

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0110786  
Insp Area: 2  
Thos Bros:  
Sub-Type: NSFR  
Housing (Y/N): N

Site Address: 7776 DIXIE LOU ST SAC  
Parcel No: 053-0016-026 LOT 26 MEADOWVIEW VILL 7

CONTRACTOR  
NEW FAZE DEVELOPMENT  
2377 GOLD MEADOW WY STE.270  
GOLD RIVER CA. 95670

OWNER

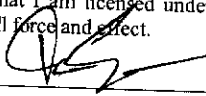
ARCHITECT

Nature of Work: NSFR MP1662 8 RMS 2 STORY

**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 714651 ~~224-9906~~ Date 4-08-03 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.)

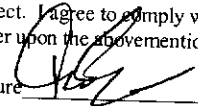
\_\_\_\_ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a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

\_\_\_\_ I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_

Date \_\_\_\_\_ Owner Signature \_\_\_\_\_

**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 aforementioned property for inspection purposes.

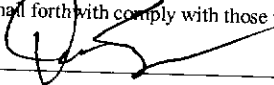
Date 11-13-01 Applicant/Agent Signature 

**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 State Fund Policy Number 1536963-98 Exp Date 7-13-02

\_\_\_\_ (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 be in violation of 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 11-13-01 Applicant Signature 

**WARNING:** FAILURE TO SECURE WORKERS 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.**



## INSTALLATION CARD

# WESTERN ONE KOTE STUCCO SYSTEM WESTERN STUCCO PRODUCTS CO. INC.



Job Address

New Faz : Development

Rainbow Springs Lot: 26

Meadow View & 24th St. Sacramento

ICBO Evaluation Service, Inc.  
Report No. 3899

Date of Job Completion \_\_\_\_\_

Plastering Contractor

Name: G. Glenn Plestaring

Address 6330 Main Ave Suite #4 Orangevale, CA 95662

Telephone Number (916) 989-8755

This is to certify that the plastering 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.

*Gerald Plestaring*  
Signature of authorized representative of plastering contractor

Date \_\_\_\_\_

Installation card must be presented to the building inspector after completion of work and before final inspection.

NO \_\_\_\_\_

# CERTIFICATION OF INSULATION

ADDRESS OR TRACT

*NEW FADE* LOT # *26*

*RAINBOW SPRINGS*

SACRAMENTO BUILDING PRODUCTS

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1631, RENO, NV 89505 LIC. #10675
- 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

DATE INSULATION COMPLETED

*5-22-02*

PART I GENERAL

PART II AREAS INSULATED

PART III CERTIFICATION

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					
CT	OC	JM	CT	OC	JM	CT	OC	JM			
			BAGS								
R-VALUE INSTALLED	APPLIED THICKNESS		R-VALUE INSTALLED	APPLIED THICKNESS		MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS			
<i>13 19</i>	<i>3 7/8 5 1/4</i>		<i>38 38</i>	<i>12 14 3/4</i>							
<b>KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE</b>											
MATERIAL <b>FIBERGLASS</b>			FORM <b>BATTS</b>			R VALUE			MANUFACTURER		
									CT	OC	JM
<b>AIR INFILTRATION SEALANT</b>											
MATERIAL <i>FOAM</i>						MANUFACTURER					
						<b>HILTI</b>			<b>HANDY FOAM</b>		
<b>THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.</b>											
SIGNATURE — INSULATION CONTRACTOR <i>[Signature]</i>						TITLE <b>MANAGER</b>			DATE <i>5-24-02</i>		
SIGNATURE — GENERAL CONTRACTOR <i>[Signature]</i>						TITLE			DATE		
REMARKS											

**Certification of Compliance**  
School District Development

**Part I—To be completed by the APPLICANT**

Owner's Name/Address NEWFAZE LLC 3187 112 1950 BLVD SANTA CA 95515  
Project Address 7776 VINIE LOU ST. INDEPENDENCE CA 95832  
Parcel Number 253-0010-620 Lot No. 26  
Subdivision Name FANDEW SIMMONS No. of Units 69  
Applicant's Signature [Signature] Title Unit Super  
Phone No. 531-3211 Date 1/11/01

**Notice to Applicant:** Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

**Part II—To be completed by the BUILDING DEPARTMENT**

Plan Identification Number 162  
Building Type (check one)  Residential  Apartment/Condominium  Commercial/Industrial  
Square Feet of Chargeable Building Area 162  
Signature/Title [Signature] Date 10-27-01

**Part III—To be completed by the SCHOOL DISTRICT**

School District 20013 Certificate No. 1210  
 Exempt Comments \_\_\_\_\_  
Residential/Apartment/etc. \_\_\_\_\_ Square ft. x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Commercial/Industrial \_\_\_\_\_ Square ft. x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Total fees collected..... = \$ 2858.64

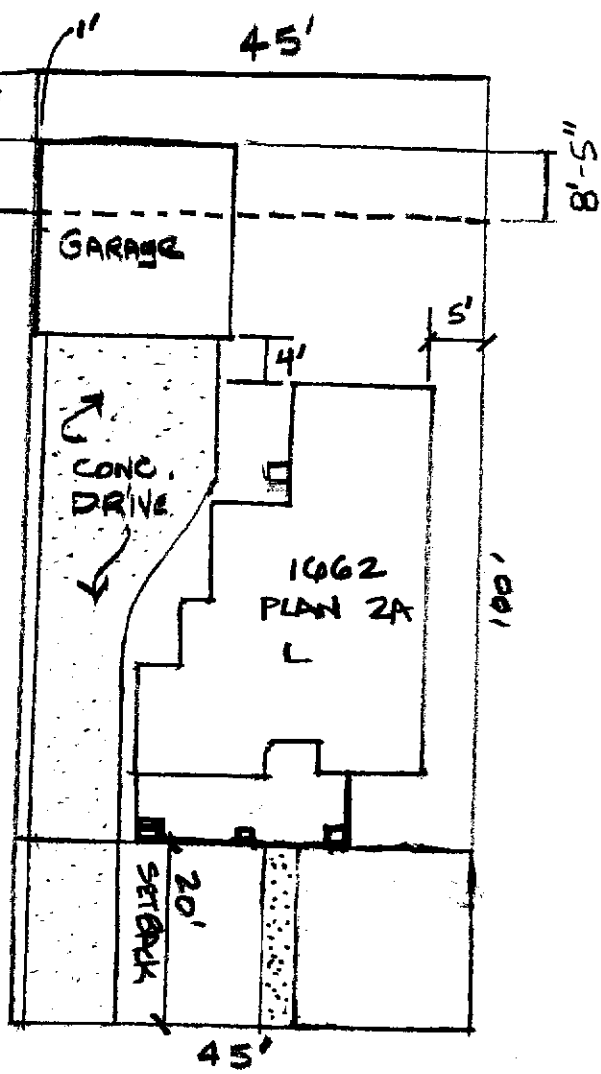
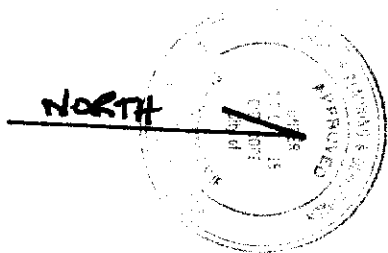
*This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.*

*As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.*

Signature [Signature] Date 10/29/01

REAR YARD COVERAGE  
(25% MAX OF REAR 15')

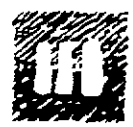
15' x 45' = 675 sq ft  
 168 = 25% of 675  
 8'-5" x 20 = 168



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Department.  
 The undersigned hereby certifies that this plan and specification were prepared by him or under his direct supervision and that he is a duly licensed and registered architect or engineer or a duly licensed and registered civil engineer or a duly licensed and registered professional geologist or a duly licensed and registered professional land surveyor or a duly licensed and registered professional engineer in the State of California.

House - 897 S.F. (Coverage)  
 Garage - 420 S.F. (Coverage)  
 Porch - 129 S.F. (Coverage)  
 LOT AREA : 4,500 S.F.  
 LOT COVERAGE : 32.1%

DATE: Jan 22, 00  
 A.P.N.:  
 ADDRESS:



MOGAVERO  
 NOTESTINE  
 ASSOCIATES  
 2229 J ST.  
 SACRAMENTO, CA.  
 PHONE: (916) 448-1038  
 FAX: (916) 448-7294

Rainbow Springs  
 NEW FAZE DEVELOPMENT, INC.  
 PLAN 2A L

Rainbow Springs  
 LOT # 26  
 APN: 053-0016-026  
 1062 PLAN