

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0100939
Insp Area: 4

Site Address: 5121 NANTUCKET WY SAC
Parcel No: 225-1510-090 NORTHPT PK 17 LOT 90

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

CONTRACTOR
JOHN LAING HOMES
536 EUREKA RD STE 100
ROSEVILLE CA, 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1645/OPT 9 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 687596 Date 2/9/01 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 Professions 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 2/9/01 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 EAGLE PACIFIC INSURANCE COMPAN Policy Number 1S0002200 Exp Date 04/15/2001

____ (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 2/9/01 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.

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 5121 Nantucket Way Assessor Parcel # _____

OWNER INFORMATION: Lot 90 0600939
 Legal Property Owner: John Laing Homes Phone # 780-1222
 Owner Address: 1536 Eureka Rd. #100 City Boscville State Ca. Zip 95661

CONTRACTOR INFORMATION: Northpointe Park Unit #17
 Contractor: John Laing Homes Lic. # 687596 Phone # 780-1222 Fax# 780-1333

PROJECT INFORMATION: * model *

Land Use Zone _____ Occupancy Group _____ Construction Type VN Fed Code A1
 No. of stories: 1 No. of rooms: 9 Street width: _____
 1st Floor Area 1895 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1895</u>
Garage/Storage	_____	<u>417</u>
Decks/Balconies	_____	<u>104</u>
Carports	_____	_____

SCOPE OF WORK: _____

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 | ✦ 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"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA | |
| <input type="checkbox"/> Title 24 Energy Compliance documentation | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> Plan Review Fees |

Date: _____ Received by: (staff) _____

ACTIVITY/PERMIT #

residentialapp [rev 3/09/99]

Lot # 90

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

JOHN LIVING HOMES

CALYPSO 5121 NANTUCKET WY Date of Job Completion 4-24-01

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC.

Address: 5900 WAREHOUSE WAY, SACRAMENTO, 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.

6-20-01
Date

[Signature]
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.

TO: CITY OF SACRAMENTO
BUILDING DEPT.

RE: CONVERSION OF CALYPSO MODELS

PLEASE BE ADVISED, THE FOLLOWING
ITEMS WILL BE DONE TO 5107, 5115 AND 5121
NANTUCKET WY, AT TIME OF CONVERSION.

- 1) TRAP FENCE WILL BE REMOVED
- 2) DBL. WIDE DRIVEWAYS WILL BE POURED
TO GARAGES
- 3) 6' FENCES WITH GATES WILL BE INSTALLED
BETWEEN UNITS
- 4) FRONT YARDS WILL BE LANDSCAPED TO
JOHN LAING HOMES LANDSCAPE SPECIFICATIONS
- 5) CONCRETE WALKWAYS WILL BE POURED TO
ENTRY NODES
- 6) ALL HOUSE LIGHTS WILL BE CONVERTED
FROM SENSORS TO WORKING SWITCHES
- 7)

* THE FOLLOWING ITEMS APPLY TO LOT #92
5107 NANTUCKET WAY ONLY.

- 1) REMOVE ALL TEMP. WALLS IN SALES OFFICE
- 2) REMOVE SALES OFFICE ENTRANCE DOORS AND ADD (1)
MANSOOR AT SOUTH ELEVATION AND (1) 16' GAR. DOOR @ EAST.
- 3) INSTALL (1) 40 GAL. WATER HEATER
- 4) PROVIDE (1) GFI OUTLET IN GARAGE
- 5) PROVIDE (1) GARAGE LIGHT
- 6) SHEETROCK AND FIRETAPE ALL GARAGE WALLS
- 7) REMOVE FRONT TRESSIS'

RESPECTFULLY,
Thomas Kane
JOHN LAING HOMES

Lot 90

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

5121 NANTUCKET WY

SACRAMENTO CA 95835

Date of Job Completion 8-16-02

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC.

Address: 5900 WAREHOUSE WAY, SACRAMENTO, CALIFORNIA 95826

Telephone No: 916) 383-6699

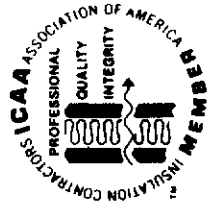
Contractor Number of Diamond Wall System 2175

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.

8-23-02
Date


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.



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**

INSULATION
CERTIFICATE

62578

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:

Frank Thomas LOT # 20 TRACT # Calypso
STREET _____ CITY Duck

EXTERIOR WALLS:
MANUFACTURER 176 THICKNESS/TYPE 3 5/8 R-VALUE 13

CEILING:
BATT:
MANUFACTURER 176 THICKNESS/TYPE 10 R-VALUE 30
BLOWN IN:
MANUFACTURER 176 THICKNESS 12 R-VALUE 30

SQUARE FOOTAGE COVERED 1316 NUMBER OF BAGS USED 241

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

WIDTH OF INSULATION _____ INCHES
FOUNDATION WALLS:
MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

GENERAL CONTRACTOR _____
CALIFORNIA CONTRACTORS LICENSE # _____ DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR **ARCADE INSULATION**
CALIFORNIA CONTRACTORS LICENSE #263784
[Signature] 4-7-91 DATE

SIGNATURE _____ TITLE _____

SIGNET

Testing Labs, Inc.

DATE: 3/13/01
 PROJECT NO. _____
 PROJECT: CALYPSO
 LOCATION: 5121 NANTUCKET WY

DSA FILE/APPL. NO. _____
 OSHPD NO. _____
 PERMIT NO. 0100939
 WEATHER: CLEAR TEMP: 69°

PROOF LOAD TORQUE WITNESSING

Testing was performed on the following items. All tests were performed with the following calibrated equipment:
 RAM: _____ GAGE: _____ TORQUE WRENCH: 3/8" SNAP ON
 RAM: _____ GAGE: _____ TORQUE WRENCH: _____

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST
<u>5121 NANTUCKET WY LOT 90</u> <u>5/8" BOLT HIT 22</u>	<u>5/8"</u>	<u>1</u>	<u>100</u>	<u>60</u>		<u>1</u>	<u>0</u>	<u>0</u>

Type of epoxy / grout used: _____ Method of application / cleaning: _____
 Visual inspection was performed on _____

 Show up / Stand by time. Job Canceled / Delayed due to: _____
 All non-compliance items were brought to the attention of: _____ at the job site.

NON-COMPLIANCE REPORT ATTACHED ADDITIONAL TESTS ATTACHED

NOTES: _____

To the best of my knowledge, the above WAS / WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: [Signature] Inspector: [Signature] 3/13/01



Canadian Heating Products Inc.

13120 - 76th Avenue
Surrey, BC V3W 2V6
604-597-3115
Fax: 604-597-3096

Att: Mr. Mike Hlavay
Company: Beutler H.V.A.C.
Fax# 1-916-646-2267
Subject: Silicone sealant

Mr. Hlavay,

In answer to your question regarding the use of pipe sealant. As per our instruction guides the use of sealants on our direct vent piping system is not necessary. These components have been designed tested and approved for use without additional sealants.

Should you have any other questions or concerns please call.

Sincerely,
Montigo/Canadian Heating Products.
Per;

A handwritten signature in cursive script that reads "Scott Baron".

Scott Baron
R&D Testing & Approvals
Technical Assistance

