

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0104276**  
**Insp Area: 4**

**Site Address: 700 ALCANTAR CR SAC**  
Parcel No: 225-1630-018 RIVER VIEW 2 VIL. 2A LOT 18

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

CONTRACTOR  
BEAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

OWNER

ARCHITECT

**Nature of Work: MP 1872 1 STORY 8 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 B License Number 724191 Date 4/18/01 Contractor Signature Sheryl Van Maer

**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 Professions 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 above-mentioned property for inspection purposes.

Date 4/18/01 Applicant/Agent Signature Sheryl Van Maer

**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 LIBERTY MUTUAL INS CO Policy Number WA2-651-004147-080 Exp Date 04/01/2002

(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 4/18/01 Applicant Signature Sheryl Van Maer

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.**

RIVER VIEW 4A/4B

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction
- Addition
- Remodels
- Other

Project Address: Lot 18 700 Alcantara Circle Assessor Parcel # \_\_\_\_\_

OWNER INFORMATION:

Legal Property Owner: Beazer Homes Holdings Corp. Phone # 916-773-3888  
 Owner Address: 3009 Douglas Blvd. 150 City Roseville State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor: Beazer Homes Lic. # B724191 Phone # 916-773-3888 Fax# 916-773-0425

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 1872 2<sup>nd</sup> Floor Area \_\_\_\_\_ Basement \_\_\_\_\_ Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1872</u>
Garage/Storage	_____	<u>618</u>
Decks/Balconies	_____	<u>-0-</u>
Carports	_____	<u>-0-</u>

SCOPE OF WORK: Single Family Dwelling

FOR OFFICE USE ONLY

- 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 : \_\_\_\_\_

NEW STRUCTURES & ADDITIONS

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

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

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

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

#18

# OMEGA PRODUCTS CORP.

## DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

#700 AL CANTAN C.A.  
BEAZER MEMORIAL #

ICBO Report #4004

Date of Job Completion 7/18/01

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC.

Address: 5900 WAREHOUSE WAY, SACRAMENTO, CALIFORNIA 95826

Telephone No: (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 report specified above and the manufacturer's instructions.

6/22/01  
Date

[Signature]  
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

PART I GENERAL

ADDRESS OF TRACT <div style="font-size: 2em; font-family: cursive;">BEAZER</div> <div style="float: right; margin-top: 10px;">LOT # <b>18</b></div>	SACRAMENTO INSULATION CONTRACTORS <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
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MEMORIES II

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 5/8"	30 30	9" 12"			
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>Beth L...</i>				TITLE <b>MANAGER</b>		DATE <b>7-3-01</b>
SIGNATURE—GENERAL CONTRACTOR				TITLE		DATE
REMARKS:						

PART II AREAS INSULATED

**N**orman

**S**cheel

**S**tructural

**E**ngineer

Sacramento  
5022 Sunrise Blvd.  
Fair Oaks, CA 95628  
(916) 536-9585  
(916) 536-0260 (fax)

NORMAN SCHEEL  
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(530) 753-5380 (fax)

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DARRELL PEREIRA  
Design Engineer  
Email: [darrell@nsse.com](mailto:darrell@nsse.com)

June 11, 2001

Beazer Homes  
3009 Douglas Blvd. Suite 150  
Roseville, CA 95661

Re: Memories II (Job #20419)  
Shear Wall Fix

To Whom It May Concern:

This letter is to clarify that the hole in the shear wall may be fixed by installing blocks around the opening and installing a new piece of shear and edge nailing all around. If the wall is a Type 3 or larger, 4x blocking will be required.

If you have any questions, please call Rob Coon.

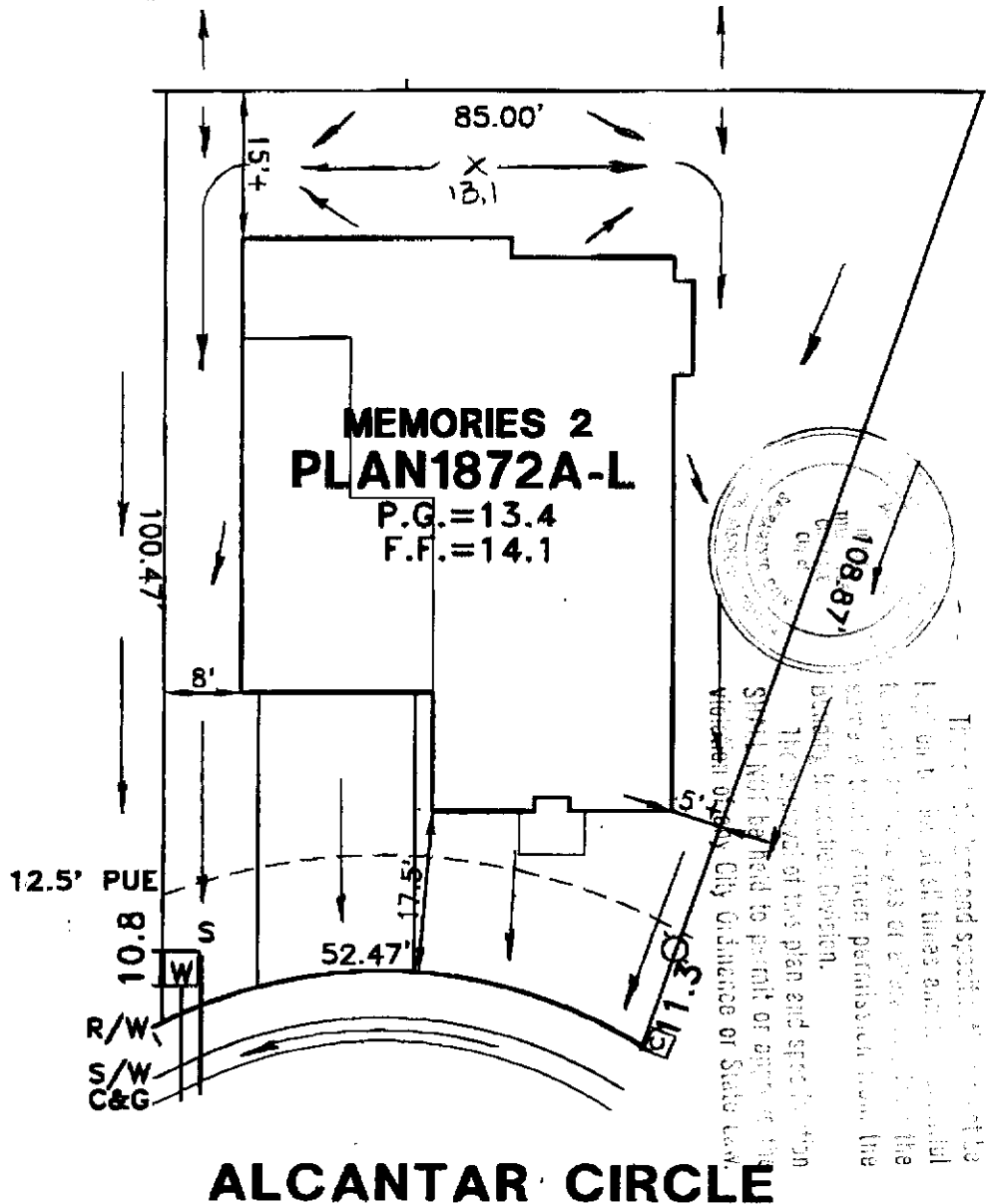
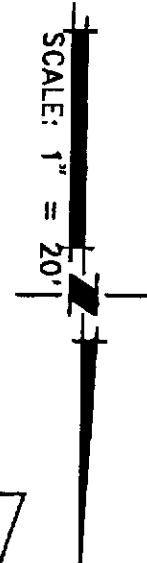


NORMAN SCHEEL  
STRUCTURAL ENGINEER



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.

ROUTING/APPROVAL		
	✓	INITIALS
President		
Project Management		
Architect	✓	WR
City	✓	WR



This plot plan and specifications shall be held in full force and effect until the City Engineer has approved the same. The City Engineer's approval does not constitute a warranty of the accuracy of the information shown hereon. The City Engineer's approval is not a guarantee of the accuracy of the information shown hereon. The City Engineer's approval is not a guarantee of the accuracy of the information shown hereon.

WOOD-RODGERS INC.  
108.87

**ALCANTAR CIRCLE**

- ⊙ = STREET LIGHT
- ⊞ = UTILITY SERVICE BOX

**PLOT PLAN  
LOT 18**  
RIVER VIEW#2 VILLAGE 2A  
FOR  
BEAZER HOMES

CITY OF SACRAMENTO CALIFORNIA

CIVIL ENGINEERING SURVEYING  
MAPPING PLANNING

**WOOD-RODGERS INC.**

3301 C STREET BLDG. 100B SACRAMENTO, CA 95816  
TEL: 916/341-7760 FAX: 916/341-7767

DATE:	DRAWN:	CHECKED:	PROJECT NO:
MAR 2001	HMB	WR	1055.015

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