

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0112645

Insp Area: 4

Site Address: 165 HAWKCREST CR SAC

Thos Bros:

Sub-Type: NSFR

Parcel No: 225-1550-078

WESTBOROUGH VIL. 2 PHASE 2 LOT 15

Housing (Y/N):

N

CONTRACTOR

OWNER

ARCHITECT

JTS COMMUNITIES
3434 MARCONI AVE STE C
SACRAMENTO CA. 95835

Nature of Work: MP 2775 2 STORY 9 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 10.2.01 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 improvement and that the improvement is not located at 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 10.2.01 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 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 10.2.01 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.

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

Project Address

165 HAWKCREST CIR
SACRAMENTO CA

ICBO Evaluation Service, Inc.
 Report ER-4004

Date Completed 2-25-02

Plastering Contractor

Name: F. T. S. Stucco DIO.
 Address: 11285 White Rock Road
 Telephone No. (916) 635-2900

Approved contractor number as issued by Omega Products Intl, 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.

Don Richell
 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 before final inspection.

CERTIFICATION OF INSULATION

PART I GENERAL
PART II AREAS INSULATED
PART III CERTIFICATION

ADDRESS OR TRACT <div style="font-size: 2em; font-family: cursive;">JTS</div> <div style="margin-top: 20px; font-size: 1.5em; font-family: cursive;">SHORES</div>	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
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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 OCF		MANUFACTURER OCF			MANUFACTURER OCF		
R-VALUE INSTALLED <div style="font-size: 2em; font-family: cursive;">13</div>		APPLIED THICKNESS <div style="font-size: 1.5em; font-family: cursive;">3 5/8"</div>		R-VALUE INSTALLED <div style="font-size: 1.5em; font-family: cursive;">30 30</div>		APPLIED THICKNESS <div style="font-size: 1.5em; font-family: cursive;">9" 12"</div>	
MIN. INSTALLED WEIGHT PER SQUARE FOOT		MIN. INSTALLED WEIGHT PER SQUARE FOOT		MIN. INSTALLED WEIGHT PER SQUARE FOOT		MIN. INSTALLED WEIGHT PER SQUARE FOOT	
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE							
MATERIAL FIBERGLASS		FORM BATTS		R-VALUE		MANUFACTURER OCF	
AIR INFILTRATION SEALANT							
MATERIAL <div style="font-size: 1.5em; font-family: cursive;">FOAM</div>				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 <div style="font-family: cursive; font-size: 1.2em;">Jeff Cobb</div>	TITLE MANAGER	DATE <div style="font-size: 1.5em; font-family: cursive;">2/7/02</div>
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

Project Address: 165 HAWKCREST CIRCLE Assessor Parcel # 225-1550-078
Lot Number: 15 Subdivision WESTBOROUGH Village 2, PHASE: 2

012645

OWNER INFORMATION:

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 2258 2nd Floor Area 517 Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living 2775
Garage/Storage 634
Decks/Balconies _____
Carports _____

SCOPE OF WORK: NSED - PLAN # 111-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:

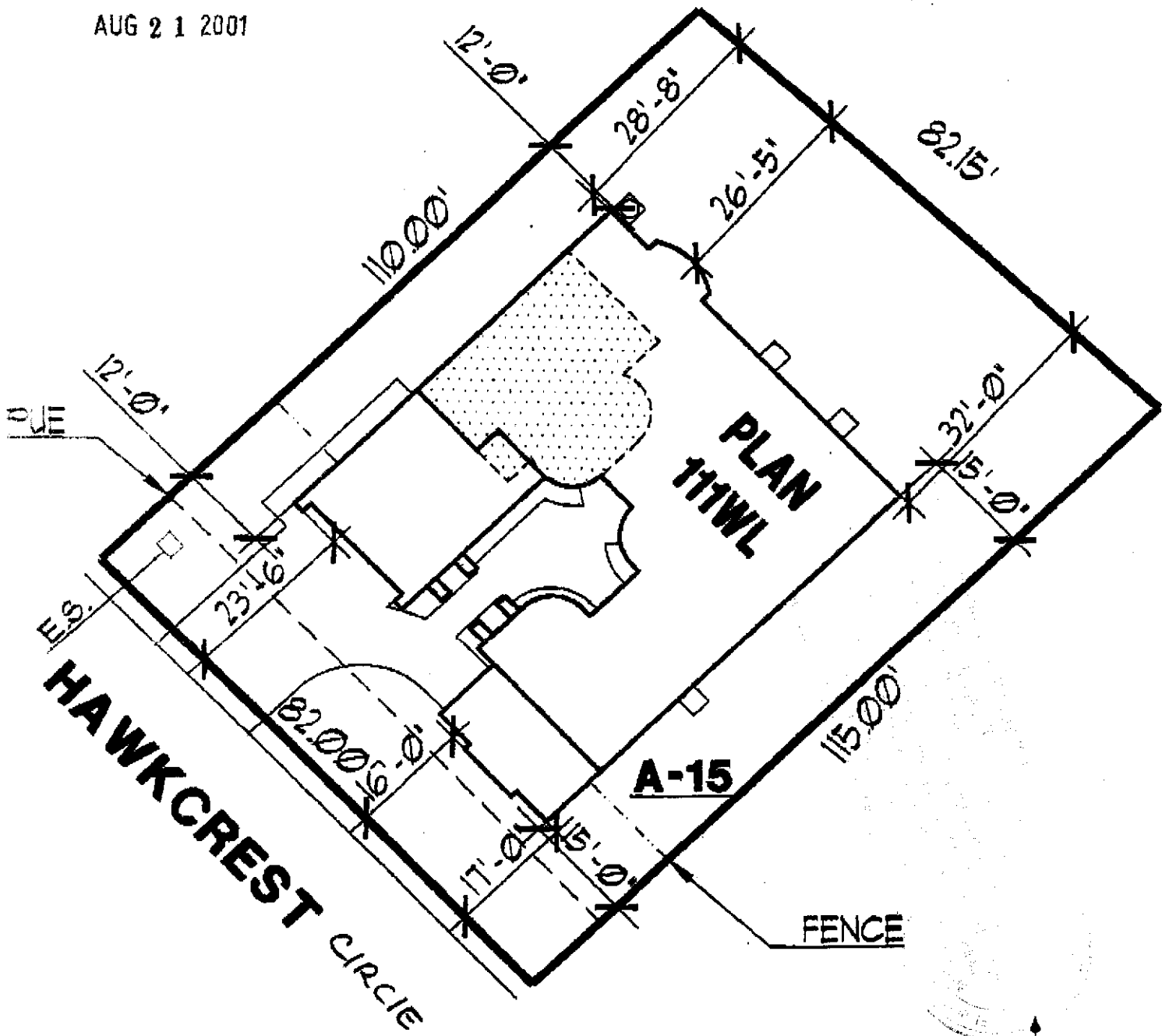
THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT:

- 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

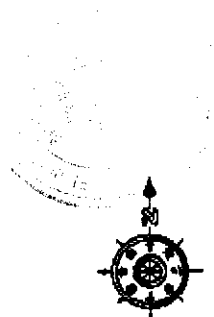
Date: _____ Received by: (staff) _____ Permit # _____

ORIGINAL

AUG 21 2001



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



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

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

0112645

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	
Owner's Address	
Project Address	
Parcel Number	
Subdivision Name	
Number of Units	
Print Applicant's Name	Applicant's Signature
Title of Applicant	
Date	Telephone Number

PART II: TO BE COMPLETED BY BUILDING DEPARTMENT

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		
Signature		
Title	Date	

PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT

District Certification Number	
Fees Collected:	
Residential:	Sq. Ft. X \$ = \$
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: _____ **Date:** _____

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:** _____
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
FEE CALCULATION	BUILDING USE
INSPECTION	RESIDENTIAL SF <input type="checkbox"/> MF <input type="checkbox"/>
CSD-1	COMMERCIAL USE
SRCSD	UNITS
CONSTRUCTION	
IN-LIEU	
TOTAL FEE	
APN:	
DESCRIPTION/ SUBDIVISION	
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