

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

**Permit No: 0111056**  
**Insp Area: 4**  
Thos Bros:  
**Sub-Type: NSFR**  
**Housing (Y/N): N**

**Site Address: 10 ASTERISM CT SAC**  
Parcel No: 225-1270-022 NATOMAS CROSS 17 LOT 4

CONTRACTOR  
BECK HOMES  
3114 WEST HAMMER LANE  
STOCKTON CA. 95209

OWNER

ARCHITECT

**Nature of Work: NSFR MP2634 2 STORY 10 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 478421 Date 9-14-01 Contractor Signature Orin Tynes

**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 9-14-01 Applicant/Agent Signature Orin Tynes

**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:

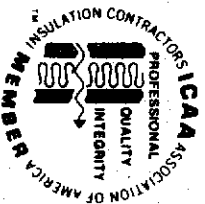
Carrier FREMONT COMPENSATION Policy Number WN99591990-06 Exp Date 07/29/2000

\_\_\_\_ (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.

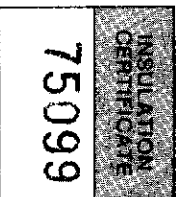
Date 9-14-01 Applicant Signature Orin Tynes

**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.**



**INSULATION CONTRACTORS  
ASSOCIATION  
OF AMERICA**



1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH  
CALIFORNIA REGULATIONS, CALIFORNIA ASSOCIATION OF INSULATION CONTRACTORS  
CERTIFICATE # 75099, IN THE BUILDING LOCATED AT

Part Done by next LOT # 4 TRACT #

STREET 10 Asterism Ct CITY Springdale

**EXTERIOR WALLS:**

MANUFACTURER IT THICKNESS/TYPE 3/8 R- VALUE 13

**CEILING:**

BATTS: IT THICKNESS/TYPE 1/2 R- VALUE 38

MANUFACTURER IT THICKNESS/TYPE 1/2 R- VALUE 38

BLOWN IN: IT MINIMUM THICKNESS 1 1/2 R- VALUE 38

MANUFACTURER IT THICKNESS/TYPE IT R- VALUE IT

SQUARE FOOTAGE COVERED IT NUMBER OF BAGS USED IT

FLOORS: IT THICKNESS/TYPE IT R- VALUE IT

MANUFACTURER IT THICKNESS/TYPE IT R- VALUE IT

WIDTH OF INSULATION IT INCHES IT

FOUNDATION WALLS: IT THICKNESS/TYPE IT R- VALUE IT

MANUFACTURER IT THICKNESS/TYPE IT R- VALUE IT

GENERAL CONTRACTOR IT TITLE IT

CALIFORNIA CONTRACTORS LICENSE # IT DATE IT

INSULATION CONTRACTOR **ARCADE INSULATION** SIGNATURE IT TITLE IT

CALIFORNIA CONTRACTORS LICENSE #263784 IT DATE IT

**@lpha Inspections  
& Material Testing**

70 Rancho Del Sol • Camino, CA 95709  
(530) 644-6726 • (916) 825-7733

DATE: 12/31/01  
PROJECT NO. 7001  
PROJECT: J.B. / BACK LOT # 4  
LOCATION: ASTORIA

DSA FILE/APPL. NO. \_\_\_\_\_  
OSHPD NO. \_\_\_\_\_  
PERMIT NO. \_\_\_\_\_  
WEATHER: \_\_\_\_\_ TEMP: \_\_\_\_\_

**PROOF LOAD**     **TORQUE**     **WITNESSING**

Testing was performed on the following items. All tests were performed with the following calibrated equipment:

RAM: AI 755    GAGE: AI 755    TORQUE WRENCH: \_\_\_\_\_  
RAM: \_\_\_\_\_    GAGE: \_\_\_\_\_    TORQUE WRENCH: \_\_\_\_\_

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST
<u>P102 / POYLED ANCHOR BOLT</u>	<u>5/8"</u>	<u>1</u>		<u>6855</u>	<u>2500</u>	<u>1</u>	<u>0</u>	<u>0</u>

Type of epoxy / grout used: \_\_\_\_\_ Method of application / cleaning: \_\_\_\_\_

Visual inspection was performed on \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Show up / Stand by time. Job Canceled / Delayed due to: \_\_\_\_\_

All non-compliance items were brought to the attention of: \_\_\_\_\_ at the job site.

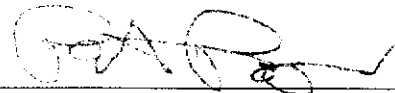
NON-COMPLIANCE REPORT ATTACHED     ADDITIONAL TESTS ATTACHED

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To the best of my knowledge, the above **WAS / WAS NOT** performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: \_\_\_\_\_

Inspector: \_\_\_\_\_



# @lpha Inspections & Material Testing

70 Rancho Del Sol • Camino, CA 95709  
(530) 644-6726 • (916) 825-7733

DATE: 10-7-01  
 PROJECT NO. 7001  
 PROJECT: 3 E. / 3000 W. / 1000 S.  
 LOCATION: 1000 S. / 3000 W.

DSA FILE/APPL. NO. \_\_\_\_\_  
 OSHPD NO. \_\_\_\_\_  
 PERMIT NO. \_\_\_\_\_  
 WEATHER: 100% D.R. TEMP: 63°

**PROOF LOAD**     **TORQUE**     **WITNESSING**

Testing was performed on the following items. All tests were performed with the following calibrated equipment:

RAM: 2" x 2" x 2" GAGE: 1000 TORQUE WRENCH: \_\_\_\_\_  
 RAM: \_\_\_\_\_ GAGE: \_\_\_\_\_ TORQUE WRENCH: \_\_\_\_\_

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST
<u>3" x 3" PROVED ANCHOR 1000 S</u>	<u>3"</u>	<u>3</u>		<u>6955</u>	<u>2670</u>	<u>3</u>	<u>0</u>	<u>0</u>

- Type of epoxy / grout used: \_\_\_\_\_ Method of application / cleaning: \_\_\_\_\_
- Visual inspection was performed on \_\_\_\_\_
- Show up / Stand by time. Job Canceled / Delayed due to: \_\_\_\_\_
- All non-compliance items were brought to the attention of: \_\_\_\_\_ at the job site.

NON-COMPLIANCE REPORT ATTACHED     ADDITIONAL TESTS ATTACHED

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

To the best of my knowledge, the above WAS / WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: \_\_\_\_\_ Inspector: [Signature]

# @lpha Inspections & Material Testing

70 Rancho Del Sol • Camino, CA 95709  
(530) 644-6726 • (916) 825-7733

DATE: 11-8-01  
PROJECT NO. 2001  
PROJECT: INS/BLOCK MOUNTS 11/7/01  
LOCATION: 1451A R. 5th ST

DSA FILE/APPL. NO. \_\_\_\_\_  
OSHPD NO. \_\_\_\_\_  
PERMIT NO. \_\_\_\_\_  
WEATHER: \_\_\_\_\_ TEMP: \_\_\_\_\_

PROOF LOAD     TORQUE     WITNESSING

Testing was performed on the following items. All tests were performed with the following calibrated equipment:

RAM: \_\_\_\_\_ GAGE: \_\_\_\_\_ TORQUE WRENCH: \_\_\_\_\_  
RAM: \_\_\_\_\_ GAGE: \_\_\_\_\_ TORQUE WRENCH: \_\_\_\_\_

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST

Type of epoxy / grout used: CONCRETE SET-26 Method of application / cleaning: AIR/BRUSH  
 Visual inspection was performed on THE SURFACE OF ONE 5/8" DIA. HULL MOUNT  
IN 11 PREPARED AND CLEANED WITH 1/4" DIA. 10" M.M.  
PROBING AT POINTS OF CONCERN

Show up / Stand by time. Job Canceled / Delayed due to: \_\_\_\_\_  
 All non-compliance items were brought to the attention of: \_\_\_\_\_ at the job site.

NON-COMPLIANCE REPORT ATTACHED     ADDITIONAL TESTS ATTACHED

NOTES: \* CONC. IS NOT SETTING PROPERLY  
NOTE: 11/8/01

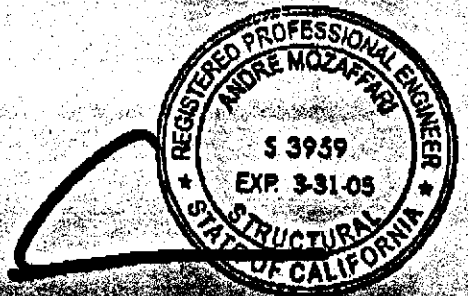
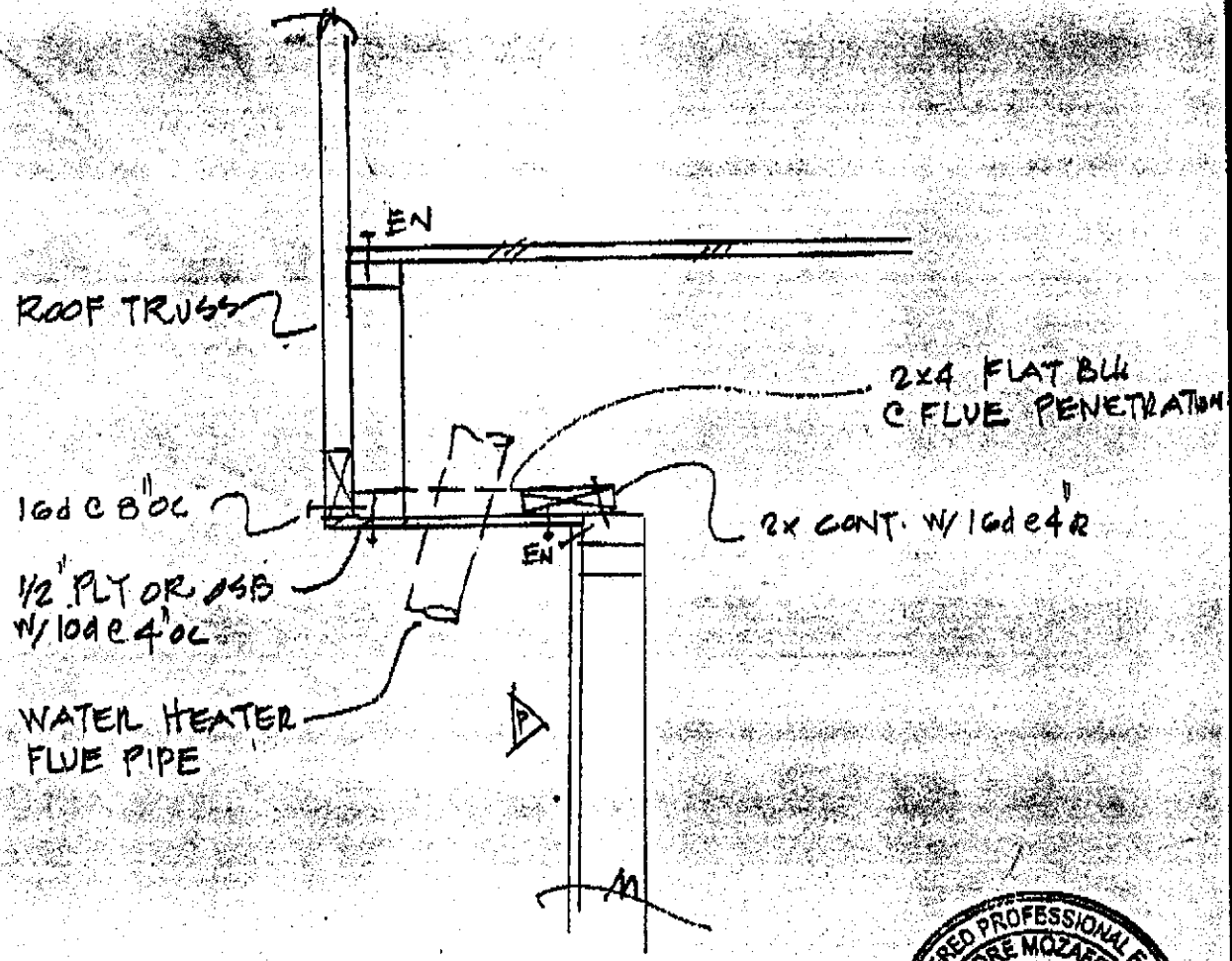
To the best of my knowledge, the above WAS / WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: \_\_\_\_\_ Inspector: [Signature]



BED HOME	
2639 PLAN	
Date:	12/4/01
Page No.:	

JOB 99100



(808) 872-4450

FAX (808) 872-4456