

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0104341
Insp Area: 2

Site Address: 7717 LARAMORE WY SAC Sub-Type: NSFR
Parcel No: 053-0160-023 LOT 23 MEADOWVIEW VILL 7 Housing (Y/N): N

CONTRACTOR
NEW FAZE DEVELOPMENT
2377 GOLD MEADOW WY STE 270
GOLD RIVER CA 95670

OWNER

ARCHITECT

Nature of Work: NSFR MP1200 6 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 714601 Date 4/9/01 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 _____ 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 April 9, 2001 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 work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier State Fund Policy Number 1536963-98 Exp. Date NOV. 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 become subject to the workers' compensation laws of California. 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 April 9, 2001 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.



INSTALLATION CARD
WESTERN ONE KOTE STUCCO SYSTEM
WESTERN STUCCO PRODUCTS CO. INC.

Job Address:

New Faze - Rainbow Springs
Lot - 23
Sacramento, CA 95815

ICBO Evaluation Service, Inc.
Report No. 3889

Date of Job Completion _____

Plastering Contractor

Name: G. Glenn Plastering
Address: 6330 Main Ave., Suite 4, Orangethorpe, CA 95662
Telephone Number (916) 942-8755

This is to certify that the plastering system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

G. Glenn Plastering
Signature of authorized representative of plastering contractor

Date

Installation card must be presented to the building inspector after completion of work and before final inspection.

NO _____

INSULATION
CERTIFICATE

WES PAC INSULATION

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:

New Face Develop LOT # 23 PLAN # 1232
STREET Rainbow Springs CITY Sacramento

EXTERIOR WALLS:

MANUFACTURER JM THICKNESS/TYPE 3.5" R VALUE 13

CEILING:

BATT: MANUFACTURER JM THICKNESS/TYPE 13" R VALUE 38

BLANKET: MANUFACTURER CT THICKNESS/TYPE H.T.S VALUE 38

SQUARE FOOTAGE COVERED 1636 NUMBER OF BAGS USED 24

FLOOR: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

SLAB ON GROUND: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS: MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____

GENERAL CONTRACTOR _____
CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR WES-PAC INSULATION, INC.
CALIFORNIA CONTRACTORS LICENSE # _____

Jerrid Stiles #487478 DATE _____
SIGNATURE OFFICE MGR. TITLE



CONSOLIDATED ENGINEERING
LABORATORIES

PROOFLoad TESTING

Project Name: Rainbow Springs Date: 02 AUG 01 CEL # 61737
Project Address: LARAMORE way Inspector: BRIAN J ARDRE
Permit# _____

1. Reported to TOM EVANS

2. Performed proofload tests on Anchor
Bolts for _____
installed at _____
See Attached

3. See attached data sheet(s) for location and quantity of anchors tested and the specified applied loads and results.

4. 100 % of the total installed were tested.
Total installed 15
Quantity Tested 15

5. Loads were applied in direct tension by using a calibrated hydraulic ram.
Ram Size/No. 20 TON

Gauge No. ENERPAC

Calibrated (date) 30 AUG 00

5a. Each _____ was randomly selected and individually proofload tested to the specified load of _____ pounds.

6. Loads were applied by use of a torque wrench.

6a. Each _____ was randomly selected and individually checked for proper installation by applying a specified torque of _____ ft. lbs.

7. All _____ tested were found to be satisfactory with no visible evidence of distress or failure.

(a) except as noted.

8. Non-compliance Report left at jobsite (Lab copy attached).

9. _____ hours spent performing reinspection.

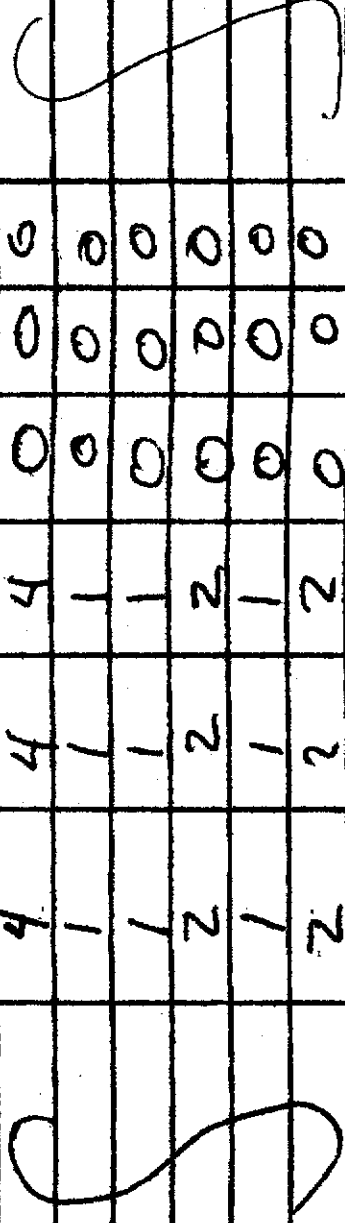
Unusual circumstances or problems?
 No Yes (Describe below)

Notified _____ at jobsite
and _____ at CEL.

Notes/Comments:
TENSION VALUES AS PER
LETTER DATED 30 September 2000
FROM A. A. LIND WITH LIND ASSOCIATES

CONSOLIDATED ENGINEERING LABORATORIES
PROOFLOAD TESTING SUMMARY

Project: RAINBOW SPRINGS CEL # 31737
 Inspector: DIAR J. AENXO Permit/OSHPD # _____ Date: 22 AUG 01

Test #	Test Location	Anchor Type	Total Installed	Total Tested	Quantity Tested		Quantity Retested		Applied Load lbs. Tension or ft. lbs. Torque	
					Pass	Fail	Pass	Fail		
1	LOT 13	Threaded Rod	2	2	2	0	0	0	5720 Tension	
2	LOT 14		4	4	4	0	0	0		
3	LOT 15		1	1	1	0	0	0		
4	LOT 16		1	1	1	0	0	0		
5	LOT 17		2	2	2	0	0	0		
6	LOT 18		1	1	1	0	0	0		
7	LOT 20		2	2	2	0	0	0		
8	LOT 22		Threaded Rod	2	2	2	0	0	0	5720 Tension

Remarks _____

NEW FAZE DEVELOPMENT, INC.
3187 DEL PASO BLVD.
SACRAMENTO, CA 95815

OFFICE

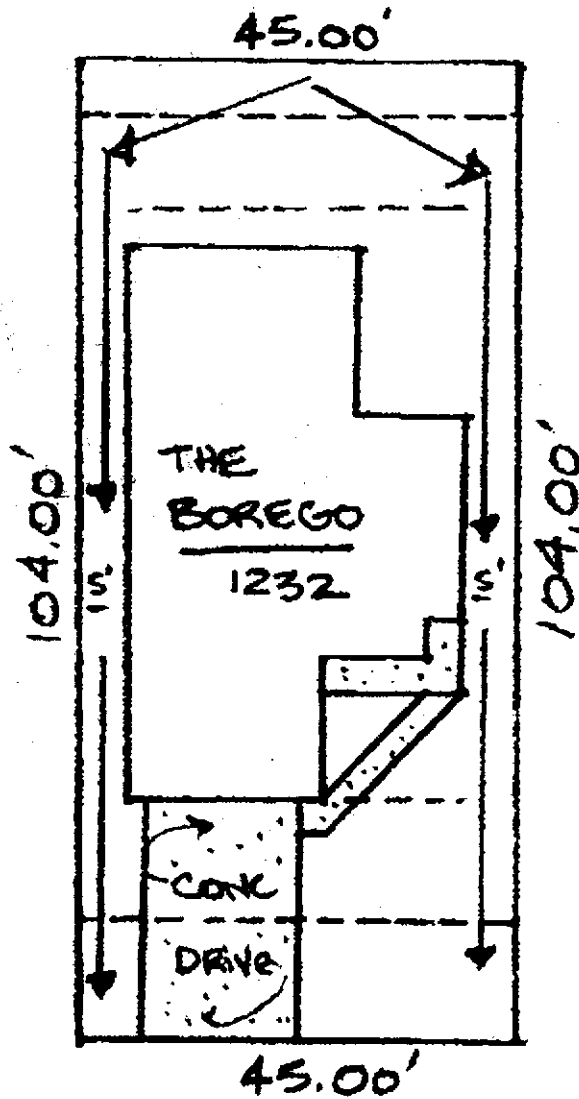
(916) 924-9906

(916) 924-9936

SITE

(916) 421-2749

(916) 421-2741
FAX



RAINBOW SPRINGS

LOT # 23 PLAN # 1232

7717 LARAMORE WAY, SACTO

APN: 053-0016-023

SCALE 1"=20'