

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0012296

Insp Area: 2

Site Address: 16 SINSKEY CT SAC

Parcel No: 117-1360-033

JACINTO VILLAGE LOT 33

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP2516 11 RMS 2 STORY

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 1 License Number 122491 Date 10/1/00 Contractor Signature M. J. Callinan

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 10/1/00 Applicant/Agent Signature M. J. Callinan

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 Exp Date 4/1/2001

____ (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 violate the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions I shall forthwith comply with those provisions.

Date 10/1/00 Applicant Signature M. J. Callinan

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: 16 Sunbury Court Assessor Parcel # 117-1360-033

OWNER INFORMATION:

Legal Property Owner: BEAZER Homes Phone # (916) 773-3888
 Owner Address: 3009 Douglas Blvd. #150, City ROSEVILLE, State Ca. Zip 95661

CONTRACTOR INFORMATION:

Contractor: BEAZER Homes Lic. # 724191 Phone # 773-3888 Fax# 773-0425

PROJECT INFORMATION:

Land Use Zone R14 Occupancy Group R3 Construction Type VN Fed Code 14

No. of stories: 2 No. of rooms: _____ Street width: _____

1st Floor Area 1278 2nd Floor Area 1235 Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>2516</u>
Garage/Storage	_____	<u>808</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: _____

FOR OFFICE USE ONLY

- | | | |
|-----------------------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------|
| <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 | | |

NEW STRUCTURES & ADDITIONS

❖ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

- | | |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> 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. |
| <input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA | |
| <input type="checkbox"/> Title 24 Energy Compliance documentation | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> Plan Review Fees |

Date: _____ Received by: (staff) _____

ACTIVITY/PERMIT #

KWIKKOTE
STUCCO SYSTEM
INSTALLATION CARD

21010
BEAZER HOMES
BELLEFLEUR LOT 33
16 SINSKEY COURT SACRAMENTO

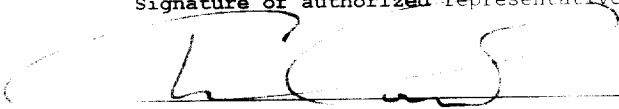
Stucco System Trade Name: KWIK KOTE
Name Stucco Manufacturer: KWIK KOTE CORP
ICBO Evaluation Service, Inc. Report No. 3607
Date of Job Completion _____

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: 3-23-07

Builder Copy

CERTIFICATION OF INSULATION

PART I GENERAL

PART II AREAS INSULATED

PART III NOTES

ADDRESS OR TRACT

SACRAMENTO INSULATION CONTRACTORS

BEAZER

Box 33

- 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

BELLE FLOOR

DATE INSULATION COMPLETED

3/17/01

WALLS

CEILING(S)

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

5 5/8

20

9"

30

12"

KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE

MATERIAL

FIBERGLASS

FORM

BATTS

R VALUE

MANUFACTURER

OCF

AIR INFILTRATION SEALANT

MATERIAL

MANUFACTURER

W R GRACE

FOAM

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

SIGNATURE - INSULATION CONTRACTOR

Bill Gray

SIGNATURE - GENERAL CONTRACTOR

TITLE

MANAGER

DATE

3/5/01

TITLE

DATE

REMARKS

Norman

Scheel

Structural

Engineer

Sacramento
5017 Sunrise Blvd
Elvert Oaks, CA 95628
(916) 936-9585
(916) 936-1260 (fax)

NORMAN SCHEEL
Structural Engineer
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ROBERT COON
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Email: paulo@nsse.com

TIM SLOAN
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STEVE COOKSEY
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Email: steve@nsse.com

STACY MARLIN
Office Manager
Email: stacy@nsse.com

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Davis, CA 95616
(530) 753-8300
(530) 753-5380 (fax)

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

DARRILL PEREIRA
Design Engineer
Email: dgriff@nsse.com

February 8, 2001

Beazer Homes
3009 Douglas Blvd Suite 150
Roseville, CA 95661

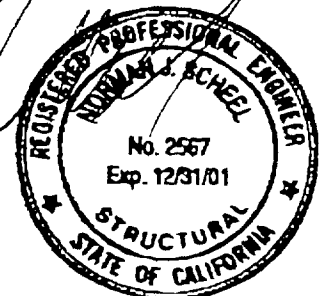
**Re: Bellefleur - Plan 2516, Lots 60, 23, 33, 16 & 11 (Job #20234)
Holdown Post**

To Whom It May Concern:

This letter is to clarify that we have reviewed the counter sunk bolts at the front of the garage and interior shear walls. These bolts may be counter sunk up to 1" leaving 2 1/2" of the 4x member in tact. In the future, the holdown located at the ends of wall and at corners should be installed per the detail on Sheet SN-2.

If you have any questions, please call Rob Coon.

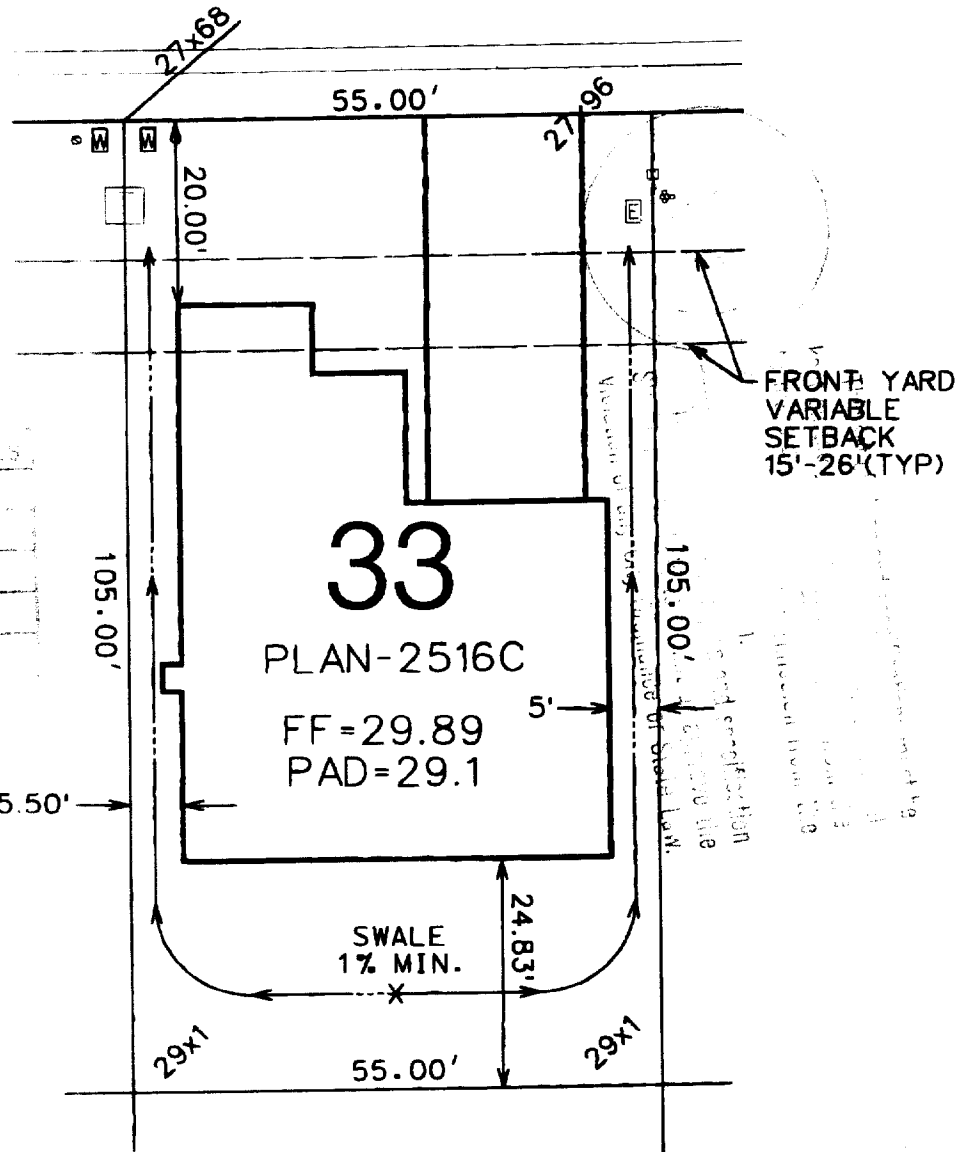

NORMAN SCHEEL
STRUCTURAL ENGINEER



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.

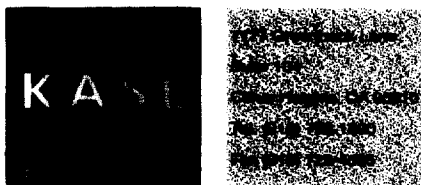
CUVAISON CT.

- W — WATER METER BOX
- E — ELECTRICAL BOX
- ⊕ — UTILITY RISERS
- s — SEWER CLEANOUT
- ⊕ — TELEPHONE PED.
- ☐ — TRANSFORMER



SCALE: 1"-20'

5775 SQUARE FEET



CIVIL - WATER RESOURCES - SURVEYING

PLOT PLAN FOR
LOT 33

JACINTO VILLAGE SOUTH

A.P.N. 117-1360-033
ADDRESS:
COUNTY: SACRAMENTO

SCALE: 1"=20'
DATE: 09-15-00
REVISED: 9-26-00
DRAWN BY: PRA
CHK'D. BY: LK
W.O. 0435-01