

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9807066

Insp Area: 4

Site Address: 2851 ROSEAU WY SAC

Parcel No: 2251050020

LOT 20/CROWN VILLAGE

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

REGIS CONTRACTORS
1425 RIVER PARK DR #530
SACRAMENTO CA 95815

OWNER

REGIS CONTRACTORS
1425 RIVER PARK DR #530
SACRAMENTO CA 95815

ARCHITECT

Nature of Work: NEW HOME, MP1485, 6 ROOMS

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 708694 Date 5-20 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 hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date _____ Applicant/Agent 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 Farmers Fund Policy Number 1-99 Dup. 80758981

____ (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 8-20-98 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.

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO: _____

BLDG PERMIT NO: _____

GENERAL INFORMATION

THIS PERMIT GOOD ONLY WHEN
VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES
ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF	UNITS
CSD-1			<input type="checkbox"/>	
SRCSD				
CONSTRUCTION				
IN-LIEU				
TOTAL FEE				

APN: _____

DESCRIPTION/
SUBDIVISION

LOT:

PROPERTY ADDRESS

OWNER

MAILING ADDRESS

CITY-STATE-ZIP

PHONE

ADDITIONAL FEE MAY BE DUE TO CHANGE IN THE APPLICABLE SEWER DISTRICT

APPLICANT SIGNATURE

CONSOLIDATED UTILITY BILLING UNF ONLY

ACCT#

INPU#

STAR#



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**

INSULATION CERTIFICATE
4549

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

Regis LOT # 20 TRACT # PRYMENTZ
STREET _____ CITY Stade

EXTERIOR WALLS:
MANUFACTURER F/E THICKNESS/TYPE 3 5/8" R-VALUE 13

CEILING:
BATTS:
MANUFACTURER F/E THICKNESS/TYPE 9 1/2" R-VALUE 30
BLOWN IN: F/E MINIMUM THICKNESS 1 1/4" R-VALUE 30
MANUFACTURER _____ THICKNESS _____ R-VALUE _____

SQUARE FOOTAGE COVERED 714 NUMBER OF BAGS USED 13
FLOORS: _____ R _____
MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____
SLAB ON GRADE _____ R _____
MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

WIDTH OF INSULATION _____ INCHES _____
FOUNDATION WALLS: _____ R _____
MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

GENERAL CONTRACTOR _____
CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

INSULATION CONTRACTOR: **ARCADE INSULATION**

MANUFACTURER LICENSE # 263784 DATE 12-29-98
SIGNATURE [Signature] TITLE [Signature]



No 17399

INSTALLATION CARD

Job Address:

1415 S. PULASKI
PO BOX 2551 PULASKI WY
STANFORD

Stucco System Trade Name: KWIK KOTE
Name Stucco Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.
Report No. 3607
Date of Job Completion 12-31-98

Stucco Contractor Kenyon Construction
Name John W. Kenyon, III
Address P.O. Box 2077
North Highlands, CA 95660
Telephone Number: (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]
Signature of authorized representative of stucco contractor

1-6-99
Date



**City of Sacramento Development Services Division
Planning and Zoning Information Request**

Project Address: SW corner gateway Oaks + Ukiah

Assessor's Parcel Number: NEN = 225-0105-XXX ORD = 225-0230-08

Description of Request: New single family with
11' rear yard + 12.5' front setbacks

Zoning Designation: R-1-A PUD

Prior Applications for Project Site(P#,Z#,DRPB#): P94-057

Comments: No planning issues. The
site conditions unit must
review to ensure compliance
with the conditions of approval
for (P94-057) - setbacks ok per R-1A

Are There Any Planning Issues?: (Circle One) YES NO

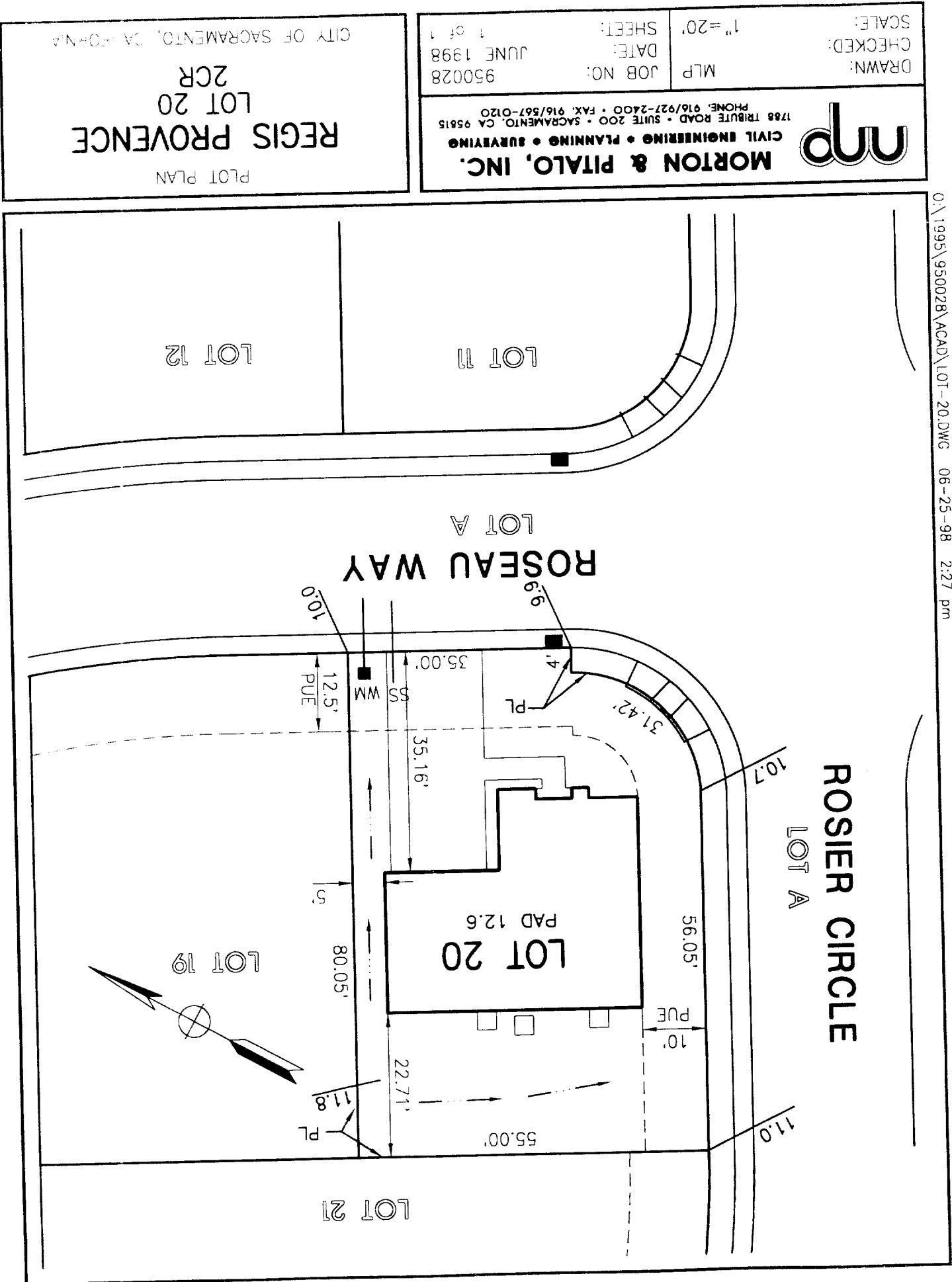
^{SITE CONDITIONS}
Planning Review Required? (Circle One) YES NO

Design Review/ Preservation Required?: (Circle One) YES NO

Planning Review by/Date: _____

For a list of items that must be reviewed by Planning, please see reverse side of this form.

*Please return to
Maureen
Thanks
7/27/98*



0:\1995\950028\ACAD\LOT-20.DWG 06-25-98 2:27 pm

NATOMAS UNIFIED SCHOOL DISTRICT

1515 Sports Drive, #1 • Sacramento, CA 95834

Phone 916/641-3300 • Fax 916/928-1629

CERTIFICATION OF COMPLIANCE

SCHOOL DISTRICT DEVELOPMENT FEES

PART I: TO BE COMPLETED BY APPLICANT			
PROPERTY OWNER'S NAME	<i>[Handwritten Name]</i>		
OWNER'S ADDRESS	<i>[Handwritten Address]</i>		
PROJECT ADDRESS	<i>[Handwritten Address]</i>		
PARCEL NUMBER	<i>[Handwritten Parcel Number]</i>		
SUBDIVISION NAME	<i>[Handwritten Subdivision Name]</i>		
NUMBER OF UNITS	<i>[Handwritten Number]</i>		
PRINT APPLICANT'S NAME	<i>[Handwritten Name]</i>	APPLICANT'S SIGNATURE:	<i>[Handwritten Signature]</i>
TITLE OF APPLICANT	<i>[Handwritten Title]</i>		
DATE	TELEPHONE NUMBER <i>[Handwritten Number]</i>		
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT			
PLAN IDENTIFICATION NUMBER	<i>[Handwritten Number]</i>		
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	<i>[Handwritten Area]</i>		
SIGNATURE	<i>[Handwritten Signature]</i>		
TITLE	<i>[Handwritten Title]</i>		DATE <i>[Handwritten Date]</i>
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT			
DISTRICT CERTIFICATION NUMBER	<i>[Handwritten Number]</i>		
FEES COLLECTED			
RESIDENTIAL	SQ. FT. X \$		= \$
APARTMENT/CONDOMINIUM	SQ. FT. X \$		= \$
COMMERCIAL/INDUSTRIAL	SQ. FT. X \$		= \$

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 school district official, I hereby certify that the requirements of Government Code Section 65995 have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL:

SIGNATURE: _____

TITLE: _____ DATE: _____

WHITE - SCHOOL DISTRICT

YELLOW - SCHOOL DISTRICT

PINK - BUILDING DEPARTMENT

GOLD - APPLICANT

NATOMAS UNIFIED SCHOOL DISTRICT

1515 Sports Drive, #1 • Sacramento, CA 95834

Phone 916/641-3300 • Fax 916/928-1629

CERTIFICATION OF COMPLIANCE

SCHOOL DISTRICT DEVELOPMENT FEES

PART I: TO BE COMPLETED BY APPLICANT			
PROPERTY OWNER'S NAME	Regis Contractors		
OWNER'S ADDRESS	1425 River Rd # 520 Sacramento 95815		
PROJECT ADDRESS	2851 Roseau Wy		
PARCEL NUMBER	225 1250-020		
SUBDIVISION NAME	Crown Village LOT 20		
NUMBER OF UNITS			
PRINT APPLICANT'S NAME	Mark J. May	APPLICANT'S SIGNATURE:	<i>Mark J. May</i>
TITLE OF APPLICANT	GP		
DATE	7-25-98	TELEPHONE NUMBER	929-3973
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT			
PLAN IDENTIFICATION NUMBER	9807066		
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	1450 sq		
SIGNATURE	<i>Manson McAllen</i>		
TITLE	Building Tech	DATE	7-25-98
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT			
DISTRICT CERTIFICATION NUMBER	99-11		
FEES COLLECTED			
RESIDENTIAL	1450	Sq. Ft. X \$	1.93 = \$ 2798.50
APARTMENT/CONDOMINIUM		Sq. Ft. X \$	= \$
COMMERCIAL/INDUSTRIAL		Sq. Ft. X \$	= \$

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 school district official, I hereby certify that the requirements of Government Code Section 65995 have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL:

SIGNATURE: *Truda K. Smith*

TITLE: Fac Plan Dir DATE: 8/11/98

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO:	BLDG PERMIT NO: <u>511</u>
GENERAL INFORMATION	THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER - SEWER CONNECTION FEE \$2,000.00 - FEE FROM 3710107 05/19/98 - RECEIPT NUMBER 111 604006.00 THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	460	COMMERCIAL USE	UNITS
SRCSD	2336		
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	2.797		

APN: 225 0145 020

DESCRIPTION/
 SUBDIVISION PTV Crown Village LOT: 20

PROPERTY ADDRESS 2851 Roseau Way

OWNER Raymond

MAILING ADDRESS 142 Sun Park Dr # 530

CITY-STATE-ZIP Sacramento, Ca 95815 PHONE 929 3197

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

APPLICANT SIGNATURE [Signature]

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____