

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0012034
Insp Area: 2

Site Address: 171 ARUBA CR SAC
Parcel No: 117-1340-035
N

REGENCY PLACE UNIT 2 LOT 35

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

CONTRACTOR
BEATTIE CONSTRUCTION
P.O. BOX 77768
STO: KTON CA 95267

OWNER

ARCHITECT

Nature of Work: MP 1500 1 STORY 7 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 232874 Date 11/21/00 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 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 12/1/00 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 _____ Policy Number _____ Exp Date _____

(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 11/21/00 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.

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE EFB
 PERMIT AND CALCULATION SHEET 11-21-00

APPLICATION NO:
 GENERAL INFORMATION

BLDG PERMIT NO: *CITY*
 THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

2105204 EFB
11-21-00

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION	RESIDENTIAL		SF	MF	UNITS
CSD-1			<i>131</i>	<input checked="" type="checkbox"/>	
SRCSO			<i>2404</i>	<input type="checkbox"/>	
CONSTRUCTION					
IN-LEU					
TOTAL FEE					<i>2535</i>

APN: *119-1340-035*

DESCRIPTION/
 SUBDIVISION *Regency Place No. 2* LOT: *35*

PROPERTY ADDRESS *171 Aruba Circle*

OWNER *Regency Place Partners LP*

MAILING ADDRESS *PO Box 77768*

CITY-STATE-ZIP *Stockton CA 95207* PHONE *(916) 681-0457*

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *Thomas M. B. [Signature]*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

Certification of Compliance

School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT

OWNER'S NAME Regency Place Partners
 OWNER'S ADDRESS 171 Aruba Cir
 PROJECT ADDRESS 171 Aruba Cir
 PARCEL NUMBER 117-1340-035 LOT NO. 35
 SUBDIVISION NAME Regency Place Unit 2
 NUMBER OF UNITS 1 Residential Senior Community
 Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.
 APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT Partners
 DATE 12-31-00 PHONE NUMBER 681-6457

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 1500
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA 1524
 SIGNATURE [Signature]
 TITLE PT DATE 12-31-00

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT 76154
 DISTRICT CERTIFICATION NO. 76154
 EXEMPT COMMENTS

RESIDENTIAL/APT/CONDO	<u>1524</u>	SQ FT X \$	<u>.33</u>	= \$	<u>502.92</u>
COMMERCIAL/INDUSTRIAL		SQ FT X \$		= \$	
OTHER FEE	TYPE	SQ FT X \$	<u>.33</u>	= \$	
TOTAL FEES COLLECTED					<u>502.92</u>

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature]
 TITLE _____ DATE 12/31/00

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 34 REGENCY PLACE SACRAMENTO, CA
STREET CITY STATE

CEILINGS:

BLOW: MANUFACTURER GREENSTONE THICKNESS 10.3" R/VALUE 38
SQUARE FEET 1160 # BAGS/LBS PER BAGS 60

BATTS: MANUFACTURER JOHNS MANVILLE THICKNESS 13" R-VALUE 35
JOHNS MANVILLE

EXTERIOR WALLS:

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

FLOOR INSULATION:

MANUFACTURER JOHNS MANVILLE THICKNESS N/A R/VALUE N/A

AIR INFILTRATION:

(TITLE 24)
YES XX NO

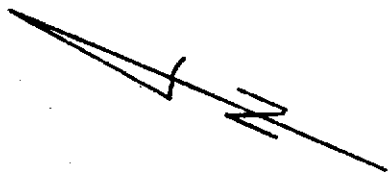
OTHER: _____

GENERAL CONTRACTOR: WESTERN RETIREMENT COMM LICENSE # _____

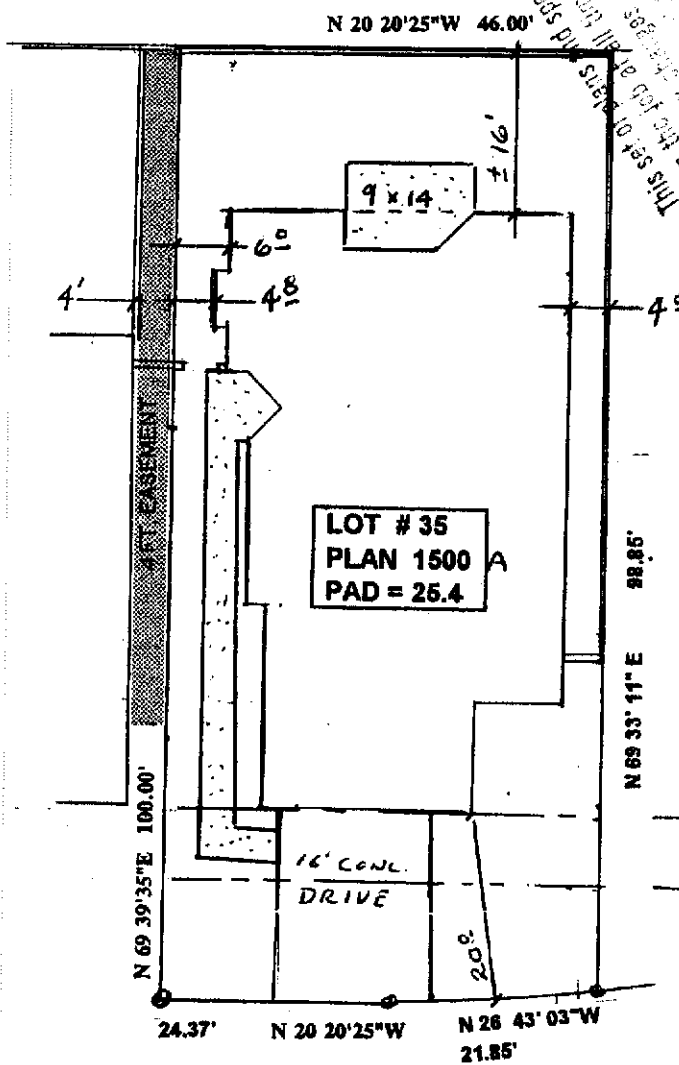
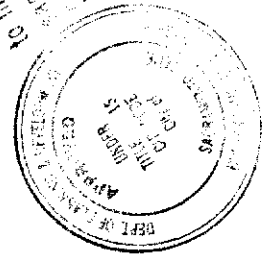
BY: _____ TITLE _____ DATE _____

INSULATION CONTRACTOR: WESTERN INSULATION, INC. LICENSE # 481278

BY: Jamie Blair TITLE AUTH. AGENT DATE 4/28/01
JAMIE BLAIR



This set of plans must be kept on the job site until the work is completed. To make any change in the work, the contractor must be notified by the engineer in writing. The contractor is responsible for the accuracy of the field data and the correctness of the calculations. The engineer is not responsible for the accuracy of the field data or the correctness of the calculations. The contractor is responsible for the accuracy of the field data and the correctness of the calculations. The engineer is not responsible for the accuracy of the field data or the correctness of the calculations.



171 ARUBA CIRCLE

WESTERN RETIREMENT COMMUNITIES INC.
P.O. BOX 77768
STOCKTON, CA 95267
PHONE (916) 681-0457