

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0100181

Insp Area: 2

Site Address: 8501 TAMBOR WY SAC

Parcel No: 117-1370-059

JACINTO N 3 LOT 109

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 724191 Date 1/29/01 Contractor Signature Sheyl 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 improvement is 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 does such work himself or herself or through his/her own employees, provided that such improvement is 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 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 1/29/01 Applicant/Agent Signature Sheyl 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 WA2-651-004147-080 Exp Date 04/01/2001

(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 1/27/01 Applicant Signature Sheyl 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.

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 3850 ~~Timber Way~~ Lot 109 Assessor Parcel # 117 1370 059

OWNER INFORMATION:

Legal Property Owner: <u>Beazer Homes Holdings Corp.</u>	Phone # <u>916-773-3888</u>
Owner Address: <u>3009 Douglas Blvd. 150</u> City <u>Roseville</u> State <u>CA</u> Zip <u>95661</u>	

CONTRACTOR INFORMATION:

Contractor: <u>Same as above</u>	Lic. # <u>B724191</u>	Phone # <u>773-3888</u>	Fax # <u>773-0425</u>
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PROJECT INFORMATION:

Land Use Zone _____	Occupancy Group _____	Construction Type _____	Fed Code _____
No. of stories: <u>1.05</u>	No. of rooms: _____	Street width: _____	
1 st Floor Area <u>1</u>	2 nd Floor Area _____	Basement _____	Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1659</u>
Garage/Storage	_____	<u>400</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: Single Family Homes

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		

NEW STRUCTURES & ADDITIONS

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

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

Date _____

Received by: (staff) _____

ACTIVITY/PERMIT #

KWIKKOTE
STUCCO SYSTEM
INSTALLATION CARD

21419
BEAZER HOMES
BELLEFLEUR II LOT 104
8552 TAMBOR WAY 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: 5-8-01

Subcontractor Copy

CERTIFICATION OF INSULATION

ADDRESS OR TRACT

SACRAMENTO INSULATION CONTRACTORS

BEAZER

1000 09

- 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

BELLE FLEUR

DATE INSULATION COMPLETED

5/23/01

PART I GENERAL PART II AREAS INSULATED

WALLS (SQUARE FEET)		CEILING (SQUARE FEET)			FLOOR (SQUARE FEET)	
TYPE OF INSULATION		TYPE OF INSULATION			TYPE OF INSULATION	
MATERIAL	FORM	MATERIAL	FORM	MATERIAL	FORM	MANUFACTURER'S PRODUCT ID
FIBERGLASS	BATTS	FIBERGLASS	BATTS & BLOW	FIBERGLASS	BATTS	
MANUFACTURER		MANUFACTURER			MANUFACTURER	
OCF		OCF			OCF	
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
13	3 5/8	30	9 1/2			
		30	12'			

KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE

MATERIAL	FORM	R-VALUE	MANUFACTURER
FIBERGLASS	BATTS		OCF

AIR INFILTRATION SEALANT

MATERIAL	MANUFACTURER
FOAM	W R GRACE

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

SIGNATURE - INSULATION CONTRACTOR

Bill Gray

SIGNATURE - GENERAL CONTRACTOR

TITLE

MANAGER

DATE

5-4-1

TITLE

DATE

REMARKS



JOB REPORT

PROJECT NAME: BELLE FLOURE II - BENZER PAGE: _____
 INSPECTOR: Kenneth Updegraff FILE NO. 5227
 PERSONS CONTACTED: CVC DATE: 4-10-01
 REFERENCE DOCUMENTS: ICBW report #4945 PERMIT #: _____
 WEATHER: CLEAR
 SERVICE PROVIDED: CONCRETE (INSP/SAMPLE ONLY/PU) MASONRY WELDING (SHOP/FIELD) SOILS

OTHER EPoxy BOLTS

WITNESS EPOXY BOLT INSTALLATION USING SIMPSON
STRONG TIE EPOXY, DATED 12/02 INTO CLEAN HOLES,
BLOWN & BRUSHED TO CLEAN.

- LOT 21 - 8 - 5/8" IN DIAMETER PER ICBW
- LOT 22 - 10 - 5/8"
- LOT 23 - 13 - 5/8"
- LOT 24 - 10 - 5/8" " "
- LOT 25 - 10 - 5/8" " "
- LOT 29 - 11 - 5/8" " "

COMPLIANCE OF WORK: _____

ATTACHMENTS: _____

EQUIPMENT/SUPPLIES USED: _____

NEXT VISIT: _____

REMARKS: _____

REVIEWED BY: Kenneth Updegraff DATE: _____

Norman
Scheel
Structural
Engineer

Sacramento
5022 Sunrise Blvd.
Fair Oaks, CA 95628
(916) 536-9585
(916) 536-0260 (fax)

NORMAN SCHEEL
Structural Engineer
Email: norm@nsse.com

ROBERT COON
Project Manager
Email: rob@nsse.com

PAULO IBANEZ
Project Manager
Email: paulo@nsse.com

TIM SLOAN
Project Manager
Email: tiro@nsse.com

STEVE COOKSEY
CAD Supervisor
Email: steve@nsse.com

STACY MARLIN
Office Manager
Email: stacy@nsse.com

Davis
213 E Street Suite B
Davis, CA 95616
(530) 753-5300
(530) 753-5380 (fax)

TRACY HARRIS P.E.
Project Engineer
Email: tracy@nsse.com

DARRELL PEREIRA
Design Engineer
Email: darrell@nsse.com

April 5, 2001

Beazer Homes
3009 Douglas Blvd. Suite 150
Roseville, CA 95661

Re: Bellefleur II (Job #20234)
Shear Wall Clarification

To Whom It May Concern:

This letter is to clarify that if the shear wall hangs over the wall more than 1/2", epoxy anchor bolts should be installed per the shear wall specification on the foundation sheet.

If you have any questions, please call Rob Coon.


NORMAN SCHEEL
STRUCTURAL ENGINEER

Ok. w/ this &
sheet 2 Matt P.
4/6/01

Sheet 1 of 2

ISSUED

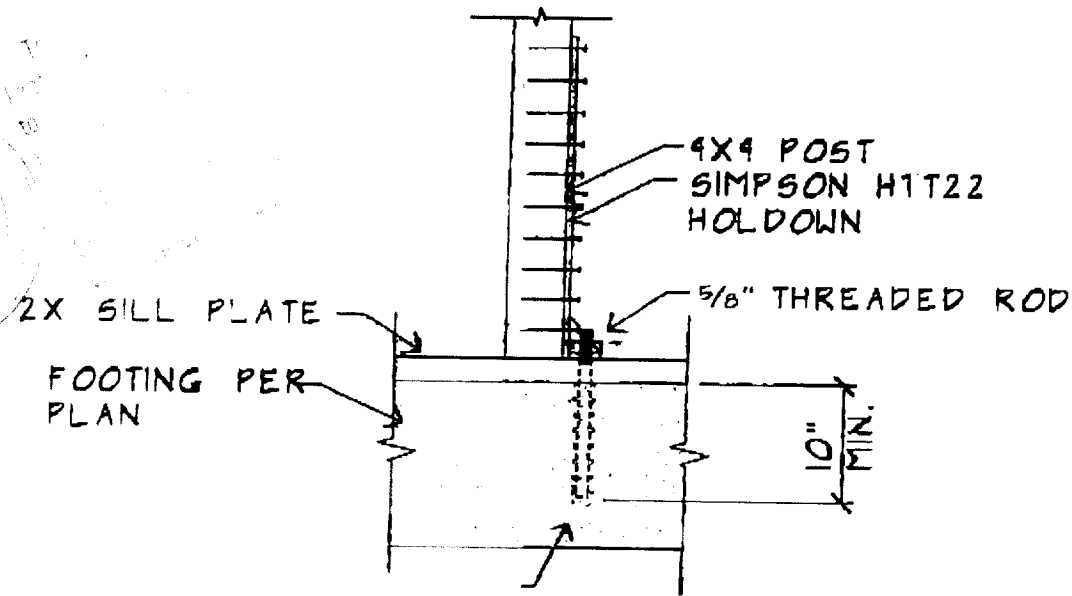
APR 06 2001

Sacramento Building Division



264-7046

PLAN ADDENDUM



DRILLED 3/4" ϕ HOLE AND EPOXY
WITH SIMPSON SET EPOXY SYSTEM
PER MANUFACTURES SPECIFICATIONS

HPAHD22, HD-2A, HD-5A EPOXY FIX

Sheet 2 of 2

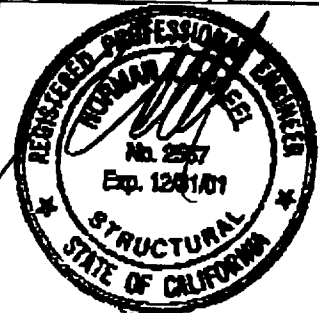
ISSUED

06 2001

Sacramento Building Division

NORMAN SCHEEL
STRUCTURAL ENGINEER
2022 SUNRISE BLVD
AIR OAKS, CA 95628
PHONE (916) 536-9585
FAX (916) 536-0260

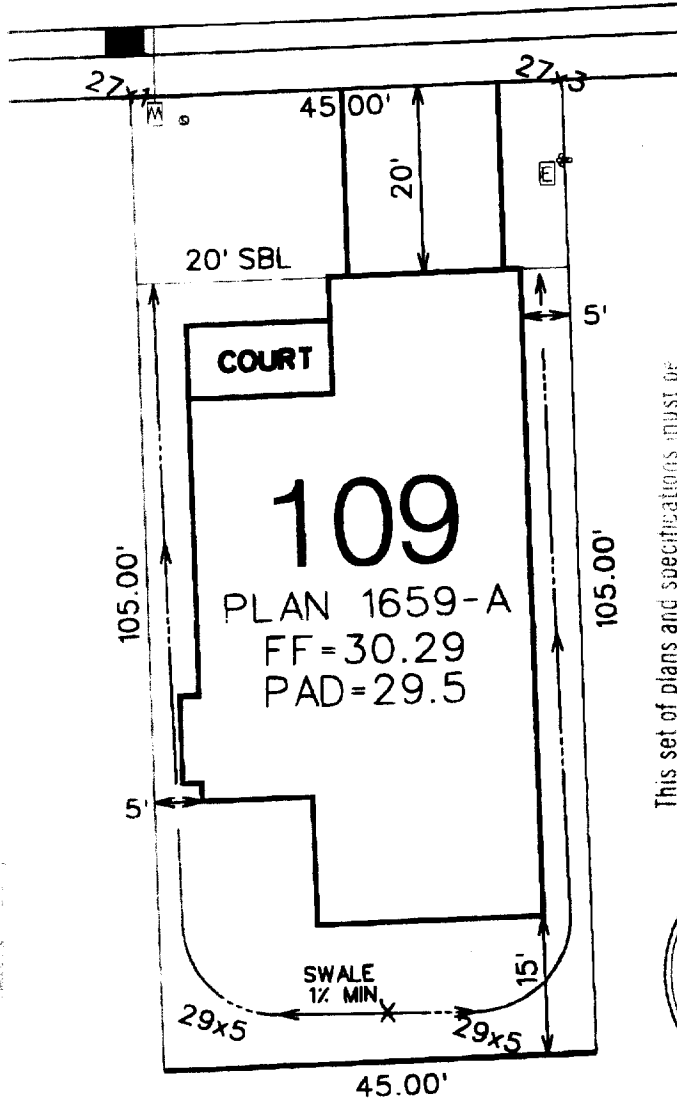
PROJECT _____
CLIENT _____
JOB NO. _____
PROJECT MGR. _____
DATE _____
PAGE _____ OF _____



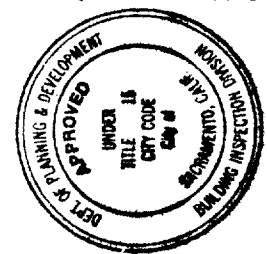
THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION. RETAINING WALLS ARE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

- W — WATER METER BOX
- E — ELECTRICAL BOX
- U — UTILITY RISERS
- S — SEWER CLEANOUT
- SL — STREET LIGHT
- FH — FIRE HYDRANT
- T — TRANSFORMER
- EV — ELECTRICAL VAULT
- TP — TELEPHONE PED.
- DI — DRAIN INLET

TAMBOR WAY

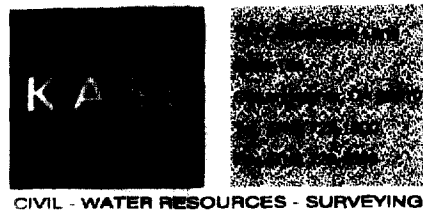


This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.
 The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



SCALE: 1"=20'

5725 SQUARE FEET



PLOT PLAN FOR LOT 109	SCALE: 1"=20'
	DATE: 12-27-00
JACINTO VILLAGE UNIT 3	REVISED:
	DRAWN BY: PWG
A.P.N.	CHK'D. BY: LK
ADDRESS:	W.O. 0434-02
COUNTY: SACRAMENTO	