

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0005752

Insp Area: 4

Site Address: 2443 MINDEN WY SAC

Parcel No: 201-0390-083

LOT 80 NORTHBR 6-2

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

MORRISON HOMES
11344 COLOMA RD
GOLD RIVER CA 95670

OWNER

ARCHITECT

Nature of Work: NSFR MP3417 2 STORY 11 RMS

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 519965 Date 5-30-00 Contractor Signature [Signature]

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 5-30-00 Applicant/Agent Signature [Signature]

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 ZURICH-AMERICAN INS. CO. Policy Number WC2815412-01 Exp Date 11/1/1999

____ (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 5-30-00 Applicant Signature [Signature]

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.

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction
 Addition
 Remodels
 Other

Project Address: 2443 Minden Way Assessor Parcel # 201-0390-083

OWNER INFORMATION:

Legal Property Owner: Morrison Homes Phone # 355-8900
 Owner Address: 1130 Iron Point Rd #120 City _____ State _____ Zip _____

CONTRACTOR INFORMATION:

Contractor: Morrison Homes Lic. # 519465 Phone # 355-8900 Fax# 355-0100

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of stories: 2 No. of rooms: 11 Street width: _____
 1st Floor Area 1676 2nd Floor Area 1741 Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>3417</u>
Garage/Storage	_____	<u>710</u>
Decks/Balconies	_____	<u>123</u>
Carports	_____	_____

SCOPE OF WORK: New Single Family Dwelling

FOR OFFICE USE ONLY

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

NEW STRUCTURES & ADDITIONS

❖ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

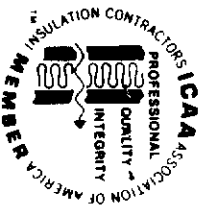
- | | |
|---|---|
| <input type="checkbox"/> 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE
<input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA

<input type="checkbox"/> Title 24 Energy Compliance documentation
<input type="checkbox"/> Grading and Erosion Control Questionnaire | ❖ Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures.

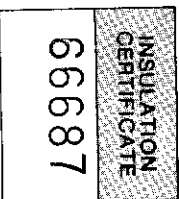
<input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor
<input type="checkbox"/> Plan Review Fees |
|---|---|

Date: _____ Received by: (staff) _____

ACTIVITY/PERMIT #



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**



1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT _____

MORRISON LOT # 80 TRACT # ARCADIA

STREET _____ CITY SAC

EXTERIOR WALLS:

MANUFACTURER _____ THICKNESS/TYPE _____ R- VALUE 13-19

CEILING:

BATTS: _____ THICKNESS/TYPE _____ R- VALUE 30

MANUFACTURER _____ THICKNESS/TYPE _____ R- VALUE 30

BLOWN IN: CT. MINIMUM THICKNESS 12" R- VALUE 30

MANUFACTURER _____ THICKNESS/TYPE _____ R- VALUE _____

FLOORS:

MANUFACTURER _____ THICKNESS/TYPE _____ R- VALUE _____

SLAB ON GRADE: _____ THICKNESS/TYPE _____ R- VALUE _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS: _____ THICKNESS/TYPE _____ R- VALUE _____

MANUFACTURER _____ THICKNESS/TYPE _____ R- VALUE _____

GENERAL CONTRACTOR _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR **ARCADE INSULATION**

CALIFORNIA CONTRACTORS LICENSE #263784

10-24-00 DATE _____

R. J. [Signature] SIGNATURE _____ TITLE _____

#80

OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

ROBINSON - HACIENDA

Date of Job Completion 9/22/00

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC

Address: 5900 WAILEHOLE WAY SACRAMENTO CA

Telephone No: (916) 383 66 99

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 10/20/00

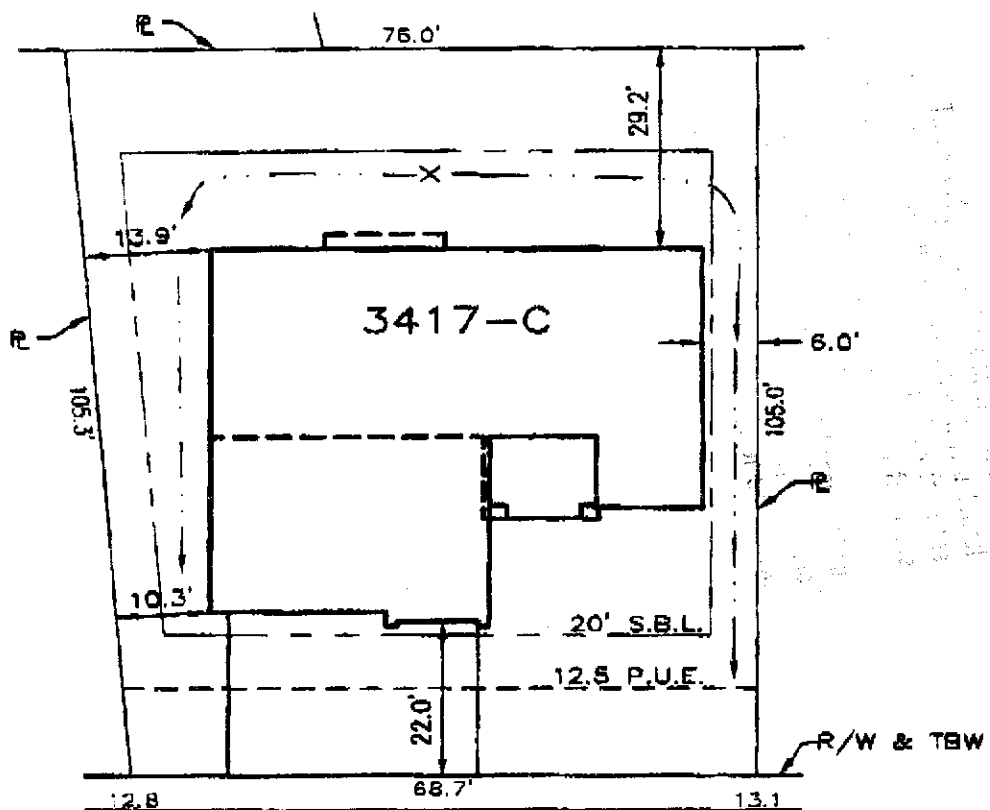
[Signature]
Signature of authorized representative of
Plastering Contractor

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

Plot Plan

PAD: 14.7
F.F.: _____

Lot conditions dictate custom development of each lot in relation to existing contours, adjacent lots and street improvements. Therefore, the contours of ungraded areas, the slopes and flat pads of graded areas, and the setback dimensions, as shown on the Plot Plan, are approximate and may vary when field construction is completed.



"BUILT IN CONFORMANCE WITH 1997 UBC" **MINDEN WAY**

ASSESSOR'S PARCEL NO. 201.0396.083
ADDRESS 2443 Minden Way

LOT AREA = 7,596 SF
ALLOWED LOT COVERAGE = 40% = 3,038 SF
ACTUAL LOT COVERAGE = 31% = 2,386 SF

NOTE: It is understood that the drainage areas, slopes and grades shall not be altered, changed, blocked, modified or in any way be reconstructed by Owner contrary to what is depicted on this Plot Plan. THESE CONDITIONS RUN WITH THE LAND AND ARE BINDING ON ALL SUBSEQUENT OWNERS.

Morrison Homes Rep. _____ Date _____

Owner _____ Date _____

APPROVAL: [Signature] 5-2-00
Morrison Homes Rep. _____ Date _____

NOTE: All setback dimensions and elevations as shown may be adjusted to fit field conditions.

MORRISON HOMES
HACIENDA COLLECTION
LOT# 80

CITY OF SACRAMENTO SACRAMENTO COUNTY CALIFORNIA

3229 Garcia Oaks Sacramento, CA 95827
916 366-3300 Fax 916 366-3303
R. E. Y. ENGINEERS, Inc.
Civ. Engineers / Land Surveyors



JOB No. 443007
DESIGN RYF
CHECKED BY
DATE 05-02-00
SCALE As Sh