

CITY OF SACRAMENTO

Permit No: 0110564

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 3418 JABBOUR WY SAC

Thos Bros:

Parcel No: RIVERVIEW 2 VIL. 4-B LOT 29

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

Nature of Work: NSFR MP1751 1 STORY 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 9/4/01 Contractor Signature Sheylf Van Maeren

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 above mentioned property for inspection purposes.

Date 9/4/01 Applicant/Agent Signature Sheylf Van Maeren

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 04/01/2002

(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 9/4/01 Applicant Signature Sheylf Van Maeren

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

lot 29 New Construction Addition Remodels Other

Project Address: 3418 Jabbar Way Assessor Parcel # _____

OWNER INFORMATION:

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

CONTRACTOR INFORMATION:

Contractor: Beazer Homes Lic. # B724191 Phone # 916-773-3888 Fax# 916-773-0425

PROJECT INFORMATION:

Land Use Zone _____ Occupancy Group _____ Construction Type _____ Fed Code _____
No. of stories: 1 No. of rooms: 8 Street width: _____
1st Floor Area 1751 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1751</u>
Garage/Storage	_____	<u>440</u>
Decks/Balconies	_____	<u>119</u>
Carports	_____	_____

SCOPE OF WORK: Single Family Dwelling

FOR OFFICE USE ONLY

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

NEW STRUCTURES & ADDITIONS

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

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

Date: _____ Received by: (staff) _____

ACTIVITY/PERMIT # _____

CERTIFICATION OF INSULATION

ADDRESS OR TRACT <div style="font-size: 2em; font-family: cursive;">BEAZER</div> <div style="margin-top: 20px; font-size: 1.5em; font-family: cursive;">CLASSICS</div>	LOT # <div style="font-size: 2em; font-family: cursive;">4029</div>	SACRAMENTO INSULATION CONTRACTORS <input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026 <input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675 <input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675 DATE INSULATION COMPLETED
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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.	
MANUFACTURER		MANUFACTURER			MANUFACTURER	
OCF		OCF			OCF	
BAGS						
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" 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 <i>Jeff Cable</i>	TITLE MANAGER	DATE 10-22-01
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS

KwikKote

No. 200-003619

Stucco System Installation Card

Job Name: CLASSIC COLLECTION/RIVERVIEW
Address: 3418 JABBOUR WAY
SACRAMENTO,
Lot #: 0004029

Stucco System Trade Name: KWIK KOTE
Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.
Report No. 3607
Date of Job Completion:

Home Builder: BEAZER HOMES
Address: 3009 DOUGLAS BLVD #150
ROSEVILLE, CA

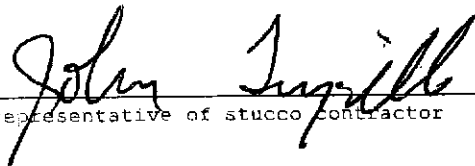
Stucco Contractor: KENYON PLASTERING, INC.
Address: PO BOX 2077
North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 08/20/2001

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

10-27-01



CAPITOL ENGINEERING LABORATORIES, INC.

631 Commerce Drive, Suite #200 • Roseville, California 95678 • (916) 786-2488

3418 JABDOUR WAY
JOB REPORT

LOT 29

PAGE: 1

PROJECT NAME: RIVERVIEW (BEAZER) FILE NO. 5222

INSPECTOR: MARVIN KELL DATE: 10-12-01

PERSONS CONTACTED: PEDRO #8 PERMIT #:

REFERENCE DOCUMENTS: ICBO Report # 4945 WEATHER: SUNNY

SERVICE PROVIDED: CONCRETE (INSP/SAMPLE ONLY/PU) MASONRY WELDING (SHOP/FIELD) SOILS

OTHER Epoxy Anchored Bolts

proof loaded 10% of All 5/8" Epoxy Bolts to
6015 lbs AND 10% of All 1/2" Epoxy Bolt to 4050 lbs
per ICBO without movement in Lots # 25, 27, 28, 29,
30, 31, 32, 33, 34, 35, 36 AND 37

COMPLIANCE OF WORK: ACCEPTABLE

ATTACHMENTS:

EQUIPMENT/SUPPLIES USED: Hydraulics

NEXT VISIT:

REMARKS:

REVIEWED BY: DATE: 10-12-01

