

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

Permit No: 0103602

Insp Area: 4

Site Address: 120 ALCANTAR CR SAC  
Parcel No: RIVERVIEW 2-3A LOT 19 Housing (Y/N):

Sub-Type: NSFR  
N

CONTRACTOR  
D. R. HORTON INC  
10 BLUE RAVINE RD STE. 209  
FOLSOM CA 95630

OWNER

ARCHITECT

Nature of Work: MP 2126/FLEX 10 RM 2 STORY 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 E License Number 756196 Date 3/27/01 Contractor Signature D. Collins

**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 3/27/01 Applicant/Agent Signature D. Collins

**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 ARGONAUT INS. CO. Policy Number WC62600115505 Exp Date 07/01/2000

This section need not be completed if the permit is for a (1) (b) (5) 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 be 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 3/27/01 Applicant Signature D. Collins

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 SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 120 Alcantara Circle Assessor Parcel # \_\_\_\_\_  
 Lot Number: 19 Subdivision RIVERVIEW #2, Unit #3-A

**OWNER INFORMATION:**

Legal Property Owner: D.R. HORTON Phone# 965-2200  
 Owner Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**CONTRACTOR INFORMATION:**

Contractor: DA HORTON Lic. # 750190 Phone # 965-2200 Fax 956-22

**PROJECT INFORMATION:**

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A  
 No. of Stories: 2 No. of Rooms: 10 Street Width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area \_\_\_\_\_ 2<sup>nd</sup> Floor Area \_\_\_\_\_ Basement \_\_\_\_\_ Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:

|                 |             |  |
|-----------------|-------------|--|
| Dwelling/Living | <u>2320</u> |  |
| Garage/Storage  | <u>492</u>  |  |
| Decks/Balconies | <u>40</u>   |  |
| Carports        | _____       |  |

SCOPE OF WORK: \_\_\_\_\_

- |   |   |   |
|---|---|---|
| <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) Assessor's Parcel Number | c) Owners Name     |
| b) New Floor Area           | d) Project Address |

Date: \_\_\_\_\_ Received by: (staff) \_\_\_\_\_ Permit # \_\_\_\_\_

OR  
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NLY

# 19

# OMEGA PRODUCTS CORP.

## DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

D. N. Horton  
PARK VIEW

ICBO Report #4004

Date of Job Completion 7/5/61

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.

7/28/61  
Date

[Signature]  
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.

# CERTIFICATION OF INSULATION

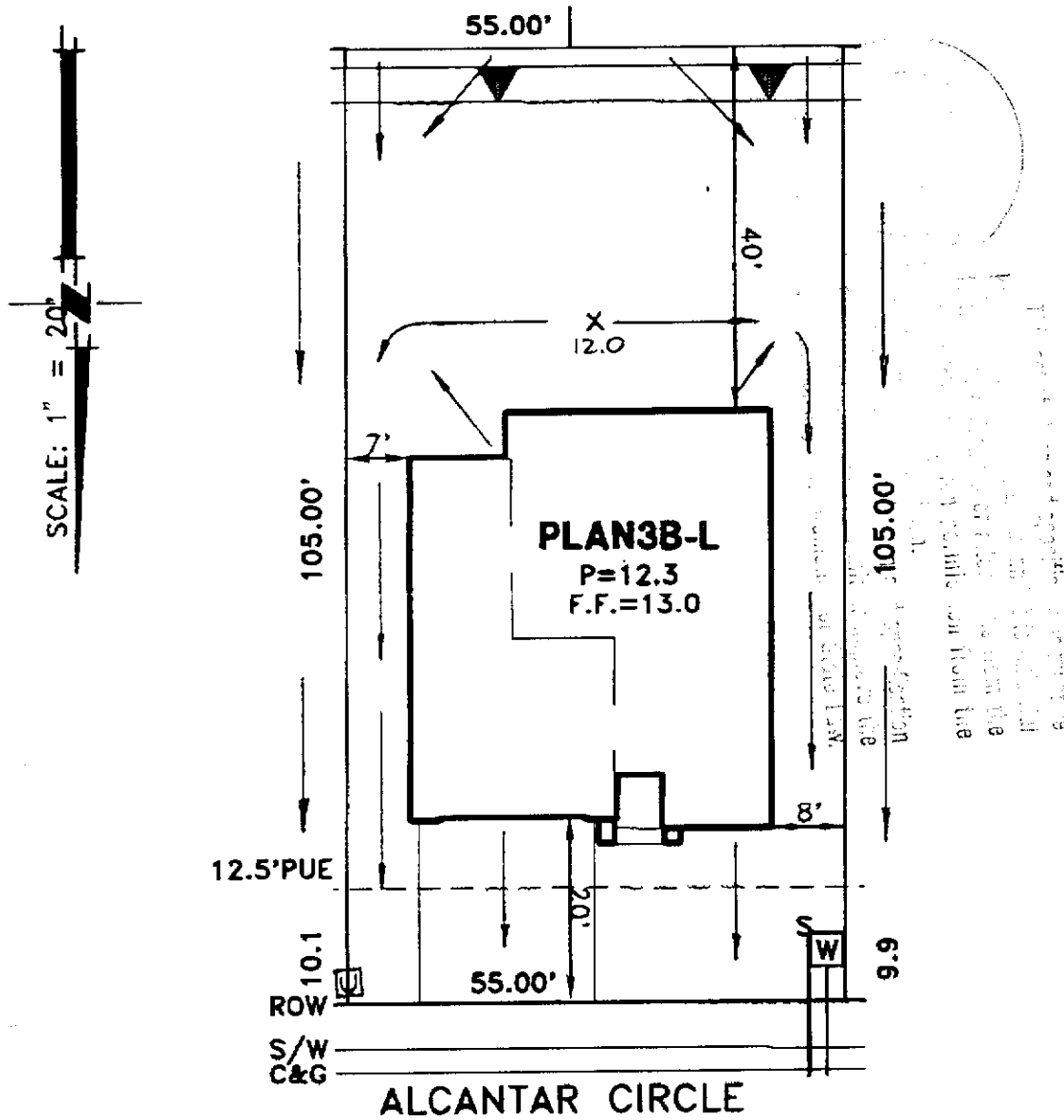
PART I GENERAL

|   |   |  |
|---|---|--|
| <b>ADDRESS OR TRACT</b><br><span style="font-size: 1.5em; font-family: cursive;">D.R. HUTTON</span><br><span style="font-size: 1.5em; font-family: cursive;">PARK WEST</span> | <b>LOT #</b><br><span style="font-size: 1.5em; font-family: cursive;">19</span> | <b>SACRAMENTO INSULATION CONTRACTORS</b><br><input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026<br><input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026<br><input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026<br><input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675<br><input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675 |
| <b>DATE INSULATION COMPLETED</b><br><span style="font-size: 1.5em; font-family: cursive;">7/20/01</span>  |   |  |

PART II AREAS INSULATED

| WALLS  |  | CEILINGS   |   |                                       | FLOORS                      |  |
|--|--|--|---|---------------------------------------|-----------------------------|--|
| SQUARE FEET)   |  | SQUARE FEET)   |   |                                       | SQUARE FEET)                |  |
| TYPE OF INSULATION   |  | TYPE OF INSULATION   |   |                                       | TYPE OF INSULATION          |  |
| MATERIAL <b>FIBERGLASS</b>   |  | MATERIAL <b>FIBERGLASS</b>   |   |                                       | MATERIAL <b>FIBERGLASS</b>  |  |
| FORM <b>BATTS</b>  |  | FORM <b>BATTS &amp; BLOW</b>   |   |                                       | FORM <b>BATTS</b>           |  |
| MANUFACTURER'S PRODUCT I.D.  |  | MANUFACTURER'S PRODUCT I.D.  |   |                                       | MANUFACTURER'S PRODUCT I.D. |  |
| MANUFACTURER   |  | MANUFACTURER   |   |                                       | MANUFACTURER                |  |
| <b>OCF</b>   |  | <b>OCF</b>   |   |                                       | <b>OCF</b>                  |  |
|  |  | BAGS   |   |                                       |                             |  |
| R-VALUE INSTALLED  | APPLIED THICKNESS  | R-VALUE INSTALLED  | APPLIED THICKNESS   | MIN. INSTALLED WEIGHT PER SQUARE FOOT | R-VALUE INSTALLED           | APPLIED THICKNESS  |
| <span style="font-size: 1.5em; font-family: cursive;">13<br/>19</span>   | <span style="font-size: 1.5em; font-family: cursive;">3 5/8"<br/>5 1/2"</span> | <span style="font-size: 1.5em; font-family: cursive;">30<br/>30</span> | <span style="font-size: 1.5em; font-family: cursive;">9"<br/>12"</span> |                                       |                             |  |
| <b>KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE</b>   |  |  |   |                                       |                             |  |
| MATERIAL <b>FIBERGLASS</b>   |  | FORM <b>BATTS</b>  |   | R VALUE                               |                             | MANUFACTURER <b>OCF</b>  |
| <b>AIR INFILTRATION SEALANT</b>  |  |  |   |                                       |                             |  |
| MATERIAL <span style="font-size: 1.5em; font-family: cursive;">FOAM</span>   |  |  |   | MANUFACTURER <b>W R GRACE</b>         |                             |  |
| <b>THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS</b> |  |  |   |                                       |                             |  |
| SIGNATURE - INSULATION CONTRACTOR<br><span style="font-size: 1.5em; font-family: cursive;">Bill [Signature]</span>                                   |  |  |   | TITLE <b>MANAGER</b>                  |                             | DATE <span style="font-size: 1.5em; font-family: cursive;">7-3-01</span> |
| SIGNATURE - GENERAL CONTRACTOR   |  |  |   | TITLE                                 |                             | DATE   |
| 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.



SCALE: 1" = 20'

**PLOT PLAN**  
**LOT 19**  
 RIVERVIEW #2, UNIT 3A  
 FOR  
 D.R.HORTON INC.  
 SACRAMENTO CALIFORNIA

CIVIL ENGINEERING SURVEYING  
 MAPPING PLANNING  
**WOOD-RODGERS INC.**  
 3301 C STREET BUILDING 100B SACRAMENTO, CA 95816  
 TEL: 916/341-7760 FAX: 916/341-7767

|                   |               |                       |                         |
|-------------------|---------------|-----------------------|-------------------------|
| DATE:<br>FEB 2001 | DRAWN:<br>MJG | CHECKED:<br><i>MR</i> | PROJECT NO:<br>1055.014 |
|-------------------|---------------|-----------------------|-------------------------|

U - UTILITY SERVICE BOX

J:\JOBS\RIVERVIEW\DWG\CIVIL\LOT PLANS SAMPLER\3A3B\3A-LOT19.DWG 02/28/01 14:42