

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0209803

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 7738 MC BRIDE WY SAC

Parcel No: 052-0180-084

STEAMBOAT BEND LOT 84

CONTRACTOR

HOFMANN CONSTRUCTION
PO BOX 907
CONCORD CA 94522

OWNER

ARCHITECT

Nature of Work: NSFR MP2725 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 B1 License Number 189167 Date 8/29/02 Contractor Signature Jerry E. [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 and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

PAID
CITY OF SACRAMENTO

____ I am exempt under Sec. _____ B & PC for this reason: _____

Date _____ Owner Signature _____

AUG 29 2002

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 8/29/02 Applicant/Agent Signature Jerry E. [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:

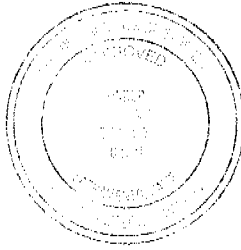
Carrier STATE FUND Policy Number 1633130 Exp Date 04/01/2003

____ (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 8/29/02 Applicant Signature Jerry E. [Signature]

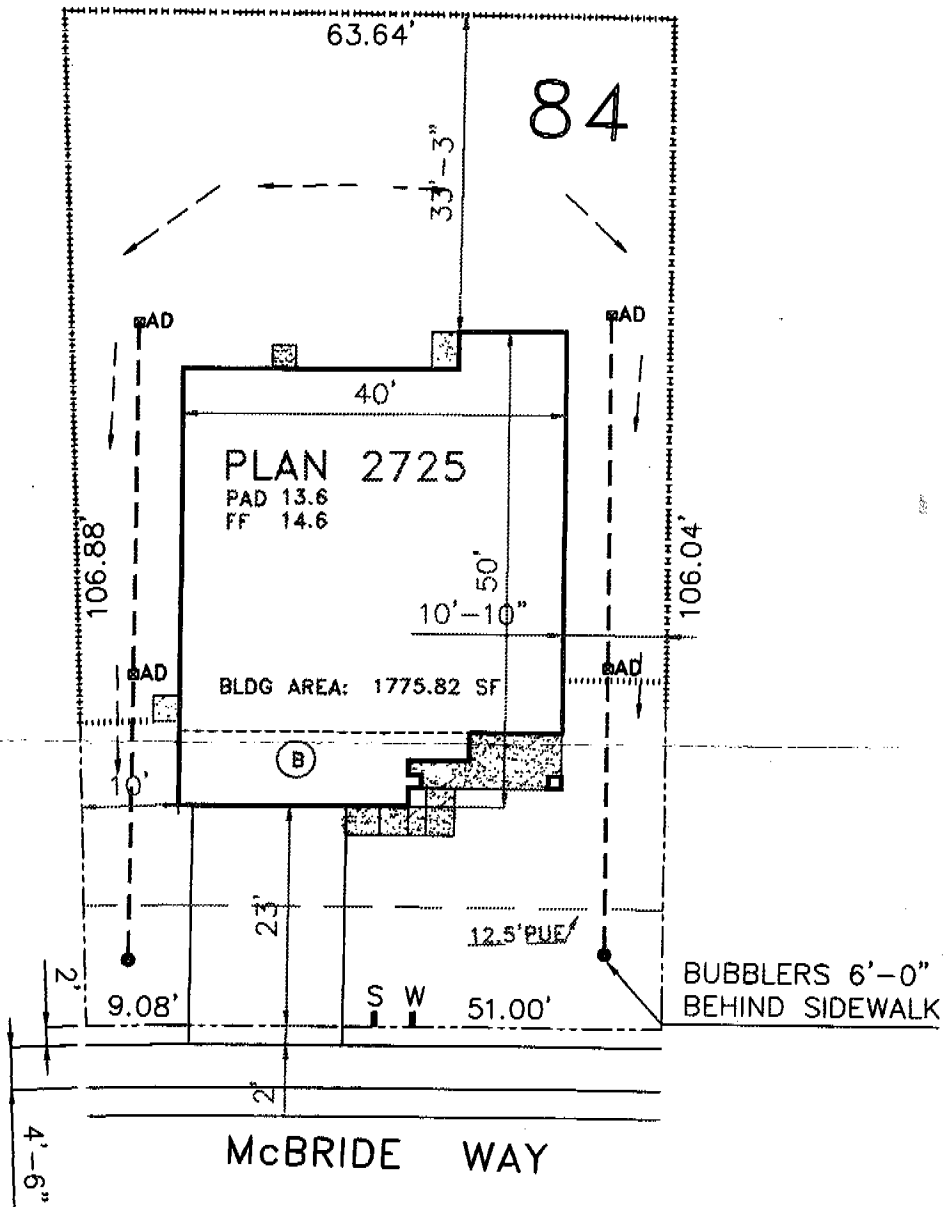
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



ADDRESS: 7738 McBRIDE WAY
SACRAMENTO, CA. 95832-1176

LOT AREA: 6,578.30 SF
BLDG COVERAGE: 1,775.82 SF
% LOT COVERAGE: 26.99%

6/14/02
PLOT PLAN
SCALE: 1" = 20'-0" STEAMBOAT BEND
LOT 84 SUB UNIT No. 1
STEAMBOAT BEND
SACRAMENTO, CA.
HOFMANN CONST. CO.

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RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 7738 McBride Way
Lot Number: 84

Assessor Parcel # 052-0180-084-0000
Subdivision Steamboat Bend Unit 1

OWNER INFORMATION:

Legal Property Owner: <u>The Hofmann Company</u>	Phone# <u>(925) 682-4830</u>
Owner Address: <u>PO Box 907</u> City <u>Concord</u>	State <u>CA</u> Zip <u>94522</u>

CONTRACTOR INFORMATION:

Contractor: <u>Hofmann Construction</u> Lic. # <u>189167</u>	Phone # <u>(925) 682-4830</u> Fax <u>(925) 603-9453</u>
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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>2</u>	No. of Rooms: <u>11</u>	Street Width: <u>56</u>	
1 st Floor Area <u>1261</u>	2 nd Floor Area <u>1466</u>	Basement <u>0</u>	Roof Material Composition <u>Shingle</u>
AREA IN SQUARE FOOT OF:			
	Dwelling/Living	<u>2727</u>	<p>HOF 2725 \$176,492.86 0209803</p>
	Garage/Storage	<u>528</u>	
	Decks/Balconies	<u>78</u>	
	Carports	<u>0</u>	
SCOPE OF WORK: <u>Single family residence with attached garage</u>			
<u>Master Plan Check # 0201355</u>			

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

CERTIFICATION OF INSULATION

PART I GENERAL
PART II AREAS INSULATED
PART III CERTIFICATION

ADDRESS OR TRAILER Hoffman Steamboat Bend 7738 Mc Bride	SACRAMENTO BUILDING PRODUCTS <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
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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
R-VALUE			R-VALUE			R-VALUE		
APPLIED			APPLIED			APPLIED		
MIN. INSTALLED WEIGHT PER			MIN. INSTALLED WEIGHT PER			MIN. INSTALLED WEIGHT PER		
THICKNESS			THICKNESS			THICKNESS		
13	3 1/2	38	12	14 3/4				
19	5 1/2	38						
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE								
MATERIAL FIBERGLASS			FORM BATTS			R VALUE		
						MANUFACTURER		
						CT OC JM		
MATERIAL						MANUFACTURER		
Foam						HILTI HANDY 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	TITLE	DATE
<i>[Signature]</i>	MANAGER	12-16-02
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE
REMARKS		