

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0107532
Insp Area: 4

Site Address: 5059 TUCKERMAN WY SAC
Parcel No: 225-1510-031 NORTHPT PK 17 LOT 31

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

CONTRACTOR
JOHN LAING HOMES
536 EUREKA RD STE 100
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1645 8 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. 30927, City Code).

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 687596 Date 6/27/01 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 contractor(s) 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 & C for this reason: _____

Date _____ Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the City hereby relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying documents 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 6/27/01 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 PACIFIC INSURANCE COMPANY 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 6/27/01 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.



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**

INSULATION
CERTIFICATE

69624

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

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

John Kelly LOT # 31 TRACT # 261252

STREET 5059 TULLOCHWOOD CITY SHELTON, VA

EXTERIOR WALLS:

MANUFACTURER Low THICKNESS/TYPE 1 1/2 VALUE 13

CEILING:

BATS: MANUFACTURER Fo THICKNESS/TYPE 10 VALUE 30

BLOWN IN: MANUFACTURER Fo MINIMUM THICKNESS 1 1/2 VALUE 30

SQUARE FOOTAGE COVERED 1421 NUMBER OF BAGS USED 36

FLOORS: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

SLAB ON GRADE: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

GENERAL CONTRACTOR _____

CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR **ARCADE INSULATION**

CALIFORNIA CONTRACTORS LICENSE #263784 DATE 11.21.01

[Signature] SIGNATURE [Signature] TITLE

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

5059 TURNER RD WY
SACRAMENTO CA 95835

Date of Job Completion 12-4-01

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC.

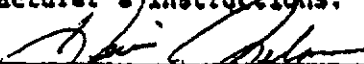
Address: 5900 WAREHOUSE WAY, SACRAMENTO, CALIFORNIA 95826

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.

12-19-01
Date


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.

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 5059 Tuckerman Way Assessor Parcel # 225-1510-031

OWNER INFORMATION:

Lot 31 0107532

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 #

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: 1 No. of rooms: 8 Street width: _____
 1st Floor Area _____ 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1645</u>
Garage/Storage	_____	<u>417</u>
Decks/Balconies	_____	<u>104</u>
Carports	_____	_____

SCOPE OF WORK: _____

FOR OFFICE USE ONLY

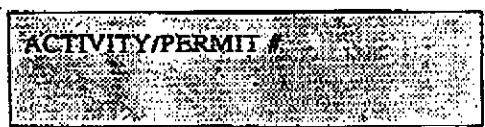
- | | | |
|---|---|--|
| <input type="checkbox"/> Information above complete | <input type="checkbox"/> AR Flood Waiver required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation files checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> 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 | * Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures. |
| <input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA | |
| <input type="checkbox"/> Title 24 Energy Compliance documentation | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> Plan Review Fees |

Date: _____ Received by: (staff) _____



residentialapp [rev 3/09/99]

1536 EUREKA ROAD
SUITE 100
ROSEVILLE, CA 95661
TEL 916-780-1222
FAX 916-780-1333



John Laing Homes
Hand crafted since 1843

December 12, 2001

City of Sacramento
Building Department
1231 I Street, Suite 200
Sacramento, CA 95814

To Whom It May Concern:

This letter shall serve as our commitment to complete grading and landscaping of the home-site at 5059 Tuckerman Way, lot 31, within 30 days of this letter. This home-site is located at the subdivision Calypso - Natomas 17. We are requesting to be issued a final for occupancy prior to this occurring.

Feel free to contact me with any questions. Thank you for your consideration in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'LFoss', written over a horizontal line.

Laura Foss
Operations Coordinator

SIGNET

Testing Labs, Inc.

DATE: 9-12-01
 PROJECT NO. 9953
 PROJECT: 3.B./CALYPSO LOT # 31
 LOCATION: 5059 TUCKERMAN WAY

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: 57 #255 GAGE: 56 #1004 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>PHD-2 EXHAUST MANIFOLD BOLT</u>	<u>5/16</u>	<u>2</u>		<u>6955</u>	<u>2070</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: _____

SIGNET

Testing Labs, Inc.

DATE: 9-21-01
 PROJECT NO. 2001
 PROJECT: J.B./CALYPSO LOT# 31
 LOCATION: 5059 TUCKERMAN

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: _____ GAGE: _____ TORQUE WRENCH: _____
 RAM: _____ GAGE: _____ TORQUE WRENCH: _____

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST

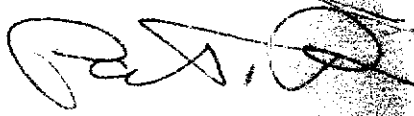
Type of epoxy grout used: SIMPSON SET II Method of application / cleaning: AIR/BRUSH
 Visual inspection was performed on THE PLACEMENT OF ONE 5/8" DIA ALL-THREAD IN A PRE-DRILLED AND CLEANED 3/4" DIA X 10" MIN. EMBEDMENT AT PHOTO LOCATION

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.

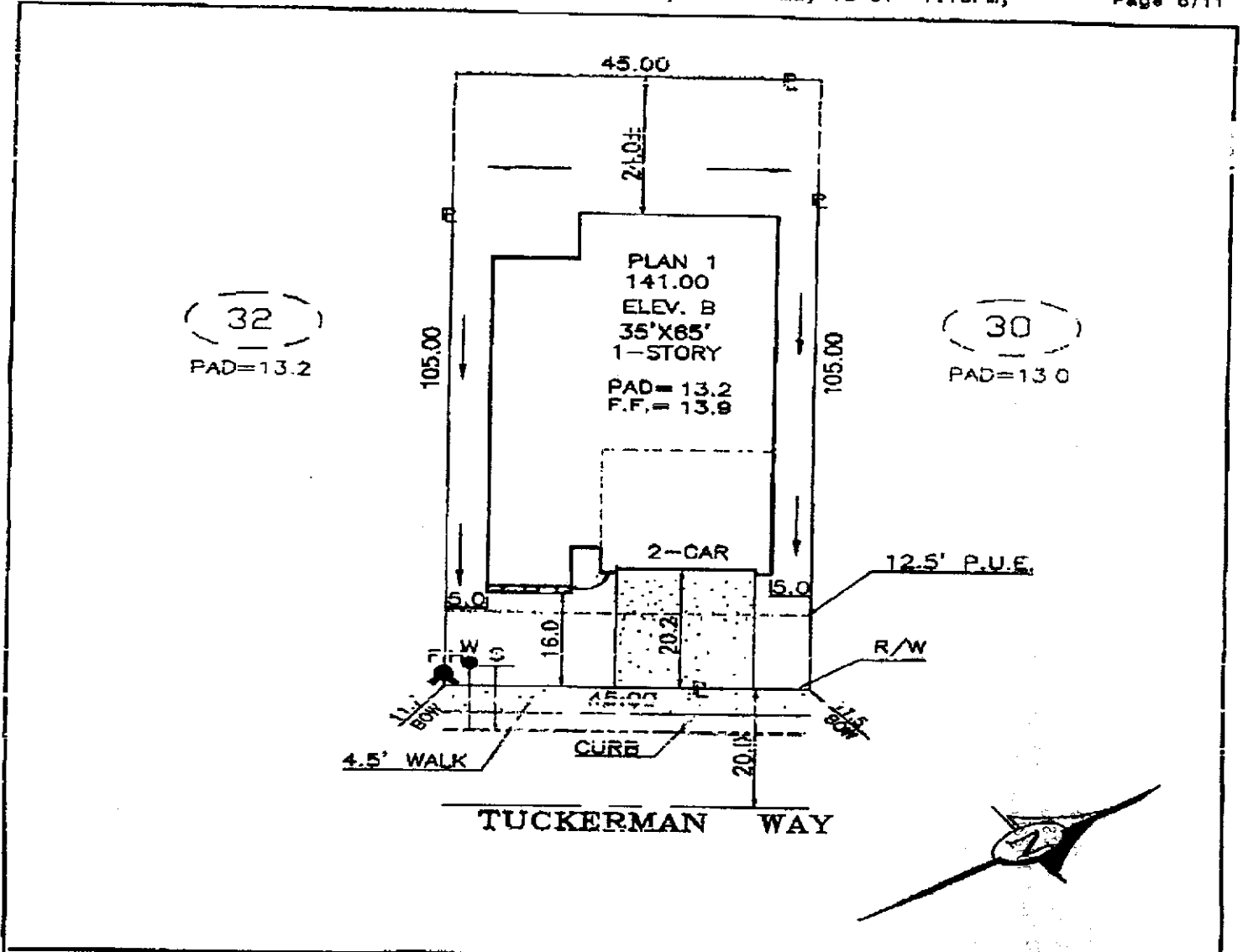
Superintendent/Representative: _____ Inspector: 

3121 Diablo Avenue
Hayward CA 94545

4741 Pell Drive #8
Sacramento CA 95838

520 Mercantile Street #A
Cotati, CA 94931

310 W 5th Street #203
Santa Ana CA 92701



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

John Laing Homes 1596 FUREKA ROAD SUITE 100 ROSEVILLE, CALIFORNIA 95691 (TEL.) 916-780-1222 (FAX) 916-780-1323		CALYPSO		PLOT PLAN NOTES:
		NORTHPOINTE PARK VILLAGE NO. 17 CITY OF SACRAMENTO CALIFORNIA		
ADDRESS: 5059 TUCKERMAN WAY		LOT COV: 39.2 %		APN: 225-151-31
PLAN NO.: 1-B	LOT SQ. FT.: 4,725	REAR YARD COVERAGE: %		LOT 31
DRAWN BY: R.P.	APPROVED BY:	DATE: 5/15/01	SCALE: 1"=20'	