

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0302142  
Insp Area: 4  
Thos Bros: 256-J5

Site Address: 35 NAPONEE CT SAC  
Parcel No: 225-1820-039 CREEKSIDE 1 LOT 39

Sub-Type: NSFR  
Housing (Y/N): N

CONTRACTOR  
D. R. HORTON INC.  
4401 HAZEL AVE STE 135  
FAIR OAKS, CA 95628

OWNER

ARCHITECT

Nature of Work: MP1531 1 STORY 7 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 \_\_\_\_\_ License Number 750190 Date 2-28-03 Contractor Signature *Benjamin M. Henderson*

**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 2-28-03 Applicant/Agent Signature *Benjamin M. Henderson*

**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 AMERICAN CASUALTY CO Policy Number WC247856876 Exp Date 07/01/2003

(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 2-28-03 Applicant Signature *Benjamin M. Henderson*

**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.**

CITY OF SACRAMENTO  
PAID  
FEB 28 2003  
NORTH PERMIT CENTER

**RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION**

(2)

Project Address: 35 NAPONEE CT Assessor Parcel # 215-1820-039-0000  
 Lot Number: 39 Subdivision CORNSIDE - CORNERSTONE

**OWNER INFORMATION:**

Legal Property Owner: DL HORTON Phone# 965 2200  
 Owner Address: 441 HAZEL AVE 135 City FAIR OAKS State CA Zip 95628

**CONTRACTOR INFORMATION:**

Contractor: DL HORTON Lic. # 750190 Phone # 965 2200 Fax 965 2201

**PROJECT INFORMATION:**

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A  
 No. of Stories: 1 No. of Rooms: 3 Street Width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1531 2<sup>nd</sup> Floor Area A Basement A Roof Material CONCRETE TILE  
 AREA IN SQUARE FOOT OF:  
     Dwelling/Living 1531 DRAIN 1531V  
     Garage/Storage 414  
     Decks/Balconies A 99  
     Carports A

SCOPE OF WORK: NEW HOME CONSTRUCTION

OR  
FICE  
SE  
NELY

- |   |   |   |
|---|---|---|
| <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

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE**  
 PERMIT AND CALCULATION

APPLICATION NO: SUD2003-00123 BLDG PERMIT NO. city  
 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	SE <input checked="" type="checkbox"/> MFE <input type="checkbox"/>
CSD-1			
SRCSD			
CONSTRUCTION			
IN-LIEU			
<b>TOTAL FEE</b>	<b>(5720)</b>		

APN: 225-1820-029-0000  
 DESCRIPTION/ SUBDIVISION CREEKSIDE VILLAGE 1 LOT 39  
 PROPERTY ADDRESS 35 Napamuel Sac CA 95835  
 OWNER D.R. Horton  
 MAILING ADDRESS 4401 Hazel Ave. Suite 135  
 CITY-STATE-ZIP Fair Oaks CA 95629 PHONE 916-965-2200  
 ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE \_\_\_\_\_  
 CONSOLIDATED UTILITY BILLING USE ONLY  
 ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

**Natomas Unified School District**

1901 Arena Blvd. • Sacramento, CA 95834

Phone 916/567-5468 • Fax 916/567-5470

**CERTIFICATION OF COMPLIANCE**

**SCHOOL DISTRICT DEVELOPMENT FEES**

<b>PART I: TO BE COMPLETED BY APPLICANT</b>	
Property Owner's Name	W. NELSON
Owner's Address	4401 HAZEL AVE 125 S.L. CA 95628
Project Address	25 NADINE CT
Parcel Number	715-1570-159-000
Subdivision Name	(DENSESTON)
Number of Units	1
Print Applicant's Name	W. VANDYKE
Title of Applicant	
Date	11-9-02
Applicant's Signature	<i>[Signature]</i>
Telephone Number	916-777
<b>PART II: TO BE COMPLETED BY BUILDING DEPARTMENT</b>	
Plan Identification Number	
Building Type (Check One)	
<input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Apartment/Condominium
<input type="checkbox"/> Commercial/Industrial	
Square Feet of Chargeable Building Area	1531
Signature	
Title	
Date	2-14-03
<b>PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT</b>	
District Certification Number	03-1397
Fees Collected:	
Residential:	1531 Sq. Ft. X \$ 3.00 = \$ 4593.00 ✓
Apartment/Condominium:	Sq. Ft. X \$ = \$
Commercial/Industrial:	Sq. Ft. X \$ = \$
<b>NOTICE TO APPLICANT:</b> 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:	<i>[Signature]</i> Date: 2-28-03

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 Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 65995 have been complied with by the above signed applicant.

SIGNATURE: *[Signature]* DATE: 2/28/03  
 TITLE: Michael Moman  
 Facilities Planning Director

# KwikKote

No. 200-914703

## Stucco System Installation Card

Job Name: CREEKSIDE - CORNERSTONE  
Address: 35 NAPONEE CT.

Lot #: 0000039

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: D.R. HORTON INC.  
Address: 4401 HAZEL AVE. SUITE 135  
FAIR OAKS, 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: 04/09/2003

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.

Julian A. Alvarez  
Signature of authorized representative of stucco contractor

6-19-03  
Date

# CERTIFICATION OF INSULATION

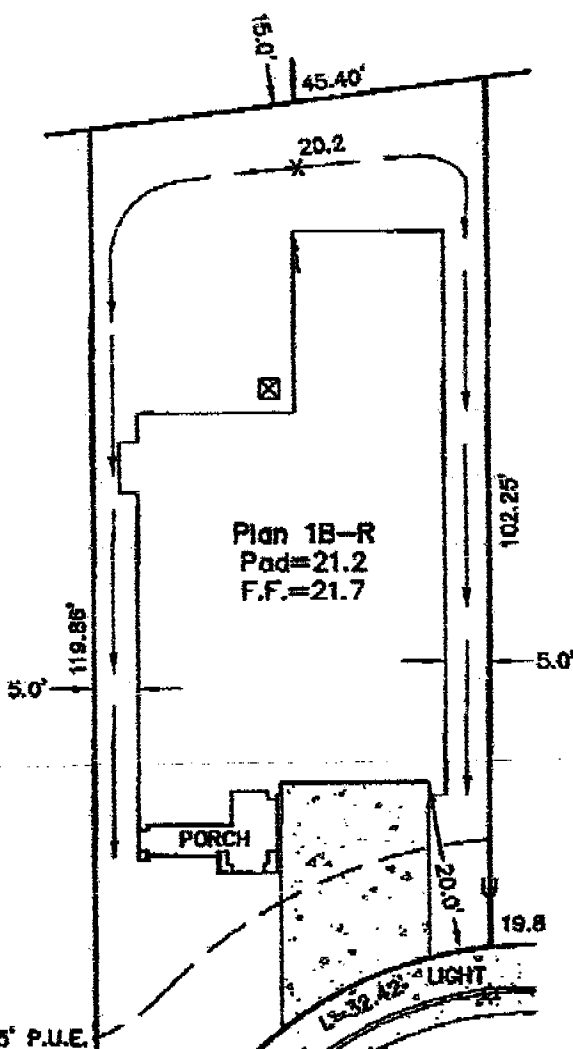
ADDRESS OR TRACT DR Horton Creekside (cornerstone)	SACRAMENTO BUILDING PRODUCTS <input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 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
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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
BAGS								
R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS
13	3 1/2	30	13					
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE								
MATERIAL			FORM			R VALUE		
FIBERGLASS			BATTS					
MATERIAL			MANUFACTURER			MANUFACTURER		
Foam			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	TITLE	DATE
<i>JC</i>	MANAGER	6-10
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSE OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE AND APPROXIMATE UTILITY CONNECTION, ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALLS ARE OPTIONAL, AND MAY OR MAY NOT BE CONSTRUCTED.



Plan 1B-R  
Pad=21.2  
F.F.=21.7

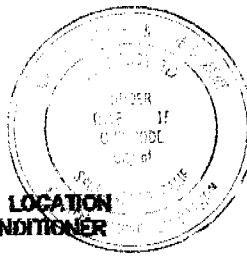
PORCH

LIGHT

12.5' P.U.E.

This set of plans and specifications must be kept on the job at all times and it is unlawful to make any alterations from the same without written permission from the Building Department Division.

The approval of this plan and specification shall not be held to approve the violation of any City Ordinance or State Law.



**LEGEND**

- U --- UTILITY LOCATION
- ☒ --- AIR CONDITIONER
- S --- SEWER
- W --- WATER
- --- DRAIN INLET
- ▽ --- FIRE HYDRANT

*BM*

SCALE: 1" = 20'

PLOT PLAN  
LOT 39  
Creekside Village 1  
City of Sacramento, State of California

**WECKER  
SURVEYS**

1111 KENNEDY PLACE  
SUITE 4  
DAVIS, CA 95616  
530-792-7252  
FAX 530-792-7171