

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0100570  
Insp Area: 2

Site Address: 7740 LARAMORE WY SAC  
Parcel No: 053-0160-057

Sub-Type: NSFR  
LOT 57 MEADOWVIEW VILL 7 Housing (Y) N

**CONTRACTOR**

**ARCHITECT**

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

Nature of Work: NSFR MP1624 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 7 (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 **714121** Date **6-1-01** 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 thereof 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 Professions 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 has provided 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 improvements 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 **6-1-01** Applicant/Agent Signature 

**WORKER'S COMPENSATION DECLARATION**: I hereby affirm under penalty of perjury one of the following declarations  
I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this 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 farm** Policy Number **1536963-98** 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 **6-1-01** 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 Faze Development, Inc.

Rainbow Springs, Lot - 57

Sacramento, CA

ICBO Evaluation Service, Inc.  
Report No. 3899

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

Plastering Contractor

Name: C. Glenn Plastering

Address: 6310 Main Ave., #4, Orangetown, CA

Telephone Number (916) 939-8755

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.

Dolores Glenn

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 Compliance**  
School District Development

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

Owner's Name/Address NEW FAZE DEVELOPMENT  
Project Address 7740 CARAMORE WAY  
Parcel Number 053-0016-057 Lot No. 57  
Subdivision Name RAINBOW SPRINGS No. of Units 1  
Applicant's Signature Clark Hammond Title owner  
Phone No. (916) 924-7906 EXT. # 208 Date 6-1-2001

**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 MP - 1624  
Building Type (check one)  Residential  Apartment/Condominium  Commercial/Industrial  
Square Feet of Chargeable Building Area 1624  
Signature/Title [Signature] Date 6-1-2001

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

School District WSPD Certificate No. 1101  
 Exempt Comments \_\_\_\_\_  
Residential/Apartment/etc. \_\_\_\_\_ Square ft. x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Commercial/Industrial \_\_\_\_\_ Square ft. x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Total fees collected..... = \$ 2793.28

*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 6/1/01

# CERTIFICATION OF INSULATION

PART I GENERAL

ADDRESS OR TRACT

SACRAMENTO INSULATION CONTRACTORS

*New FAZE DEV.  
Rumbo SPRING  
Sacto., CA*

LOT # *37*

- 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

PART II AREAS INSULATED

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	
<b>OCF</b>		<b>OCF</b>			<b>OCF</b>	
		BAGS				
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 1/2"</i>	<i>38</i> <i>38 BATT</i>				

KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE

MATERIAL	FORM	R VALUE	MANUFACTURER
<b>FIBERGLASS</b>	<b>BATTS</b>		<b>OCF</b>

AIR INFILTRATION SEALANT

MATERIAL	MANUFACTURER
<i>FOAM</i>	<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 <i>JEFF CABLE</i>	TITLE MANAGER	DATE
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS:

NEW FAZE DEVELOPMENT, INC.  
 3187 DEL PASO BLVD  
 SACRAMENTO, CA 95815

OFFICE:

(916) 924-9906

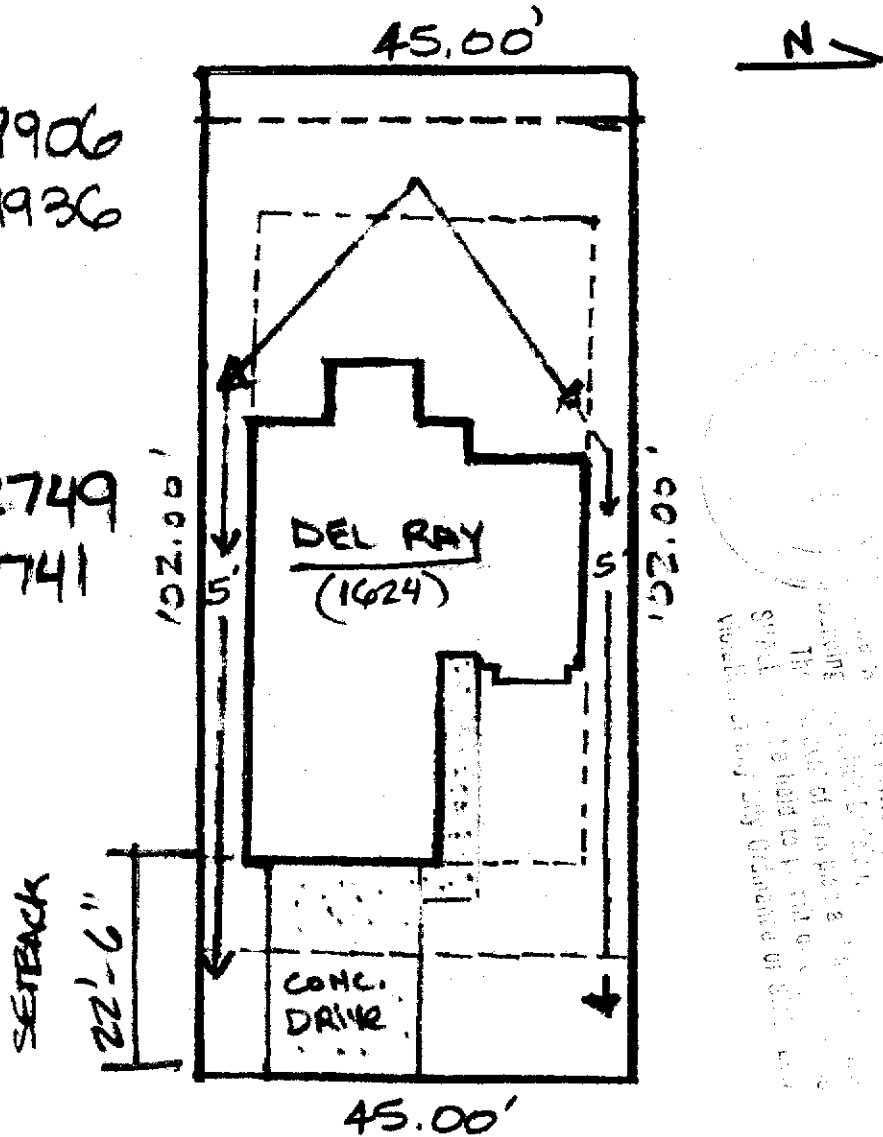
Fax (916) 924-9936

SITE:

(916) 421-2749

(916) 421-2741

Fax



*[Faint, illegible text, possibly a stamp or official notice]*

RAINBOW SPRINGS  
 LOT # 57 PLAN # 1624  
 7740 LARAMORE WAY, SACRTO  
 APN: 053-0016-057  
 SCALE 1" = 20' =