

**CITY OF SACRAMENTO**

**1231 I Street, Sacramento, CA 95814**

**Permit No: 0009825**

**Insp Area: 4**

**Site Address: 30 KLONDIKE CT SAC**

Parcel No: 225-1060-034

NORTHPT PK 1 LOT 48

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

WESTERN PACIFIC HOUSING  
1210 CENTRAL BLVD  
BRENTWOOD CA. 94513

OWNER

ARCHITECT

**Nature of Work:** MP 2484/OPT 2 STORY 11 ROOM 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).

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 D License Number 675489 Date 9/7/00 Contractor Signature N. Collins

**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 \_\_\_\_\_

**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 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 hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 9/7/00 Applicant/Agent Signature N. Collins

**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 EAGLE INS. CO. Policy Number 4S-0000273 Exp Date 3/19/2001

\_\_\_\_\_, (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 9/7/00 Applicant Signature N. Collins

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.**

### RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

plan 2  
185  
185

Project Address: 30 Klondike Ct. Assessor Parcel # \_\_\_\_\_  
Lot Number: 48 Subdivision Northpointe Park Unit # /

#### OWNER INFORMATION:

Legal Property Owner: Western Pacific Housing Phone# (925) 634-6023  
Owner Address: 1210 Central Boulevard; City Brentwood, State Ca. Zip 94513

#### CONTRACTOR INFORMATION:

Contractor: Western Pacific Lic# 075709/B Phone # (925) 634-6023 Fax 634-6166

#### PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code IA

No. of Stories: 2 No. of Rooms: \_\_\_\_\_ Street Width: \_\_\_\_\_

1<sup>st</sup> Floor Area \_\_\_\_\_ 2<sup>nd</sup> Floor Area \_\_\_\_\_ Basement \_\_\_\_\_ Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:

Dwelling/Living 2669

Garage/Storage 418

Decks/Balconies \_\_\_\_\_

Carpports \_\_\_\_\_

---

SCOPE OF WORK: \_\_\_\_\_

FOR OFFICE USE ONLY

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Information Above Complete | <input type="checkbox"/> AR Flood Waiver Required             | <input type="checkbox"/> Planning Approval            |
| <input type="checkbox"/> Violation Files Checked    | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval       |
| <input type="checkbox"/> Standard Setbacks          | <input type="checkbox"/> Water Development Infill Area        | <input type="checkbox"/> Special Fee Districts Apply: |
| <input type="checkbox"/> County Sewer               |   |   |

**~THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT~**

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION:
 

a) Assessor's Parcel Number	c) Owners Name
b) New Floor Area	d) Project Address



**BASALITE®**  
 PACIFIC STUCCO SYSTEMS

4290 Roseville Road  
 North Highlands, CA 95660-5710  
 (916) 486-4094  
 Fax (916) 486-4187

Installation Card  
 Fiber Reinforced Stucco

Job Name and Address : WESTERN PACIFIC  
SIENA  
 \_\_\_\_\_

ICBO# 5269

1-20-01  
 Date of job completion  
101-48

Plastering Contractor

Name: VISION PLASTERING

Address: 8974 GREENBACK LN

Telephone No. ( ) 987-33-24

Approved contractor as issued by Basalite/Pacific Stucco

This is to certify the exterior coating system at the above address, has been installed in accordance with the evaluation report specified above and the manufacturers instructions.

[Signature]

Signature of authorized representative of  
 plastering contractor

2-13-01  
 Date

This installation card must be presented to the building inspector after completion of work and before final inspection.

# CERTIFICATION OF INSULATION

PART I  
GENERAL

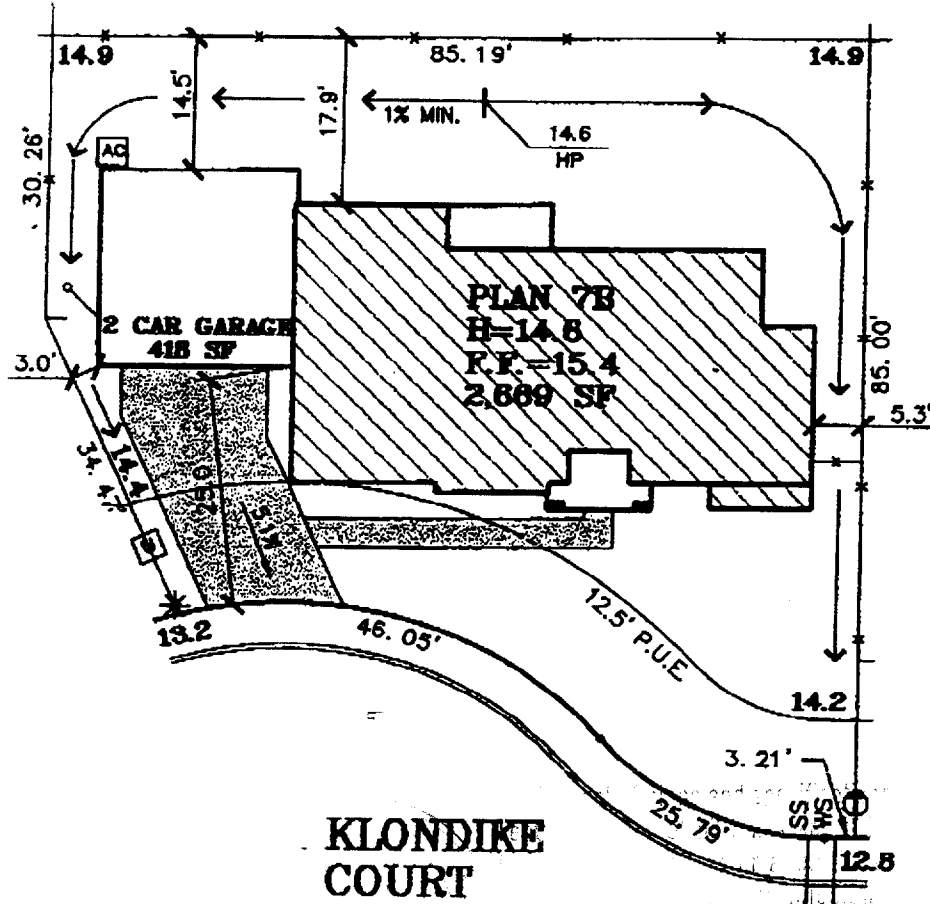
<b>ADDRESS OR TRACT</b> WESTERN Pacific LOT 48  30 Klondike  SIENA	<b>SACRAMENTO INSULATION CONTRACTORS</b> <input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026 <input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675 <input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675  DATE INSULATION COMPLETED
---	---

PART II  
AREAS INSULATED

WALLS		CEILING			FLOORS	
( SQUARE FEET)		( SQUARE FEET)			( SQUARE FEET)	
TYPE OF INSULATION		TYPE OF INSULATION			TYPE OF INSULATION	
MATERIAL <b>FIBERGLASS</b>		MATERIAL <b>FIBERGLASS</b>			MATERIAL <b>FIBERGLASS</b>	
FORM <b>BATTS</b>		FORM <b>BATTS &amp; BLOW</b>			FORM <b>BATTS</b>	
MANUFACTURER'S PRODUCT I.D.		MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.	
MANUFACTURER		MANUFACTURER			MANUFACTURER	
<b>OCF</b>		<b>OCF</b>			<b>OCF</b>	
BAGS						
R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
13	3 <sup>5</sup> / <sub>8</sub>	30	9"			
		30	13"			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL <b>FIBERGLASS</b>		FORM <b>BATTS</b>		R VALUE		MANUFACTURER <b>OCF</b>
AIR INFILTRATION SEALANT						
MATERIAL <b>FOAM</b>				MANUFACTURER <b>W R GRACE</b>		
THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.						
SIGNATURE—INSULATION CONTRACTOR <i>Bill [Signature]</i>				TITLE <b>MANAGER</b>		DATE <b>1-15-01</b>
SIGNATURE—GENERAL CONTRACTOR				TITLE		DATE
REMARKS						

**LEGEND**

SWALE	WOOD FENCE	SS SEWER SERVICE	UTILITY SERVICE
MAILBOX	SIDEYARD GATE	WS WATER SERVICE	F.F. FINISH FLOOR



**LOT 48**  
**PLAN 7B**  
**A.P.N.:**  
**ADDRESS: 30 KLONDIKE COURT**  
**LOT AREA: 5,671 SF**

*OK. Phil Reed, 8/24/00*



DU TO THE UNIQUE CONDITIONS OF THIS LOT, THE BUYER AS WALKED AND APPROVED THE SITE. FINAL GRADING CONDITIONS MAY VARY. THE INFORMATION ON THIS PLOT PLAN IS PROVIDED FOR YOUR CONVENIENCE AS A GUIDE TO THE GENERAL LOCATION OF THE SUBJECT PROPERTY. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED OR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS MAY VARY OR CHANGE WITHOUT PRIOR NOTICE DUE TO ACTUAL SITE CONDITIONS.

PLAN: <u>7</u>	SIGNED (BUYER) _____	DATE _____
ELEVATION: <u>B</u>	PROJECT SUPERINTENDENT APPROVAL _____	DATE _____
ORIENTATION: <u>L</u>	SITE SUPERINTENDENT APPROVAL _____	DATE _____
COLOR: <u>136</u>	ESTIMATING APPROVAL _____	DATE _____
	SALES APPROVAL <i>fls</i>	DATE _____
	CONSTRUCTION APPROVAL _____	DATE _____

**The Splink Corporation**  
 1590 VENTURE OAKS WAY  
 SACRAMENTO, CA 95833  
 T(916)825-5560 FAX(916)821-8274

**Western Pacific Housing**  
 1210 Central Boulevard  
 Brentwood, CA 94613  
 office: (925) 834-6023  
 fax: (925) 834-6063

**SIENA**  
 NORTHPONTE PARK UNIT 1  
 City of Sacramento, California  
 Scale: 1"=20'  
 July 13, 2000