

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0100245

Insp Area: 2

Site Address: 7884 SHASTA AV SAC

Parcel No: 117-1370-002

JACINTO N 2 LOT 2

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1441 7 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 1/10/01 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 1/10/01 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 1/10/01 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.

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 1/10/01

____ (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 1/10/01 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 BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 7886 Shasta Avenue #472 Assessor Parcel # 117 1370 002

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: Same as above Lic. # B724191 Phone # 773-3888 Fax # 773-0425

PROJECT INFORMATION:

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

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1441</u>
Garage/Storage	_____	<u>439</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: Single Family Homes

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 # _____

KWIKKOTE
STUCCO SYSTEM
INSTALLATION CARD

#C30346
BEAZER HOMES
BELLEFLEUR II LOT 2
~~784~~ SHASTA AVE SACRAMENTO

Stucco System Trade Name: KWIK KOTE
Name Stucco Manufacturer: KWIK KOTE CORP
ICBO Evaluation Service, Inc. Report No. 3607
Date of Job Completion _____

Stucco Contractor Kenyon Plastering, Inc.
Name John W. Kenyon, III
Address P.O. Box 2077
North Highlands, CA 95660
Telephone # (916) 349-8191

Approved Contractor Number as issued by the Stucco Manufacturer: 1

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: 3-30-01

Builder Copy

CERTIFICATION OF INSULATION

ADDRESS OR TRACT

BEAZER

LOT # 0002

BELLE FLEUR

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

PART I GENERAL

PART II AREAS INSULATED

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 30	9" 12"			
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 Brown</i>				TITLE MANAGER		DATE 2/26/01
SIGNATURE - GENERAL CONTRACTOR				TITLE		DATE

REMARKS

PART III REMARKS

Norman

Scheel

Structural

Engineer

Sacramento

5022 Sunrise Blvd.
Fair Oaks, CA 95628
(916) 536-9585
(916) 536-0260 (fax)

NORMAN SCHEEL
Structural Engineer
Email: norm@nsse.com

ROBERT COON
Project Manager
Email: rob@nsse.com

PAULO IBÁÑEZ
Project Manager
Email: paulo@nsse.com

TIM SLOAN
Project Manager
Email: tim@nsse.com

STEVE COOKSEY
CAD Supervisor
Email: steve@nsse.com

STACY MARLIN
Office Manager
Email: stacy@nsse.com

Davis

213 E Street Suite B
Davis, CA 95616
(530) 753-5300
(530) 753-5380 (fax)

TRACY HARRIS P.E.
Project Engineer
Email: tracy@nsse.com

DARRELL PEREIRA
Design Engineer
Email: darrell@nsse.com

February 12, 2001

Beazer Homes
3009 Douglas Blvd. Suite 150
Roseville, CA 95661

**Re: Bellefleur (Job #20234)
Inspection Clarifications**

1. In our opinion, the MAS anchors may be installed on 3x sill plates for the lateral loads. However, you may consider installing a few wedge anchors for the overall stability of the wall.
2. 6" plus or minus on shear walls over 8'-0" long is acceptable with the same hardware and nailing specified on the plans.
3. Anchor bolts may be repaired or replaced with either wedge anchors or epoxy bolts. The only condition with wedge anchors is that when they are at the edge of the slab, they require 2 bolts per each existing anchor bolt at the shear walls.

If you have any questions, please call Rob Coon.


NORMAN SCHEEL
STRUCTURAL ENGINEER





CAPITOL ENGINEERING LABORATORIES, INC.

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

JOB REPORT

PAGE: _____

PROJECT NAME: Beckman 1 Loop II - 150244 FILE NO. 5222

INSPECTOR: Kenneth L. John DATE: 2-14-01

PERSONS CONTACTED: CVC PERMIT #: _____

REFERENCE DOCUMENTS: ICBW Request "4945" WEATHER: Clear

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

OTHER epoxy repairs

View limited epoxy repairs to 150% of
allowance per repair details or to 400 lbs for 2"
max 400 lbs on 2"

OK	Lot 7 - Concrete 9-1/2" x 12-1/2" with rebar	max	400
OK	Lot 8 - Concrete 9-1/2" x 12-1/2"	"	"
OK	Lot 9 - Concrete 11-1/2" x 13-1/2"	"	"
OK	Lot 10 - Concrete 13-1/2" x 12-1/2"	"	"
	Lot 11 - Concrete 11-1/2" x 12-1/2"	"	"
	Lot 12 - Concrete 11-1/2" x 12-1/2"	"	"

COMPLIANCE OF WORK: _____

ATTACHMENTS: _____

EQUIPMENT/SUPPLIES USED: _____

NEXT VISIT: _____

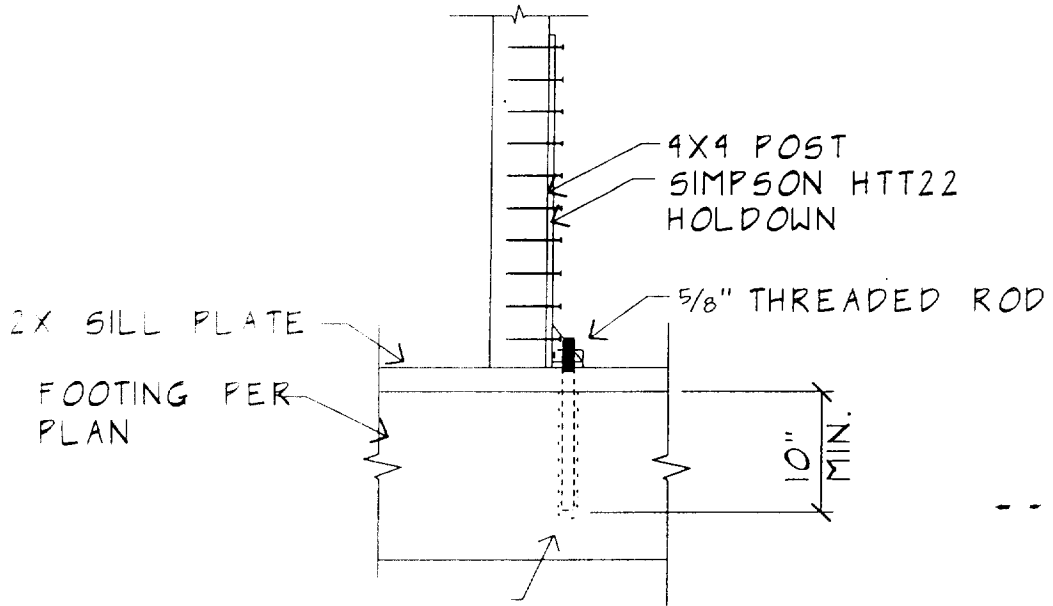
REMARKS: _____

REVIEWED BY: Kenneth L. John DATE: _____

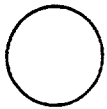
PLAN ADDENDUM

Fix for

8 HPAHD-2P



DRILLED 3/4" ϕ HOLE AND EPOXY WITH SIMPSON SET EPOXY SYSTEM PER MANUFACTURES SPECIFICATIONS

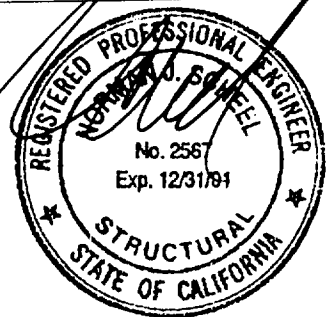


HTT22 HOLDOWN REPAIR DETAIL WITH EPOXY SYSTEM

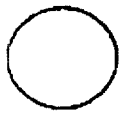
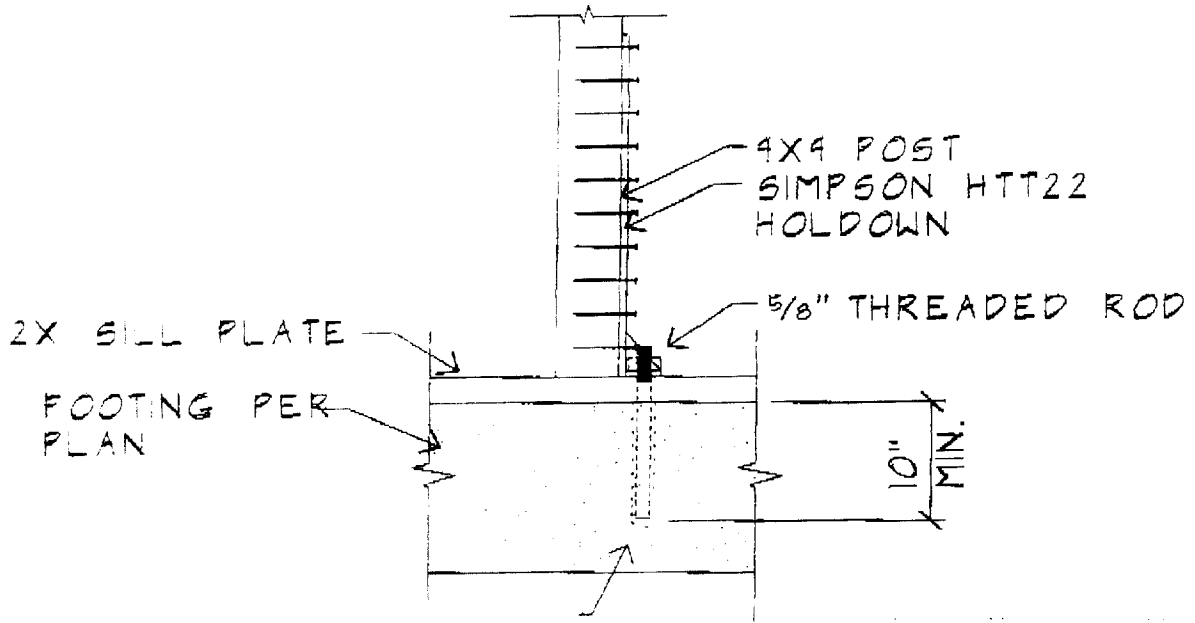
PLAN 2516

NORMAN SCHEEL
STRUCTURAL ENGINEER
6939 SUNRISE BLVD SUITE 123
CITRUS HEIGHTS, CA 95610
VOICE (916) 726-0612
FAX (916) 726-3189

PROJECT BELLEFLEUR
CLIENT BENZEE HOMES
JOB NO. 20234
PROJECT MGR. ROB
DATE 11/13/00
PAGE 1 OF 1



PLAN ADDENDUM



HTT22 HOLDOWN REPAIR DETAIL WITH EPOXY SYSTEM

HTT22 EPOXY FIX

NORMAN SCHEEL
STRUCTURAL ENGINEER
5022 SUNRISE BLVD
FAIR OAKS, CA 95628
VOICE (916) 536-9585
FAX (916) 536-0260

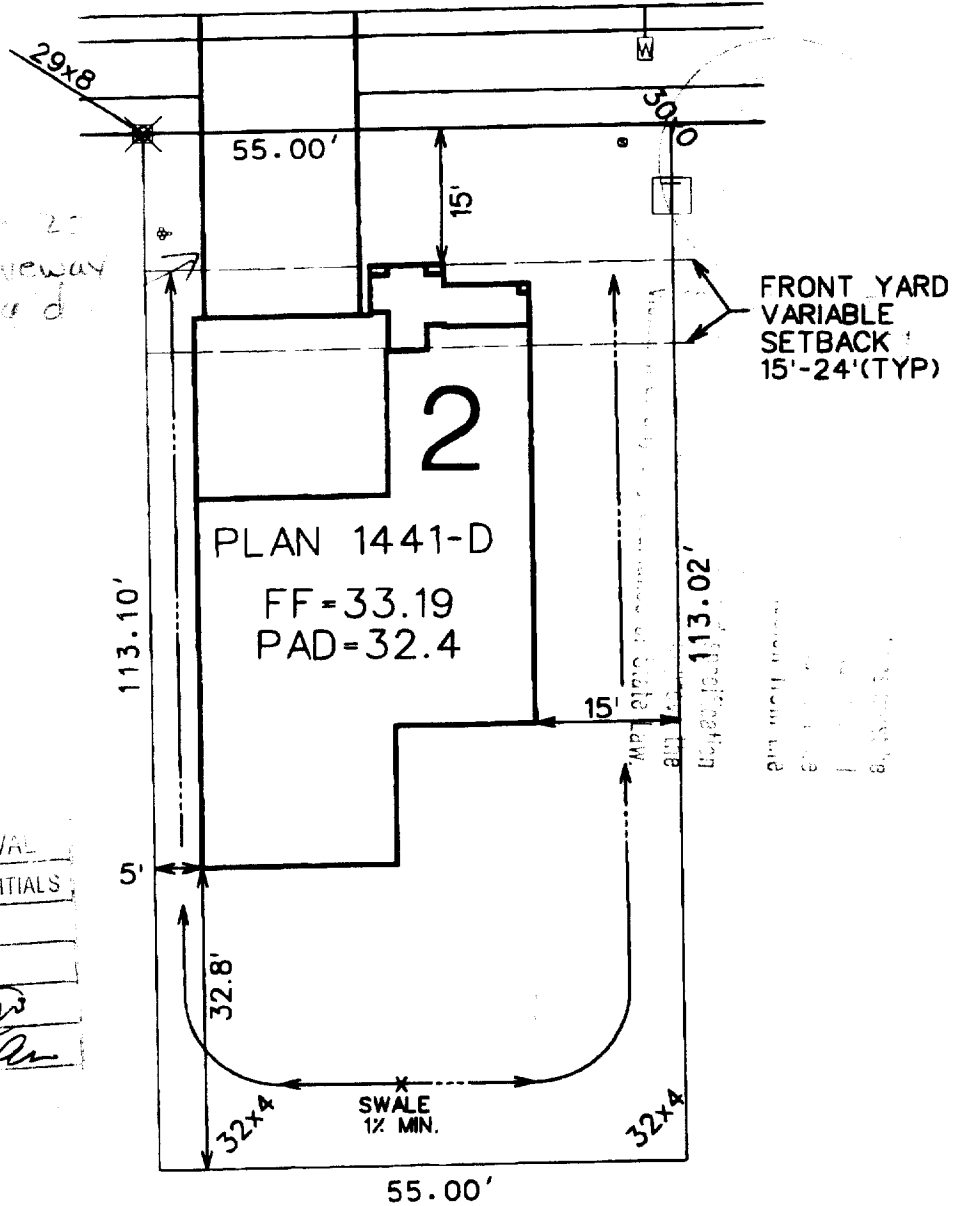
PROJECT BELLEFLUER II
CLIENT BELZER HOMES
JOB NO. 20234
PROJECT MGR. ROB
DATE 2/9/01
PAGE 1 OF 1



THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION. RETAINING WALLS ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.

- W — WATER METER BOX
- E — ELECTRICAL BOX
- U — UTILITY RISERS
- SC — SEWER CLEANOUT
- SL — STREET LIGHT
- FH — FIRE HYDRANT
- T — TRANSFORMER
- EV — ELECTRICAL VAULT
- TP — TELEPHONE PED.
- DI — DRAIN INLET

SHASTA AVE.



ROUTING/APPROVAL		INITIALS
✓		
✓		
✓		



SCALE: 1"-20'

6218 SQUARE FEET



PLOT PLAN FOR
LOT 2
JACINTO VILLAGE NORTH
A.P.N.
ADDRESS:
COUNTY: SACRAMENTO

SCALE: 1"=20'
DATE: 12-05-00
REVISED:
DRAWN BY: PWG
CHK'D. BY: LK
W.O. 0434-02