

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0105351
Insp Area: 4

Site Address: 2084 RIGGS AV SAC
Parcel No: 225-1400-090 NORTHPT PK 8-2 LOT 40

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

CONTRACTOR
MOURIER JOHN CONSTRUCTION INC.
1830 VERNON ST
SUITE 9 95687

OWNER

ARCHITECT

Nature of Work: NSFR MP2400 2 STORY 10 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 613004 Date 5/2/01 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 abovementioned property for inspection purposes.

Date 5/2/01 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 STATE COMPENSATION INS FUND Policy Number 156326600 Exp Date 10/01/2001

_____, (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 _____ 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.



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**

INSULATION
CERTIFICATE

41331

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

John Maurier LOT # 40 TRACT # _____

STREET 2094 Riggs Ave CITY Sac

EXTERIOR WALLS:

MANUFACTURER F/G THICKNESS/TYPE 3 1/8 VALUE 13

CEILING:

BATTS: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE R-

BLOWN IN: MANUFACTURER Insul 4 MINIMUM THICKNESS 12 VALUE R- 30

SQUARE FOOTAGE COVERED 1365 NUMBER OF BAGS USED 20

FLOORS: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE R-

SLAB ON GRADE: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE R-

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE R-

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

GENERAL CONTRACTOR _____ DATE _____

CALIFORNIA CONTRACTORS LICENSE # _____

INSULATION CONTRACTOR **ALCAL INSULATION** TITLE _____

CALIFORNIA CONTRACTORS LICENSE #266583 DATE 10-9-01

Alcal SIGNATURE TITLE insulator

#40
OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

S.M.C. Court Yard
2084 RIGGS AVE.

ICBO Report #4004

Date of Job Completion 10/1/01

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.

10/3/01
Date

[Signature]
Signature of authorized representative of
Plastering Contractor

This installation card must be submitted to the building inspector after completion of work and before final inspection.

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 2084 Riggs
 Lot Number: 40

Assessor Parcel # 225 1400 090
 Subdivision _____

OWNER INFORMATION:

Legal Property Owner: _____	Phone# _____	
Owner Address: _____	City _____	State _____ Zip _____

CONTRACTOR INFORMATION:

Contractor: <u>JMC</u>	Lic. # _____	Phone # _____	Fax _____
------------------------	--------------	---------------	-----------

PROJECT INFORMATION:

Land Use Zone <u>R1A</u>	Occupancy Group <u>R3</u>	Construction Type <u>VN</u>	Fed Code <u>1A</u>
No. of Stories: _____	No. of Rooms: _____	Street Width: _____	
1 st Floor Area _____	2 nd Floor Area _____	Basement _____	Roof Material _____
AREA IN SQUARE FOOT OF:			
	Dwelling/Living	<u>2400</u>	
	Garage/Storage	<u>579</u>	
	Decks/Balconies	<u>64</u>	
	Carports	_____	
SCOPE OF WORK: _____			

FOR OFFICE USE ONLY

- | | | |
|---|---|---|
| <input type="checkbox"/> Information Above Complete | <input type="checkbox"/> AR Flood Waiver Required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation Files Checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval |
| <input type="checkbox"/> Standard Setbacks | <input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Special Fee Districts Apply: |
| <input type="checkbox"/> County Sewer | | _____ |

~THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT~

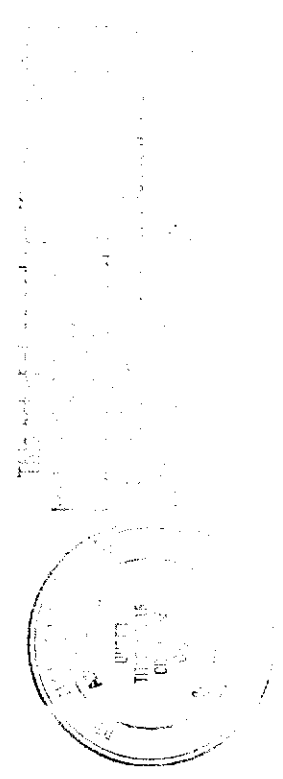
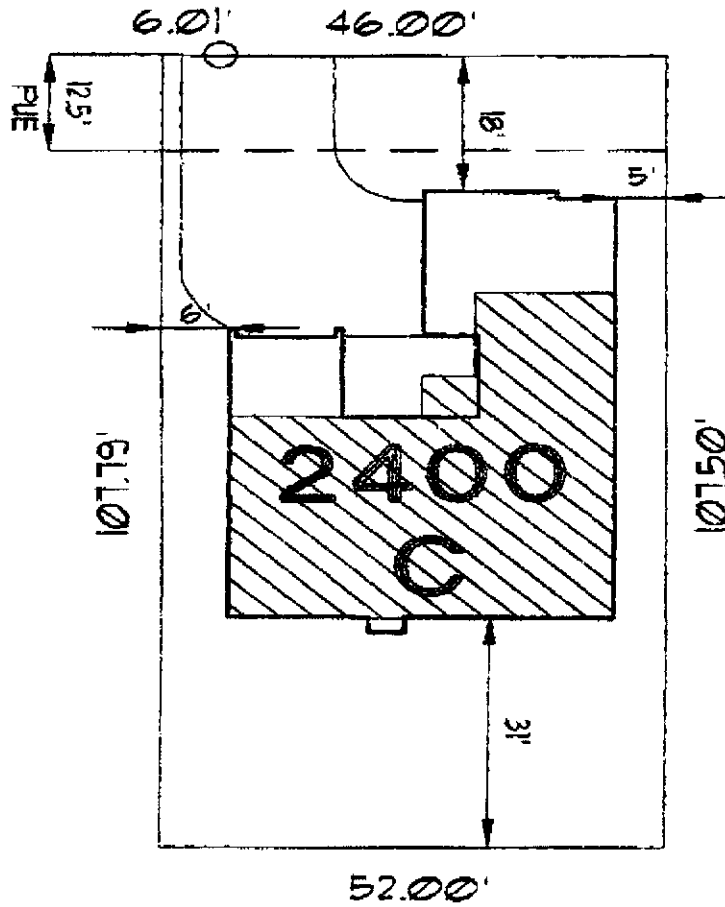
- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION

a) Assessors Parcel Number	c) Owners Name
b) New Floor Area	d) Project Address

NORTHPOINTE 8-2



RIGGS AVENUE



LOT: 40 SITE ADDRESS: 2084 RIGGS AVENUE

WHEN USED FOR SALES OR CONTRACT PURPOSES THIS DOCUMENT DOES NOT GUARANTEE ANY DIMENSIONS, DISTANCES, BEARINGS OR SETBACKS. JMC RESERVES THE RIGHT TO MAKE CHANGES AT ANY TIME WITHOUT PRIOR NOTICE AND IS NOT RESPONSIBLE FOR IRREGULARITIES OR DIFFERENCES IN ACTUAL OR "AS-BUILT" LOT CHARACTERISTICS.

SCALE: 1"=20'
LOT SIZE: 5605 +/-
 NPB-2P40 DH 4-4-01

COVERAGE:
 APN: 225-140-090
 1830 VERMONT ST. S.W.
 ROSEVILLE, CA 95678
 916-782-8903
 CA. L.P. 070004

3-CAR L
JMC HOMES