

CITY OF SACRAMENTO

Permit No: 0112648

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 110 HAWKCREST CR SAC

Thos Bros:

Parcel No: 225-1550-028

WESTBOROUGH VIL. 2 PHASE 1 LOT 67

Sub-Type: NSFR

Housing (Y/N):

N

CONTRACTOR

OWNER

ARCHITECT

JTS COMMUNITIES
3434 MARCONI AVE STE.C
SACRAMENTO CA. 95835

Nature of Work: MP 3901 2 STORY 10 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 767107 Date 10/02/01 Contractor Signature Lona J. Caldwell

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 shall be liable 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 10/02/01 Applicant/Agent Signature Lona J. Caldwell

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 DAUGARD INS. BROKERS Policy Number WC 3374248-00 Exp Date 11/18/2001

(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 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 10/02/01 Applicant Signature Lona J. Caldwell

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.

Lot # 67

INSTALLATION CARD
Diamond Wall One Coat System
Omega Products International, Inc.

Project Address

110 Hawkcrest
Sacramento

ICBO Evaluation Service, Inc.
Report ER-4004

Date Completed _____

Plastering Contractor

Name: J. T. S. Stucco D.D.
Address: 11285 White Rock Road
Telephone No. (916) 635-2800

Approved contractor number as issued by Omega Products Int'l, Inc. P.N. # 2227

This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report and the manufacturer's instructions.

Ray Rickels
Signature of authorized representative of
plastering contractor

12-12-01
Date

This installation card must be presented to the building inspector after completion of work and

Project Address: 110 HAWKCREST CIRCLE Assessor Parcel # 225-1550-028
Lot Number: 67 Subdivision WESTBOROUGH VILLAGE 2, PHASE: 1

OWNER INFORMATION:

0112648

Legal Property Owner: JTS Communities, Inc. Phone# 916-487-3434
Owner Address: 3434 MARCONI AVE. City SACRAMENTO State CA Zip 95821

CONTRACTOR INFORMATION:

Contractor: JTS Communities Lic. # 767107 Phone # 487-3434 Fax 487-3815

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 2438 2nd Floor Area 1463 Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living 3901

Garage/Storage 585

Decks/Balconies _____

Carports _____

SCOPE OF WORK: NSED-PLAN # 81-WL

FOR OFFICE USE ONLY

- 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 # _____

CERTIFICATION OF INSULATION

<p>ADDRESS OR TRACT</p> <p><i>JTS The Shores Sacto, CA</i></p> <p style="text-align: right;">LOT # <i>67</i></p>	<p style="text-align: center;">SACRAMENTO INSULATION CONTRACTORS</p> <p><input type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026</p> <p><input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675</p> <p><input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675</p> <p>DATE INSULATION COMPLETED</p>
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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	
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
<i>13</i>	<i>3 1/2</i>	<i>R30</i>	<i>10'</i>			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL FIBERGLASS		FORM BATTS		R VALUE <i>13</i>		MANUFACTURER OCF
AIR INFILTRATION SEALANT						
MATERIAL <i>FOAM</i>				MANUFACTURER W R GRACE		

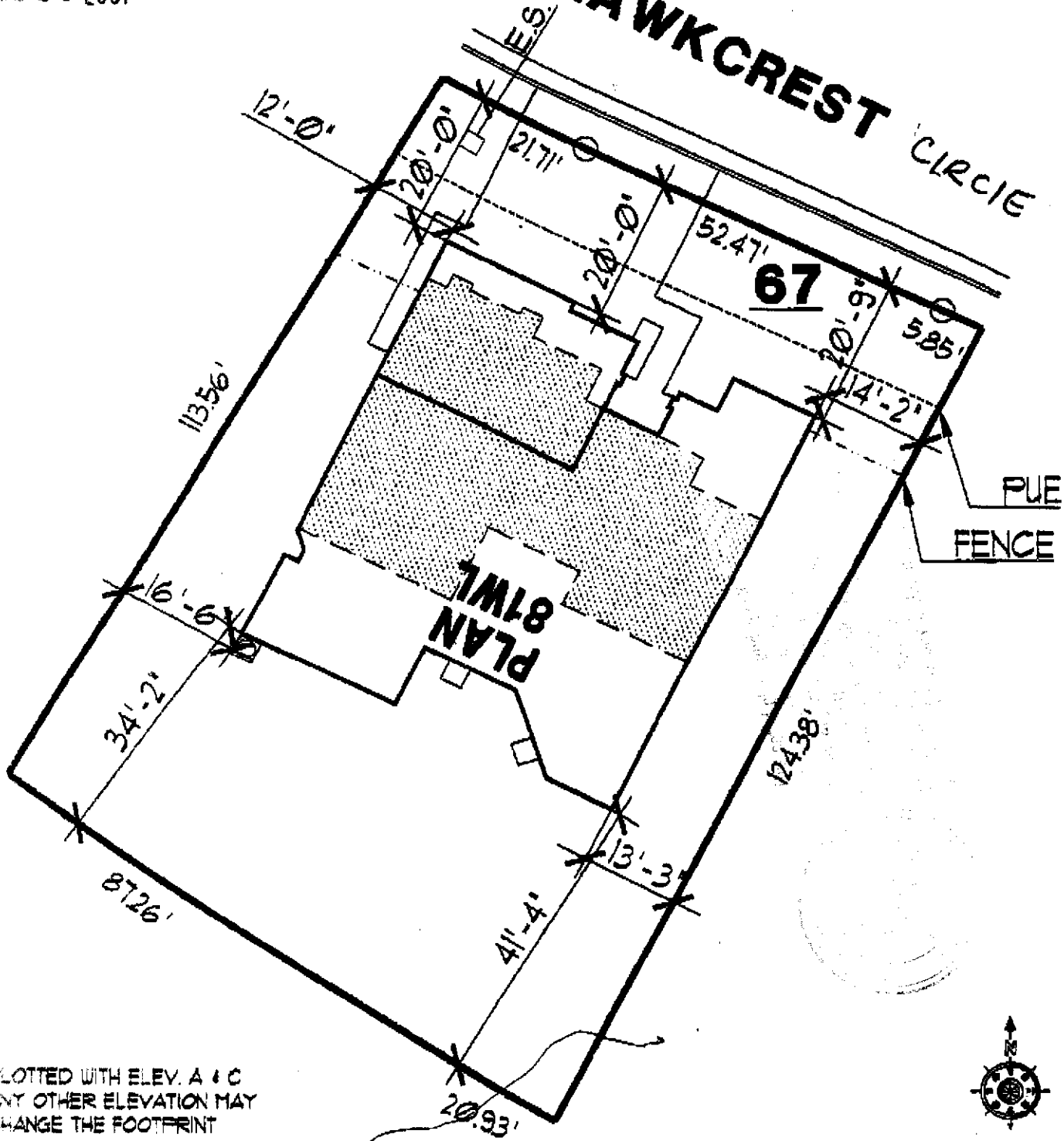
THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.

SIGNATURE—INSULATION CONTRACTOR <i>JEFF CABLE</i>	TITLE MANAGER	DATE
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

ORIGINAL

AUG 28 2001

HAWKCREST CIRCLE



PLOTTED WITH ELEV. A & C
 ANY OTHER ELEVATION MAY
 CHANGE THE FOOTPRINT

DIMENSIONS SHOWN ARE APPROXIMATE AND ARE FOR THE SOLE PURPOSE OF COUNTY/CITY APPROVAL

<p>2 STORY HOUSE 3 CAR GARAGE</p>	<p>PROPOSED SITE PLAN</p>	<p>JTS Working Together to Achieve Excellence COMMUNITIES INC. 3434 Marconi Avenue Suite A Sacramento, CA 95821 (916) 487-3434</p>	<p>THE SHORES AT WESTLAKE WESTLAKE VILLAGE 2</p>
<p>APN #</p>			<p>SCALE = 1" = 20' DATE: AUG. 27, 2001</p>
<p>APPROVED FOR RELEASE</p>	<p>DATE</p>	<p>APPROVED FOR RELEASE</p>	<p>DATE</p>

0112648

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

PART I: TO BE COMPLETED BY APPLICANT

Property Owner's Name	ITC COMMUNITIES, INC.
Owner's Address	2424 MINORVILLE BLVD, SACRAMENTO, CA 95821
Project Address	111 POLYPHASE TOWER LOT # 67
Parcel Number	003-1030-007
Subdivision Name	WILSONWOOD VILLAGE 2 PH. 1
Number of Units	
Print Applicant's Name	ITC COMMUNITIES, INC.
Title of Applicant	
Date	9/12/01
Telephone Number	(916) 487-2434
Applicant's Signature	<i>[Signature]</i>

PART II: TO BE COMPLETED BY BUILDING DEPARTMENT

Plan Identification Number	81-001
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	
Signature	<i>[Signature]</i>
Title	
Date	9/12/01

PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT

District Certification Number	02-426
Fees Collected:	
Residential:	2904 Sq. Ft. X \$ 3.35 = \$ 13,068.25
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: *[Signature]* Date: 9/12/01

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: 9/12/01
TITLE: Michael Morman
Facilities Planning Director

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"/>	UNITS
CSD-1	COMMERCIAL USE			
SRCSD				
CONSTRUCTION				
IN-LIEU				

TOTAL FEE

APN: _____

DESCRIPTION/
 SUBDIVISION _____ LOT: _____

PROPERTY ADDRESS _____

OWNER _____

MAILING ADDRESS _____

CITY-STATE-ZIP _____ PHONE _____

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

APPLICANT SIGNATURE _____

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____