

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0311788

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 5671 ERSKIN FISH WY SAC

Parcel No: 201-0580-037 NORTHPT PK 31 LOT 37

CONTRACTOR

CAMBRIDGE HOMES
9852 BUSINESS PARK DR STE. B
SACRAMENTO CA. 95827

OWNER

CAMBRIDGE HOMES
9852 BUSINESS PARK DR STE. B
SACRAMENTO CA. 95827

ARCHITECT

Nature of Work: MP 2676 1 STORY 9 ROOM SFR

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 766741 Date _____ 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 8-14-07 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 the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ Exp Date _____

____ (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 8-14-07 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.

Cam 2455

Project Address: 5671 ERSKIN FISH WAY Assessor Parcel # 201-0580-037
Lot Number: 37 Subdivision NONTA DOLMTE PARK VILLAGE #31

OWNER INFORMATION:

Legal Property Owner: CAMBRIDGE HOMES Phone# 643-1440
Owner Address: 1816 TRIBUTE RD City SACTO State CA Zip 95815

CONTRACTOR INFORMATION:

Contractor: CAMBRIDGE Lic. # 766741 Phone # 643-1440 Fax _____

PROJECT INFORMATION:

Land Use Zone R1A Occupancy Group R3 Construction Type VN Fed Code 1A
No. of Stories: ONE No. of Rooms: 9 Street Width: _____
1st Floor Area 2676 2nd Floor Area 0 Basement N/A Roof Material TILE

AREA IN SQUARE FOOT OF:

Dwelling/Living 2676
Garage/Storage 695
Decks/Balconies _____
Carports _____

33711

SCOPE OF WORK: NEW SFD
PLAN #2

0311788

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) Assessors Parcel Number
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

COUNTY SANITATION DISTRICT 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE LFG
PERMIT AND CALCULATION 8 AUG 03

APPLICATION NO: SAC CITY BLDG PERMIT NO 500 1103-00 697

GENERAL INFORMATION
MASTER AMO

THIS PERMIT GOOD ONLY WHEN
VALIDATED BY THE CASHIER

FIRST PERMITS
SUP 2003 - 000815
6 x 1853 = 11118
2 x 5255 = 10510
42628

PAID
8 AUG 03

THIS PERMIT TO CONNECT EXPIRES
ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF
CSD - OK 1853	11118		
SRCSD - OK 5255	31530	5255	
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	7108		
	64287		

APN: 201-0580-037-038-039-040-041-042

DESCRIPTION / SUBDIVISION: NorthPointe Park Village 31st LOT 37-38-39 40-41-42

PROPERTY ADDRESS: 5071 ERSKIN FISH WAY

OWNER: CARBRIDGE HOMES

MAILING ADDRESS: 1816 TRIBUTE ROAD

CITY/STATE/ZIP: SAC TO CA 95815 PHONE: 648 1444

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

APPLICANT SIGNATURE

CONSOLIDATED UTILITY BILLING USE ONLY

[Handwritten Signature]

ACCT _____ INPUT _____ START _____

Certification of Compliance School District Development Fees

PART 1 To be completed by APPLICANT

Owner's Name & Address CAMBRIDGE HOMES 1816 TRIBUTE RD 91815
 Project Address 5671 ERSKINE FISH WAY
 Parcel Number 201-5580-037 Lot No. 37
 Subdivision Name HOATINOWNE PARK VILLAGE 31 Number of Units ONE
 Applicant's Signature & Title [Signature] / Processor
 Date 8-03-02 Phone No. 978-9720

NOTICE TO APPLICANT: 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(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

PART 2 To be completed by BUILDING DEPARTMENT

Plan Identification Number PLAN # 2 Building Type (CHECK ONE)
 Residential
 Apartment/Condominium
 Commercial/Industrial
 Square Feet of Chargeable Building Area 2676
 Signature [Signature] Date 8-11-03
 Title Building Tech

PART 3 To be completed by SCHOOL DISTRICTS

Grant Joint Union High School District
 District Certification No. 04-169
 EXEMPT _____
 Comments RECEIPT # 8519
 RESIDENTIAL / APARTMENT / CONDOMINIUM
2676 Sq. Ft. x \$ 2.14 = \$ 5726.64
 COMMERCIAL / INDUSTRIAL
 _____ Sq. Ft. x \$ _____ = \$ _____
 OTHER FEE: TYPE _____
 _____ Sq. Ft. x \$ _____ = \$ _____
 TOTAL FEES COLLECTED = \$ 5726.64

Robla Elementary School District
 District Certification No. _____
 EXEMPT _____
 Comments _____
 RESIDENTIAL / APARTMENT / CONDOMINIUM
 _____ Sq. Ft. x \$ _____ = \$ _____
 COMMERCIAL / INDUSTRIAL
 _____ Sq. Ft. x \$ _____ = \$ _____
 OTHER FEE: TYPE _____
 _____ Sq. Ft. x \$ _____ = \$ _____
 TOTAL FEES COLLECTED = \$ _____

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 and any other authorized requirements have been complied with by the above signed applicant.

GRANT Authorized School District Official **ROBLA**

Signature [Signature]
 Title BUDGET TECHNICIAN
 Date 8-11-03

Signature _____
 Title _____
 Date _____

Original: Grant Joint Union High School District/
 Robla Elementary School District
 1st Copy: Building Department
 2nd Copy: Applicant

CERTIFICATION OF INSULATION

ADDRESS OR TRACT <div style="font-size: 1.5em; font-family: cursive;">Cambridge North Pointe</div> <div style="float: right; margin-top: 10px;">LOT # 37</div>	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 <div style="font-size: 1.2em; font-family: cursive;">12-23-03</div>
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WALLS			CEILINGS			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 INSTALLED		APPLIED THICKNESS	R - VALUE INSTALLED		APPLIED THICKNESS	R - VALUE INSTALLED		APPLIED THICKNESS
13 19		3 1/2" 5 1/2"	30		9" 12"			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE								
MATERIAL FIBERGLASS		FORM BATTS	R VALUE			MANUFACTURER		
						CT	OC	JM
AIR INFILTRATION SEALANT								
MATERIAL <i>Foam</i>					MANUFACTURER			
					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	JC	TITLE MANAGER
SIGNATURE — GENERAL CONTRACTOR		DATE 12-23
REMARKS		

KwikKote

No. 200-917476

Stucco System Installation Card

Job Name: PARKSIDE @ NORTHPOINTE
Address: 5671 ERSKIN FISH WAY
 , CA
Lot #: 0000037

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

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

Home Builder: CAMBRIDGE HOMES
Address: 1816 TRIBUTE ROAD STE. 100
 SACRAMENTO, CA

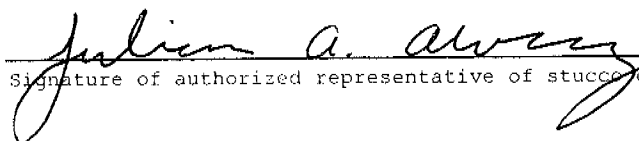
Stucco Contractor: KENYON PLASTERING, INC.
Address: PO BOX 2077
 North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 12/30/2003

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.



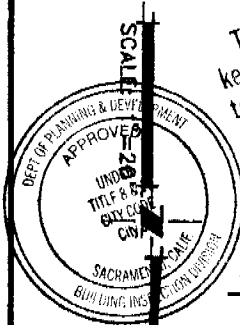
Signature of authorized representative of stucco contractor

12-29-03

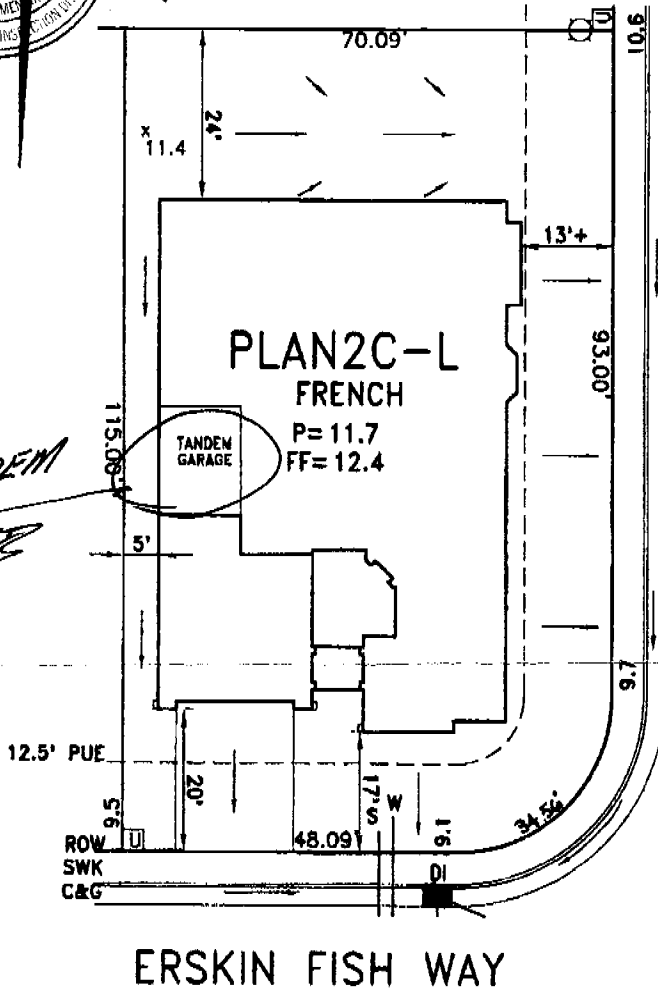
Date

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.

This set of plans and specifications shall be kept on the job at all times and shall be subject 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.



No TANDEM



POP BECKER STREET

ERSKIN FISH WAY

LOT SQ. FT.= 7956 LOT COVERAGE=38.0 %

KEY:

- ▲ = TRANSFORMER
- = FIRE HYDRANT
- = UTILITY BOX
- = STREET LIGHT
- SP = STREET LIGHT SERVICE POINT

ADDRESS:
5671 ERSKIN FISH WAY

PLOT PLAN
LOT 37
Northpointe Village 31
FOR
CAMBRIDGE HOMES
CITY OF SACRAMENTO CALIFORNIA

WOOD RODGERS
ENGINEERING • PLANNING • MAPPING • SURVEYING
2201 O STREET, OLD D. 10018, SACRAMENTO, CA 95816
PHONE: (916) 341-7760 FAX: (916) 341-7767

DATE: 07-2003	DRAWN: HMB	CHECKED:	PROJECT NO: 1045.079
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J:\Jobs\Northpointe Phase 2\Village 31\Civil\Plotplans\037.dwg B/D/03 9:32am jshilinsky