

NOTE: DO NOT COVER OR CONCEAL ANY BUILDING, ELECTRICAL, PLUMBING OR MECHANICAL WORK WITHOUT INSPECTOR'S SIGNATURE IN PROPER PLACE.

INSPECTION	INSPECTOR	DATE
B10 FOUNDATION FORMS	WV	7-5-00
B11 UFER GROUND	WV	7-5-00
B12 CONCRETE SLAB FORMS	WV	7-12-00
B40 PLUMB. UNDER FLOOR/SLAB	WV	7-5-00
M30 MECH/UNDER FLOOR/SLAB		
E61 ELECT. UNDERGROUND		
E62 ELECT. CONDUIT-SLAB		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B13 FLOOR JOISTS OR GIRDERS		
DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED		
B14/15 INSULATION/WALL/FLOOR		
P41 TOP PLUMBING		
M31 TOP MECHANICAL/WALL/CELL.		
E63 ROUGH ELECTRICAL/WALL/CELL.		
B19 FRAME		
B17 ROOF PLYWOOD NAIL COMM. PARTS		
B18 EXTERIOR LATH/SIDING		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B22 INT. LATH OR WALL BD. NAILING		
DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED		
E66 SEWER UNDERGRD CONDUIT		
P43 SEWER SERVICE		
P42 WATER SERVICE		
P46 SPRINKLER SYSTEM		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
M33 GAS TEST/RELEASED GAS TAG		
P48 TEMP GAS ISSUED		
E68 POWER POLE		
E67 TEMP POWER #		
SWIMMING POOLS ONLY		
P47 GAS TEST		
P51 PLUMBING PRE-GUNITE		
P52 PLUMBING PRE-DECK		
E70 ELECTRICAL PRE-GUNITE		
E71 ELECTRICAL PRE-DECK		
E72 ELECTRICAL UNDERGRD		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B23 BUILDING		
E73 ELECTRICAL		
P49 PLUMBING		
M39 MECHANICAL		
F94 FIRE		
S92 SITE		

FINAL APPROVALS

DO NOT OCCUPY BUILDING UNTIL ALL OF THE ABOVE HAVE BEEN SIGNED AND CERTIFICATE OF OCCUPANCY ISSUED

BUILDING SITE ADDRESS
 3 ANTON Ct 3 Anton Ct SUITE 4R
 INSP AREA PLAN CHECK NO.

ASSESSOR PARCEL NO. 225-1150-016 ADDRESS COMMUNITY PLAN NO. ZIP CODE PHONE NO.

NAME OF APPLICANT: DWAN WRESTLER LICENSED CONTRACTOR PROPERTY OWNER

ARCH. ENGR. LICENSE NO.

NO. OF STORES NO. OF ROOMS ROOF COVERING AREA 1ST FLOOR TOTAL AREA GARAGE AREA PATIO AREA USE ZONE STREET WIDTH

THIS PERMIT IS FOR: BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL: MP 601 NSF-12

FLOOD STATUS: SPECIAL CONDITIONS ATTACHMENTS:

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION INSPECTIONS 264-5191

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: Policy Number:

This section need not be completed if the permit is for one hundred dollars (one hundred dollars) 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):

VALUATION	\$ 14752315	FIRE SP.	
ISSUED BY:	WV	FED CODE	
DATE ISSUED	6/16/00	PERMIT NO.	00
BUILDING PERMIT FEE	\$		
PLAN CHECK PROC. FEE	\$		
S.M.I. FEE	\$		
CONST. EXCISE TAX	\$		
CITY BUS LICENSE	\$		
TECH. FEE	\$		
WATER DEV. FEE	\$		
CITY SEWER DEV. FEE	\$		
REG. SEWER FEE	\$		
RESIDENTIAL CONST. TAX	\$		
TOTAL	\$		

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

WINHURST Willows
LOT 2

ICBO Report #4004

Date of Job Completion 11-15-00

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.

Date

11-23-00
Signature of authorized representative of
Plastering Contractor

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

Jr INSULATION

3 Anton
WILLOWS

LOT # 006

SACRAMENTO INSULATION CONTRACTORS

- 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
12/19/00

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 ID		MANUFACTURER'S PRODUCT ID			MANUFACTURER'S PRODUCT ID	
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 19	3 5/8" 5 1/2"	38 38	12 1/4" 14 3/4"			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL: FIBERGLASS		FORM: BATTS		R VALUE		MANUFACTURER: OCF
AIR INFILTRATION SEALANT						
MATERIAL: FOAM				MANUFACTURER: 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>Bill Morby</i>				TITLE: MANAGER		DATE: 10-23-00
SIGNATURE - GENERAL CONTRACTOR				TITLE:		DATE:
REMARKS						