Directions:		Subd. Name:	Unit #:	Lot #:									
Describe Project: REMODEL/ADDITION, SINGLE-STORY		Living Area: 4830	Contract Price: \$45,000										
OWNER NAME AND ADDRESS		APPLICANT NAME AND ADDRESS											
Name: CURT & DEBBIE LYLE		Name: CURT LYLE											
Mailing Address: 1420 CUNNINGHAM RD.		Mailing Address: 1420 CUNNINGHAM RD.											
City: SEBASTOPOL	State: CA	ZIP: 95472	City: SEBASTOPOL	State: CA	ZIP: 95472								
Day Ph: (823-5468)	Fax: ()	Day Ph: (823-5468)	Fax: ()										
CONTRACTOR INFORMATION			OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)										
Company Name: OWNER-BUILDER			Name: SAUNDERS & ASSOCIATE										
Address:			Address: 789 PLEASANT HILL RD.										
City:	State:	ZIP:	City: SEBASTOPOL	State: CA	ZIP: 95472								
Day Ph: ()	Fax: ()		Day Ph: 707 824-8149	Fax: 707 824-9739									
WORKER'S COMPENSATION DECLARATION			CONSTRUCTION LENDING DECLARATION										
<p>I hereby affirm under penalty of perjury one of the following declarations:</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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:</p> <p>Carrier: _____ Policy: _____ No. _____</p> <p>(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)</p> <p><input type="checkbox"/> 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.</p> <p>Exp. Date: _____ Applicant: _____</p> <p>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 3708 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.</p>			<p>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.)</p> <p>Lenders Name: _____</p> <p>Lenders Address: _____</p>										
<p>OWNER-BUILDER DECLARATION</p> <p>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).):</p> <p><input checked="" type="checkbox"/> 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.)</p> <p><input type="checkbox"/> 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.)</p> <p><input type="checkbox"/> I am exempt under Sec. _____ B & P.C. for this reason: _____</p> <p>Date: 5-5-99 Owner: Curtis Lyle</p>													
<p>LICENSED CONTRACTOR'S DECLARATION</p> <p>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.</p> <p>Lic. Class: _____ Lic. No.: _____</p> <p>Exp. Date: _____ Contractor: _____</p>													
<p>ASBESTOS DECLARATION</p> <p>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 <input type="checkbox"/> does <input type="checkbox"/> does not contain asbestos, or that <input type="checkbox"/> no demolition is authorized by this permit.</p> <p>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.</p> <p>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.</p> <p>PERMITTEE SIGNATURE: Curtis Lyle ADDRESS: 1420 Cunningham Rd. Seb. <input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Agent for Contractor <input type="checkbox"/> Agent for Owner</p>													
<p>FOR DEPARTMENT USE</p> <p>Zoning: DA 36 10 File No.: _____ Acres: 9.9</p> <p>Existing Use/Structures: 323 SF 2 story SFP</p> <p>Proposed Use/Structures: 483 SF 1 story Addition to SFP</p> <p>Zoning Min. Yard Requirements: Front 32 Left 10 Right 10 Back 20</p> <p>NOTE: Fire Safe Standards require all parcels greater than 1 Acre to have a min. 30' setback unless mitigated. <input type="checkbox"/> Mitigation Required <input type="checkbox"/> Address subject to change</p> <p>Approval for Permit Issuance: _____ Approval for Occupancy: _____</p> <p>By: _____ Date: 5/10/99</p> <p>Conditions: _____</p> <p>Sewer Connection: <input type="checkbox"/> Available <input type="checkbox"/> Fees Paid</p> <p>Approved by: _____ Date: _____</p> <p>Road Encroachment: <input type="checkbox"/> Fees Paid</p> <p>Approved by: _____ Date: _____</p> <p>Septic System Permit/Clearance # 5497-0138 new septic plan</p> <p>Approved by: R. Leach Date: 6-9-99</p> <p>Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No 100 Year Flood Elevation: _____</p> <p>Site Review: _____</p> <p>By: _____ Date: _____</p> <p>Condition of Soil at Job Site: <input type="checkbox"/> Original <input type="checkbox"/> Engineered Fill <input type="checkbox"/> Loose Fill</p> <p>Required Reports: <input type="checkbox"/> Geology <input type="checkbox"/> Soils <input type="checkbox"/> Compaction</p> <p>Code Enforcement Violation <input type="checkbox"/> Yes <input type="checkbox"/> No 014521 06/17/99B01</p> <p>Work Authorized: 483 # living space # 0153893</p> <p>117 # of porch SIERRA \$614.72</p> <p>***TTL \$614.72</p> <p><input type="checkbox"/> New <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Moving <input type="checkbox"/> Chg</p> <p>CHNG Machine Space for Permit Fee</p> <p>Plans Approved <input checked="" type="checkbox"/> No Plans Subject to Field Inspection</p> <p>Platting Cleared: 6/9/99 Date: 6-17-99</p> <p>Permit Cleared for Issuance By: BR Date: 6-17-99</p> <table border="1"> <tr> <td>Type of Construction</td> <td>Occupancy</td> <td>No. of Stories</td> <td>No. of Bedrooms</td> </tr> <tr> <td>Auto. Fire Sprinklers Req'd</td> <td>No. of Units</td> <td colspan="2">Certificate of Occupancy</td> </tr> </table> <p>Final Date: 10/29/99 Inspector: _____</p>						Type of Construction	Occupancy	No. of Stories	No. of Bedrooms	Auto. Fire Sprinklers Req'd	No. of Units	Certificate of Occupancy	
Type of Construction	Occupancy	No. of Stories	No. of Bedrooms										
Auto. Fire Sprinklers Req'd	No. of Units	Certificate of Occupancy											
<p>Permit # 5153893 Area 7</p> <p>Permit Coordinator: _____</p> <p>Distribution: White - File Canary - Applicant Pink - Audit Copy Blue - Assessor Cardstock - Inspector</p>													

JOB ADDRESS:

1420 Cunningham Rd

PERMIT NUMBER:

5153893

INSPECTION AREA:

7

SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
FOUNDATION				
FORMS/SETBACK				
FOOTING				
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				
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				
ROUGH MECHANICAL				
ROUGH PLUMBING				
ROUGH FRAME				
SMOKE DETECTORS				
INSULATION				
WALLBOARD				
STUCCO/PLASTER				
<input type="checkbox"/> LATH				
<input type="checkbox"/> SCRATCH				
TUB/SHOWER PAN				
SUSPENDED CEILING				
ROUGH ELECTRICAL				
ROUGH MECHANICAL				
EXITING				
STAIRS/HANDRAILS				
RAMPS				
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				
STAIRS/SKIRTS				
RIDGE BOLTING				
SWIMMING POOLS				
PRE-GUNITE				
PRE-DECK				
PRE-PLASTER/FENCE				
GRADING FINAL				
ELECTRICAL FINAL				
MECHANICAL FINAL				
PLUMBING FINAL				
FINAL				
OCCUPANCY (OK TO OCCUPY)				

FIRE INSPECTION REQUIRED		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inspected by:			
CLEARANCES:			
FIRE	<input type="checkbox"/> Local	<input type="checkbox"/> County	
HEALTH DEPARTMENT			
ZONING			
SANITATION			
N.C.A.P.C.D.			
PLAN RETENTION REQUIRED?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

PERMIT # 8-153893

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

(707) 565-1900 FAX (707) 565-1103

BUILDING PERMIT RECEIPT B-153893

Site Location Information		Printed By: BKEARNS 12:46 Jun 17, 1999	
Address: 1420 CUNNINGHAM RD HES		APN: 063-090-023	
Cross Street: SCHAEFFER RD		Initialized By: CNIEDERM B-BLD 9801	
Owner		Applicant	
RIEBLI CARL JOSEPH & CATHERINE A 1610 CUNNINGHAM RD SEBASTOPOL CA 954725564		SAUNDERS & ASSOCIATE 789 PLEASANT HILL RD SEBASTOPOL CA 95472 707 824 8140	
Contractor		Architect or Engineer	
Lic. #:		Lic. #:	

Permit Description: ADDITION & REMODEL TO EXISTING SFD PLUS PORCH					Status: PC APRVD
Valuation/Contract Price: \$46,011.24					Issued:
Planchek Multiplier: 1.00 Penalty Multiplier (Where Applicable):					Type: SADD
Occupancy	Type	Factor	Sq. Feet	Valuation	
Dwellings	DWEL-Type V - Wd Frme	91.17	483	44,035.11	
Dwellings	Covered Porch/Patio	16.89	117	1,976.13	
Subtotal:			600	46,011.24	
Table Date: 07/01/1998			Total Valuation:	46,011.24	

Item #	Item Account Code	Description	Fee	Prev. Paid
0011	1341	3505 INSPECTIONS - OTHER	\$.00	\$.00
0012	1341	3505 INSP. OUTSIDE NORMAL HRS	\$.00	\$.00
0013	1341	3505 REINSPECTION(S) FEE	\$.00	\$.00
0018	3141	1004 APPLICATION PROCES'G FEE	\$36.00	\$.00
0050	327023-4040	S.M.I.P. RESIDENTIAL	\$4.60	\$.00
0060	1341	BLDG PERM PLAN CHECK FEE	\$299.31	\$299.31
0062	1341	ADDITIONAL PLANCHCK FEE	\$.00	\$.00
0100	1341	3502 SITE REVIEW/ELEV. CERT.	\$73.00	\$73.00
0119	649103-3661	CO FIRE MARSHAL REVIEW	\$.00	\$.00
0120	1341	3504 FIRE STDS INSPECT - PRMD	\$.00	\$.00
0121	1341	FIRE SAFE STDS &REF PRMD	\$.00	\$.00
0122	1341	3504 ELECTRICAL FEE	\$31.54	\$.00
0123	1341	3504 MECHANICAL FEE	\$31.54	\$.00
0124	1341	3504 PLUMBING FEE	\$31.54	\$.00
0132	1341	3504 BUILDING PERMIT FEE	\$460.50	\$.00
0220	1600	VIO. PENALTY FEE (BLDG)	\$.00	\$.00
0221	4114	2001 VIO. INVEST. FEE (BLDG)	\$.00	\$.00
0707	3140	6054 REF.-GRADING/DRAIN. PLAN	\$.00	\$.00
0708	3140	6055 REF.-GRD/DRAIN DAM/DRVWY	\$.00	\$.00
1165	3829	6146 ZONING PERMITS W/O D.R.	\$19.00	\$.00
2000	335208	CTY-WDE CE TRAFFIC MIT	\$.00	\$.00
2001	335307	CTY-WDE NO TRAFFIC MIT	\$.00	\$.00
2002	335406	CTY-WDE SO TRAFFIC MIT	\$.00	\$.00
2003	335505	CTY-WDE WE TRAFFIC MIT	\$.00	\$.00
2005	335042	EASTMN LN TRAFFIC MIT	\$.00	\$.00
2006	335075	MOORLAND AV DRAINAGE MIT	\$.00	\$.00
2007	335034	LARK/WIKIUP TRAFFIC MIT	\$.00	\$.00
2008	335059	SONOMA VLY TRAFFIC MIT	\$.00	\$.00
5011	1341-WAIVED	3505 INSPECTIONS - OTHER	\$.00	\$.00
5012	1341-WAIVED	3505 INSP. OUTSIDE NORMAL HRS	\$.00	\$.00
5013	1341-WAIVED	3505 REINSPECTION(S) FEE	\$.00	\$.00
5018	3141-WAIVED	1004 PROCESSING FEE	\$.00	\$.00
5060	1341-WAIVED	BLDG PERM PLAN CHECK FEE	\$.00	\$.00
5062	1341-WAIVED	ADDITIONAL PLANCHCK FEE	\$.00	\$.00
5100	1341-WAIVED	3502 SITE REVIEW/ELEV. CERT.	\$.00	\$.00
5119	649103-3661-WAIVED	CO FIRE MARSHAL REVIEW	\$.00	\$.00
5120	1341-WAIVED	3504 FIRE STDS INSPECT - PRMD	\$.00	\$.00
5121	1341-WAIVED	FIRE SAFE STDS &REF PRMD	\$.00	\$.00
5122	1341-WAIVED	3504 ELECTRICAL FEE	\$.00	\$.00
5123	1341-WAIVED	3504 MECHANICAL FEE	\$.00	\$.00
5124	1341-WAIVED	3504 PLUMBING FEE	\$.00	\$.00
5132	1341-WAIVED	3504 BUILDING PERMIT FEE	\$.00	\$.00
5220	1600-WAIVED	VIO. PENALTY FEE	\$.00	\$.00
5221	4114-WAIVED	2001 VIOLATION INVESTIG FEE	\$.00	\$.00
5707	3140-WAIVED	6054 REF.-GRADING/DRAIN. PLAN	\$.00	\$.00
5708	3140-WAIVED	6055 REF.-GRD/DRAIN DAM/DRVWY	\$.00	\$.00
6165	3829-WAIVED	6146 ZONING PERMITS W/O D.R.	\$.00	\$.00
7000	335208-4040-WAIVED	PRM-CO-WDE CE DEV FEE TR	\$.00	\$.00
7001	335307-4040-WAIVED	PRM-CO-WDE NO DEV FEE TR	\$.00	\$.00
7002	335406-4040-WAIVED	PRM-CO-WDE SO DEV FEE TR	\$.00	\$.00
7003	335505-4040-WAIVED	PRM-CO-WDE WE DEV FEE TR	\$.00	\$.00
7005	335042-4040-WAIVED	PRM-EASTMN LN DEV FEE TR	\$.00	\$.00
7006	335075-4040-WAIVED	PRM-MOORLAND DEV FEE TR	\$.00	\$.00
7007	335034-4040-WAIVED	PRM LARK/WIK SP PLN DEV	\$.00	\$.00
7008	335059-4040-WAIVED	PRM-SONOMA VLY DEV FEE T	\$.00	\$.00

Permit qualified for fee waiver (Y/N): N	\$987.03	\$372.31	\$0.00
Total Calculated Fees	\$987.03	CASH REGISTER	
Previously Paid	\$372.31	VALIDATION	
Balance Due	\$614.72	REQUIRED	
		BELOW	

SITE EVALUATION CHECKLIST

JOB ADDRESS: 1420 Cunningham

File # B- 153893

Inspector: SJ

Date: 5/21/97

The proposed construction appears to be located in:

Flood Hazard:	<input type="checkbox"/> FIRM Flood Zone (A.S.F.H.) BFE = _____ ft. NGVD. Lowest finish floor at 12" above BFE at _____ ft. <input type="checkbox"/> Design for moving water is recommended Section _____ is _____ Ft/sec Section _____ is _____ Ft/sec <input type="checkbox"/> Area subject to flooding (not on adopted FIRM). <input type="checkbox"/> Project is on flood zone major damage list. <input type="checkbox"/> Flood prone urban area defined by Ordinance #4467.	<input type="checkbox"/> FIRM Floodway <input type="checkbox"/> Portions of property in flood zone but project site not in flood zone. <input type="checkbox"/> Appears to be a "substantial improvement" therefore flood regulations apply. <input type="checkbox"/> Located inside the <i>Laguna de Santa Rosa</i> below elevation of 75 ft (Ord. #4467). <input type="checkbox"/> Sensitive drainage area, review by drainage section recommended.
Geo-technical:	<input type="checkbox"/> Area of suspected slides, slumps, earth flow, or soil creep. <input type="checkbox"/> Area of previous fill placement. <input type="checkbox"/> Area of highly expansive soil. <input type="checkbox"/> Area without sufficient slope setback as set forth in UBC Section 1806. <input type="checkbox"/> Area subject to possible liquefaction. <input type="checkbox"/> Area of suspected soft, compressible, or organic soil with low bearing capacity.	<input type="checkbox"/> Area without recommended setback from stream (SCWA recommendations). <input type="checkbox"/> Area of high moisture content in soil. <input type="checkbox"/> Area subject to high erosion (water or wind). <input type="checkbox"/> Area of soft soil due to past deep ripping or cultivation below minimum foundation depth. <input type="checkbox"/> Area within 1000 feet of a solid waste disposal site.
	Soils Report: Required <input type="checkbox"/> Available <input type="checkbox"/>	
Geologic:	<input type="checkbox"/> Located in the Alquist-Priolo Special Studies Zone.	<input type="checkbox"/> Geologic report required (see DMG Publication 42).
General:	<input type="checkbox"/> Building addition will affect the required light and ventilation in an existing room. <input type="checkbox"/> Existing electric meter must be replaced. <input type="checkbox"/> Existing gas meter must be replaced. Slope is <u>0-5</u>	<input type="checkbox"/> Indications of existing substandard conditions that are not addressed by the proposed construction. <input type="checkbox"/> Indications of past work done without a permit. <input type="checkbox"/> Grading permit required for road, driveway, or site preparation. <input checked="" type="checkbox"/> Site is likely to be acceptable for conventional construction methods.
Wind:	Exposure "B" Exposure "C" Northern Sonoma County Air Pollution Control District	Exposure "D" <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Site Sketch:

FIRE SAFE STANDARDS FIELD EVALUATION

Address _____ P.C.# _____

Inspector _____ Fire District _____ Date _____

ADDRESS

Visible both directions of travel - - - - - Yes ☐ No ☒
 Address in sequence - - - - - Yes ☐ No ☒

GATES N/A

30' setback from road - - - - - Yes ☐ No ☐
 Opens in or increased setback - - - - - Yes ☐ No ☐
 Locked gate - - - - - Yes ☐ No ☐
 KNOX box present - - - - - Yes ☐ No ☐
 At least 2 feet wider than road (12 feet) - - - - - Yes ☐ No ☐

ROAD

(Name: Cunningham)

Existing prior to 1/1/92 Yes ☒ No ☐
 Meets county road standards Too narrow Yes ☐ No ☒

Secondary Road N/A

(Name: _____)

Existing prior to 1/1/92 Yes ☐ No ☐
 Meets county road standards Yes ☐ No ☐
 Number of homes presently served by this road _____; surface is dirt ☐ gravel ☐ asphalt ☐

DRIVEWAY (on this property) PROPOSED

Existing prior to 1/1/92 - - - - - Yes ☒ No ☐
 Existing driveway allows access to within 150' of structure - - - - - Yes ☒ No ☐
 Driveway over 150' in length - - - - - Yes ☐ No ☒
 Existing surface is dirt ☒ gravel ☒ asphalt ☐ Total driveway length _____ FT.
 Grade not over 0-5% ☒ 5-10% ☒ 10-15% ☐ Length of grade over 15% _____ FT.
 Width of driveway _____ FT.
 Bridges required - Now in place, More info needed ☐ Yes ☐ No ☒
 Encroachment permit required - - - - - Yes ☐ No ☒

EMERGENCY WATER SUPPLY

Public water system hydrant within 250' (Hydrant type 4 1/2" ☐ 2 1/2" ☐ Yes ☐ No ☒
 Water system hydrant within 800' (Hydrant type 4 1/2" ☐ 2 1/2" ☐ Yes ☐ No ☒
 Onsite water minimum 0 gallons
 Meets Fire Safe Standards - - - - - Yes ☐ No ☒

CLEARANCE OF FLAMMABLE VEGETATION N/A

Over one acre parcel - - - - - Yes ☒ No ☐
 Terrain %slope 5+ within 100' of building site
 up slope ☐ or down slope ☒
 Direction of slope face: north ☐ south ☐ east ☒ west ☐
 Vegetation type: grass ☒ woodland ☐ brush ☐ timber ☐ vineyard ☐ orchard ☐ urban ☐
 other _____
 Vegetation volume living fuel: light ☐ medium ☒ heavy ☐
 Vegetation volume dead fuel: light ☐ medium ☒ heavy ☐
 Fire history in area: Unknown ☒
 Mitigation likely due to: Turn around, Excessive Grade, Water tank, Other Yes ☐ No ☐

Notes

Project Title: Lytle Residence
 Project Address: 1420 Cunningham Rd
 Sebastopol CA 95472
 Building Title: Existing + Addition
 Document Author: Cindy Rader
 Telephone: (707) 585-3952
 Compliance Method: CALRES2 Version 1.31a
 Climate Zone: 2

Run: 000 29-Apr-99
 Building Permit #
 Plan Check / Date
 Field Check / Date

GENERAL INFORMATION

Conditioned Floor Area: 2161 ft2
 Building Type: SFD Single Family Detached
 Building Front Orientation: 315 deg (West)
 Number of Dwelling Units: 1.00
 Floor Construction Type: Raised floor

BUILDING SHELL INSULATION

Component Type	Insul R-value	Assembly U-value	Location/Comments
Door	0	0.330	Outside
Wall	0	0.431	Outside
Wall	13	0.088	Outside
Floor	0	0.097	Crawl
Floor	19	0.037	Crawl
Ceiling	19	0.062	Attic
Ceiling	30	0.031	Attic

FENESTRATION

Orientation	Area (ft2)	U-value	Panes	Interior Shading	Exterior Shading	Overhang and Fins	Frame Type
Window South	114.5	0.600	2	Std Drape	Bug Screen	None	Vinyl
Window West	58.0	0.600	2	Std Drape	Bug Screen	None	Vinyl
Window North	83.0	0.600	2	Std Drape	Bug Screen	None	Vinyl
Window East	123.8	0.600	2	Std Drape	Bug Screen	None	Vinyl

THERMAL MASS

Type	Exposed?	Area (ft2)	Thick (in)	Location/Comments
None	--	--	--	--

Project Title: Lytle Residence

Run: 000

29-Apr-99

HVAC SYSTEMS

Type	Efficiency	Duct Location and R-value
Furnace	0.78 AFUE	Attic R-4.2
Air cond. -- central split	10.00 SEER	Attic R-4.2

WATER HEATING SYSTEMS

System Name	Distrib Type	Water Heater Name	Water Heater Type	# of Htrs	Energy Factor	Volume (gal)	Wrap R-val
Standard_Gas	Standard	StandardGas	Storage gas	1	0.53	50	12

WATER HEATING SYSTEMS MISC

System Name	Solar savings fraction	Solar system type	Wood stove boiler?	Wood stove boiler pump?
Standard_Gas	--	--	No	No

WATER HEATER/BOILER DETAILS

Water Heater Name	Recovery Efficiency	AFUE	Rated Input (kBtuh)	Standby Loss	Tank R-value	Pilot Light (Btuh)
StandardGas	76%	--	36.00	--	--	--

HYDRONIC DISTRIBUTION AND TERMINALS

System/Name	Type	Number	Pipe run (ft)	Pipe diam (in)	Insul thck (in)	Insul R-value
None						

SPECIAL FEATURES, REMARKS, AND NOTES

None

Project Title: Lytle Residence

Run: 000

29-Apr-99

COMPLIANCE STATEMENT

This certificate of compliance lists the building features and performance specifications needed to comply with the Energy Standards in 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, and Notes section.

DESIGNER OR OWNER

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DOCUMENTATION AUTHOR

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Lic #: C 12602

Vincent D. Saunders 5/3/99
Signed Date

Cindy Rader 4-29-99
Signed Date

ENFORCEMENT AGENCY

Name: _____

Title: _____

Agency: _____

Telephone: _____

Signed Date

MANDATORY MEASURES CHECKLIST: RESIDENTIAL

MF-1R

Note: 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.

Instructions: Check or initial applicable boxes when completed or enter N/A if not applicable.

DESCRIPTION	DESIGNER	ENFORCEMENT
Building Envelope Measures:		
* §150(a): Minimum R-19 ceiling insulation.		
§150(b): Loose fill insulation manufacturer's labeled R-Value.		
* §150(c): Minimum R-13 wall insulation in wood framed walls or equivalent U-value in metal frame walls (does not apply to exterior mass walls).		
* §150(d): Minimum R-13 raised floor insulation in framed floors; minimum R-8 in raised concrete floors.		
§150(l): 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 insulation quality standards. Indicate type and form.		
§116-17: Fenestration Products, Exterior Doors, and Infiltration/Exfiltration Controls 1. Doors and windows between conditioned and unconditioned spaces designed to limit air leakage. 2. Manufactured fenestration products have label with certified U-value, and infiltration certification. 3. Exterior doors and windows weathertightened; 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 § 151 meets Commission 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 pilot lights allowed.		
Space Conditioning, Water Heating and Plumbing System Measures:		
§110-13: HVAC equipment, water heaters, showerheads and faucets certified by the Commission.		
§150(h): Heating and/or cooling loads calculated in accordance with ASHRAE, SMACNA or ACCA.		
§150(i): Setback thermostat on all applicable heating and/or cooling systems.		
§150(j): Pipe and tank insulation 1. First 5 feet of pipes closest to water heater tank, non-recirculating systems, insulated (R-4 or greater) 2. Back-up tanks for solar system, unfired storage tanks, or other indirect hot water tanks have R-12 external insulation or R-16 combined internal/external insulation. 3. All buried or exposed piping insulated in recirculating sections of hot water systems. 4. Cooling system piping below 55° F 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 601 and 603; ducts insulated to a minimum installed R-4.2 or ducts enclosed entirely within conditioned space. 2. Exhaust fan systems have back draft 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 is installed with: a. At least 36" of pipe between filter and heater for future solar heating. b. Cover for outdoor pools or outdoor spas. 3. Pool system has directional inlets and a circulation pump time switch.		
§115: Gas fired central furnaces, pool heaters, spa heaters or household cooking appliances have no continuously burning pilot light. (Exception: Non-electrical cooking appliances with pilot < 150 Btu/hr)		
Lighting Measures:		
§150(k): 40 lumens/watt or greater for general lighting in kitchens and rooms with water closets; and recessed ceiling fixtures are IC (insulation cover) approved.		