

**CITY OF SACRAMENTO**

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

**Permit No: 0000638**

**Insp Area: 4**

**Site Address: 130 GROTH CR SAC**

Parcel No: 225-1380-033

LOT 33 GATEWAY WEST 6

Sub-Type: NSFR

Housing (Y/N): N

**CONTRACTOR**

BEAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

**OWNER**

**ARCHITECT**

**Nature of Work: NSFR MP1659 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. 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 24191 Date 2/10/00 Contractor Signature Sheyf VanMaen

**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 the above purposes.  
Date 2/10/00 Applicant/Agent Signature Sheyf VanMaen

**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.

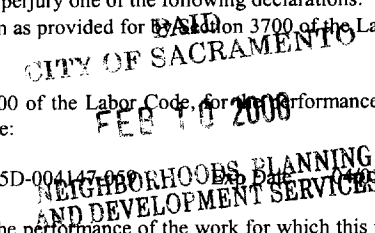
I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:  
Carrier LIBERTY MUTUAL INS CO. Policy Number WA2-65D-004147-060 Date 02/09/2000

\_\_\_\_ (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.

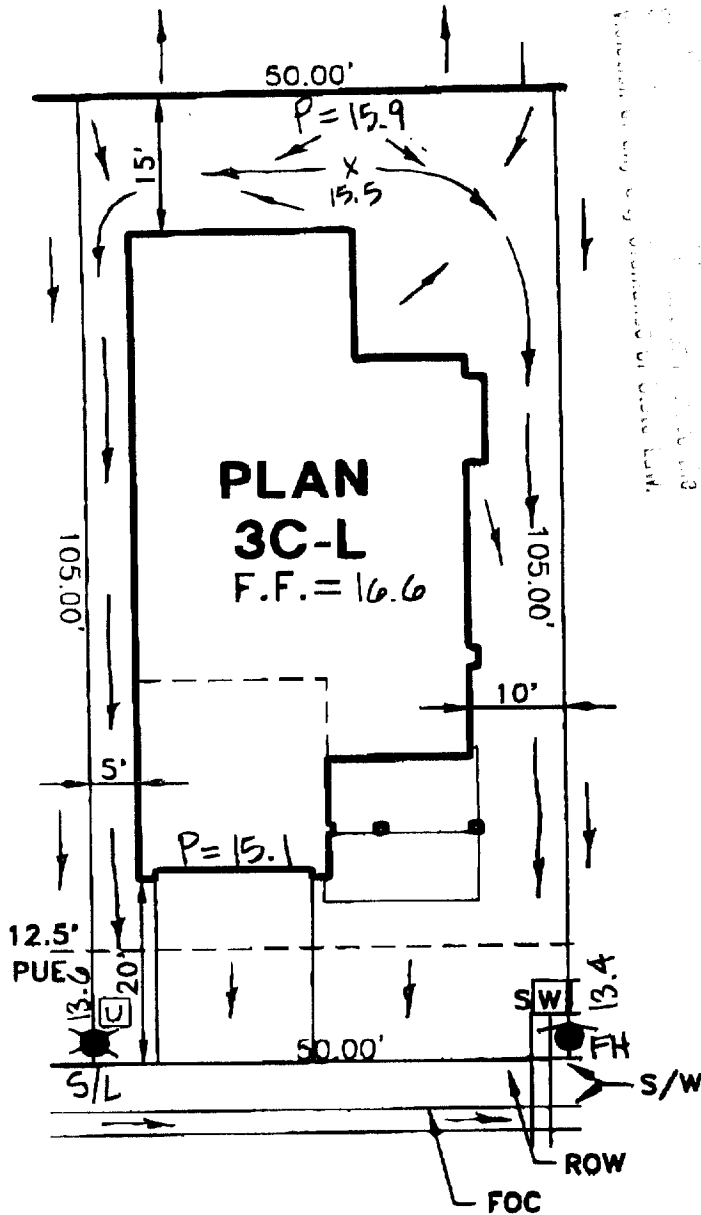
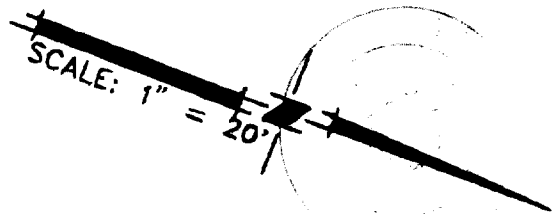
Date 2/10/00 Applicant Signature Sheyf VanMaen

**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.**



THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALL ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.



ROUTING/APPROVAL		
	✓	INITIALS
President		
Project Development		
Construction	✓	<i>[Signature]</i>
	✓	<i>[Signature]</i>

### GROTH CIRCLE

☐ = UTILITY SERVICE BOX

LOT COVERAGE = 40%

**PLOT PLAN**  
**LOT 33**  
 GATEWAY WEST VILLAGE NO.6  
 FOR  
 BEAZER HOMES  
 SACRAMENTO COUNTY CALIFORNIA

**WOOD-RODGER INC.**

DATE: DEC.1999	DRAWN: DPB	CHECKED: JWH 12-30-99	PROJECT NO: BEZ-026
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H:\DRAWINGS\GATEWAY\6\PLOTPANS\LOT33.DWG 12/22/99 09:34

**KWIKKOTE**  
STUCCO SYSTEM  
INSTALLATION CARD

20670  
Beazer  
Reflections, Lot 6033  
130 Groth Cir. Sacramento

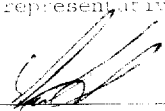
Stucco System Trade Name: KWIK KOTE  
Name Stucco Manufacturer: KWIK KOTE CORP  
ICBO Evaluation Service, Inc. Report No. 3607  
Date of Job Completion \_\_\_\_\_

Stucco Contractor Kenyon Plastering, Inc.  
Name John W. Kenyon, III  
Address P.O. Box 2077  
North Highlands, CA 95660  
Telephone # (916) 349-8191

Approved Contractor Number as issued by the Stucco Manufacturer: 1

This is to certify that the stucco system on the building exterior at the above address had been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

Signature of authorized representative of stucco contractor:



Date: 6/12/2008

Builder Copy

# CERTIFICATION OF INSULATION

PART I GENERAL  
PART II AREAS INSULATED  
PART III OTHER

ADDRESS OR TRACT

SACRAMENTO INSULATION CONTRACTORS

130 brook Cir

LOT # 33

- 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

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	
<b>OCF</b>		<b>OCF</b>			<b>OCF</b>	
<b>R - VALUE INSTALLED</b>	<b>APPLIED THICKNESS</b>	<b>R - VALUE INSTALLED</b>	<b>APPLIED THICKNESS</b>	<b>MIN. INSTALLED WEIGHT PER SQUARE FOOT</b>	<b>R - VALUE INSTALLED</b>	<b>APPLIED THICKNESS</b>
13		30 30				
<b>KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE</b>						
MATERIAL	FORM	R VALUE		MANUFACTURER		
<b>FIBERGLASS</b>	<b>BATTS</b>			<b>OCF</b>		
<b>AIR INFILTRATION SEALANT</b>						
MATERIAL				MANUFACTURER		
<b>Foam</b>				<b>W R GRACE</b>		

**THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.**

SIGNATURE - INSULATION CONTRACTOR	TITLE	DATE
	MANAGER	5-2-00
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

### RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction

Addition

Remodels

Other

Address: 130 Groth Cir Lot 33

Assessor Parcel # \_\_\_\_\_

#### OWNER INFORMATION:

Legal Property Owner: Beazer Homes Phone # 773-3888  
 Owner Address: 3009 Douglas Boulevard City Roseville State CA Zip 95661

#### CONTRACTOR INFORMATION:

Contractor: Beazer Homes Lic. # 724191 Phone # 773-3888 Fax # 773-0425

#### PROJECT INFORMATION:

Land Use Zone \_\_\_\_\_ Occupancy Group \_\_\_\_\_ Construction Type \_\_\_\_\_ Fed Code \_\_\_\_\_  
 No. of stories: 1 No. of rooms: \_\_\_\_\_ Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1659 2<sup>nd</sup> Floor Area 0 Basement 0 Roof Material \_\_\_\_\_

#### AREA IN SQUARE FOOT OF:

**EXISTING**

**NEW**

Dwelling/Living	_____	_____
Garage/Storage	_____	<u>4100</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: new SFD

#### FOR OFFICE USE ONLY

- Information above complete
- Violation files checked
- Standard setbacks
- County Sewer
- AR Flood Waiver required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply: \_\_\_\_\_

#### NEW STRUCTURES & ADDITIONS

❖ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

- 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE
- 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA
- Title 24 Energy Compliance documentation
- Grading and Erosion Control Questionnaire
- ❖ Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures.
- 11" x 17" copy of floor plan for County Assessor
- Plan Review Fees

Date: \_\_\_\_\_

Received by: (staff) \_\_\_\_\_

**ACTIVITY/PERMIT #**

\_\_\_\_\_