

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

**Permit No: 0213225**

**Insp Area: 4**

**Thos Bros:**

**Sub-Type: NSFR**

**Housing (Y/N): N**

**Site Address: 4 DEKALB CT SAC**

**Parcel No: 225-1820-022**

**CREEKSIDE 1 LOT 22**

**CONTRACTOR**

D. R. HORTON INC.  
4401 HAZEL AVE STE 135  
FAIR OAKS, CA 95628

**OWNER**

**ARCHITECT**

**Nature of Work: MP2240/6 2 STORY 11 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 \_\_\_\_\_ License Number 750190 Date 10-17-02 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 contractor(s) 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 10-17-02 Applicant/Agent Signature [Signature]

**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.

DF 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 AMERICAN CASULTY CO Policy Number WC247856876 Exp Date 07/01/2003

\_\_\_\_ (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 10-17-02 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: A DEVALB CT Assessor Parcel # 225-1820-022-0000 9  
 Lot Number: 22 Subdivision CREEKSIDE - CORNERSTONE

**OWNER INFORMATION:**

Legal Property Owner: <u>DL HORTON</u>	Phone# <u>965 2200</u>
Owner Address: <u>4401 HAZEL AVE 135</u>	City <u>FAIR OAKS</u> State <u>CA</u> Zip <u>95628</u>

**CONTRACTOR INFORMATION:**

Contractor: <u>DL HORTON</u>	Lic. # <u>750190</u>	Phone # <u>965 2200</u>	Fax <u>965 2201</u>
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DRH 2240V6

**PROJECT INFORMATION:**

Land Use Zone <u>RIA</u>	Occupancy Group <u>R3</u>	Construction Type <u>VN</u>	Fed Code <u>1A</u>
No. of Stories: <u>1</u>	No. of Rooms: <u>11</u>	Street Width: _____	
1 <sup>st</sup> Floor Area <u>1297</u>	2 <sup>nd</sup> Floor Area <u>1369</u>	Basement <u>A</u>	Roof Material <u>CONCRETE TILE</u>
<b>AREA IN SQUARE FOOT OF:</b>			
	Dwelling/Living	<u>2666</u>	<u>2668</u>
	Garage/Storage	<u>415</u>	<u>414</u>
	Decks/Balconies	<u>A</u>	<u>76</u>
	Carports	<u>A</u>	_____
SCOPE OF WORK: <u>NEW HOME CONSTRUCTION</u>			

9-13-02

OR  
FICE  
SS  
NLY

<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	_____	
<b>--THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT--</b>		
<input type="checkbox"/> 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE		
<input type="checkbox"/> 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	

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE** *AK-02*  
 PERMIT AND CALCULATION *10-1-02*

APPLICATION NO. \_\_\_\_\_ BLDG PERMIT NO. *Sub A 2002 - 00722*

GENERAL INFORMATION THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER

*1411755 for 212*

*46,980.00*

THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF
CSD-1	<input checked="" type="checkbox"/>	<i>720</i>	
SRCSD			
CONSTRUCTION			
IN-LIEU			
<b>TOTAL FEE</b>			<i>0</i>

APN: *225-1825-022-0000*

DESCRIPTION/SUBDIVISION *CREEKSIDE VILLAGE 1* LOT: *22*

PROPERTY ADDRESS *4 DEVALDT. SAC, CA 95835*

OWNER *D R Horton*

MAILING ADDRESS *4901 HORREL AVE Suite 135*

CITY-STATE-ZIP *Fair Oaks CA 95628* PHONE *916-965-2200*

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT

APPLICANT SIGNATURE *[Signature]*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

INSPECTOR'S COPY

**Natomas Unified School District**

1901 Arena Blvd. • Sacramento, CA 95834

Phone 916/567-5468 • Fax 916/567-5470

**CERTIFICATION OF COMPLIANCE**

**SCHOOL DISTRICT DEVELOPMENT FEES**

PART I: TO BE COMPLETED BY APPLICANT	
Property Owner's Name	DK Horton
Owner's Address	4401 Hazel ave Suite 135 #10 95628
Project Address	4 DeKalb court
Parcel Number	225-1820-022-0000
Subdivision Name	Creekside - Cornerstone
Number of Units	1
Print Applicant's Name	Del Fairchild
Applicant's Signature	<i>Del Fairchild</i>
Title of Applicant	Super
Date	9-3-02
Telephone Number	416-3227
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT	
Plan Identification Number	XXXXXXXXXXXX AP 2666
Building Type (Check One)	
<input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Apartment/Condominium
<input type="checkbox"/> Commercial/Industrial	
Square Feet of Chargeable Building Area	2666
Signature	<i>Del Fairchild</i>
Title	Super
Date	9/12/02
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT	
District Certification Number	03:543
Fees Collected:	
Residential:	2666 Sq. Ft. X \$ 3.00 = \$ 7998.00
Apartment/Condominium:	Sq. Ft. X \$ = \$
Commercial/Industrial:	Sq. Ft. X \$ = \$
<p><b>NOTICE TO APPLICANT:</b> Pursuant to government code section 66020 (d), this will serve to notify you that the 90-day approval period in which you may protest the fees, or other payment identified above, will begin to run on the date in which the building or installation permit for this project is issued, or on which they are paid to the District, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.</p>	
Applicant Signature:	<i>Del Fairchild</i> Date: 9-3-02

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 65995 have been complied with by the above signed applicant.

SIGNATURE: *Del Fairchild* DATE: 10/1/02  
 TITLE: *Del Fairchild*

# KwikKote

No. 200-913467

## Stucco System Installation Card

Job Name: CREEKSIDE - CORNERSTONE  
Address: 4 DEKALB CT.

Lot #: 0000022

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: D.R. HORTON INC.  
Address: 4401 HAZEL AVE. SUITE 135  
FAIR OAKS, CA

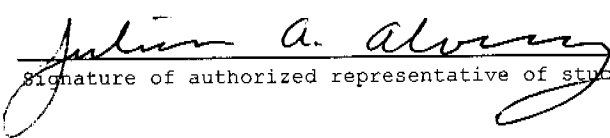
Stucco Contractor: KENYON PLASTERING, INC.  
Address: PO BOX 2077  
North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as  
issued by the Stucco Manufacturer: 1001

Card Print Date: 01/21/2003

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

3-14-03  
Date

# CERTIFICATION OF INSULATION

PART I GENERAL	ADDRESS OR TRACT	SACRAMENTO BUILDING PRODUCTS									
	DR Horton Creekside - <del>Cornerstone</del> Cornerstone LOT # <del>22</del>	<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 <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				
	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				
	13 19	3 1/2 5 1/2	30 30	9 12							
	KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE										
MATERIAL <b>FIBERGLASS</b>			FORM <b>BATTS</b>			R VALUE			MANUFACTURER		
									CT	OC	JM
AIR INFILTRATION SEALANT											
MATERIAL <b>Foam</b>						MANUFACTURER					
						<b>HILTI</b>			<b>HANDY FOAM</b>		
THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.											
SIGNATURE — INSULATION CONTRACTOR <b>JC</b>						TITLE <b>MANAGER</b>			DATE <b>2-6-03</b>		
SIGNATURE — GENERAL CONTRACTOR						TITLE			DATE		
REMARKS											

Aug 26 02 11:02a

Aug 26 02 10:00a

Craig Wecker

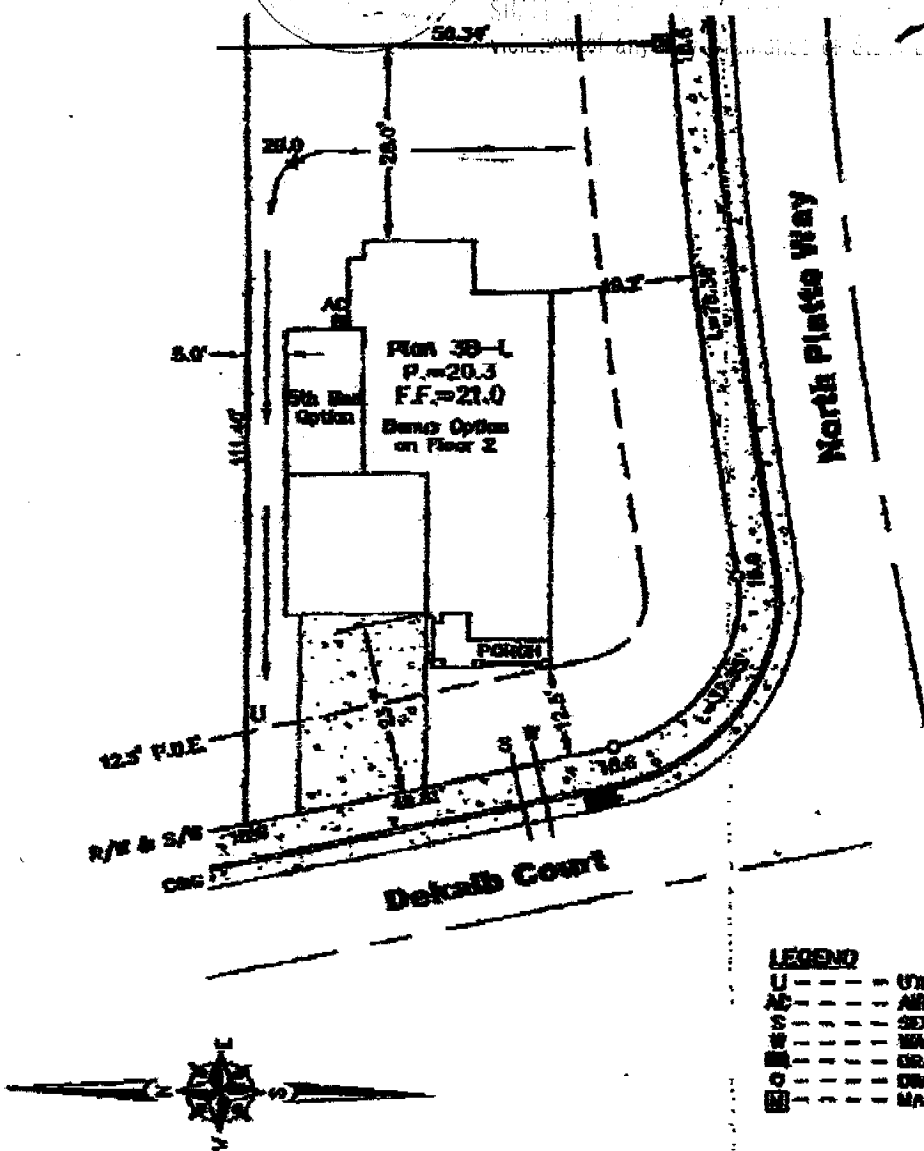
This set of plans and specifications must be kept on the lot at all times and it is unlawful to remove them from the lot.

530-758-2775

p-3

p-2

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THE PLOT PLAN IS FOR THE PURPOSE OF ENSURING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREIN IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITIONS, REMAINING SETBACKS ARE OPTIONAL, AND MAY OR MAY NOT BE CONSTRUCTED.



- LEGEND**
- U --- UTILITY LOCATION
  - AC --- AIR CONDITIONER
  - S --- SEWER
  - W --- WATER
  - O --- DRAIN SILET
  - --- DIMENSION POINT
  - --- MAIL BOX

SCALE: 1" = 20'

**PLOT PLAN**  
**LOT 22**  
 Creekside Village 1  
 City of Sacramento, State of California

**WECKER SURVEYS**  
 3740 MODOC PLACE  
 DAVIS, CA 95616  
 530-792-7252  
 FAX 530-758-2775

08/26/2002 09:43 [TX/RX NO 5125] @002