1231 I Street, Sacramento, CA	Insp Area:	Insp Area: 4		
Site Address: 150 ALCANTAR C Parcel No: RIVERVIEW 2-3A	TR SAC LOT 22 Housing (Y/N):	Sub-Type: N	NSFR	
CONTRACTOR D. R. HORTON INC 1:0 BLUE RAVINE RD STE. 209 EOLSOM CA. 95630	<u>OWNER</u>	<u>ARCHITECT</u>		
Nature of Work: MP 1804 1 STORY	7 ROOM SFR			
CONSTRUCTION LENDING AGENCY of the work for which this permit is issued (Sec.		there is a construction lending age	ncy for the performance	
Lender's Name	Lender'sAddress			
LICENSED CONTRACTORS DECLAR commencing with section 7000) of Division 3 o	f the Business and Professions Code and my lice	nse is in full force and effect.	JA.	
ticense Class 1 License Number 7	1/90 Date 3/27/6/ Contr	actor Signature No Co	ellens	
OWNER-BUILDER DECLARATION: tollowing reason (Sec. 7031.5, Business and Proany structure, prior to its issuance, also requires of the Contractors License Law (Chapter 9 (conference) therefrom and the basis for the alleged expendity of not more than five hundred dollars (SS)	dessions Code, any city or county which require the applicant for such permit to file a signed state mmencing with Section 7000) of Division 8 of xemption. Any violation of Section 7031.5 by 4	s a permit to construct, alter, imp ement that he or she is licensed p the Business and Professions Co	rove, demolish, or repair ursuant to the provisions ide) or that he or she is	
for sale (Sec. 7044, Business and Professional thereon, and who does such work himself or her sale. If, however, the building or improvement not build or improve for the purpose of sale.)	rself or through his/her own employees, provide is sold within one year of completion, the own	apply to an owner of property of that such improvements are not er-builder will have the burden of	who builds or improves t intended or offered for proving that he/she did	
I, as owner of the property, am exclusiv Code. The Contractors License Law does not apcontractor(s) licensed pursuant to the Contractors	pply to an owner of property who builds or imp	nstruct the project (Sec. 7044, Broves thereon, and who contracts	usiness and Professions for such projects with a	
Lam exempt under Sec	B & PC for this reason:			
Date	Owner Signature			
IN ISSUING THIS BUILDING PERMIT, the all measurements and locations shown on the appropriate agreement relating to permissible or prany improvement or the violation of any private and any pr	plication or accompanying drawings and that the oblibited locations for such improvements. This	e improvement to be constructed of	does not violate any law	
i certify that I have read this application and starelating to building construction and herby author	rize representative(s) of this city to enter upon th			
Date 5/2//6/	Applicant/Agent Signature ///	cellins		
WORKER'S COMPENSATION DECLA I have and will maintain a certificate of coperformance of work for which the permit is assued.	onsent to self-insure for workers' compensation a			
X I have and will maintain workers' compensation this permit is issued. My workers' compensation	nsation insurance as required by Section 3700 insurance carrier and policy number are:	of the Labor Code, for the perfo	rmance of the work for	
Carrier ARGONAUT INS CO	Policy Number WC62600	115505 Exp Date	07/01/2000	
Carrier ARGONAUT INS CO (This section need not be completed if the shall not employ any person in any manner so a subject to the workers' compensation provisions of Date 3/2//	e permit is for \$100 or less) is creatillat in the as to become subjects of the whorkers' compensation Section 3700 of the Labor Code, I shall forthw	performance of the work for whic ion laws of California and agree with comply with those provisions.	h this permit is issued,I that if I should become	
Date 3/27/6/	Applicant Signature 14 (CC	Cins	······································	
WARNING: FAILURE TO SECURE WORKE CRIMINAL PENALTIES AND CIVIL FINES COMPENSATION, DAMAGES AS PROVIDED	R'S COMPENSATION COVERAGE IS UNLA UP TO ONE HUNDRED THOUSAND DOL	AWFUL AND SHALL SUBJEC LARS (\$100,000) IN ADDITIO	Γ AN EMPLOYER TO N TO THE COST OF	

Permit No: 0103593

CITY OF SACRAMENTO

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

roject Address: 150 Alcanto	P CROLE Assessor Subdivi	or Parcel #ision	#2, Uni+ #3-A
WNER INFORMATION:		-	
Legal Property Owner: 0 R. Dwner Address:	HortonCity	Phone# 96 State_	5 - 2200 Zip
CONTRACTOR INFORM	ATION:		
Contractor: DA HORTON	Lic. # <u>750194</u>	Phone # 965-23	200 Fax 956-22.
ROJECT INFORMATION:			
and Use Zone RIA Occu	pancy Group R3 (Construction Type VN	Fed Code 1A
No. of Stories:	No. of Rooms:	Street Width:	
s Floor Area2 rd Floo	or AreaBase	ment Roof N	Material
	welling/Living		
	arage/Storage	رسيم ا	
D	ecks/Balconies	<u> </u>	
C	arports	·	
SCOPE OF WORK:			
	□ AR Flood Waiver	Paguired G Plant	ning Approval
Information Above Complete Violation Files Checked Standard Setbacks County Sewer	☐ Flood Elevation C ☐ Water Developme	Certificate Required Design	
-THE FOLLOWING MUST I	SE PROVIDED IN ORDER TO	SUBMIT FOR PERMIT	
Z 2 COMPLETE PLOT PLANS, LEGIE 2 11 X 17 COPY OF FLOOR PLAN W	TH FOLLOWING INFORMAT	NON	
a) Assessors Parcel Number b) New Floor Area	c) Owners Name d) Project Address		
	Received by: (staff)		=
Feb. 04 2001 10:20AM	0 021 166 916 : 'O	NONE N	1 : D'C'C'C'?

OMEGA PRODUCTS CO

DIAMOND WALL INSULATING STUCCO SYSTEM

303 ADDRESS:

ICBO Report #4004

PLASTERING CONTRACTOR:

STUCCO NORKS INC.

Name:

Address: 5900 WAREHOUSE WAY, SACRAMENTO, CAL FORNIA 95826

Telephone Not (916) 383-6699

Contractor Number of Diamond Wall System 2175

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

Signature of authorized representative of Plastering Contractor

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

-- CERTIFICATION OF INSULATION

	ADDRESS OR TRACT			SACRAME	NTO INSULAT	ION CONTI	RACTORS
P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026							
Dur HA	1010	t	1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026				01 LIC. #202026
			P.C). BOX 9651, FRI	ESNO, CA 937	9 3-9651 LIC	c. #202026
			P.C). BOX 1631, RE	NO, NV 89505	LIC. #1067	5
N E , R	3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #1					89118 LIC. #10675	
PANK W)EST		DATE IN	SULATION COMP	2/01		
WAL	LS		CEILINGS		<u>.</u>	FLO	DRS
(SQUARE FEET)	((SQUARE FEET)		(SQUARE FEET)		
TYPE OF IN	SULATION	TYPE OF INSULATION MATERIAL		TYPE OF INSULATION MATERIAL			
FIBERG	iLASS		FIBERGLASS		FIBERGLASS		
FORM	TS	FORM BA	BATTS & BLOW		FORM BATTS		
MANUFACTURER'S PRODU	MANUFACTURER'S PRODUCT I.D.		MANUFACTURER'S PRODUCT I D		MANUFACTURER'S PRODUCT LD		
II MANUFAC	TURER	M	ANUFACTURER			MANUFA	CTURER
A	.=				OCF		
A OC	OCF		OCF BAGS				
R-VALUE	APPLIED THICKNESS	R - VALUE APPLIED MIN. INSTALLED WEIGHT PER SOLIARE FOOT				APPLIED THICKNESS	
N INSTACLED	_ € . 2	30	9"				
L \3	3314	30	17.71				
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	KN	EE WALLS IF R-VA	LUE IS OTHER	THAN WALLS A	BOVE		
E MATERIAL	FORM		R VALUE			MANUFACT	JRER
FIBERGLAS	s	BATTS		OCF			
	and the second	AIR IN	FILTRATION SE	2.17.27.			
MATERIAL	FOAM			W R GRACE			
THIS IS TO CERTIFY T MATERIAL STANDAR	HAT INSULATION A	ND/OR SEALANT	HAS BEEN IN	ISTALLED IN C	ONFORMAN	ICE WITH	APPLICABLE CODES
SIGNATURE - INSULATION			TITLE			DATE	1
A Se	Bell Serveyo		 	MANAGER		DATE	-6-07
SIGNATURE—GENERAL CONTRACTOR		11116	TITLE		DAIL		
REMARKS						<u> </u>	
É R							
A							
G.							
N							



