

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0009885
Insp Area: 4

Site Address: 3318 SHEARWATER DR SAC
Parcel No: 274-0550-056 SHOREBIRD UNIT 1 LOT

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

CONTRACTOR
CITATION NORTHERN
597 CENTER AVE. STE. 150
MARTINEZ CA. 94553

OWNER

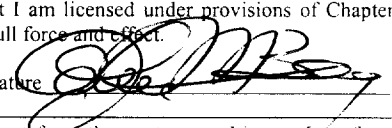
ARCHITECT

Nature of Work: MP2161 2 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 54776A Date 8-24-00 Contractor 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.)

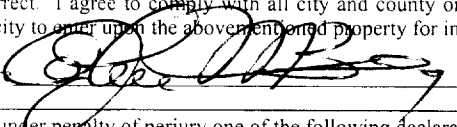
____ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

____ I am exempt under Sec. _____ B & PC for this reason: _____
Date _____ Owner Signature _____

PAID
CITY OF SACRAMENTO
AUG 24 2000
NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

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 8-14-00 Applicant/Agent 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.

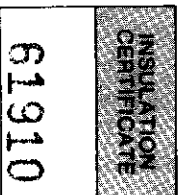
Date 8-24-00 Applicant Signature 

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.



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**



61910

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

Alpha Builders LOT # 75 TRACT # 3

STREET 3318 Shearwater CITY San Francisco

EXTERIOR WALLS:

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE R-

CEILINGS:

BATTS: _____ THICKNESS/TYPE _____ VALUE R-

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE R-

BLOWN IN: 2 1/2" R-15 MINIMUM THICKNESS _____ VALUE 38

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

SQUARE FOOTAGE COVERED 1200 NUMBER OF BAGS USED _____

FLOORS: _____ THICKNESS/TYPE _____ VALUE R-

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS: _____ THICKNESS/TYPE _____ VALUE R-

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

GENERAL CONTRACTOR _____ DATE _____

CALIFORNIA CONTRACTORS LICENSE # _____

INSULATION CONTRACTOR **ARCADE INSULATION** TITLE _____

CALIFORNIA CONTRACTORS LICENSE #263784 DATE 7/1/11

SIGNATURE

TITLE

Lot 75

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 3318 SHEARWATER DRIVE

Assessor Parcel # 274-0550-056

OWNER INFORMATION:

Legal Property Owner: <u>Citation Northern</u>	Phone # <u>(925) 372-0300</u>
Owner Address: <u>597 Center Avenue, #150 City Martinez</u>	State <u>CA</u> Zip <u>94553</u>

CONTRACTOR INFORMATION:

Contractor: <u>Citation Northern Lic. # 547764</u>	Phone # <u>(925) 372-0300</u>	Fax # <u>(925) 228-1833</u>
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PROJECT INFORMATION:

Land Use Zone _____	Occupancy Group _____	Construction Type _____	Fed Code _____
No. of stories: <u>2</u>	No. of rooms: <u>9</u>	Street width: <u>46'</u> R/W	
1 st Floor Area <u>1,281</u>	2 nd Floor Area <u>880</u>	Basement _____	Roof Material <u>TILE</u>
AREA IN SQUARE FOOT OF:		<u>EXISTING</u>	<u>NEW</u>
Dwelling/Living		_____	<u>2,161</u>
Garage/Storage		_____	<u>576</u>
Decks/Balconies		_____	_____
Carports		_____	<u>2737</u>
SCOPE OF WORK: <u>Single Family</u>			<u>Plan 22</u>
			<u>Master</u>

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 # _____

**MATERIALS TESTING, INC./KC ENGINEERING COMPANY
SPECIAL INSPECTION / CONCRETE TESTING
FIELD REPORT & DATA**

Project No. VV072 Client Name: CITATION NORTHERN Date: 2-8-01

Project Name & Location: SHOREBIRDS, SACRAMENTO

Special Inspection/Tests Performed: HD PULL TEST / LOT #75

Foundation Type: 12" PT. MAT Plans by & Date: _____

The following was noted: I PERFORMED PULL-TEST ON 3/8" HTIL W/ATED
(observations, comments & items requiring correction)

ON E. SIDE OF LIVING ROOM FRONT WINDOW (BL-PULL)

USING GAUGE # 9910 (w/ 1250 PSI) FOR LOAD OF 5500. BOLT

HELD FOR 60 SECONDS W/ NO LOSS OF GAUGE PRESSURE.

BOLT IS READY FOR BOLKIT

Material Description:	Strength Requirement (p.s.i.):
Sample Type:	Supplier:
Samples Cast By:	Date Cast:
Laboratory:	Weather: <u>69. 9910 @ 1250 PSI</u>

Test Samples @: 3 Days _____ 5 Days _____ 7 Days _____ 10 Days _____ 14 Days _____ 28 Days _____ Other _____

No. of Cyl.	Mix No.	Location	Air Content (%)	Slump or Kelly Ball	Unit Weight	Air Temp.	Mix Temp.	Ticket No.

To the best of my knowledge work inspected was in accordance with the Building Department approved design drawings, specifications & applicable workmanship provisions of the UBC except as noted above.

INSPECTOR: [Signature] DATE: 2-8-01

MATERIALS TESTING, INC./KC ENGINEERING COMPANY
SPECIAL INSPECTION / CONCRETE TESTING
FIELD REPORT & DATA

Project No. VV 072 Client Name: Citation Northern Date: 2-6-01

Project Name & Location: Shorebirds

Special Inspection/Tests Performed: Bolt pull testing

Foundation Type: PT'S Plans by & Date: _____

The following was noted: ARRIVED ON SITE FOR PULL-TESTING ON HD. BOLTS
(observations, comments & items requiring correction)
ON Lot - 75 Front Wall left side of front door Pulled 4 Bolts
to 5,500# Pulled 1 Bolt out of slab. Next to window
THE OTHER 3 HELD

Material Description:	Strength Requirement (p.s.i.):
Sample Type:	Supplier:
Samples Cast By:	Date Cast:
Laboratory:	Weather:

Test Samples @: 3 Days _____ 5 Days _____ 7 Days _____ 10 Days _____ 14 Days _____ 28 Days _____ Other _____

No. of Cyl.	Mix No.	Location	Air Content (%)	Slump or Kelly Ball	Unit Weight	Air Temp.	Mix Temp.	Ticket No.

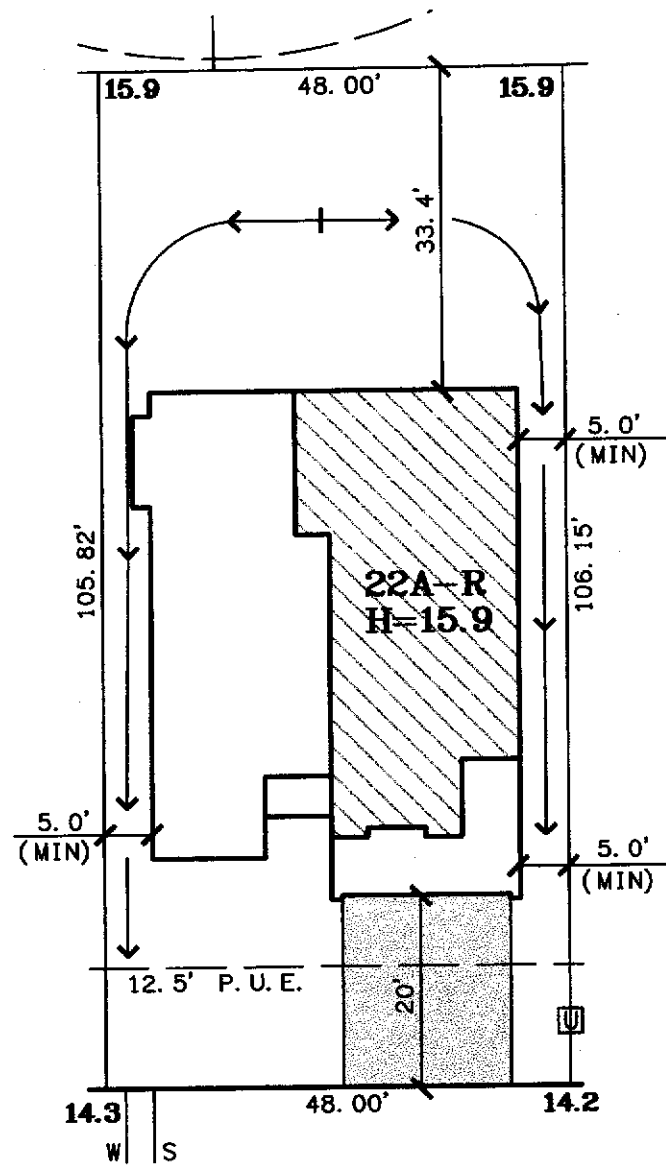
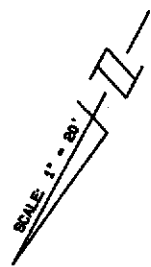
To the best of my knowledge work inspected was in accordance with the Building Department approved design drawings, specifications & applicable workmanship provisions of the UBC except as noted above.

INSPECTOR: [Signature]

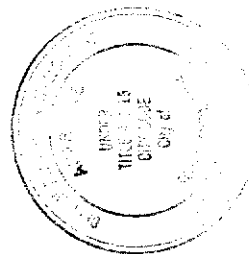
DATE: 2-6-01

Arrive 10:00 Depart 12:00 Travel 1

TOTAL 3



This set of plans and specifications shall be kept on the job at all times and it shall be the responsibility of the contractor to make any changes or additions to the same without written permission from the building inspection division.



DATE: 7-20-00

A.P.N.:

ADDRESS: SHEARWATER DRIVE

LOT AREA: 5,087 SF
LOT COVERAGE: 38%

The Splink Corporation
2590 VENTURE OAKS WAY
SACRAMENTO, CA. 95833
PH (916)925-5550 FAX (916)921-9274

**SHOREBIRD
UNIT NO. 1
LOT 75
PLAN 22A**

SHOREBIRD
CITY OF SACRAMENTO, CA
CLIENT: CITATION NORTHERN
JOB NO.: 1579-001