

**CITY OF SACRAMENTO**

**Permit No: 0006016**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 2**

**Site Address: 7445 MASTERS ST SAC**

**Sub-Type: NSFR**

**Parcel No: LOT 62 LAGUNA VEGA N I**

**Housing (Y/N): N**

**CONTRACTOR**

**OWNER**

**ARCHITECT**

D. R. HORTON INC.  
110 BLUE RAVINE RD STE. 209  
FOLSOM CA. 95630

**Nature of Work: MP 1385 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 750190 Date 6-8-00 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 above mentioned property for inspection purposes.

Date 6-8-00 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 ARGONAUT INS. CO. Policy Number WC62600115505 Exp Date 7/1/2000

\_\_\_\_ (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.

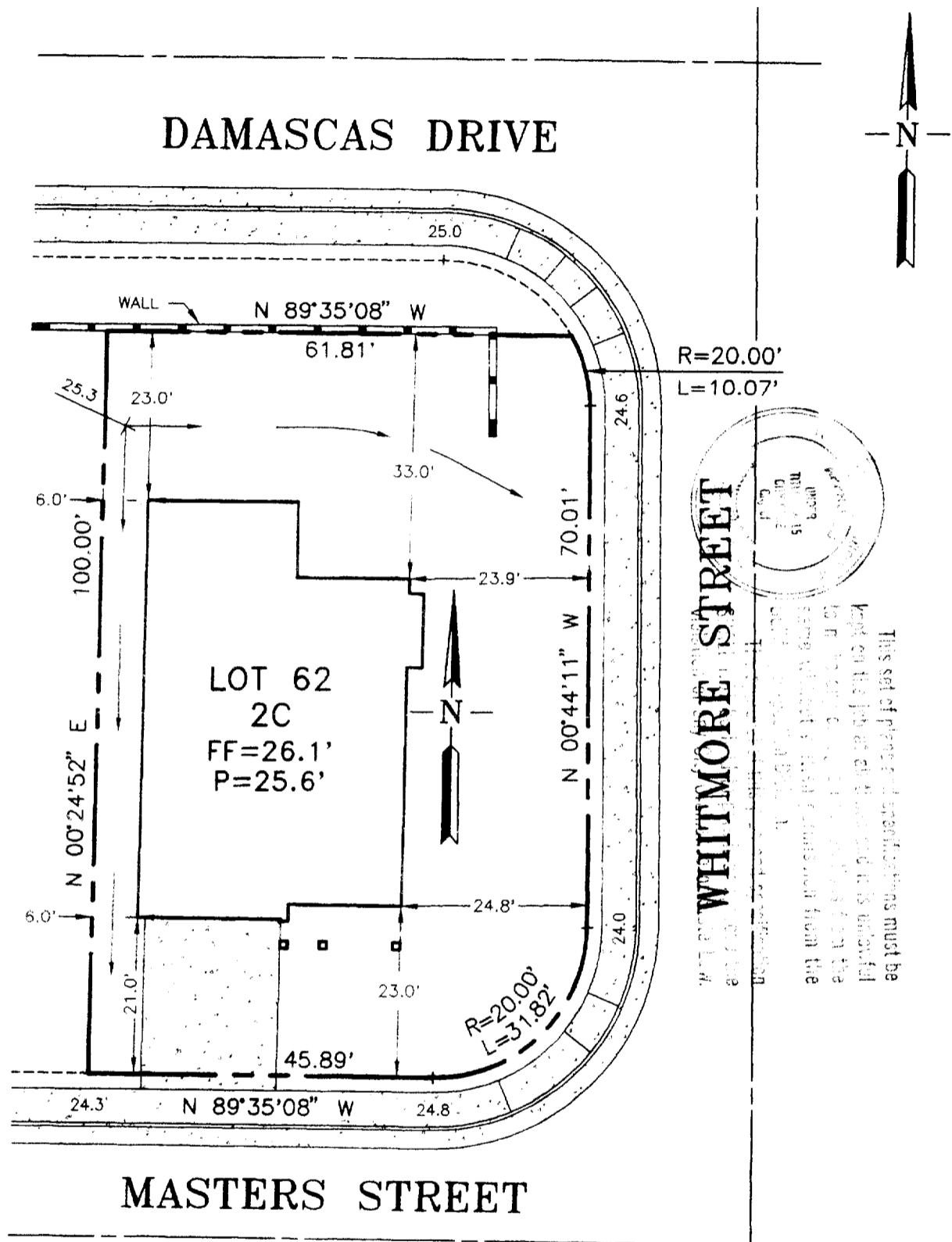
Date 6-8-00 Applicant Signature [Signature]

**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.**

**AREAS:**

HOUSE AND GARAGE = 1,780 SQ.FT.  
 TOTAL LOT AREA = 6,432 SQ.FT.  
 LOT COVERAGE = 27.7 %



This set of plans and specifications must be kept on the job at all times and it is unlawful to remove or alter any part of the same without the consent of the Engineer.

**NOTE:**  
 THE FOOTPRINTS & DIMENSIONS SHOWN HEREON ARE FOR PLANNING PURPOSES & SHOULD ONLY BE USED AS A GUIDE. ACTUAL AS-BUILT CONDITIONS MAY VARY AND ARE BEYOND THE CONTROL OF OURADA ENGINEERING AND D.R. HORTON, INC. MINIMUM SETBACK REQUIREMENTS SHALL BE ADHERED TO AND ALL OTHER DIMENSIONS AS SHOWN MAY BE ADJUSTED ACCORDINGLY.

7445 MASTERS STREET		LOT 62
Phase 4		
LAGUNA VEGA NORTH VILLAGE 1		
SACRAMENTO, CALIFORNIA		
Prepared for D.R. Horton, Inc.		
OURADA ENGINEERING		
3111 SUNSET BLVD., SUITE L ROCKLIN, CA 95677		
SCALE: 1"=20'	DATE: 5/6/2000	JOB#: DR680P4

# OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

7485 Markey St  
Elk Grove 95758

ICBO Report #4004

Date of Job Completion 10/30/00

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.

11-29-00  
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.

# CERTIFICATION OF INSULATION

ADDRESS OR TRACT  <i>D.N. HORTON</i>	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
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LOT # *62*  
 DATE INSULATION COMPLETED *11-3-00*  
*LAGUNA VEGA*

WALLS		CEILINGS			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	
OCF		OCF			OCF	
R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
<i>13</i>	<i>3 5/8"</i>	<i>30</i> <i>30</i>	<i>9"</i> <i>12"</i>			

**KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE**

MATERIAL: <b>FIBERGLASS</b>	FORM: <b>BATTS</b>	R-VALUE: <i>19</i>	MANUFACTURER: <b>OCF</b>
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**AIR INFILTRATION SEALANT**

MATERIAL: <i>FOAM</i>	MANUFACTURER: <b>W R GRACE</b>
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**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 Swartz</i>	TITLE: <b>MANAGER</b>	DATE: <i>10-16-00</i>
SIGNATURE: GENERAL CONTRACTOR	TITLE:	DATE:

REMARKS: