

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0102358
Insp Area: 4

Site Address: 300 ALCANTAR CR SAC
Parcel No: RIVERVIEW 2 UNIT 3A LOT 2

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

CONTRACTOR
D. R. HORTON INC.
110 BLUE RAVINE RD STE. 209
FOI SOM CA. 95630

OWNER

ARCHITECT

Nature of Work: MP 2126 WITH OPTION 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 756190 Date 3/22/01 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 & P 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 3/22/01 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 ARGONAUT INS. CO. Policy Number WC62600115505 Exp Date 07/01/2000

(This section need not be completed if the permit is for \$200 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 the Labor Code, I shall forthwith comply with those provisions.

Date 3/22/01 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.

0102358

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE *h/m*
 PERMIT AND CALCULATION SHEET *3/21/01*

APPLICATION NO:
 GENERAL INFORMATION

BLDG PERMIT NO: *SMD 2001-0920*
 THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

219028

CITY

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL	SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>
CSD - 1	473	COMMERCIAL USE	UNITS
SRCSD	2404		
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	2877		

APN: 225-0190-003

DESCRIPTION/
 SUBDIVISION Riverview 2 Unit #3-A LOT: 2

PROPERTY ADDRESS 300 Alcantara Circle

OWNER D.R. Horton

MAILING ADDRESS 4401 Hazel Ave., Suite #135;

CITY-STATE-ZIP *Fair Oaks Ca 95628* PHONE *(916) 965-2200*
 ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.


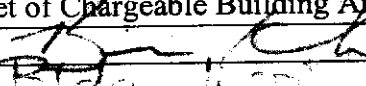
APPLICANT SIGNATURE *D. Horton*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____


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	D.R. Horton	(916) 965-2200	
Owner's Address	4401 Hazel Ave, Suite #135, Fair Oaks, Ca 95628		
Project Address	290 Alcantar Circle		
Parcel Number	225-0190-003	Lot	3
Subdivision Name	Riverview #2 Unit #3-A		
Number of Units	1		
Print Applicant's Name	Deanna Collins	Applicant's Signature	
Title of Applicant	Operations		
Date	3/20/2001	Telephone Number	801-8331
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT			
Plan Identification Number	2615		
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	2615		
Signature		Date	3/21/01
Title	Planner		
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT			
District Certification Number	01-1465		
Fees Collected:			
Residential:	2615	Sq. Ft. X \$ 3.25	= \$ 8,495.75
Apartment/Condominium:		Sq. Ft. X \$	= \$
Commercial/Industrial:		Sq. Ft. X \$	= \$
<p>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.</p>			
Applicant Signature:			Date: 3/20/01

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:  DATE: 3/21/01
 TITLE: Michael Morman
Facilities Planning Director

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 300 Alcantara Circle Assessor Parcel # _____
 Lot Number: 2 Subdivision RIVERVIEW #2, Unit #3-A

OWNER INFORMATION:

Legal Property Owner: D.R. HORTON Phone# 965-2200
 Owner Address: _____ City _____ State _____ Zip _____

0102358

CONTRACTOR INFORMATION:

Contractor: DA HORTON Lic. # 750190 Phone# 965-2200 Fax 956-22

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of Stories: 2 No. of Rooms: 10 Street Width: _____
 1st Floor Area _____ 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living	<u>2320</u>
Garage/Storage	<u>492</u>
Decks/Balconies	<u>40</u>
Carports	_____

SCOPE OF WORK: MP 2126/FLEX

- 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:

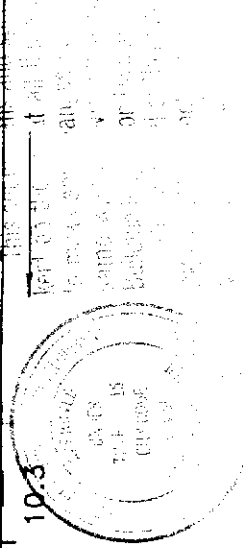
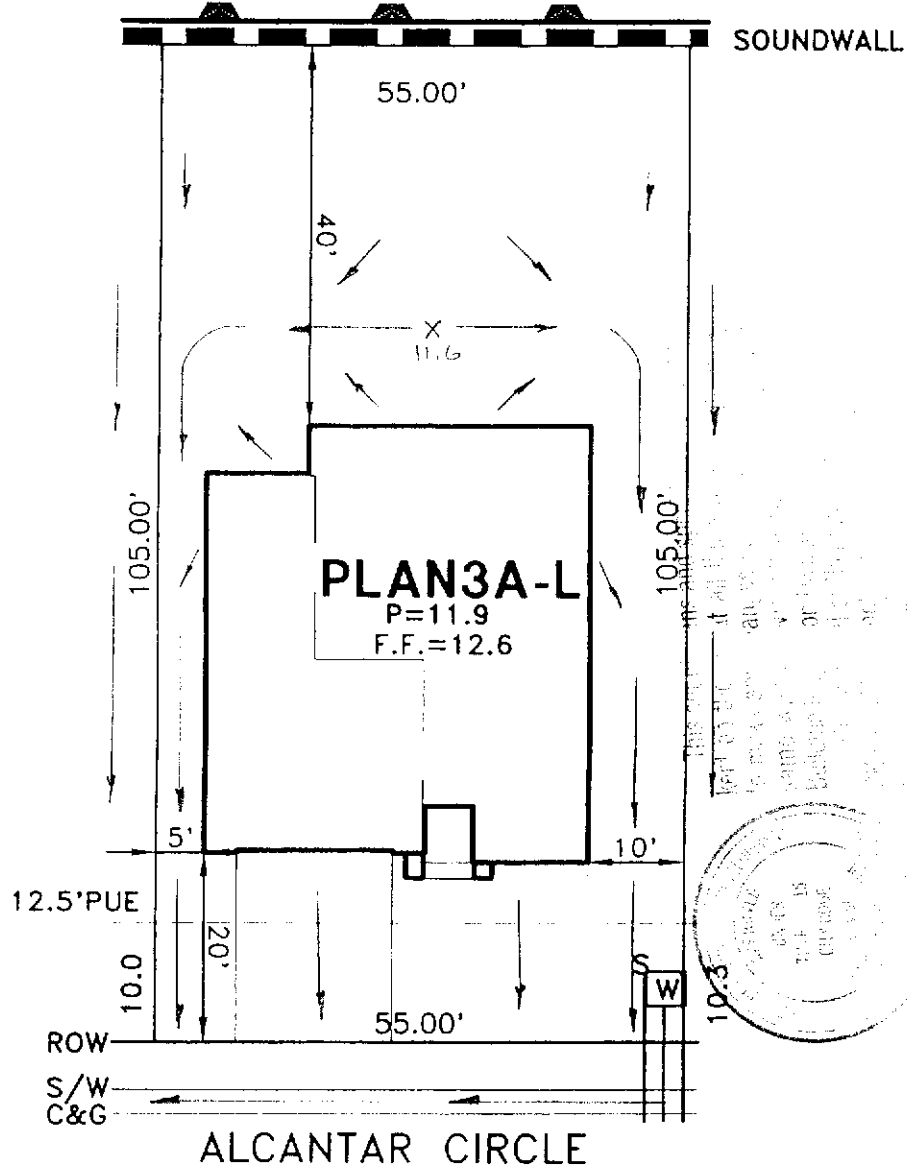
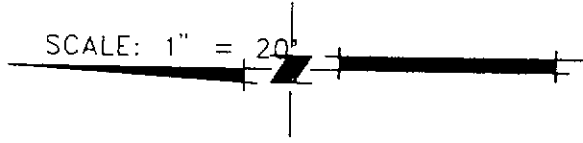
—THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT—

- 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

Received by: (staff) _____ Permit # _____

RECEIVED

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINE, DESIGN DRAINAGE CONTROL ELEVATIONS, AND DIRECTION OF DRAINAGE FLOW TO CONFORM WITH LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN IS APPROXIMATE EXCEPT FOR THOSE SETBACKS WHICH ARE MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.



PLOT PLAN
LOT 2
RIVERVIEW#2, UNIT 3A
FOR
D.R.HORTON INC.
SACRAMENTO CALIFORNIA

CIVIL ENGINEERING
MAPPING
WOOD RODGERS & ASSOCIATES, INC.
3301 C STREET BUILDING 100B SACRAMENTO, CA 95816
TEL: 916/341-7760 FAX: 916/341-7767

DATE: NOV 2000	DRAWN: HMB	CHECKED:	PROJECT NO: 1055.014
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J:\JOBS\RIVERVIEW\DWG\CIVIL\LOT PLANS SAMPLER\3A-3B\3A-LOT02.DWG 11/20/00 1:3:10

CERTIFICATION OF INSULATION

PART I GENERAL

ADDRESS OR TRACT D.R. Horton LOT # 2 300 Alcantara Cir Park west	SACRAMENTO INSULATION CONTRACTORS <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 5/29/01
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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 SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
13 19	3 5/8 6 1/4	30 30	9 1/2 12 1/2			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL	FORM	R VALUE		MANUFACTURER		
FIBERGLASS	BATTS			OCF		
AIR INFILTRATION SEALANT						
MATERIAL				MANUFACTURER		
FOAM				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>Bell</i>	TITLE MANAGER	DATE 5-9-1
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS:

300 Alcantara

Lot 2

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

1000 Report 94004

JOB ADDRESS:

D.P. Holden
1201 E. Allen

Date of Job Completion: *6-16-01*

PLASTERING CONTRACTOR:

NAME: STUCCO NORR, INC.

ADDRESS: 5900 WAREHOUSE WAY, GROVERBEACH, CALIFORNIA 95826

TELEPHONE NO: (916) 383-6699

CONTRACTOR NUMBER OF DIAMOND WALL SYSTEM: 2175

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 specified above and the manufacturer's instructions.

Date: *6/16/01*

Signature of authorized representative of
Plastering Contractor

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

July 16, 2001

City of Sacramento
P.O. Box 2770
Sacramento, CA 95812-2770

RE: Park West Subdivision, Lot Number 1

To Whom It May Concern:

The following are a list of items we will address at the time of Model conversion:

1. Installation of wood fences.
2. Removal of iron trap fences.
3. Removal of Sales Office (conversion to garage).
4. Removal of connecting flatwork and replacement of grass.
5. Removal of heat pump.
6. Removal of temperature locks from windows.
7. Removal of motion sensors.
8. Replacement of interior doors.
9. Turning on all plumbing.
10. Re-key houses.
11. Installation of screens and locks added to sliders.
12. Removal of flags.
13. Water heaters added.
14. Removal of music source in Models.
15. Removal of Sales Office -conductor.

This list may or may not include all of the items needing to be converted. We will follow up as needed.

Sincerely,

Matt Allen
Superintendent, Park West
D.R. Horton