

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0012017
Insp Area: 4

Site Address: 1810 MONTARA AV SAC
Parcel No: 225-1110-056 NORTHPT PK 12 LOT 56

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

CONTRACTOR
LENNAR RENAISSANCE INC.
2240 DOUGLAS BL
ROSEVILLE CA. 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP655C/OPT 2/4022 SQ FT/11 RMS 2 STORY

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 73234E Date 1/13/00 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 3 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 above mentioned property for inspection purposes.

Date 10/13/00 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 TRANSCONTINENTAL INSURANCE CO Policy Number WC166792277 Exp Date 6/1/2001

____ (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 10/13/00 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 BUILDING PERMIT APPLICATION

Lot # _____

655C

New Construction

Addition

Remodels

Other

Project Address: 1512 MCLELLAN BLVD

Assessor Parcel # 325-111-056 000

OWNER INFORMATION:

Legal Property Owner LENNAR RENAISSANCE, INC. Phone # (916) 773-4083
 Owner Address: 2240 DOUGLAS BLVD. #250 City ROSEVILLE State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor: SAME AS ABOVE Lic # 732348 B Phone # 773-4083 Fax# 773-4086

PROJECT INFORMATION:

Land Use Zone R/A Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of stories: 2 No. of rooms: 11 Street width: 40
 1st Floor Area 1798 2nd Floor Area 2224 Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

	<u>EXISTING</u>	<u>NEW</u>
Dwelling/Living	_____	<u>4022</u>
Garage/Storage	_____	<u>700</u>
Decks/Balconies	_____	<u>258</u>
Carports	_____	_____

SCOPE OF WORK: MP 4022/ 655X

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

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

Date: _____

Received by: (staff) _____

ACTIVITY/PERMIT #

INSTALLATION CARD

Job Address:

1810 Montara Ave

System System Trademark: **MINI NOTE**

Name of System Manufacturer: **MINI NOTE CORP.**

ENR Evaluation Service, Inc.
1000 North 17th Street, Suite 200
San Jose, CA 95131
Date of Job Completion: 6-19-01

System Contractor:

Name: Kenyon Plastering

Address: _____

Telephone Number: _____

Approved Contractor Number as issued by the System Manufacturer: _____

This is to certify that the above 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.

Nester Hertz
Signature of authorized representative of system contractor

6-28-01
Date

FIGURE 3

DECLARATION

Project Address: _____

Date: _____

The field testing and mixing of all components and of the plaster wall coating at the address noted above has been satisfactorily inspected before, during and after installation of the cementitious coating. The field testing and mixing have been found to comply with current evaluation report EN-307 and approved plans.

Authorized Inspector Signature _____

Authorized Inspector Name (Print) _____

Employer Name _____

Employer Address _____

Telephone Number () _____

This is to certify that the above noted inspector, approved by MINI NOTE CORP., was authorized to inspect the project as noted and was found to properly discharge his duties.

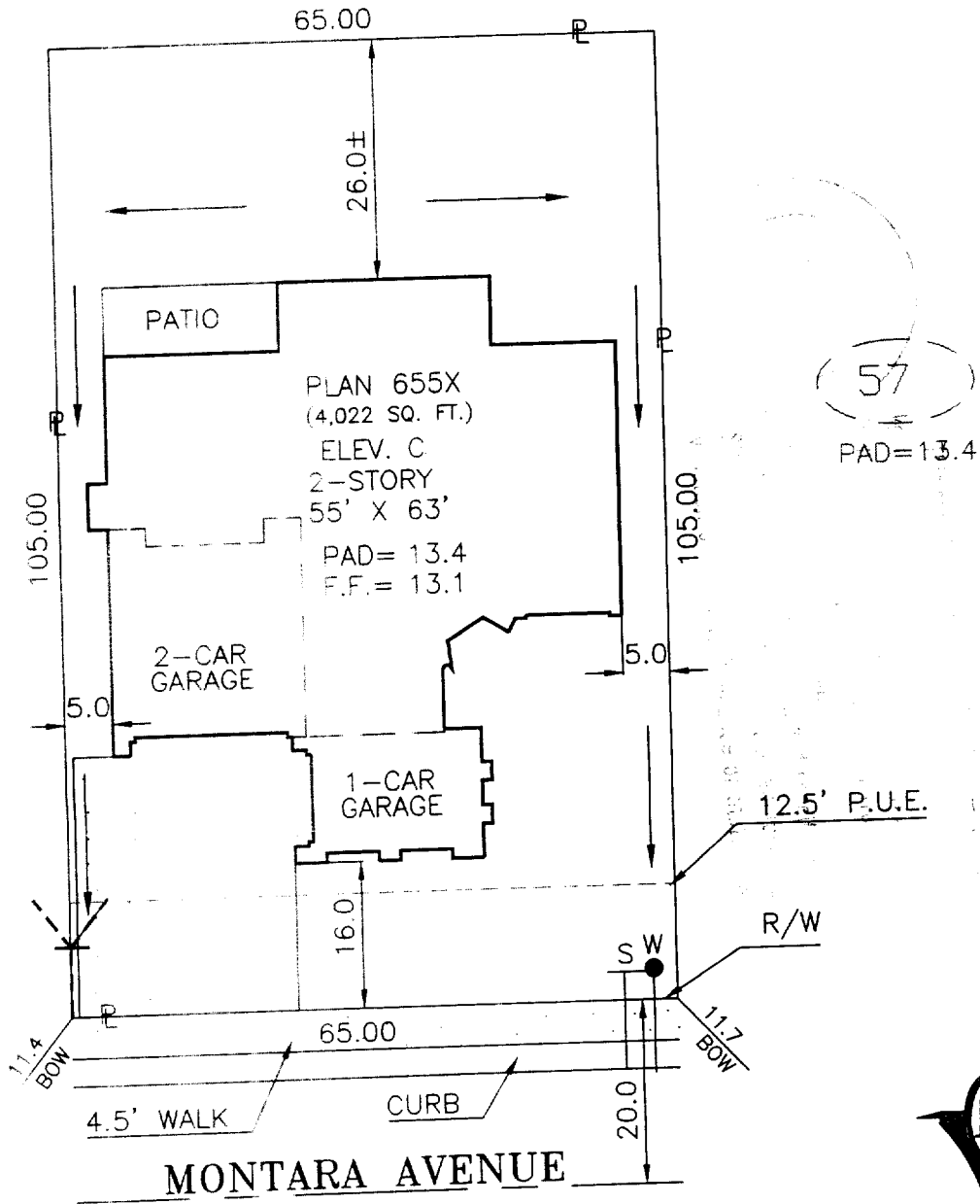
Signature of Engineer or Owner of Report Holder _____

Signer's Name (Print): _____

Date: _____

* Signature required only if inspector is not an employee of evaluation report holder.

FIGURE 4



DIMENSIONS SHOWN ARE APPROXIMATE EXCEPT FOR MINIMUMS REQUIRED BY ORDINANCE.
THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS AND MAY VARY FROM THIS PLAN.

RENAISSANCE
H O M E S

2240 DOUGLAS BLVD. SUITE 250, ROSEVILLE, CALIFORNIA 95661
PHONE (916) 773-4083 FAX (916) 773-4086

SOMERSET

PLOT PLAN

NORTHPOINTE PARK UNIT 12
CITY OF SACRAMENTO
SACTO. COUNTY CALIFORNIA

NOTES:

ADDRESS: 1810 MONTARA AVENUE

LOT COV: 36.4 % APN:

PLAN NO.: 655X-C LOT SQ. FT.: 6,825

REAR YARD COVERAGE: %

DRAWN BY: R.P. APPROVED BY: *AS*

DATE: 9/5/00 SCALE: 1"=20'

LOT 56