

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0311789

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 5626 POP BECKER ST SAC

Parcel No: 201-0580-039

NORTHPT PK 31 LOT 39

CONTRACTOR

CAMBRIDGE HOMES
9852 BUSINESS PARK DR STE. B
SACRAMENTO CA. 95827

OWNER

ARCHITECT

Nature of Work: MP 3291 2 STORY 12 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 R License Number 766741 Date _____ Contractor Signature [Signature]

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 8-14-03 Applicant/Agent Signature [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:

Carrier _____ Policy Number _____ Exp Date _____

____ (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 8-14-03 Applicant Signature [Signature]

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 CAM 2291

Project Address: 5626 POP BECKER ST Assessor Parcel # 201-0580-039
Lot Number: 39 Subdivision NORTH POINTE PARK VILLAGE #31

OWNER INFORMATION:

Legal Property Owner: CAMBRIDGE HOMES Phone# 643-1444
Owner Address: 1816 TRIBUTE RD City SACTO State CA Zip 95815

CONTRACTOR INFORMATION:

Contractor: CAMBRIDGE Lic. # 766741 Phone # 643-1444 Fax _____

PROJECT INFORMATION:

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A
No. of Stories: TWO No. of Rooms: 12 Street Width: _____
1st Floor Area 1115 2nd Floor Area 1576 Basement N/A Roof Material TILE
AREA IN SQUARE FOOT: F.
Dwelling/Living 3291
Garage/Storage 712
Decks/Balconies 120
Carpets _____
4003
SCOPE OF WORK: NEW SFD
PLAN # 4

- Information Above Complete
- Violation Files Checked
- Standard Setbacks
- County Sewer
- AR Flood Waiver Required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply:

~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
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

FOR OFFICE USE ONLY

COUNTY SANITATION DISTRICT 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE LOT 39
 PERMIT AND CALCULATION 840603

APPLICATION NO: SAC CITY BLDG PERMIT NO.

GENERAL INFORMATION THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
 SWP 2003 - 00697 PAID 840603

THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF
CSD-1	<input checked="" type="checkbox"/>		
SRCSD			
CONSTRUCTION			
IN-LIEU			
TOTAL FEE			

APN: 201-0588-039

DESCRIPTION: MOUNTAIN POINT TRUCK VILLAGE LOT 39

PROPERTY ADDRESS: 5626 POP BECKER STREET

OWNER: CARM BRADICE HOMES

MAILING ADDRESS: 1816 TRIBUTE RD

CITY-STATE-ZIP: SACRAMENTO CA 95811 PHONE: 643-1444

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE: *[Signature]*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

Certification of Compliance School District Development Fees

PART 1 To be completed by APPLICANT

Owner's Name & Address CAMBRIDGE HOMES 1816 TILBURN RD 91815
 Project Address 5626 POP BECKER STREET
 Parcel Number 201-0584-039 Lot No. 39
 Subdivision Name NORTHPONTE PARK VILLAGE 31 Number of Units ONE
 Applicant's Signature & Title [Signature] / Processor
 Date 8-03-03 Phone No. 978 9720

NOTICE TO APPLICANT: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

PART 2 To be completed by BUILDING DEPARTMENT

Plan Identification Number PLAN 44 Building Type (CHECK ONE)
 Residential
 Apartment/Condominium
 Commercial/Industrial
 Square Feet of Chargeable Building Area 3291
 Signature [Signature] Date 8-11-03
 Title Building Tech

PART 3 To be completed by SCHOOL DISTRICTS

Grant Joint Union High School District

District Certification No. 04-167

EXEMPT _____

Comments RECEIPT # 9519
 RESIDENTIAL / APARTMENT / CONDOMINIUM
3291 Sq. Ft. x \$ 2014 = \$ 7042.74
 COMMERCIAL / INDUSTRIAL

_____ Sq. Ft. x \$ _____ = \$ _____

OTHER FEE: TYPE _____

_____ Sq. Ft. x \$ _____ = \$ _____

TOTAL FEES COLLECTED = \$ 7042.74

Robla Elementary School District

District Certification No. _____

EXEMPT _____

Comments _____
 RESIDENTIAL / APARTMENT / CONDOMINIUM

_____ Sq. Ft. x \$ _____ = \$ _____
 COMMERCIAL / INDUSTRIAL

_____ Sq. Ft. x \$ _____ = \$ _____

OTHER FEE: TYPE _____

_____ Sq. Ft. x \$ _____ = \$ _____

TOTAL FEES COLLECTED = \$ _____

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

GRANT Authorized School District Official ROBLA

Signature [Signature]
 Title BUDGET TECHNICIAN
 Date 8-11-03

Signature _____
 Title _____
 Date _____

Original: Grant Joint Union High School District / Robla Elementary School District
 1st Copy: Building Department
 2nd Copy: Applicant

KwikKote

No. 200-917433

Stucco System Installation Card

Job Name: PARKSIDE @ NORTHPOINTE
Address: 5626 POP BECKER STREET
 , CA
Lot #: 0000039

Stucco System Trade Name: KWIK KOTE
Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.
Report No. 3607
Date of Job Completion:

Home Builder: CAMBRIDGE HOMES
Address: 1816 TRIBUTE ROAD STE. 100
 SACRAMENTO, CA

Stucco Contractor: KENYON PLASTERING, INC.
Address: PO BOX 2077
 North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 12/30/2003

This is to certify that the stucco system on the building exterior at the above address had been installed in accordance with the evaluation report specified above and the manufacturer's instructions.



Signature of authorized representative of stucco contractor

12.29.03

Date

CERTIFICATION OF INSULATION

<p style="text-align: center;">ADDRESS OR TRACT</p> <p style="font-size: 2em; font-family: cursive;">Cambridge North Point</p> <p style="text-align: right;">LOT # 39</p>	<p style="text-align: center;">SACRAMENTO BUILDING PRODUCTS</p> <p><input type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026</p> <p><input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675</p> <p><input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675</p> <p>DATE INSULATION COMPLETED</p>
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WALLS			CEILING			FLOORS		
(SQUARE FEET)			(SQUARE FEET)			(SQUARE FEET)		
TYPE OF INSULATION			TYPE OF INSULATION			TYPE OF INSULATION		
MATERIAL FIBERGLASS			MATERIAL FIBERGLASS			MATERIAL FIBERGLASS		
FORM BATTS			FORM BATTS & BLOW			FORM BATTS		
MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.		
MANUFACTURER			MANUFACTURER			MANUFACTURER		
CT	OC	JM	CT	OC	JM	CT	OC	JM
			BAGS					
R - VALUE INSTALLED	APPLIED THICKNESS		R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS	
13	3 1/2		30	9"				
	19	5 1/2	30	12"				
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE								
MATERIAL FIBERGLASS			FORM BATTS			R VALUE		
						CT	OC	JM
AIR INFILTRATION SEALANT								
MATERIAL						MANUFACTURER		
<i>foam</i>						HILTI		
						HANDY FOAM		

THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.

SIGNATURE — INSULATION CONTRACTOR	TITLE	DATE
<i>J.C.</i>	MANAGER	12/3/03
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

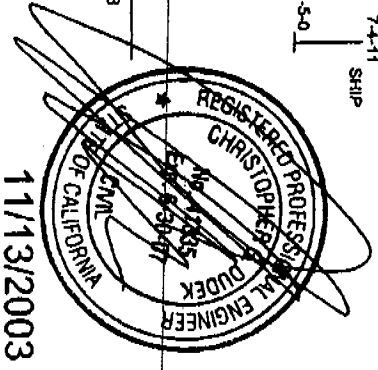
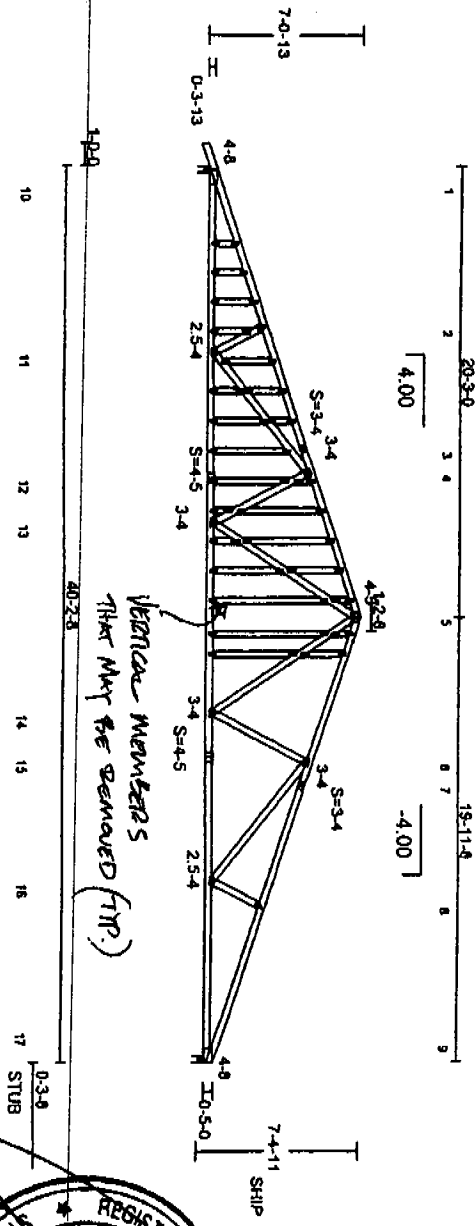
89C	X-LOC	REACT	SIZE	RECO
1-0	1-12	1731.350	185	
2-40	0-12	1649.550	176	
TC FORCE AXI: 8ND CSI				
1-2	4284	0.333	6.59	0.82
2-3	4085	0.14	0.38	0.52
3-4	3886	0.14	0.38	0.52
4-5	3744	0.09	0.44	0.53
5-6	3711	0.09	0.47	0.56
6-7	3816	0.13	0.41	0.60
7-8	3935	0.22	0.25	0.61
8-9	4128	0.15	0.62	0.77
BC FORCE AXI: 8ND CSI				
10-11	4002	0.50	0.18	0.78
11-12	3246	0.50	0.18	0.59
12-13	3246	0.50	0.18	0.74
13-14	2420	0.29	0.37	0.67
14-15	3216	0.39	0.37	0.78
15-16	3216	0.39	0.23	0.52
16-17	3899	0.59	0.31	0.69
WEB FORCE CSI: WEB FORCE CSI				
2-11	427	0.874	884	0.35
4-11	749	0.884	882	0.32
4-13	733	0.846	628	0.25
5-13	909	0.816	572	0.06

TC 2x4 DFL #1
 BC 2x4 DFL #1
 WEB 2x4 DFL STANDARD
 GBL BLX 2x4 DFL STANDARD
 Gable verticals are 2x4 web material spaced at 16.0" o.c. unless noted otherwise.
 Top chord supports 2x4.0" of uniform load at 16' dead load and 18' per dead load.
 Additional design considerations may be required if sheathing is attached:
 Gable stud vertical members require lateral bracing (designed by others) perpendicular to the plane of the member at intervals.
 Bracing is a result of wind load applied to the member (Combination axial plus bending).
 This truss requires adequate sheathing, as designed by others, applied to the webs in order to provide lateral support for webs in action to resist diaphragm loads.

TRUSS ALTERNATIVE
VERTICAL NON-STRUCTURAL
MEMBERS MAY BE REMOVED
LE NO DAMAGE TO STRUCTURE
MEMBERS IS DONE BUILDING
THAT PROTECTS
(SEE DRAW)

MAX DEFLECTION (Inches):
 L999 IN MEM 13.14 (L/W/E)
 L=0.25' D=0.35' T=0.83'

1	0-0-0	10	0-0-0
2	7-3-12	11	8-5-1
3	12-9-1	12	14-0-0
4	13-9-6	13	18-0-0
5	20-3-0	14	24-6-0
6	26-6-10	15	28-6-0
7	27-8-15	16	32-0-15
8	33-2-4	17	40-2-8
9	40-2-8		



11/13/2003

Scale: 1/8" = 1'



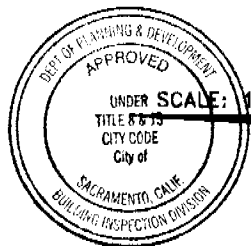
3700 RIEGO ROAD, EMERYVA, CA 94526

WARNING Read all notes on this sheet and give a copy of it to the Erecting Contractor.

This design is for an industrial building component not truss system. It has been based on specifications provided by the component manufacturer and does not conform to the current versions of TR and AFPA design standards. No responsibility is assumed for dimensional accuracy. Dimensions are to be verified by the component manufacturer and/or building designer prior to fabrication. The building designer must ascertain that the loads utilized on this design meet or exceed the loading imposed by the local building code and the particular application. The design assumes that the loads are laterally braced by the roof or floor sheathing and the bottom chord is laterally braced by a rigid sheathing material directly attached, unless otherwise noted. Bracing shown is for lateral support of components members only to reduce buckling length. This component shall not be placed in any environment that will cause the moisture content of the wood to exceed 18% and/or cause connector plate corrosion. Fabricate, handle, install and brace this truss in accordance with the following standards: JOINT DETAILS by Trusway, ANS/ITP 1; WITCA, "Wood Truss Council of America Standard Design Responsibilities, HANDLING, INSTALLING AND BRACING METAL PLATE CONNECTED WOOD TRUSSES" (HIB-91) and HIB-91 SUMMARY SHEET by TPI, The Truss Plate Institute (TPI) is located at 1111 19th Street, NW, Ste 800, Washington, DC 20036. The American Forest and Paper Association (AFPA) is located at 1111 19th Street, NW, Ste 800, Washington, DC 20036.

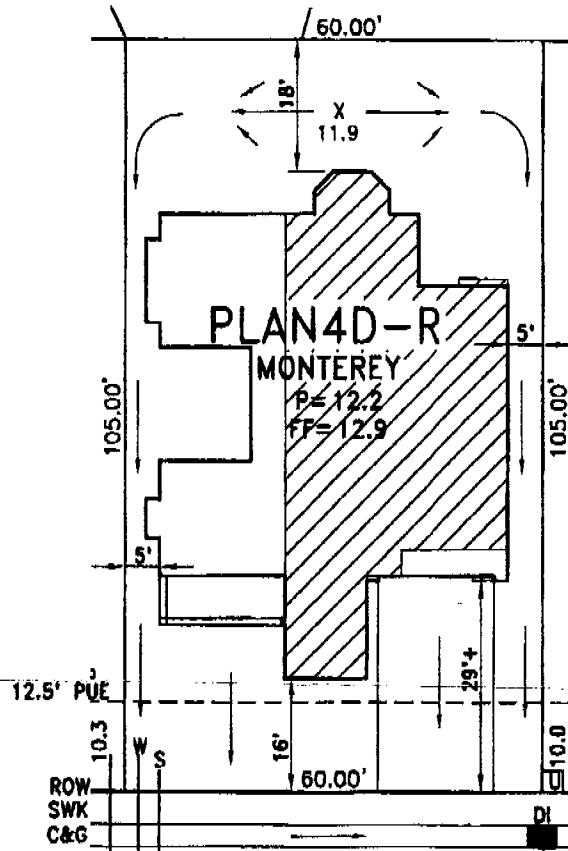
Eng. Job: EI	Job#: 12504P4
Chk: CM	Truss ID: VG
Design: EC	
TC Live 16.00 psf	DurFacs L=1.25 P=1.25
TC Dead 18.00 psf	Rep Affr Bnd 1.15
BC Live 0.00 psf	O.C.Spacing 2-0-0
BC Dead 7.00 psf	Design Spec UBC
TOTAL 41.00 psf	Segn T6.26 0

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALL ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the ~~plans~~ without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



POP BECKER STREET

LOT SQ. FT.= 6300

LOT COVERAGE=32.9 %

KEY:

- = TRANSFORMER
- = UTILITY BOX
- = STREET LIGHT
- = FIRE HYDRANT
- = STREET LIGHT SERVICE POINT

ADDRESS:

5626 POP BECKER STREET

PLOT PLAN
LOT 39
Northpointe Village 31
FOR
CAMBRIDGE HOMES
CITY OF SACRAMENTO CALIFORNIA

WOOD RODGERS
ENGINEERING • PLANNING • MAPPING • SURVEYING
2201 O STREET, BLDG. 100-B, SACRAMENTO, CA 95816
PHONE: (916) 541-7700 FAX: (916) 841-7707

DATE: 07-2003	DRAWN: HMB	CHECKED: 	PROJECT NO: 1045.079
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J:\Jobs\Northpointe Phase 2\ Village 31\Civil\p1plans\039.dwg 8/01/03 9:38am jshilinsky