

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0107533  
Insp Area: 4

Site Address: 5077 TUCKERMAN WY SAC  
Parcel No: 225-1510-028 NORTHPT PK 17 LOT 28

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

CONTRACTOR  
JOHN LAING HOMES  
1556 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. 3097, Civ. 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 contractors to construct or improve 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 & P for this reason: \_\_\_\_\_  
Date \_\_\_\_\_ Owner's 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 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 worker's compensation insurance carrier and policy number are:

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

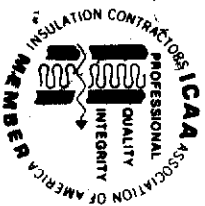
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 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

**69626**

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 King LOT # 28 TRACT # Map 88  
STREET 5077 Tuckermore CITY SMITHLAND

**EXTERIOR WALLS:**

MANUFACTURER Fo THICKNESS/TYPE 3 1/2 VALUE 13

**CEILING:**

BATTS: MANUFACTURER Fo THICKNESS/TYPE 1 1/2 VALUE 30

BLOWN IN: MANUFACTURER Fm THICKNESS/TYPE 1 1/2 VALUE 30

SQUARE FOOTAGE COVERED 1556 NUMBER OF BAGS USED 38

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** \_\_\_\_\_ DATE 11-1-01  
CALIFORNIA CONTRACTORS LICENSE #263784

John King SIGNATURE \_\_\_\_\_ King TITLE \_\_\_\_\_

Lot 28

# OMEGA PRODUCTS CORP.

## DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

5077 TUCKERMAN WY  
SACTO CA 95835

Date of Job Completion 11-30-01

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.

12-13-01  
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.

**RESIDENTIAL BUILDING PERMIT APPLICATION**

New Construction     Addition     Remodels     Other

Project Address: 5077 Tuckerman Way    Assessor Parcel # 225-1510-028

**OWNER INFORMATION:**

Lot 28    0107533

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 # 17

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

**PROJECT INFORMATION:**

Land Use Zone _____	Occupancy Group _____	Construction Type <u>VN</u>	Fed Code <u>A1</u>
No. of stories: <u>1</u>	No. of rooms: <u>8</u>	Street width: _____	
1 <sup>st</sup> Floor Area _____	2 <sup>nd</sup> Floor Area _____	Basement _____	Roof Material _____
<b>AREA IN SQUARE FOOT OF:</b>		<b>EXISTING</b>	<b>NEW</b>
Dwelling/Living		_____	<u>1645</u>
Garage/Storage		_____	<u>417</u>
Decks/Balconies		_____	_____
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) \_\_\_\_\_

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

residentialapp (rev 3/09/99)

# SIGNET

Testing Labs, Inc.

DATE: 8-27-01  
 PROJECT NO: 9953  
 PROJECT: J.B. / CALYPSO Lot #28  
 LOCATION: 5077 TUCKERMAN

DSA FILE/APPL. NO. \_\_\_\_\_  
 OSHPD NO. \_\_\_\_\_  
 PERMIT NO. 0107533  
 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

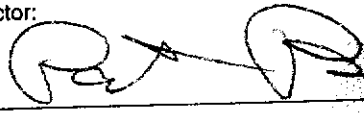
Type of epoxy grout used: \_\_\_\_\_ Method of application / cleaning: AIR / BRUSH  
 Visual inspection was performed on THE PLACEMENT OF TWO 3/4" DIA. FULL THREADS AT HIT-22 LOCATIONS. ALL HOLES WERE 3/4" DIA X 10" MIN. EMBED. AND PRE-DRILLED AND CLEANED

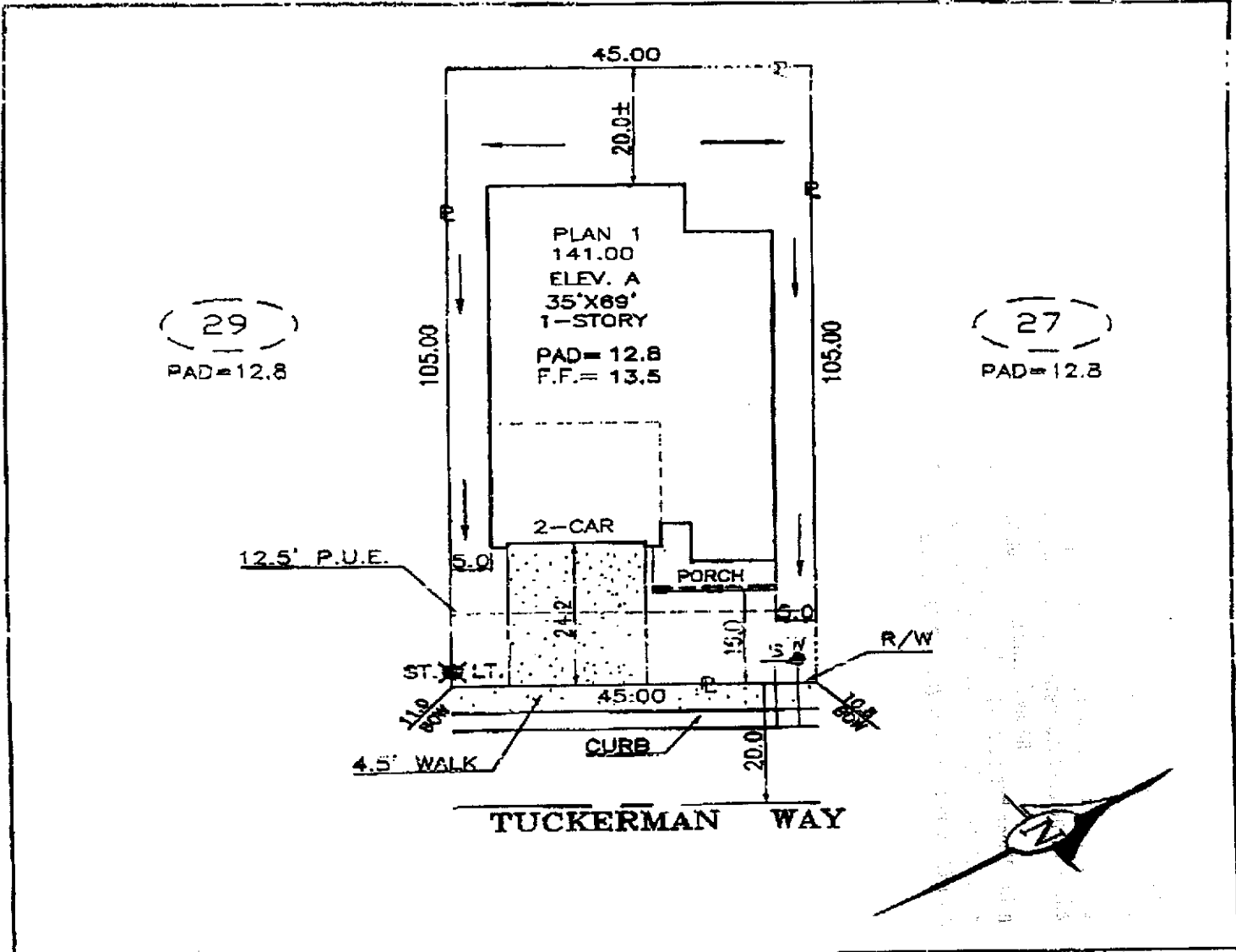
Show up / Stand by time. Job Canceled / Delayed due to: \_\_\_\_\_ at the job site.  
 All non-compliance items were brought to the attention of: \_\_\_\_\_

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: 



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

<b>John Laing Homes</b> 1596 BURRKA ROAD SUITE 100 ROSEVILLE, CALIFORNIA 95671 (TEL.) 916-760-1223 (FAX.) 916-760-1333		CALYPSO NORTHPOINTE PARK VILLAGE NO. 27 CITY OF SACRAMENTO CALIFORNIA	PLOT PLAN NOTES:
ADDRESS: 5077 TUCKERMAN WAY		LOT COV: 39.2%	APN: 225-151-28
PLAN NO.: 1-A	LOT SQ. FT.: 4,725	REAR YARD COVERAGE: %	
DRAWN BY: R.P.	APPROVED BY:	DATE: 5/15/01	SCALE: 1"=20'
			<b>LOT 28</b>