

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9904082

Insp Area: 4

Site Address: 3607 POPPY HILL WY SAC

Parcel No: 225-1160-022

GATEWAY WEST LOT 95

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

BLOODGOOD SHARP BUSTER
2356 GOLD MEADOW WY #201
GOLD RIVER CA 95670

Nature of Work: NEW HOME, MP1659, 8 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 724191 Date 4/29/99 Contractor Signature Sheep Van Maen

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 4/29/99 Applicant/Agent Signature Sheep Van Maen

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 Policy Number WA265D004147089 Exp Date 4/00

____ (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 4/29/99 Applicant Signature Sheep Van Maen

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	<input type="checkbox"/>	MF	<input type="checkbox"/>
CSD-1	COMMERCIAL USE				UNITS
SROCD					
CONSTRUCTION					
IN-LIEU					
TOTAL FEE					

APN: _____

DESCRIPTION _____

SUBDIVISION _____

PROPERTY ADDRESS _____

OWNER _____

MAILING ADDRESS _____

CITY STATE ZIP _____

DATE _____

BY _____

CERTIFICATION OF INSULATION

PART I
GENERAL

ADDRESS OR TRACT	SACRAMENTO INSULATION CONTRACTORS
LOT #	<input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 3243 INDUSTRIAL DRIVE, YUBA CITY, CA 95993 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	

PART II
AREAS INSULATED

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 ID		MANUFACTURER'S PRODUCT ID			MANUFACTURER'S PRODUCT ID	
MANUFACTURER		MANUFACTURER			MANUFACTURER	
OCF		OCF			OCF	
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL FIBERGLASS		FORM BATTS			R VALUE OCF	
AIR INFILTRATION SEALANT						
MATERIAL W R GRACE						

PART III
CERTIFICATION

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
	MANAGER	
SIGNATURE GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

PART I: TO BE COMPLETED BY APPLICANT

Property Owner's Name _____
 Owner's Address _____
 Project Address _____
 Parcel Number _____
 Subdivision Name Lot 95
 Number of Units _____
 Print Applicant's Name _____ Applicant's Signature _____
 Title of Applicant _____
 Date _____ Telephone Number _____

PART II: TO BE COMPLETED BY BUILDING DEPARTMENT

Plan Identification Number _____
 Building Type (Check One)
 Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area _____
 Signature _____ Date 1-23-91
 Title _____

PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT

District Certification Number _____		
Fees Collected		
Residential:	Sq. Ft. X \$	= \$ <u>7500</u>
Apartment/Condominium:	Sq. Ft. X \$	= \$
Commercial/Industrial:	Sq. Ft. X \$	= \$

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, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.

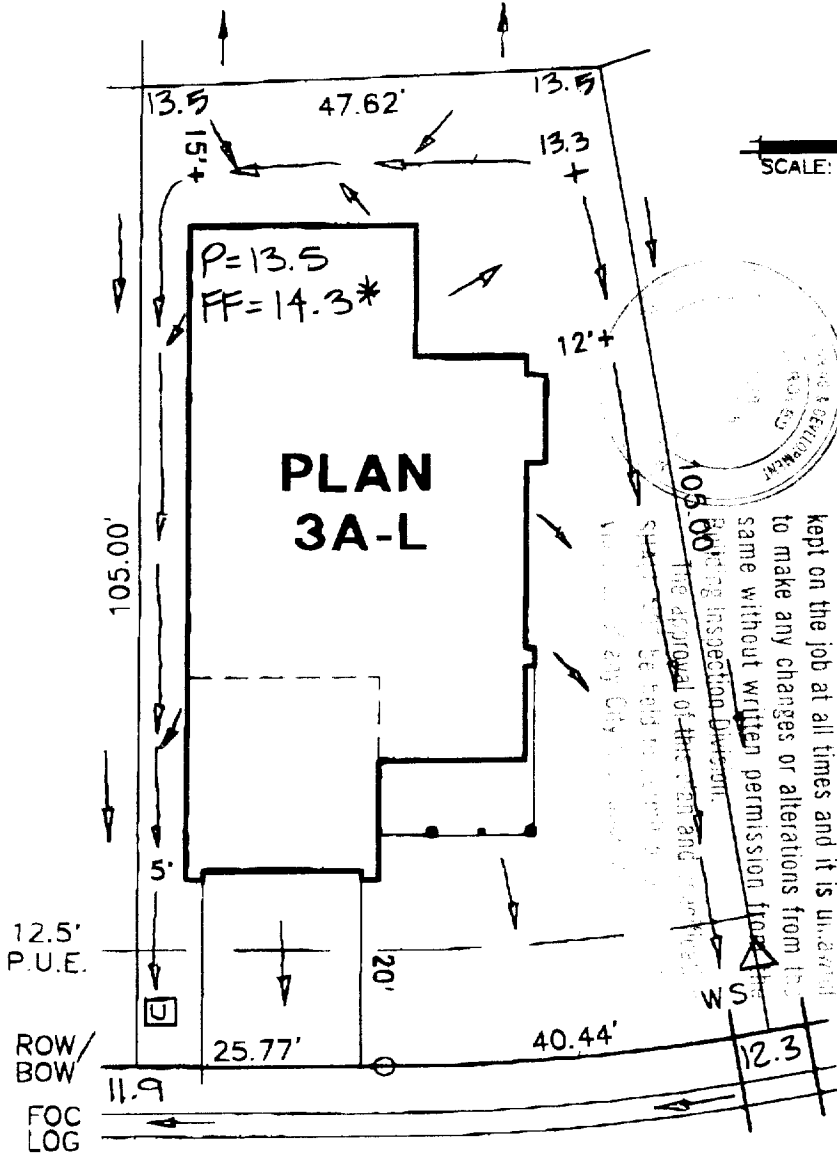
Applicant Signature: _____ **Date:** 1

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: _____ **DATE:** _____
TITLE: _____

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINE, DESIGN DRAINAGE CONTROL ELEVATIONS, AND DIRECTION OF DRAINAGE FLOW TO CONFORM WITH LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN IS APPROXIMATE EXCEPT FOR THOSE SETBACKS WHICH ARE MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.



RC	
President	
Project Development	
Construction	✓ D
Marketing	
Admin.	
Accounting	

This set of plans and specifications is to be kept on the job at all times and it is understood that no changes or alterations from the same without written permission from the Building Inspection Division.

POPPY HILL WAY

* ADDITIONAL 0.1' FOUNDATION HEIGHT REQUIRED

☐ = UTILITY SERVICE BOX

△ = UTILITY TRANSFORMER

LOT COVERAGE = 35%
3607 POPPY HILL WAY

PLOT PLAN
LOT 95
GATEWAY WEST-VILLAGE NO. 1
FOR
BEAZER HOMES
SACRAMENTO CALIFORNIA

WOOD-RODGERS INC.

DATE: APR. 1999	DRAWN: LCS	CHECKED: JWH 4-20-99	PROJECT NO: 98BEZ-009
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CERTIFICATION OF INSULATION

PART I GENERAL

BEAZER

LOT # 95

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 3243 INDUSTRIAL DRIVE, YUBA CITY, CA 95993 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1631, RENO, NV 89505 LIC. #10675
- 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

GATEWAY WEST

DATE INSULATION COMPLETED

PART II AREAS FINISHED

WALLS (SQUARE FEET)	CEILINGS (SQUARE FEET)	FLOORS (SQUARE FEET)
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.
OCF	OCF	OCF
	BAGS	

13	3 5/8	30 30	9" 12"			
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MATERIAL FIBERGLASS	FORM BATTS	R VALUE	MANUFACTURER OCF
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MATERIAL FOAM	MANUFACTURER W R GRACE
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SIGNATURE—INSULATION CONTRACTOR <i>[Signature]</i>	TITLE MANAGER	DATE 7-7-99
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS:

Natomas Unified School District
 1515 Sports Drive, #1 • Sacramento, CA 95834-1905
 Phone 916/641-3300 • Fax 916/928-1629

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

Property Owner's Name Beazer Homes
 Owner's Address 3009 Douglas Blvd., Ste. 150., Roseville, CA. 95661
 Project Address 3607 Poppy Hill Way
 Parcel Number 225-1160-022
 Subdivision Name Gateway West Village 1 Lot 95
 Number of Units 1
 Print Applicant's Name Sheryl Van Maren Applicant's Signature Sheryl Van Maren
 Title of Applicant Starts Coordinator Telephone Number 773-3888
 Date 4/23/99

Plan Identification Number 1659
 Building Type (Check One) Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area 1659
 Signature [Signature] Date 4-23-99
 Title _____

District Certification Number _____
 Fees Collected:
 Residential: 1659 Sq. Ft. X \$ 4.57 = \$ 7581.63
 Apartment/Condominium: _____ Sq. Ft. X \$ _____ = \$ _____
 Commercial/Industrial: _____ Sq. Ft. X \$ _____ = \$ _____

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, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.

Applicant Signature: Sheryl Van Maren Date: 4/23/99

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: 4/23/99
 TITLE: Director Facilities

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE

PERMIT AND CALCULATION SHEET

APPLICATION NO. CITY NO. 18418
 BLDG. PERMIT NO. 251250 STADIUM

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

DEPT 26 251250 4/23/99
 RECEIPT TRAN 387826 04/23/99 \$2,414.00
 RECEIPT 695354 C41 \$2,414.00

FEE CALCULATION

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

INSPECTION	RESIDENTIAL	COMMERCIAL USE	UNITS
SD-1			
RCSO	29.00		
CONSTRUCTION	2,385.00		
N-LIEU			
TOTAL FEE	2,414.00		

BUILDING USE

RESIDENTIAL SF MF

PN: 225-1160-022

SCRIPTION / DIVISION

PROPERTY ADDRESS Gateway West Village 1 LOT: 95

OWNER Beazer Homes

MAILING ADDRESS 3009 Douglas Blvd. Suite 150

STATE-ZIP Roseville, CA 95661 PHONE 773-3888

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

INSTALLER SIGNATURE Shunde Van Plaan

CONSOLIDATED UTILITY BILLING USE ONLY



INSTALLATION CARD

No 18418

Stucco System Trade Name: KWIK KOTE
 Name Stucco Manufacturer: KWIK KOTE CORP.
 ICBO Evaluation Service, Inc.
 Report No. 3607
 Date of Job Completion _____

Job Address: Blazer Reflections of Sac
3607 Poppy Hill Way 95661
Sacramento

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 of authorized representative of stucco contractor

Date 7/5/99