

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0211666
Insp Area: 4
Thos Bros:
Sub-Type: NSFR
Housing (Y/N):

Site Address: 1620 AIMWELL AV SAC
Parcel No: 225-1670-063
N

NORTHPOINTE PARK VILLAGE 19 LOT 63

CONTRACTOR
MORRISON HOMES
1130 IRON POINT RD STE 120
FOLSOM CA. 95630

OWNER

ARCHITECT

Nature of Work: MP2265 2 STORY 10 ROOM 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 B License Number 519465 Date 9-12-02 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 herby authorize representative(s) of this city to enter upon the above mentioned property for inspection purposes.

Date 9-12-02 Applicant/Agent Signature [Signature]
PAID
CITY OF SACRAMENTO
SEP 12 2002

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.

X 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 ZURICH-AMERICAN INS. CO. Policy Number WC2090701-03 Exp Date 11/01/2002

____ (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 9-12-02 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.

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 1620 AIMWELL DRIVE Assessor Parcel # 225-167-063
Lot Number: 63 Subdivision NORTH POINTE PARK VILL #19

OWNER INFORMATION:

Legal Property Owner: Morrison Homes Phone# (916) 355-8900
Owner Address: 1130 Iron Point Rd #120 City Folsom State CA Zip 95630

CONTRACTOR INFORMATION:

Contractor: Morrison Homes Lic. # 519465 Phone # 355-8900 Fax 355-0100

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A
No. of Stories: 2 No. of Rooms: 10 Street Width: _____
1st Floor Area 1064 2nd Floor Area 1199 Basement _____ Roof Material _____
AREA IN SQUARE FOOT OF:
Dwelling/Living 2245 MOR2265
Garage/Storage 433 \$146,988.91
Decks/Balconies 94 0211666
Carports _____
SCOPE OF WORK: New Single Family Dwelling

FOR OFFICE USE ONLY

- Information Above Complete
- Violation Files Checked
- Standard Setbacks
- County Sewer
- AR Flood Waiver Required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply:

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
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

Date:

Received by: (staff)

Permit #

CERTIFICATION OF INSULATION

1620 AIMWELL

PART I GENERAL

ADDRESS OR TRACT	SACRAMENTO BUILDING PRODUCTS
<p style="font-size: 1.5em; margin: 0;">Morrison</p> <p style="font-size: 1.5em; margin: 0;">Cabana @ Northpoint</p> <p style="text-align: right; margin: 0;">LOT # 63</p>	<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	

PART II AREAS INSULATED

WALLS			CEILING			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			
CT	OC	JM	CT	OC	JM	CT	OC	JM	
BAGS									
R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	
13 19	3 1/2 5 1/2	30 30	9 12						
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE									
MATERIAL FIBERGLASS		FORM BATTS		R VALUE			MANUFACTURER		
							CT	OC	JM
AIR INFILTRATION SEALANT									
MATERIAL FOAM				MANUFACTURER HILTI			MANUFACTURER HANDY FOAM		

PART III CERTIFICATION

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

SIGNATURE — INSULATION CONTRACTOR	TITLE MANAGER	DATE 1-7-03
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

1620 AIM WELL

KwikKote

No. 200-912549

Stucco System Installation Card

~~Job Name:~~ NORTHPOINTE PARK

~~Address:~~ 1620 AIMWELL DR.

, CA

Lot #: 000063

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: MORRISON HOMES

Address: 1130 IRON POINTE RD #120

FOLSOM, CA

Stucco Contractor: KENYON PLASTERING, INC.

Address: PO BOX 2077

North Highlands, CA

Telephone Number: 916/349-8191

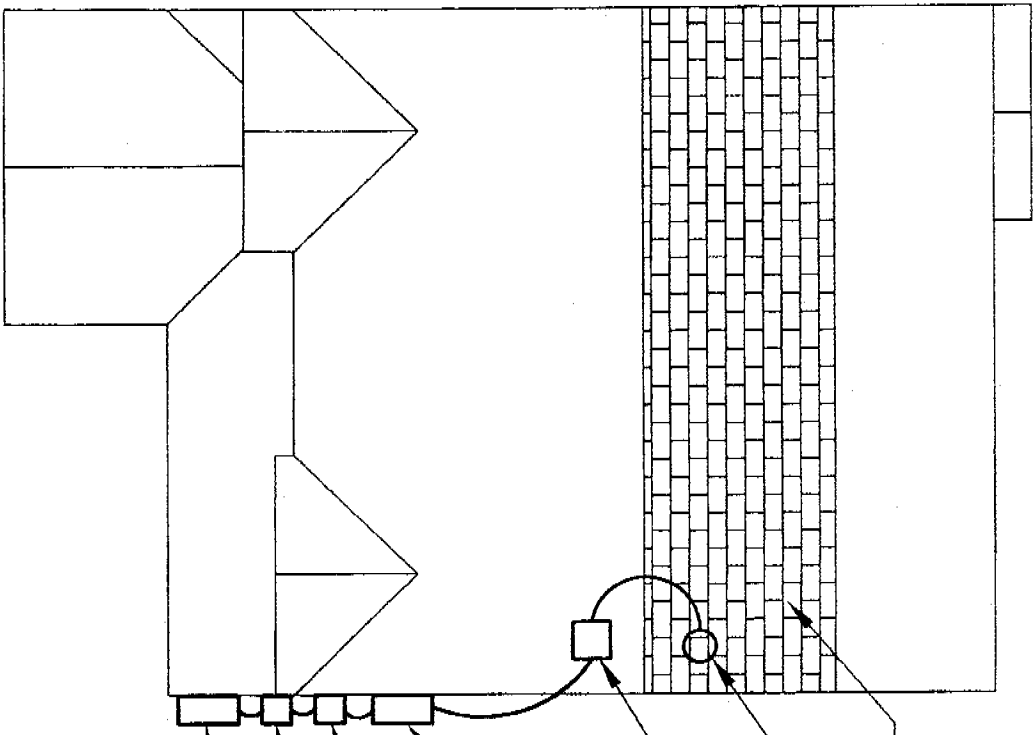
Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 11/05/2002

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.

Julian A. Alvarez
Signature of authorized representative of stucco contractor

1-17-03
Date



COMPONENT LOCATION PLAN

APPROVED PER 1996
NATIONAL ELECTRICAL CODE
AND CITY OF SACRAMENTO
AMENDMENTS
7.2.m. 9.27.02
 ELECTRICAL DIVISION

THE APPROVAL OF ALL ELECTRICAL WORK
IS SUBJECT TO FIELD INSPECTIONS

- Sunslate Roof
- Roof Penetration
- System Splice Box Mounted in Attic
- STXR2500 Inverter Mounted on Exterior Wall
- AC Disconnect Box
- PV System kWh Meter
- Utility Meter Breaker Panel


Notes:

- DC runs from Sunslates to splice box are to be 12 AWG 2 wire THHN or THWN type cable with Sunslate connector at one end.
- Splice box is not necessary if cables will reach from roof to inverter.
- DC runs from splice box to inverter are to be 12 AWG 3 wire NM type cable.
- All AC runs after inverter are to be 10 AWG 3 wire NM type cable.

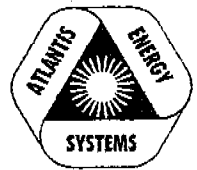
This set of plans and specifications must be kept on the job at all times and it is prohibited to make any changes or alterations from the original set of plans and specifications from the date of issue of these specifications until the project is completed.

ISSUED
 SEP 27 2002
 Sacramento Building Division

CITY COPY

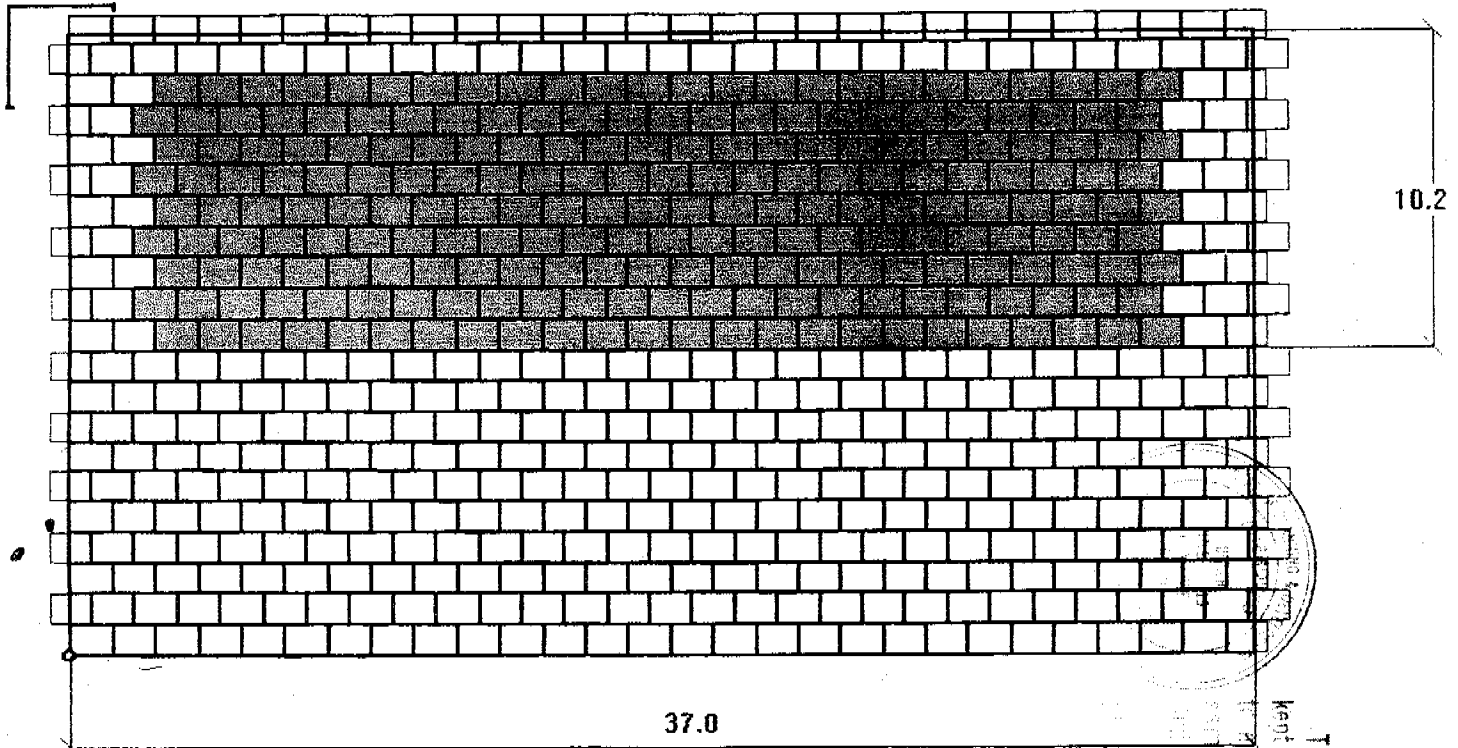
 <p>ATLANTIS ENERGY SYSTEMS, INC. 4610 NORTHGATE BLVD SUITE 150 SACRAMENTO, CA 95834 PHONE (916) 920-9500 FAX (916) 927-1697</p>	MORRISON HOMES NORTHPOINT (CABANA) PLAN 2265 / LOT 63	DATE 9/20/02	SCALE NONE
	N. LOWRIE 1 OF 1	DRAWN BY N. LOWRIE	SHEET 1 OF 1

ATLANTIS ENERGY Inc.



Project Name: Cabana plan 2265a lot 43

63 System Design
Offer S-02.09.s1



THE APPROVAL OF ALL ELECTRICAL WORK IS SUBJECT TO FIELD INSPECTIONS.

Total installed power DC @ STC:	2,873	[W]
Total installed power AC @ PTC:	2,172	[W]
Sunslates surface:	279.0	Sq.Ft.

Sacramento Building Division

SEP 27 2002

ISSUED

Orientation
0.00° from South

4610 NORTHGATE BLV. 150, SACRAMENTO CA95834, Tel:916 920 9500 Fax: 916 927 1697 Info@atlantisenergy.com

ATLANTIS ENERGY Inc.

Project Name: 2265a Roof A

System Design
Offer S-02.08.material

System components and parameters

All calculations are made with 1000 W/m2 sun irradiation at 25 degC.

1. Sunslate

Sunslate Type: SP-A	Total Sunslates:	216
Cells per Sunslate: 6	Bare Slates	382
Connection in Sunslate: 6 in Series and 1 parallel	Sunslate Blanks:	0

2. Strings (Fields)

Sunslates per String: 24	Ump:	70.56 [VDC]
Connections: All in Series	Uoc:	93.60 [VDC]
	Pmp:	319.21 [W]

3. System

Installed DC power:	Pmp:	<u>2,872.92</u> [W]
Total Strings: 9	Ump:	70.56 [VDC]
Connection in Sunslate: 1 in Series and 9 parallel	Uoc:	93.60 [VDC]
	Pmp:	<u>2,171.93</u> Watts AC @ PTC

4. Cables

Field connecting	Row connecting	Sunslate-Sunslate	Bridges
9 ea.- Field2.5B	9 ea.- Twister	198 ea.- Inerconnect	9 ea.

5. Inverter

1 ea.-ST2500

6. Field connecting box (if any)

1 ea.-----

Sacramento Building Division

SEP 27 2002

ISSUED

THE APPROVAL OF ALL ELECTRICAL WORK IS SUBJECT TO FIELD INSPECTIONS.

This set of plans and specifications shall be used for the construction of the project. Any changes or modifications shall be made by written agreement between the contractor and the owner. The contractor shall be responsible for obtaining all necessary permits and approvals. The contractor shall maintain a copy of these plans and specifications on the project site at all times.

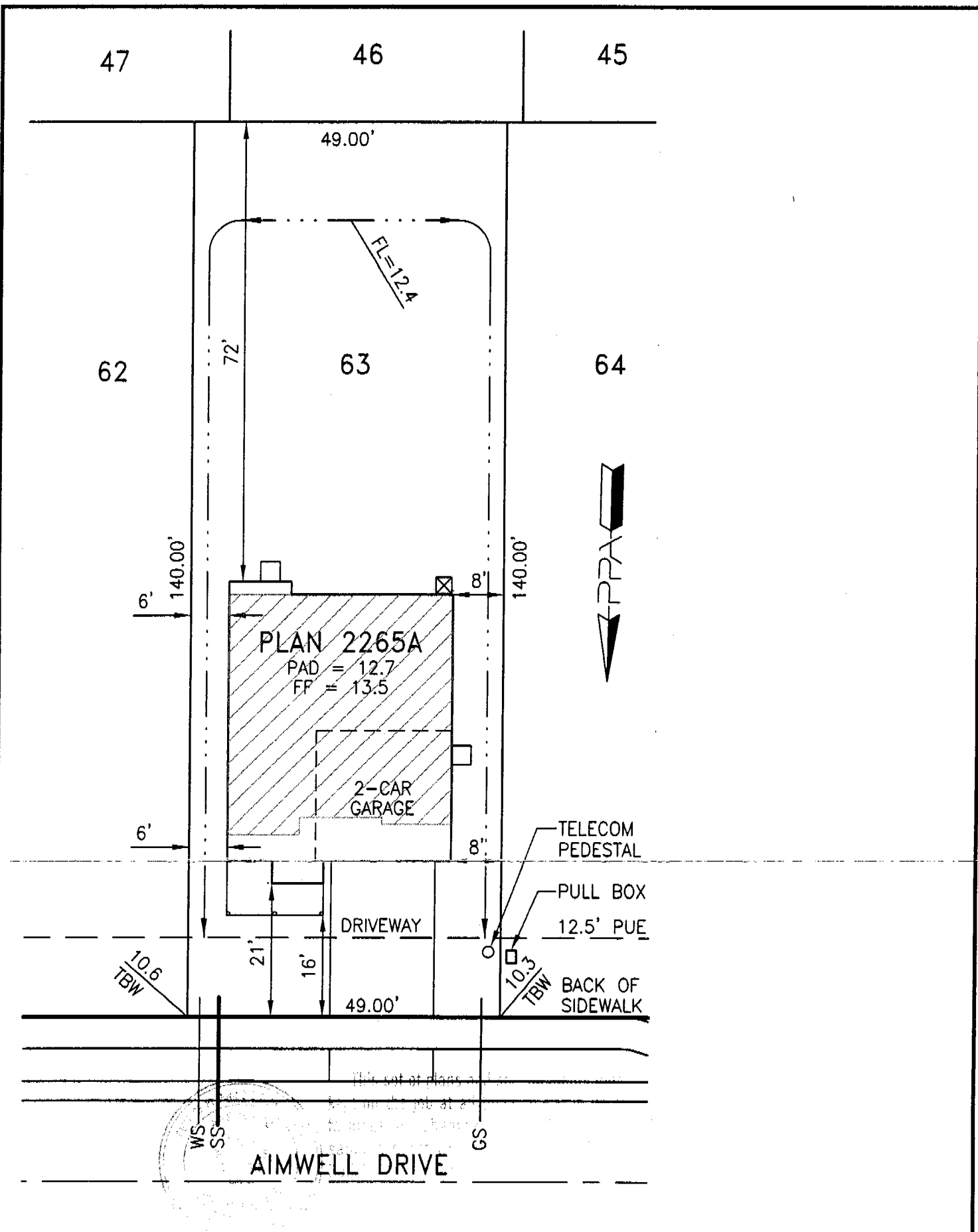
4610 NORTHGATE BLV. 150, SACRAMENTO CA95834, Tel:916 920 9500 Fax: 916 927 1697 e-mail: Atlanta@agv.net

material

8/20/02

File:2265a.atl

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINES, DRAINAGE CONTROL ELEVATIONS AND DIRECTION OF DRAINAGE FLOW. THIS IS DONE TO CONFORM TO LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN ON THIS PLAN IS APPROXIMATE EXCEPT FOR MINIMUM SETBACKS WHICH ARE REQUIRED BY LOCAL ORDINANCE. THIS PLAN DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.



Approved By: *[Signature]* Morrison Homes Rep. *8-5-02* Date

Revision	Approved By	Date
1		
2		

LOT AREA: 6860 SF
 ALLOWED LOT COVERAGE: 2744 SF = 40.0%
 ACTUAL LOT COVERAGE: 1500 SF = 21.9%
 REAR YARD AREA: 3595 SF
 NUMBER OF BEDROOMS:

It is understood that the drainage areas, slopes and grades shall not be altered, changed, blocked, modified or in any way be reconstructed by Owner contrary to what is depicted on this Plot Plan. THESE CONDITIONS RUN WITH THE LAND AND ARE BINDING ON ALL SUBSEQUENT OWNERS. All setback dimensions and elevations as shown may be adjusted to fit field conditions.

Plot Plan for the Cabana Collection Morrison Homes Tract #514 PPA Job #001001
Northpointe Park Village 19 Lot 63
 1620 Aimwell Drive, Sacramento, CA 95835 APN 225-167-063

Morrison Homes - Sacramento Division
 1130 Iron Point Road, Suite 120, Folsom, CA 95630 Phone (916) 355-8900 Fax (916) 355-8111

Plot Plan Associates www.plotplans.org Date Drawn: 08/08/02 Scale: 1"=20'
 PO Box 435 Citrus Heights CA 95611-0435 (916) 769-9063 Date Revised: - Drawn By: BEB

D:/001001/Plotplans/Village19/0010063.dwg