

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0013080

Insp Area: 4

Site Address: 110 AVIATOR CR SAC

Parcel No: 225-1450-079

NORTHPT PK 1 LOT 79

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

WESTERN PACIFIC HOUSING
1210 CENTRAL BLVD
BRENTWOOD CA. 94513

OWNER

ARCHITECT

Nature of Work: MP 2092 2 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 675709 Date 11/28/00 Contractor Signature N. 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 11/28/00 Applicant/Agent Signature N. 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 FAGLE INS. CO. Policy Number 4S-0000273 Exp Date 3/19/2001

____ (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 be 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 11/28/00 Applicant Signature N. 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.



BASALITE®
 PACIFIC STUCCO SYSTEMS

4290 Roseville Road
 North Highlands, CA 95660-5710
 (916) 486-4094
 Fax (916) 486-4187

Installation Card
 Fiber Reinforced Stucco

Job Name and Address : WESTERN PACIFIC
SIENA

ICBO# 5269

3-30-01
 Date of job completion
LOT-34

Plastering Contractor

Name: VISION PLASTERING

Address: 8974 GREEN BANK

Telephone No. () 987-3324

Approved contractor as issued by Basalite/Pacific Stucco

This is to certify the exterior coating system at the above address, has been installed in accordance with the evaluation report specified above and the manufacturers instructions.

[Signature]
 Signature of authorized representative of
 plastering contractor

4-02-01
 Date

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

Project Address: 109 Aviator Circle Assessor Parcel # 225 1450 034 6 opt
Lot Number: 34 Subdivision Northpointe Park Unit #

OWNER INFORMATION:

Legal Property Owner: Western Pacific Housing Phone# (925) 634-6023
Owner Address: 1210 Central Boulevard; City Brentwood, State Ca. Zip 94513

CONTRACTOR INFORMATION:

Contractor: Western Pacific Lic# 675709/B Phone # (925) 634-6023 Fax 634-6166

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A

No. of Stories: 2 No. of Rooms: _____ Street Width: _____

1st Floor Area _____ 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living 2645
Garage/Storage 484
Decks/Balconies _____
Carports _____

SCOPE OF WORK: _____

- 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) Assessor's Parcel Number
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

Date:

Received by: (staff)

Permit #

2
C
E
Y

CERTIFICATION OF INSULATION

PART I GENERAL	ADDRESS OR TRACT	SACRAMENTO INSULATION CONTRACTORS
	WESTERN Pacific LOT # 34 SIENA	<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

PART II AREAS INSULATED	WALLS		CEILING			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	
	OCF		OCF			OCF	
	BAGS						
	R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
13	3 5/8	30 30	9" 12"				
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE							
MATERIAL FIBERGLASS		FORM BATTS		R VALUE		MANUFACTURER OCF	
AIR INFILTRATION SEALANT							
MATERIAL FOAM				MANUFACTURER W R GRACE			

THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.		
SIGNATURE - INSULATION CONTRACTOR <i>Bill Geary</i>	TITLE MANAGER	DATE 3/26/01
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE 3/30/1
REMARKS		

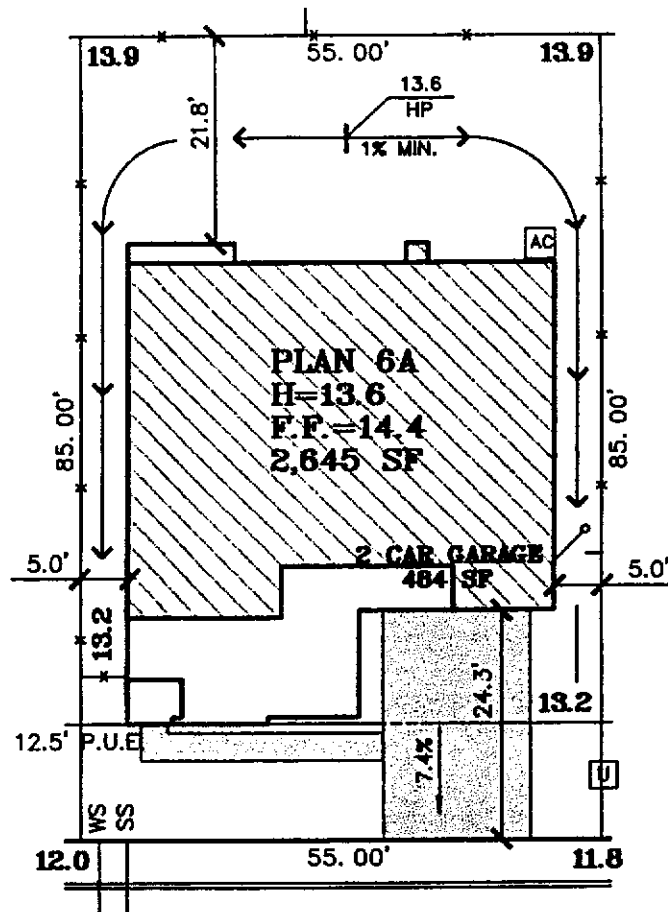
LEGEND

→ SWALE
 □ MAILBOX

* WOOD FENCE
 ○ SIDEYARD GATE

SS SEWER SERVICE
 WS WATER SERVICE

□ UTILITY SERVICE
 F.F. FINISH FLOOR



AVIATOR CIRCLE



LOT 34
 PLAN 6A
 A.P.N.:
 ADDRESS: 109 AVIATOR CIRCLE
 LOT AREA: 4,675 SF

DUE TO THE UNIQUE CONDITIONS OF THIS LOT, THE BUYER AS WALKED AND APPROVED THE SITE. FINAL GRADING CONDITIONS MAY VARY. THE INFORMATION ON THIS PLOT PLAN IS PROVIDED FOR YOUR CONVENIENCE AS A GUIDE TO THE GENERAL LOCATION OF THE SUBJECT PROPERTY. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED OR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS MAY VARY OR CHANGE WITHOUT PRIOR NOTICE DUE TO ACTUAL SITE CONDITIONS.

PLAN: 6 SIGNED (BUYER) _____ DATE _____
 ELEVATION: A _____
 ORIENTATION: R PROJECT SUPERINTENDENT APPROVAL _____ DATE _____
 COLOR: 123 SITE SUPERINTENDENT APPROVAL _____ DATE _____
 ESTIMATING APPROVAL _____ DATE _____
 SALES APPROVAL _____ DATE _____
 CONSTRUCTION APPROVAL _____ DATE _____

Spink Corporation

2590 VENTURE OAKS WAY
 SACRAMENTO, CA. 95833

TEL: (916) 926-5660 FAX: (916) 921-9274



1210 Central Boulevard
 Brentwood, CA 94513
 office: (925) 634-8023
 fax: (925) 634-8083

SIENA

NORTHPOINTE PARK UNIT 1
 City of Sacramento, California

Scale: 1"=20'

September 8, 2000



BASALITE®

PACIFIC STUCCO SYSTEMS

4290 Roseville Road
North Highlands, CA 95660-5710
(916) 486-4094
Fax (916) 486-4187

Installation Card
Fiber Reinforced Stucco

Job Name and Address : WESTERN PACIFIC

ICBO# 5269

SIENA

4-11-01
Date of job completion

LOT-79

Plastering Contractor

Name: VISION PLASTERING

Address: 8974 GREEN BUCK LN

Telephone No. () 987-3324

Approved contractor as issued by Basalite/Pacific Stucco.

This is to certify the exterior coating system at the above address, has been installed in accordance with the evaluation report specified above and the manufacturers instructions.

[Signature]
Signature of authorized representative of
plastering contractor

4-19-01
Date

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

CERTIFICATION OF INSULATION

WESTERN Pacific LOT # 79

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1631, RENO, NV 89505 LIC. #10675
- 3325 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

SIENA

DATE INSULATION COMPLETED
4/11/01

WALLS		WALLS		FLOORS	
(SQUARE FEET)		(SQUARE FEET)		(SQUARE FEET)	
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	
R-VALUE		APPLIED		R-VALUE	
13	3 5/8	30	9 1/2		

MATERIAL: FIBERGLASS	FORM: BATTS	R-VALUE	MANUFACTURER: OCF
MATERIAL: FOAM		MANUFACTURER: W R GRACE	

SIGNATURE—INSULATION CONTRACTOR <i>Bill Gray</i>	TITLE: MANAGER	DATE: 4-2-01
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS:

3

Project Address: 110 Aviator Circle Assessor Parcel # 225 1450 079
Lot Number: 79 Subdivision Northpointe Park Unit #1

OWNER INFORMATION:

Legal Property Owner: Western Pacific Housing Phone# (925) 634-6023
Owner Address: 1210 Central Boulevard, City Brentwood, State Ca. Zip 94513

CONTRACTOR INFORMATION:

Contractor: Western Pacific Lic# 675709/B Phone # (925) 634-6023 Fax 634-6166

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A

No. of Stories: 2 No. of Rooms: _____ Street Width: _____

1st Floor Area _____ 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living	<u>2092</u>	<u>2294</u>
Garage/Storage	<u>635</u>	<u>422</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: _____

<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		

~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) Assessor's Parcel Number	c) Owners Name
b) New Floor Area	d) Project Address

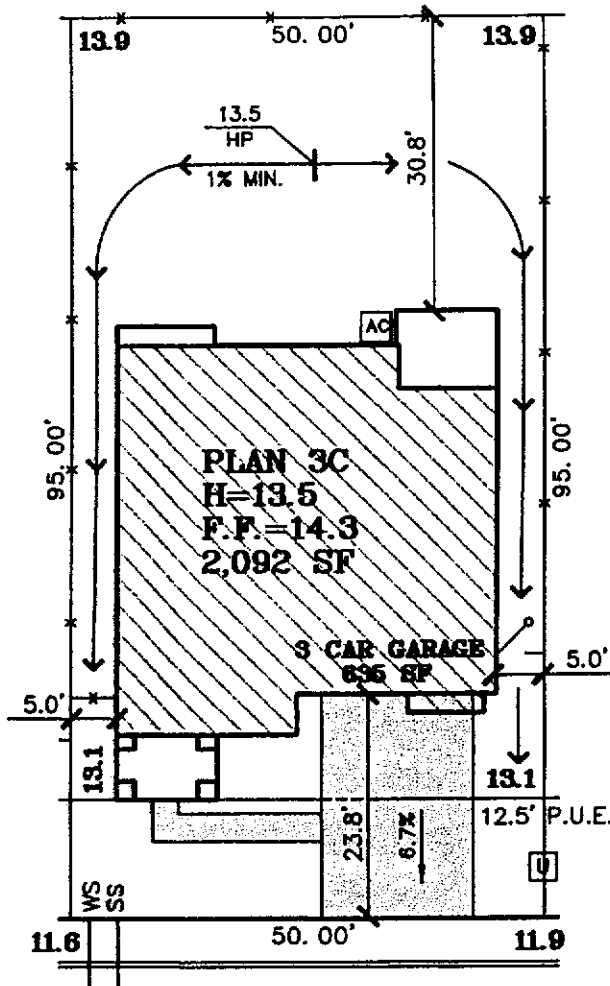
LEGEND

→ SWALE
 □ MAILBOX

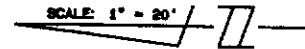
* WOOD FENCE
 ○ SIDEYARD GATE

SS SEWER SERVICE
 WS WATER SERVICE

▣ UTILITY SERVICE
 F.F. FINISH FLOOR



AVIATOR CIRCLE



LOT 79
PLAN 3C
A.P.N.:
ADDRESS: 110 AVIATOR CIRCLE
LOT AREA: 4,750 SF

DUE TO THE UNIQUE CONDITIONS OF THIS LOT, THE BUYER HAS WALKED AND APPROVED THE SITE. FINAL GRADING CONDITIONS MAY VARY. THE INFORMATION ON THIS PLOT PLAN IS PROVIDED FOR YOUR CONVENIENCE AS A GUIDE TO THE GENERAL LOCATION OF THE SUBJECT PROPERTY. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED NOR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS MAY VARY OR CHANGE WITHOUT PRIOR NOTICE DUE TO ACTUAL SITE CONDITIONS.

PLAN: 3 SIGNED (BUYER) _____ DATE _____
 ELEVATION: C _____
 ORIENTATION: R PROJECT SUPERINTENDENT APPROVAL _____ DATE _____
 COLOR: 102 SITE SUPERINTENDENT APPROVAL _____ DATE _____
 ESTIMATING APPROVAL _____ DATE _____
 SALES APPROVAL _____ DATE _____
 CONSTRUCTION APPROVAL _____ DATE _____

Splink Corporation

2590 VENTURE OAKS WAY
 SACRAMENTO, CA 95833

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SIENA

NORTHPOINTE PARK UNIT 1
 City of Sacramento, California

Scale: 1"=20'

September 8, 2000

Rel