

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9907487
Insp Area: 4

Site Address: 40 CAFARO CR SAC
Parcel No: GATEWAY WEST LOT 68

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

CONTRACTOR
BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: MP 2123 1 STORY 8 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 B3 License Number 724191 Date 7/13/99 Contractor Signature Sheryl VanMaren

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 abovementioned property for inspection purposes.

Date 7/13/99 Applicant/Agent Signature Sheryl VanMaren

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.

X 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-004147-059 Exp Date 04/01/2000

____ (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 7/13/99 Applicant Signature Sheryl VanMaren

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.

CERTIFICATION OF INSULATION

PART I GENERAL

BENZER
40 Cafaro
MEMORIES

LOT # **68**

- 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

10-18-99

PART II AREAS INSULATED

WALLS	CEILINGS	FLOORS
(SQUARE FEET)	(SQUARE FEET)	(SQUARE FEET)
TYPE OF INSULATION	TYPE OF INSULATION	TYPE OF INSULATION
MATERIAL FIBERGLASS	MATERIAL FIBERGLASS	MATERIAL FIBERGLASS
FORM BATTS	FORM BATTS & BLOW	FORM BATTS
MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.
OCF	OCF	OCF
	BAGS	

13	35 1/4"	38 38	12 1/4" 14 3/4"			
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MATERIAL FIBERGLASS	FORM BATTS	R VALUE	MANUFACTURER OCF
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MATERIAL FOAM	MANUFACTURER W R GRACE
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INSULATION SHALL BE INSTALLED IN CONFORMANCE WITH ALL APPLICABLE CODES.

SIGNATURE - INSULATION CONTRACTOR <i>[Signature]</i>	TITLE MANAGER	DATE 9-15-99
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

Natomas Unified School District
 1515 Sports Drive, #1 • Sacramento, CA 95834-1905
 Phone 916/641-3300 • Fax 916/928-1629

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

Property Owner's Name		Beazer Homes	
Owner's Address		3009 Douglas Blvd., Ste. 150, Roseville, CA. 95661	
Project Address	40 CAFARO CIR	Lot 68	
Parcel Number	225-0140-019		
Subdivision Name	Gateway West (Memories)		
Number of Units	1		
Print Applicant's Name	Sheryl Van Maren	Applicant's Signature	<i>Sheryl Van Maren</i>
Title of Applicant	1		
Date	6/7/99	Telephone Number	773-3888
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT			
Plan Identification Number	2123		
Building Type (Check One)	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Apartment/Condominium <input type="checkbox"/> Commercial/Industrial		
Square Feet of Chargeable Building Area	2123		
Signature	<i>[Signature]</i>		
Title	Date 7-8-99		
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT			
District Certification Number	CC-031		
Fees Collected:			
Residential:	2123	Sq. Ft. X \$ 4.57	= \$ 9702.11
Apartment/Condominium:		Sq. Ft. X \$	= \$
Commercial/Industrial:		Sq. Ft. X \$	= \$
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, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.			
Applicant Signature:	<i>Sheryl Van Maren</i>		Date: 6/7/99

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: *[Signature]* DATE: 7/8/99
 TITLE: EPIC

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE amt
 PERMIT AND CALCULATION SHEET

APPLICATION NO: <u>City</u>	BLDG PERMIT NO: <u>City</u>
GENERAL INFORMATION	THIS PERMIT GOOD ONLY WHEN DEPT 28 VALIDATED BY THE CASHIER T# TRAN 392870 07/07/99 RECEIPT 707814 C#1 \$2,414.00 252.736 7/10/99 THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>	
CSD-1	29.00	COMMERCIAL USE	UNITS
SRCSO			
CONSTRUCTION	2,385.00		
IN-LIEU			
TOTAL FEE	2,414.00		

APN: 225-0140019

DESCRIPTION/
 SUBDIVISION Gateway West (Memories) LOT: 68

PROPERTY ADDRESS 40 Cafaro Circle

OWNER Beaver Homes

MAILING ADDRESS 3009 Douglas Blvd., Ste. 150

CITY-STATE-ZIP Roseville, CA. 95661 PHONE 773-3888

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE Sherry Van Meter

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

SEE REVERSE SIDE

No 18509



INSTALLATION CARD

Job Address:

*Beazer - Menlo Park
101st St. San Carlos CA
95070*

Stucco System Trade Name: KWIK ROCK
Name Stucco Manufacturer: KWIK ROCK CORP
ICBO Evaluation Service, Inc.
Report No. 3607
Date of Job Completion: *10-8-99*

Stucco Contractor: Kenyon Construction

Name: John W. Kenyon, III

Address: P.O. Box 2077

North Highlands, CA 95660

Telephone Number: (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.

8/29/99

Date

Signature of authorized representative of stucco contractor

CERTIFICATION OF INSULATION

TRAP II SAVED INSULATION DETAILS

ADDRESS OR TRACT: **SACRAMENTO INSULATION CONTRACTORS**

LOT # **68** **BEAZER** **MEMORIES**

DATE INSULATION COMPLETED: **10-18-99**

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

WALLS	CEILING	FLOORS
() SQUARE FEET TYPE OF INSULATION FIBERGLASS MATERIAL BATTS FORM MANUFACTURER'S PRODUCT ID BATTS MANUFACTURER	() SQUARE FEET TYPE OF INSULATION FIBERGLASS MATERIAL BATTS & BLOW FORM MANUFACTURER'S PRODUCT ID BATTS MANUFACTURER	() SQUARE FEET TYPE OF INSULATION FIBERGLASS MATERIAL BATTS FORM MANUFACTURER'S PRODUCT ID BATTS MANUFACTURER
R-VALUE INSTALLED 13 APPLIED THICKNESS 3 5/8"	R-VALUE INSTALLED 38 APPLIED THICKNESS 1 1/2"	R-VALUE INSTALLED 12 1/4" APPLIED THICKNESS 1 1/4"

MATERIAL FIBERGLASS **FORM** BATT **R VALUE** OCF

MATERIAL AIR INFILTRATION SEALANT **MANUFACTURER** W R GRACE

MATERIAL FOAM

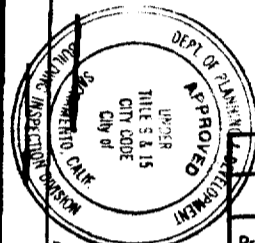
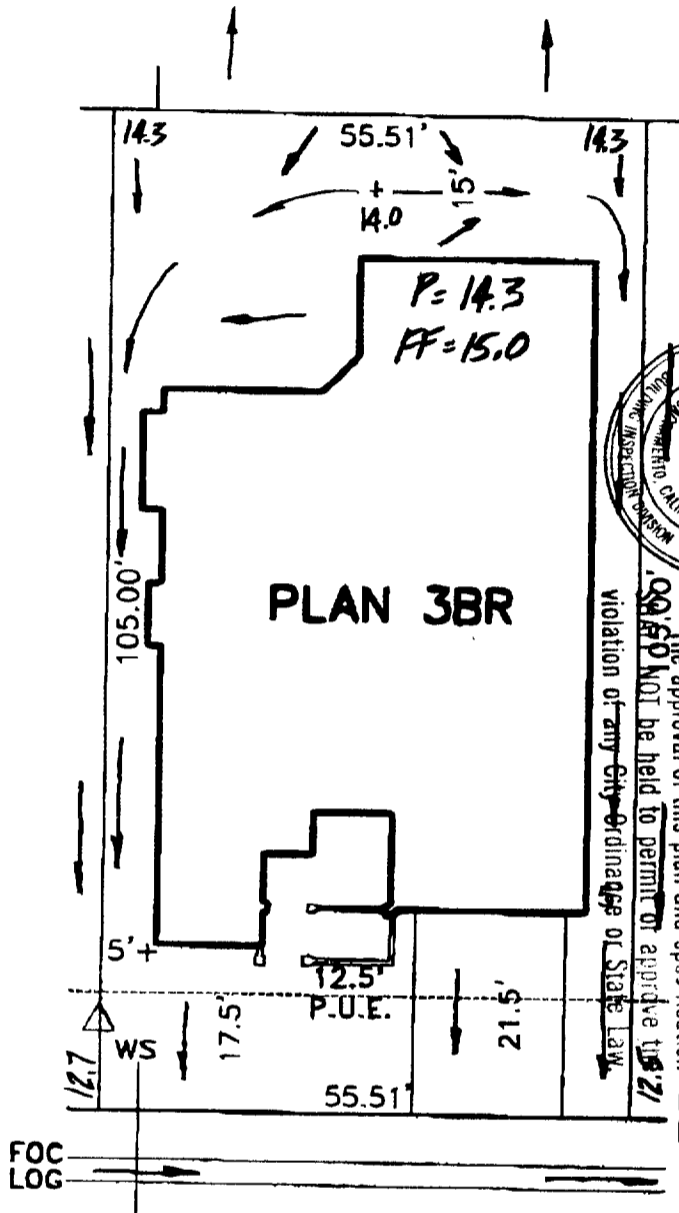
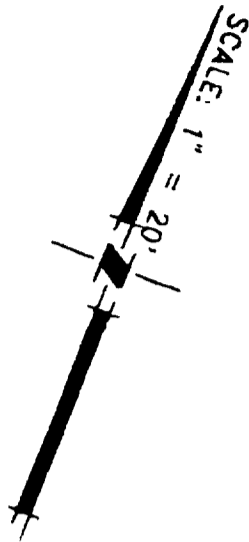
THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES.

SIGNATURE-INSULATION CONTRACTOR: *[Signature]* TITLE: _____ DATE: _____

SIGNATURE-GENERAL CONTRACTOR: _____ TITLE: _____ DATE: **9-15-99**

REMARKS: _____

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINE, DESIGN DRAINAGE CONTROL ELEVATIONS, AND DIRECTION OF DRAINAGE FLOW TO CONFORM WITH LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN IS APPROXIMATE EXCEPT FOR THOSE SETBACKS WHICH ARE MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.



ROUTING/APPROVAL		INITIALS
President	<input checked="" type="checkbox"/>	
Project Development	<input type="checkbox"/>	
Construction	<input checked="" type="checkbox"/>	(Signature)
Marketing	<input checked="" type="checkbox"/>	(Signature)

The approval of this plan and specification shall NOT be held to permit or approve the violation of any City Ordinance or State Law.

The approval of this plan and specification to make any changes or alterations from the same without written permission from the Building Inspection Division.

CAFARO CIRCLE

△ = UTILITY TRANSFORMER

LOT COVERAGE = 42%

PLOT PLAN
LOT 68
GATEWAY VILLAGE 2
 FOR
BEAZER HOMES
 SACRAMENTO CALIFORNIA

WOOD-RODGER INC.

DATE: MAY, 1999	DRAWN: P.D.M.	PROJECT NO: 99BEZ-022
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JWH 5-28-99