CITY OF SACRAMENTO	Permit No: 0110571
1231 I Street, Sacramento, CA 95814	Insp Area: 4
	Thos Bros:
Site Address: 3447 JUMILLA WY SAC	Sub-Type: NSFR
Parcel No: RIVERVIEW 2 VIL. 4-B LOT 51	Housing (Y/N): N
<u>CONTRACTOR</u> BEAZER HOMES	<u>ARCHITECT</u>
3009 DOUGLAS BL #150 ROSEVILLE CA 95661	
Nature of Work: NSFR MP1346 1 STORY 6 RMS	
<b>CONSTRUCTION LENDING AGENCY:</b> I hereby affirm under penalty of perjury that to of the work for which this permit is issued (Sec. 3097, Civ. C).	here is a construction lending agency for the performance
Lender's Name Lender's Address	<u></u>
LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of p (commencing with section 7000) of Division 3 of the Business and Professions Code and my licens	erjury that I am licensed under provisions of Chapter 9 se is in full force and effect.
License Class B License Number 724191 Date 9/7/01 Contractor Sig	- 1
OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires any structure, prior to its issuance, also requires the applicant for such permit to file a signed state of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the E therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicanot more than five hundred dollars (\$500.00);	am exempt from the contractors License Law for the a permit to construct, alter, improve, demolish, or repair ment that he or she is licensed pursuant to the provisions Business and Professions Code) or that he or she is exempt
I, as a owner of the property, or my employees with wages as their sole compensation, will for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply and who does such work himself or herself or through his/her own employees, provided that such owever, the building or improvement is sold within one year of completion, the owner-builder with improve for the purpose of sale.)  I, as owner of the property, am exclusively contracting with licensed contractors to construct The Contractors License Law does not apply to an owner of property who builds or improve contractor(s) licensed pursuant to the Contractors License Law).	to an owner of property who builds or improves thereon, h improvements are not intended or offered for sale. If, ill have the burden of proving that he/she did not build or t the project (Sec. 7044, Business and Professions Code: es thereon, and who contracts for such projects with a
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 represents and locations shown on the application or accompanying drawings and that the imprivate agreement relating to permissible or prohibited locations for such improvements. This build improvement or the violation of any private agreement relating to location of improvements.	provement to be constructed does not violate any law or
I certify that I have read this application and state that all information is correct. I agree to correlating to building construction and herby authorize representative(s) of this city to enter upon the	nply with all city and county ordinances and state laws
Date 9/7/11 Applicant/Agent Signature	ur Van Maron
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perj  I have and will maintain a certificate of consent to self-insure for workers' compensation as performance of work for which the permit is issued.	ury one of the following declarations: provided for by Section 3700 of the Labor Code, for the
I have and will maintain workers' compensation insurance, as required by Section 3700 of the this permit is issued. My workers' compensation insurance carrier and policy number are:	e Labor Code, for the performance of the work for which
Carrier LIBERTY MUTUAL INS CO. Policy Number WA2-651-0	004147-080 Exp Date 04/01/2002
(This section need not be completed if the permit is for \$100 or less) I certify that in the probability and the permit is for \$100 or less). I certify that in the probability is shall not employ any person in any manner so as to become subject to the workers' compensation provisions of Section 3700 of the Labor Code (Shall forthwith	in laws of California and some that if I should become
Date 1/7/01 Applicant Signature	y- wiriawy
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLA CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLL COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODI	ARS (\$100,000) IN ADDITION TO THE COST OF

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

RESIDENTIAL BUILDING PERMIT APPLICATION ☐ Addition ■ New Construction ☐ Remodels ☐ Other Project Address: \_ 3447 Jumilla way Assessor Parcel #\_\_\_\_\_ OWNER INFORMATION: Phone # 916-773-3888 Legal Property Owner: Beazer Homes Holdings Corp. Owner Address: 3009 Douglas Blvd. 150 City Roseville State CA Zip 95661 CONTRACTOR INFORMATION: Contractor: Beazer Homes Lic. # B724191 Phone #916-773-3888 Fax# 916-773-0425 PROJECT INFORMATION: Occupancy Group \_\_\_\_\_ Fed Code \_\_\_\_\_ Land Use Zone \_\_\_\_\_ No. of stories! \_\_\_\_\_ No. of rooms: \_\_\_\_\_ Street width: \_\_\_\_\_ 1º Floor Area 1325 2º Floor Area Basement Roof Material **AREA IN SQUARE FOOT OF:** EXISTING Dwelling/Living Garage/Storage Decks/Balconies Carports SCOPE OF WORK: Single Family Dwelling FOR OFFICE USE ONLY ☐ Information above complete ☐ AR Flood Waiver required O Planning Approval ☐ Violation files checked ☐ Flood Elevation Certificate Required ☐ Design Review Approval Standard setbacks ☐ Water Development Infill Area ☐ Special Fee Districts Apply :\_\_\_\_\_ County Sewer **NEW STRUCTURES & ADDITIONS ♦THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW** • Plans to include: site plan, floor plan, elevations. □ 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE roof/chiling plan, foundation and structural framing 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA details, and structural calculations for nonconforming structures. ☐ Title 24 Energy Compliance documentation 11" x 17" copy of floor plan for County Assessor Grading and Erosion Control Questionnaire O Plan Review Fees Received by: (staff) Date:

rosidentlalapp (rev 3/09/99)

ACTIVITY/PERMIT #

## CERTIFICATION OF INSULATION

SS OR TRACT	LOT # 1651	1309	BOX 854, WEST	SACRAMEN	ITO, CA 9569 LE, CA 9590°	91 LIC. #202026 1 LIC. #202026	
	BEAZER LOT # 1309 MELODY			EST SACRAMENTO, CA 95691 LIC. #202026 DAD, MARYSVILLE, CA 95901 LIC. #202026			
				P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026			
				NO, NV 89505 LIC. #10675 A WAY, LAS VEGAS, NV 89118 LIC. #10675			
		3320	3 A PONDEROSA	/EGAS, NV 6	9118 LIC. #10013		
 >		DATE INS	ULATION COMPL	ETED			
i	d	CEILINGS			FLOORS		
OLIABE FEET)	{	sau	ARE FEET)	( .		SQUARE FEET)	
	TYPE OF INSULATION			TYPE OF INSULATION			
	MATERIAL FIBERGLASS			FIBERGLASS			
	FORM BATTS & BLOW			BATTS		TTS	
).	MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.			
	MAX	NUFACTURER			MANUFA	CTURER	
MANUFACTURER  OCF  BAGS  MANUFACTURER  OCF			OCF				
APPLIED	R-VALUE	WEIGHT PER		R - VALUE APPLIED THICKNES		APPLIED THICKNESS	
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5-8	30	, –					
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FORM	BATTS					OCF	
	AIR INFI	LTRATION SE	ALANT				
TOXM		MANUFACTURER  WR GRACE					
TINSULATION A	ND/OR SEALANT	HAS BEEN I	NSTALLED IN	CONFORM/	ANCE WITH	APPLICABLE COD	
BMD REGOLATIV	MS,				T = = =		
AACTUR /	Le.	111100	MANAGE	R		1-6-01	
ETAR CAC		TITLE	TITLE		DATE		
	APPLIED THICKNESS  SS "  KNI  FORM  TINSULATION A	COUARE FEET)  ITION  TYPE  MATERIAL  FORM  BAT  MANUFACTURER'S F  BAGS  APPLIED THICKNESS  INSTALLED  KNEE WALLS IF R-VAL  FORM  BATTS  AIR INFI  T INSULATION AND/OR SEALANT AND REGULATIONS  PACTOR  PACTOR  COUCH  TO THE COURT OF THE COURT	CEILINGS  OUARE FEET)  ( SOU TYPE OF INSULATION  MATERIAL  FIBERGLASS  FORM  BATTS & BLOW  MANUFACTURER'S PRODUCT I.D  MANUFACTURER  OCF  BAGS  APPLIED THICKNESS  R - VALUE INSTALLED THICKNESS  APPLIED THICKNESS  NAME WALLS IF R-VALUE IS OTHER FORM  BATTS  AIR INFILTRATION SE  MANUF  T INSULATION AND/OR SEALANT HAS BEEN IN  AND REGULATIONS  PACTOR  TITLE	CEILINGS  OUARE FEET)  TYPE OF INSULATION  MATERIAL  FIBERGLASS  FORM  BATTS & BLOW  MANUFACTURER'S PRODUCT I.D  MANUFACTURER  OCF  BAGS  APPLIED THICKNESS  R - VALUE INSTALLED THICKNESS  TORM  BATTS  KNEE WALLS IF R-VALUE IS OTHER THAN WALLS A R VALUE  BATTS  AIR INFILTRATION SEALANT  MANUFACTURER  MANUFACTURER  TINSULATION AND/OR SEALANT HAS BEEN INSTALLED IN A AND REGULATIONS  PRACTOR  MANAGE  MANAGE	CEILINGS  QUARE FEET)  ( SQUARE FEET)  ( TYPE OF INSULATION  MATERIAL  FIBERGLASS  FORM  BATTS & BLOW  MANUFACTURER'S PRODUCT I.D  MANUFACTURER  OCF  BAGS  APPLIED THICKNESS  INSTALLED THICKNESS  TORM  BATTS  KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE FORM  BATTS  AIR INFILTRATION SEALANT  MANUFACTURER  W R G  TINSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMAND REGULATIONS  PRACTIF  TINSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMAND REGULATIONS  TINSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMAND REGULATIONS  TITLE  MANAGER	CEILINGS  CUARE FEET)  ( SQUARE FEET)  ( TYPE OF INSULATION TYPE OF INSULATION  MATERIAL  FIBERGLASS  FORM  BATTS & BLOW  MANUFACTURER'S PRODUCT I.D.  MANUFACTURER MANUFACTURER  OCF  BAGS  APPLIED THICKNESS  TITLE  MANUFACTURER  MANUFACTURER  MANUFACTURER  MANUFACTURER  MANUFACTURER  MANUFACTURER  MANUFACTURER  MANUFACTURER  R - VALUE INSTALLED  MANUFACTURER  MANUFACTURER  WEGHT PER SOUARE FOOT  INSTALLED  MANUFACTURER  WAS AIR INFILTRATION SEALANT  MANUFACTURER  WAS GRACE  TINSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH AND REGULATIONS  MATERIAL  MANUFACTURER  WAS GRACE  TITLE  MANAGER  DATE  DATE  MANAGER  DATE	

## KwikKote

## Stucco System

## Installation Card

Job Name: CLASSIC COLLECTION/RIVERVIEW

Address: 3447 JUMILLA WAY

SACRAMENTO,

Lot #: 0004051

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: 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

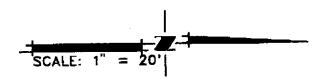
issued by the Stucco Manufacturer: 1001

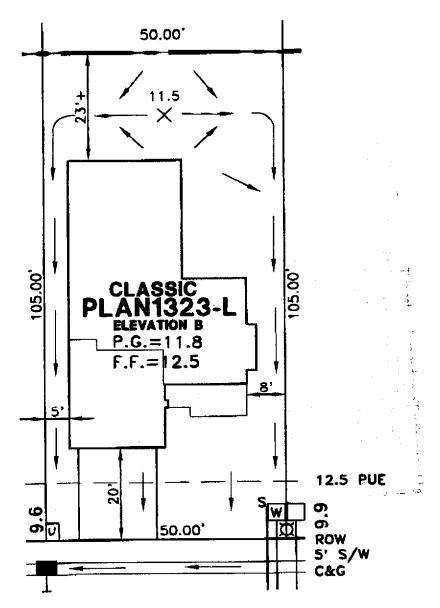
Card Print Date: 08/20/2001

1-14-D1

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.

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.

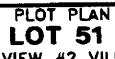




JUMILLA WAY

U - UTILITY SERVICE BOX

Z -STREETLIGHT



RIVER VIEW #2 VILLAGE 4B

BEAZER HOMES

CITY OF SACRAMENTO

CALIFORNIA

WOOD RODGERS INC.

DATE:

JUN 2001

DBJ

more

1055.015

J: \JOBS\RIVERVIEW\DWG\FROMREY\UNIT2\PHASE4B\PLOT PLANS\LOT-51.DWG 06/21/01

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