

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

**Permit No: 0102072**  
**Insp Area: 4**

**Site Address: 1774 NORTH BEND DR SAC**  
Parcel No: 225-1090-053  
N

**NORTHPOINTE PARK UNIT 4 LOT 53**

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

CONTRACTOR  
JOHN LAING HOMES  
2150 PROFESSIONAL DR #120  
ROSFVILLE CA 95661

OWNER

ARCHITECT

**Nature of Work: MP 1973W/4BD OPT. 1 STORY 9 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 15396 Date 3/13/01 Contractor Signature N. Gollens

**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 3/13/01 Applicant/Agent Signature N. Gollens

**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 EAGLE PACIFIC INSURANCE COMPAN Policy Number 1S0002200 Exp Date 04/15/2001

(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 3/13/01 Applicant Signature N. Gollens

**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

New Construction    
  Addition    
  Remodels    
  Other

Project Address: 1774 North Bend Drive     Assessor Parcel # 225-1090-053

OWNER INFORMATION:     Lot 53     0102072

Legal Property Owner: John Laing Homes     Phone # 780-1222  
 Owner Address: 1536 Eureka Rd. #100,     City Roseville,     State Ca.     Zip 95661

CONTRACTOR INFORMATION: Northpointe Park Unit #4

Contractor: John Laing Homes Lic. # 687596     Phone # 780-1222     Fax# 780-1333

**PROJECT INFORMATION:**

Land Use Zone \_\_\_\_\_     Occupancy Group \_\_\_\_\_     Construction Type VN     Fed Code A1  
 No. of stories: 2     No. of rooms: 10     Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area \_\_\_\_\_     2<sup>nd</sup> Floor Area \_\_\_\_\_     Basement \_\_\_\_\_     Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:	EXISTING	NEW	
Dwelling/Living	_____	<u>2073</u>	1973 4/8
Garage/Storage	_____	<u>617</u>	
Decks/Balconies	_____	<u>93</u>	
Carports	_____	_____	

SCOPE OF WORK: \_\_\_\_\_

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

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

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

# OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

1774 North 2nd Dr.  
Lot 53

Date of Job Completion 9/29/01

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.

9/29/01  
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.

# INSULATION CERTIFICATE

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH THE CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATION CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

SITE ADDRESS: LOT 53 PAGEENTRY SACRAMENTO, CA  
STREET CITY STATE

## CEILINGS:

BLOW: MANUFACTURER GREENSTONE THICKNESS 8.1" R-VALUE 30  
SQUARE FEET 1361 # BAGS/LBS PER BAGS 37

BATTS: MANUFACTURER JOHNS MANVILLE THICKNESS 10.25" R-VALUE 30  
JOHNS MANVILLE

## EXTERIOR WALLS:

MANUFACTURER JOHNS MANVILLE THICKNESS 3.5" R-VALUE 13  
JOHNS MANVILLE

## FLOOR INSULATION:

MANUFACTURER JOHNS MANVILLE THICKNESS 3.5" R-VALUE 13

## AIR INFILTRATION: (TITLE 24)

YES  NO

OTHER: \_\_\_\_\_

GENERAL CONTRACTOR: JOHN LAING HOMES LICENSE # \_\_\_\_\_

BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

INSULATION CONTRACTOR: WESTERN INSULATION LP LICENSE # 794484

BY:  TITLE AUTH. AGENT DATE 10/4/01  
JAMIE BLAIR

# SIGNET

Testing Labs, Inc.

DATE: 7-26-01  
 PROJECT NO. 9953  
 PROJECT: J.B. / PADBENTRY LGT#53  
 LOCATION: 1774 NORTH BEND

DSA FILE/APPL. NO. \_\_\_\_\_  
 OSHPD NO. \_\_\_\_\_  
 PERMIT NO. \_\_\_\_\_  
 WEATHER: \_\_\_\_\_ TEMP: \_\_\_\_\_

**PROOF LOAD**     **TORQUE**     **WITNESSING**

Testing was performed on the following items. All tests were performed with the following calibrated equipment:  
 RAM: SN-255    GAGE: SN-1005    TORQUE WRENCH: \_\_\_\_\_  
 RAM: \_\_\_\_\_    GAGE: \_\_\_\_\_    TORQUE WRENCH: \_\_\_\_\_

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST
<u>HT-22 EPOXIED ANCHOR BOLTS</u>	<u>5/8</u>	<u>2</u>		<u>6855</u>	<u>2670</u>	<u>2</u>	<u>0</u>	<u>0</u>

- Type of epoxy / grout used: \_\_\_\_\_ Method of application / cleaning: \_\_\_\_\_
- Visual inspection was performed on \_\_\_\_\_
- Show up / Stand by time. Job Canceled / Delayed due to: \_\_\_\_\_
- All non-compliance items were brought to the attention of: \_\_\_\_\_ at the job site.
- NON-COMPLIANCE REPORT ATTACHED     ADDITIONAL TESTS ATTACHED

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

To the best of my knowledge, the above WAS / WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: \_\_\_\_\_ Inspector: Pat Roy