

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0100873

Insp Area: 4

Site Address: 220 LYMAN CR SAC

Parcel No: 225-1290-046

NORTHPT PK 13-1 LOT 46

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

WESTERN PACIFIC HOUSING  
1210 CENTRAL BLVD  
BRENTWOOD CA. 94513

OWNER

ARCHITECT

Nature of Work: NSFR MP3592/OPT 2 STORY 10 RMS

**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 675769 Date 1/26/01 Contractor Signature N. Collins

**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 1/26/01 Applicant/Agent Signature N. Collins

**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 INS. CO.

WESTERN PACIFIC HOUSING  
AND DEVELOPMENT SERVICES  
0100873

Exp Date 03/19/2001

\_\_\_\_\_, (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 1/26/01 Applicant Signature N. Collins

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.**

# KwikKote

No. 200-002550

## Stucco System Installation Card

Job Name: BELLAGIO  
Address: 220 LYMAN CIR  
*Sacramento, CA*  
Lot #: 0000046

Stucco System Trade Name: KWIK KOTE  
Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.  
Report No. 3607  
Date of Job Completion:

Home Builder: WESTERN PACIFIC  
Address: 1210 CENTRAL BLVD WEST #200  
BRENTWOOD, CA

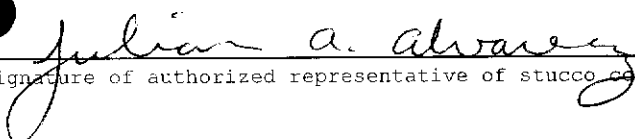
Stucco Contractor: KENYON CONSTRUCTION  
Address: PO BOX 2077  
North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as  
issued by the Stucco Manufacturer: 1001

Card Print Date: 05/22/2001

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

  
\_\_\_\_\_  
Signature of authorized representative of stucco contractor

5-29-01  
\_\_\_\_\_  
Date

# CERTIFICATION OF INSULATION

PART I GENERAL

ADDRESS OR TRACT <b>WESTERN Pacific</b> <b>LOT # 46</b>  <b>BELLAGIO</b>	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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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	MIL INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
13	3 5/8	30 30	9" 12"			
<b>KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE</b>						
MATERIAL <b>FIBERGLASS</b>		FORM <b>BATTS</b>		R VALUE		MANUFACTURER <b>OCF</b>
<b>AIR INFILTRATION SEALANT</b>						
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>Bill [Signature]</i>	TITLE MANAGER	DATE 5-4-1
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS:

PART II AREAS INSULATED

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

BE 360

Project Address: 220 Lyman Circle Assessor Parcel # 225-1290-046  
Lot Number: 46 Subdivision Northpointe Park Unit #13 VI

OWNER INFORMATION:

Legal Property Owner: Western Pacific Housing Phone# (925) 634-6023  
Owner Address: 1210 Central Boulevard; City Brentwood, State Ca. Zip 94513

CONTRACTOR INFORMATION:

Contractor: Western Pacific Lic# 075709/B Phone # (925) 634-6023 Fax 634-6166

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A

No. of Stories: 2 No. of Rooms: \_\_\_\_\_ Street Width: \_\_\_\_\_

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

AREA IN SQUARE FOOT OF:

Dwelling/Living 3659 + 67  
Garage/Storage 636  
Decks/Balconies 143  
Carports \_\_\_\_\_

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

- 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:

~THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT~

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALES
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION:
  - a) Assessor's Parcel Number
  - b) New Floor Area
  - c) Owners Name
  - d) Project Address

Date:

Received by: (initials)

Permit #

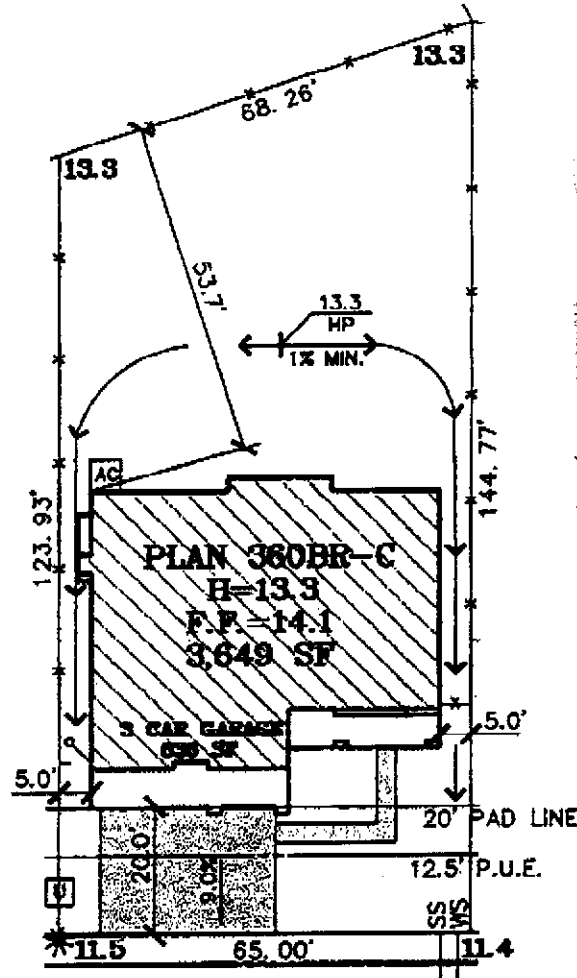
**LEGEND**

→ SWALE  
 □ MAILBOX

✱ WOOD FENCE  
 ○ SIDEYARD GATE

SS SEWER SERVICE  
 WS WATER SERVICE

□ UTILITY SERVICE  
 F.F. FINISH FLOOR



**LYMAN CIRCLE**

**LOT 46**  
**PLAN 360BR-C**  
**A.P.N.:**  
**ADDRESS: 220 LYMAN CIRCLE**  
**LOT AREA: 8,733 SF**

UE TO THE UNIQUE CONDITIONS OF THIS LOT, THE BUYER AS WALKED AND APPROVED THE SITE. FINAL GRADING CONDITIONS MAY VARY. THE INFORMATION ON THIS PLOT PLAN IS PROVIDED FOR YOUR CONVENIENCE AS A GUIDE TO THE GENERAL LOCATION OF THE SUBJECT PROPERTY. HE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED OR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS MAY VARY OR CHANGE WITHOUT PRIOR NOTICE DUE TO CTUAL SITE CONDITIONS.

PLAN: 360br  
 ELEVATION: C SIGNED (BUYER) \_\_\_\_\_ DATE \_\_\_\_\_  
 ORIENTATION: L  
 COLOR: 159

**The Splink Corporation**

2590 VENTURE OAKS WAY  
 SACRAMENTO, CA 95893

TEL: (916) 926-6560 FAX: (916) 921-9274



1210 Central Boulevard  
 Brentwood, CA 94513  
 office: (925) 634-6023  
 fax: (925) 634-6063

**BELLAGIO**

**NORTHPOINTE PARK VILLAGE 13 PHASE 1**

City of Sacramento, California

Scale: 1"=30'

December 13, 2000