

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0007097  
Insp Area: 4

Site Address: 3861 SAINTSBURY DR SAC  
Parcel No: 225-1190-033 LOT 221 GATEWAY WEST 1

Sub-Type: NSFR  
Housing (Y/N): N

CONTRACTOR  
BEAZER HOMES  
3009 DOUGLAS BL. #150  
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1232 5 RMS

**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 B License Number 724191 Date 7/3/00 Contractor Signature Shung Van Maran

**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 7/3/00 Applicant/Agent Signature Shung Van Maran

**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 is LIBERTY MUTUAL INS CO.

Carrier LIBERTY MUTUAL INS CO. Policy Number WA2-651-004147-080 Exp Date 4/1/2001

\_\_\_\_ (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 7/3/00 Applicant Signature Shung Van Maran

**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.**

5 rooms  
\$ 84681.50

### RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction    
  Addition    
  Remodels    
  Other

Project Address: 3861 Santsbury Dr

Assessor Parcel # 225-119-033

OWNER INFORMATION: lot 221

Legal Property Owner: Beazer Homes Phone # 773-3888  
 Owner Address: 3009 Douglas Blvd #150 City Roseville State CA Zip 95661

#### CONTRACTOR INFORMATION:

Contractor: Beazer Homes Lic. # 724191 Phone # 773-3888 Fax# 773-0425

#### PROJECT INFORMATION:

Land Use Zone \_\_\_\_\_ Occupancy Group \_\_\_\_\_ Construction Type \_\_\_\_\_ Fed Code \_\_\_\_\_  
 No. of stories: 1 No. of rooms: \_\_\_\_\_ Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1232 2<sup>nd</sup> Floor Area 0 Basement 0 Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1232</u>
Garage/Storage	_____	<u>426</u>
Decks/Balconies	_____	_____
Carpports	_____	_____

SCOPE OF WORK: New SFD

#### 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               |   |  |

#### NEW STRUCTURES & ADDITIONS

◆ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

- |   |   |
|---|---|
| <input type="checkbox"/> 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE   | ◆ Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures. |
| <input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA |   |
| <input type="checkbox"/> Title 24 Energy Compliance documentation     | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor   |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire    | <input type="checkbox"/> Plan Review Fees   |

Date: \_\_\_\_\_

Received by: (staff) \_\_\_\_\_

ACTIVITY/PERMIT # \_\_\_\_\_

19842



INSTALLATION CARD

Job Address:

*Brazier Homes  
Gateway West lot # 221  
3861 Sainisbury Dr. Sac*

Stucco System Trade Name: KWIK KOTE  
Name Stucco Manufacturer: KWIK KOTE CORP.  
ICBO Evaluation Service, Inc.  
Report No. 3607  
Date of Job Completion

Stucco Contractor: Kenyon Construction

Name: John W. Kenyon, III

Address: P.O. Box 2077  
North Highlands, CA 95660

Telephone Number: (916) 349-8191

Approval Contractor Number as issued by the Stucco Manufacturer: 1

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: *[Handwritten Signature]*

Date: *8/25/00*

# CERTIFICATION OF INSULATION

**ADDRESS:**  
 RENO  
 3861 Saintsbury  
 LOT # ~~477~~ 201

P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026  
 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026  
 P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026  
 P.O. BOX 1631, RENO, NV 89505 LIC. #10675  
 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

DATE INSULATION COMPLETED: 9/9/00

WALLS		CEILINGS			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	
OCF		OCF			OCF	
BAGS						
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
13	3 5/8	30 30	9 17			

**KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE**

MATERIAL <b>FIBERGLASS</b>	FORM <b>BATTS</b>	R VALUE	MANUFACTURER <b>OCF</b>
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**AIR INFILTRATION SEALANT**

MATERIAL <b>FOAM</b>	MANUFACTURER <b>W R GRACE</b>
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**THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, LOCAL STANDARDS AND REGULATIONS.**

SIGNATURE - INSULATION CONTRACTOR <i>Bill Hardy</i>	TITLE MANAGER	DATE 9-1-00
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

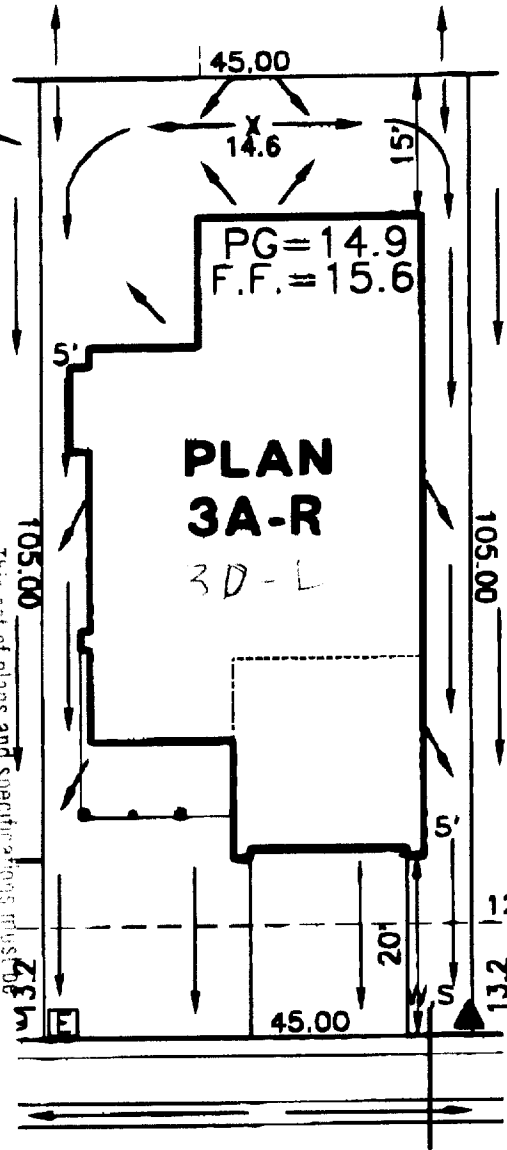
REMARKS

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINE, DESIGN DRAINAGE CONTROL ELEVATIONS, AND DIRECTION OF DRAINAGE FLOW TO CONFORM WITH LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN IS APPROXIMATE EXCEPT FOR THOSE SETBACKS WHICH ARE MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.

SCALE: 1" = 20'



This set of plans and specifications must be kept on file at all times and it is unlawful to make any changes or alterations from the same without a written permission from the appropriate authority.  
 The approval of this plan and specifications shall not be held to permit or approve the violation of any City Ordinance or State Law.



ROUTING/APPROVAL		INITIALS
President	✓	
Project Development		
Construction	✓	[Signature]
Engineering	✓	[Signature]

# SAINTSBURY DRIVE

- ▲ UTILITY TRANSFORMER
- UTILITY SERVICE BOX

**PLOT PLAN**  
**LOT 221**  
 GATEWAY WEST-VILLAGE NO. 1  
 FOR  
 BEAZER HOMES  
 SACRAMENTO CALIFORNIA

**WOOD-RODGERS INC.**

DATE:	DRAWN:	CHECKED:	PROJECT NO:
JULY2000	HMB		98BEZ-009

LOT COVERAGE=35.1%