

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

Permit No: 0012679

Insp Area: 4

Site Address: 190 JARVIS CR SAC

Parcel No: 225-1230-021

GATEWAY W 2 LOT 21

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

BEAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1973 8 RMS 1 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 (See 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 24791 Date 11-1-00 Contractor Signature M. Collins

**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 11-1-00 Applicant/Agent Signature M. Collins

**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

(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 11-1-00 Applicant Signature M. Collins

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.**

CITY OF SACRAMENTO  
NOV 9 2000  
NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES

### RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction    
  Addition    
  Remodels    
  Other

Project Address: 190 Jarvis Circle Lot 21     Assessor Parcel # 225-123-21

#### OWNER INFORMATION:

Legal Property Owner: Beazer Homes     Phone # 773-3888  
 Owner Address: 3009 Douglas Blvd #150     City Roseville     State CA     Zip 95661

#### CONTRACTOR INFORMATION:

Contractor: Beazer Homes     Lic. # 724191     Phone # 773-3668     Fax # 773-0425

#### PROJECT INFORMATION:

Land Use Zone \_\_\_\_\_     Occupancy Group R-5     Construction Type 5     Fed Code \_\_\_\_\_  
 No. of stories: 1     No. of rooms: \_\_\_\_\_     Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1973     2<sup>nd</sup> Floor Area 0     Basement 0     Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1973</u>
Garage/Storage	_____	<u>074</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: SFD

#### 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 # \_\_\_\_\_



No 18598

### INSTALLATION CARD

Job Address:  
Blazer Memories  
190 Jarvis Cir Lot 21  
Stucco

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

ICBO Evaluation Service, Inc.  
Report No. 3607  
Date of Job Completion 9/1/99

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

9/15/99  
Date

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

APPLICATION NO: *C14*

BLDG PERMIT NO:

GENERAL INFORMATION

THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER

DEPT 26525332446 AGS/99  
 TRN 392253 06/28/99  
 RECEIPT 706420 C#1 \$24411.00

THIS PERMIT TO CONNECT EXPIRES  
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL	SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>
TSD-1	29.00	COMMERCIAL USE	UNITS
SRCSD			
CONSTRUCTION	2,365.10		
IN-LIEU			
<b>TOTAL FEE</b>	<b>2,414.10</b>		

APN: *A portion of 225-0140-008*  
 DESCRIPTION: *SEWERAGE WEST WILLOW LOT 21*  
 SUBDIVISION: *WILLOW*  
 PROPERTY ADDRESS: *SAVINS*  
 OWNER: *BENZIE HUNDS*  
 MAILING ADDRESS: *3009 DUNBAR BLVD. STE 150*  
 CITY-STATE-ZIP: *Roseville, CA 95661* PHONE: *773 3887*  
 ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE: *Shirley VanHaven*  
 CONSOLIDATED UTILITY BILLING USE ONLY  
 ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_  
 BILLING COPY

# CERTIFICATION OF INSULATION

<p><b>ADDRESS OR TRACT</b></p> <p style="font-size: 2em; font-family: cursive;">BEAZER</p> <p style="font-size: 1.5em; font-family: cursive;">MEMORIES</p> <p style="text-align: right;">LOT # <i>ZI</i></p>	<p style="text-align: center;"><b>SACRAMENTO INSULATION CONTRACTORS</b></p> <p><input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026</p> <p><input type="checkbox"/> 3243 INDUSTRIAL DRIVE, YUBA CITY, CA 95993 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675</p> <p><input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675</p> <hr/> <p>DATE INSULATION COMPLETED</p> <p style="font-size: 1.5em; font-family: cursive;">8-20-99</p>
--	---

WALLS	CEILING	FLOORS
( SQUARE FEET)	( SQUARE FEET)	( SQUARE FEET)
TYPE OF INSULATION	TYPE OF INSULATION	TYPE OF INSULATION
MATERIAL <b>FIBERGLASS</b>	MATERIAL <b>FIBERGLASS</b>	MATERIAL <b>FIBERGLASS</b>
FORM <b>BATTS</b>	FORM <b>BATTS &amp; BLOW</b>	FORM <b>BATTS</b>
MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.
MANUFACTURER	MANUFACTURER	MANUFACTURER
<b>OCF</b>	<b>OCF</b>	<b>OCF</b>
	BAGS	
R-VALUE	R-VALUE	R-VALUE
APPLIED	APPLIED	APPLIED
INSTALLED	INSTALLED	INSTALLED
THICKNESS	THICKNESS	THICKNESS
<i>13</i>	<i>30</i>	<i>30</i>
<i>3 5/8"</i>	<i>9"</i>	<i>12"</i>
<i>30</i>	<i>30</i>	
<b>KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE</b>		
MATERIAL <b>FIBERGLASS</b>	FORM <b>BATTS</b>	R-VALUE
		MANUFACTURER <b>OCF</b>
AIR INFILTRATION SEALANT		
MATERIAL <b>FOAM</b>	MANUFACTURER <b>W R GRACE</b>	

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	<i>8-9-99</i>
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE
REMARKS:		

**CERTIFICATION OF COMPLIANCE**  
**SCHOOL DISTRICT DEVELOPMENT FEES**

PART I: TO BE COMPLETED BY APPLICANT	
Property Owner's Name	Bruce Jones
Owner's Address	3009 Douglas Blvd Ste 50 Roseville CA 95601
Project Address	Yates Circle Lot 21
Parcel Number	A portion of 25-0110-028
Subdivision Name	Memorial
Number of Units	1
Print Applicant's Name	Sheng Van Huan
Title of Applicant	Student Council
Date	6/2/99
Applicant's Signature	<i>Sheng Van Huan</i>
Telephone Number	773-3888
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT	
Plan Identification Number	1872
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	1872
Signature	<i>[Signature]</i>
Title	BE III
Date	6-2-99
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT	
District Certification Number	19-200
Fees Collected:	
Residential:	1872 Sq. Ft. X \$ 4.57 = \$ 8555.04
Apartment/Condominium:	Sq. Ft. X \$ = \$
Commercial/Industrial:	Sq. Ft. X \$ = \$
<p><b>NOTICE TO APPLICANT:</b> Pursuant to government code section 66020 (d), this will serve to notify you that the 90-day approval period in which you may protest the fees, or other payment identified above, will begin to run on the date in which the building or installation permit for this project is issued, or on which they are paid to the District, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.</p>	
Applicant Signature:	<i>Sheng Van Huan</i> Date: 6/2/99

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: *[Signature]*      DATE: 6/2/99  
 TITLE: PTK

# BEAZER HOMES

# Memories

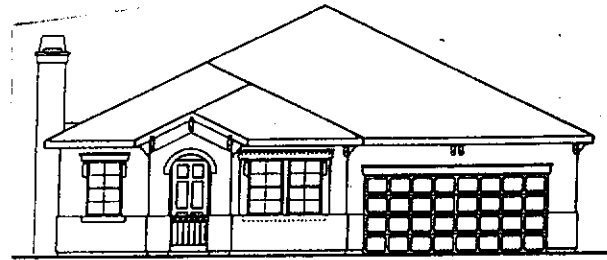
of Sacramento

WORK ORDER

Date: 9/22/99

Subcontractor Rep: SAC, CITY INSPECTION

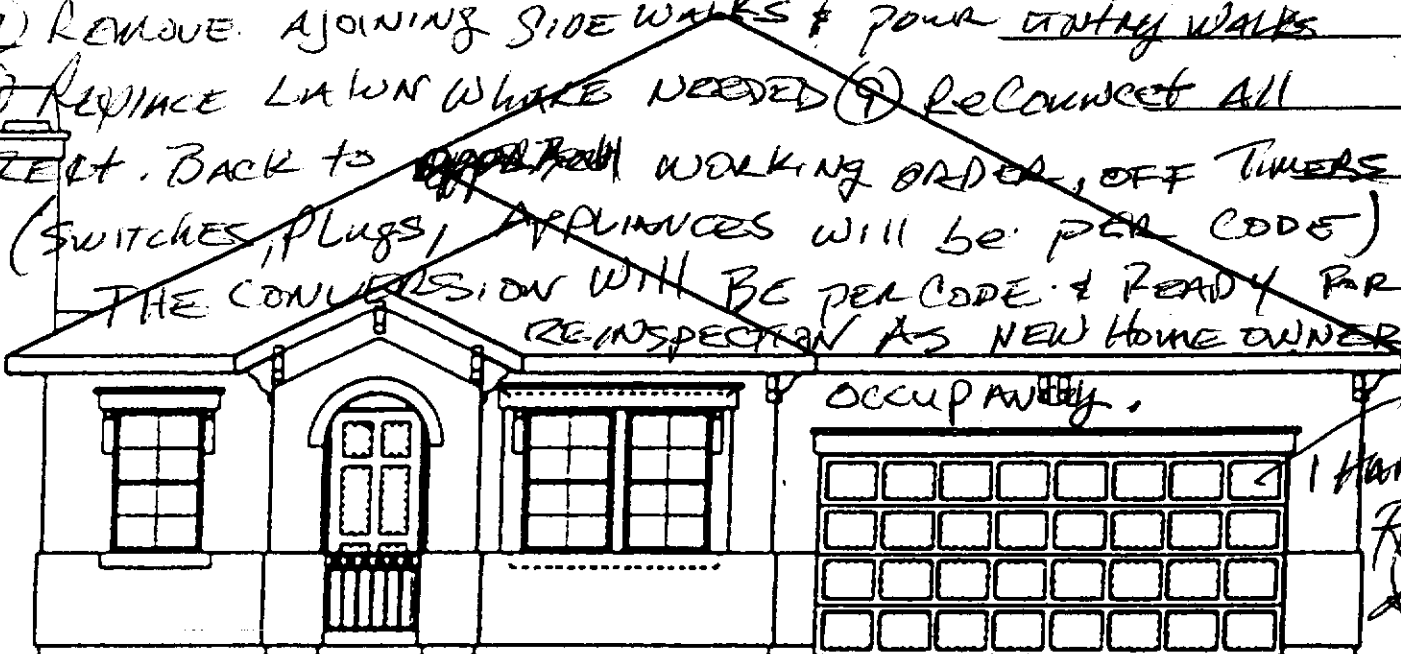
Builder Rep: BEAZER HOMES



LOT # 21

MODEL # 21 AT MEMORIES OF SAC. BY BEAZER HOMES  
SAC, CA. IN ADDITION TO A REINSPECTION THE FOLLOWING  
ITEMS WILL BE CONVERTED & COMPLETED PRIOR TO HOME  
OWNER OCCUPANCY.

- (1) SALES OFFICE CONVERSION TO GARAGE AS REQUIRED BY  
CODE. (2) WATER HEATER WILL BE INSTALLED AND VENTED PER  
CODE. (3) ALARM & LOW VOLTAGE MODEL INTER-LINK WILL  
BE DECONNECTED. (4) FENCE INSTALLED PER SUBDIVISION REQUIREMENTS
  - (5) DRIVEWAY POURED. (6) IRRIGATION RETURNED TO EACH LOT.
  - (7) REMOVE ADJOINING SIDE WALKS & POUR ENTRY WALKS
  - (8) REPLACE LAWN WALKS NEEDED (9) RECONNECT ALL  
ELECT. BACK TO ~~WORKING~~ WORKING ORDER, OFF TIMERS  
(SWITCHES, PLUGS, APPLIANCES WILL BE PER CODE)
- THE CONVERSION WILL BE PER CODE & READY FOR  
REINSPECTION AS NEW HOME OWNER  
OCCUPANCY.



I thank you  
Rob  
Keyser

# KwikKote

No. 200-006637

## Stucco System Installation Card

Job Name: MEMORIES <sup>J</sup>  
 Address: ~~676 PLEASANTON CTR.~~  
 190 JARVIS *John Young J. J.*  
 Lot #: 0000021

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

ICBO Evaluation Service, Inc.  
 Report No. 3607  
 Date of Job Completion: May 01, 2002

Home Builder: BEAZER HOMES  
 Address: 3009 DOUGLAS BLVD #150  
 ROSEVILLE, CA

Stucco Contractor: KENYON PLASTERING, INC.  
 Address: PO BOX 2077  
 North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as  
 issued by the Stucco Manufacturer: 1001

Card Print Date: 06/07/2002

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.

*John Ingalls*  
 \_\_\_\_\_  
 Signature of authorized representative of stucco contractor

*6-7-02*  
 \_\_\_\_\_  
 Date



**N**orman

May 24, 1999

**S**cheel

Beazer Homes  
3309 Douglas Blvd., Suite 150  
Roseville, CA 95661

**S**tructural

Re: The Memories Plan 3 (Job #99112)


**E**ngineer

To Whom It May Concern:

This letter is to clarify that it is acceptable to install a 22"x 30 access hole through the floor sheathing into the attic space over the bedroom at the front of the house.

6939 Sunrise Blvd.  
Suite 123  
Citrus Heights, CA 95610  
(916) 726-0612  
(916) 726-3189 (fax)

If you have any further questions please contact Robert Coon.

  
NORMAN SCHEEL  
STRUCTURAL ENGINEER

NORMAN SCHEEL  
Structural Engineer  
Email: [norm@nsse.com](mailto:norm@nsse.com)

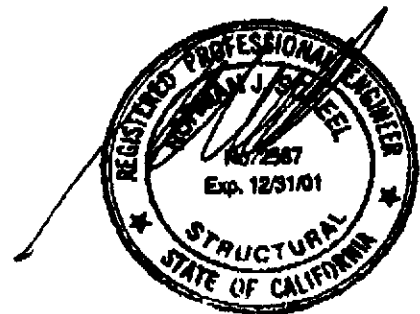
ROBERT COON  
Project Manager  
Email: [robi@nsse.com](mailto:robi@nsse.com)

TRACY HARRIS P.E.  
Project Engineer  
Email: [tracy@nsse.com](mailto:tracy@nsse.com)

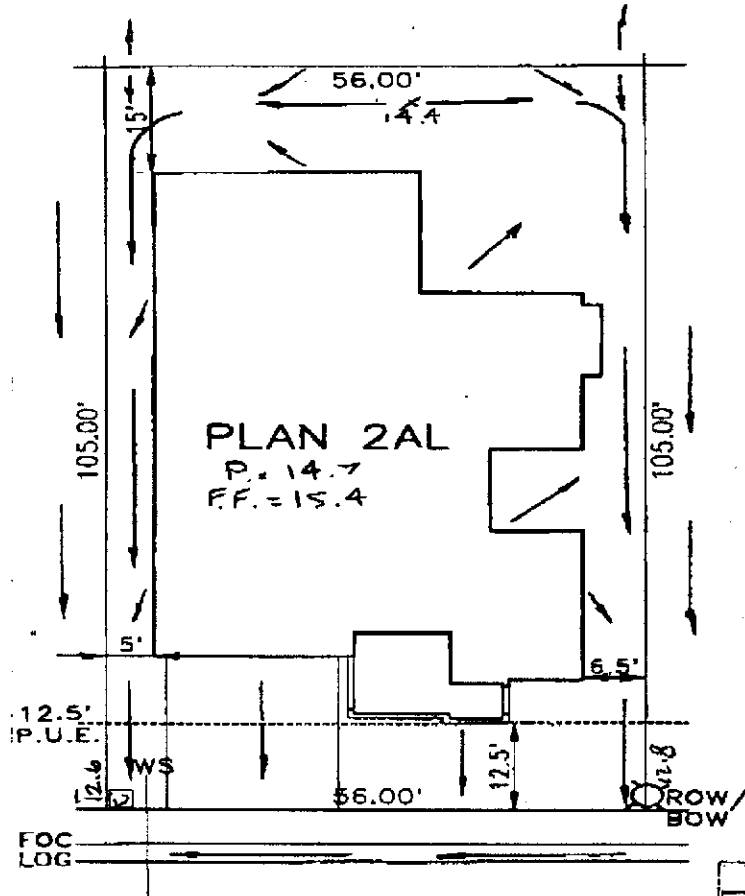
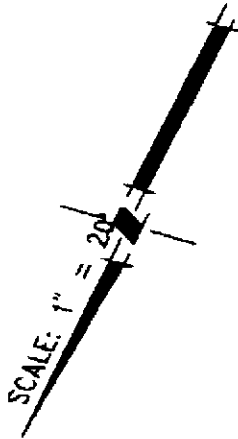
PAULO IBAÑEZ  
Design Engineer  
Email: [paulo@nsse.com](mailto:paulo@nsse.com)

TERRI SCHNEIDER P.E.  
Project Engineer  
Email: [terri@nsse.com](mailto:terri@nsse.com)

STEVEN COOKSEY  
C.A.D. Supervisor  
Email: [steve@nsse.com](mailto:steve@nsse.com)



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 WALL ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.



# JARVIS CIRCLE

min 20'  
driveway  
required

ROUTED APPROVAL		INITIALS
President	<input checked="" type="checkbox"/>	
Project Development	<input type="checkbox"/>	
Construction	<input type="checkbox"/>	
Marketing	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<i>[Signature]</i>

⊙ = STREET LIGHT  
⊠ = UTILITY SERVICE BOX

**PLOT PLAN  
LOT 21**  
GATEWAY WEST VILLAGE NO.2  
FOR  
BEAZER HOMES  
SACRAMENTO COUNTY CALIFORNIA

**WOOD-RODGERS INC.**

DATE: APR. 2000	DRAWN: HMB	CHECKED: JCR 10/10/00	PROJECT NO: 1031.017
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LOT COVERAGE = 39.3%