

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9912081
Insp Area: 2

Site Address: 7427 SHELBY ST SAC
Parcel No: 117-1350-005
N

LOT 5 LAGUNA VEGA NORTH UNIT 1

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

CONTRACTOR
D. K. HORTON INC
110 BLUE RAVINE RD STE 209
BOY SUTON CA 95630

OWNER

ARCHITECT

Nature of Work: MP 1591 2 STORY 7 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: 7 License Number: 74111 Date: 1/15/99 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 am the 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 the property 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. (However, if 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, alter, improve or demolish for the purpose of sale.)

I am the 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, ordinance or agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of an 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: 1/15/99 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: ARGONAUTINS CO Policy Number: WC62600115505 Exp Date: 07/01/2000

(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: 1/15/99 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.

COUNTY: SANITATION DISTRICT NO: 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE

PERMIT AND CALCULATION SHEET 11/10/99

APPLICATION NO:	BLDG PERMIT NO: City
GENERAL INFORMATION	THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
- DEPT 26 \$2,855.00 - # TRAN 401179 11/10/99 - RECEIPT 725477 C#1 \$2,855.00 255508 11/10/99	
THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
FEE CALCULATION	BUILDING USE
INSPECTION	RESIDENTIAL SF <input checked="" type="checkbox"/> ME <input checked="" type="checkbox"/>
CSD-1	COMMERCIAL USE
SRCSDS	UNITS
CONTRIBUTION	
IN-LIEU	
TOTAL FEE 2855	
APN: 117-1350-005	
DESCRIPTION / SUBDIVISION: LAGUNA VEGA	LOT: 5
PROPERTY ADDRESS: 7427 SHERIDAN ST.	PAC.
OWNER: O.R. HORTON	
MAILING ADDRESS: 110 BLUE LAUREL LN	
CITY-STATE-ZIP: FOLSOM	PHONE: 956-1272
ADDITIONAL FEES MAY BE ADDED BY CHANGES IN USE INCREASE SEWER IMPACT	
APPLICANT SIGNATURE: <i>[Signature]</i>	
CONSOLIDATED UTILITY BILLING USE ONLY	
ACCT _____	INPUT _____ START _____

INSPECTOR'S COPY

(Print or Type) If Printing, press hard for four copies

OWNER'S NAME D.R. Horton, Inc.
OWNER'S ADDRESS 110 Blue Ravine Road Suite 209, Folsom CA 95630
PROJECT ADDRESS 7427 SHELBY STREET SAC.
PARCEL NUMBER 117-1350-005 LOT NO. 5
SUBDIVISION NAME Laguna Vega
NUMBER OF UNITS S.F. House

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
TITLE OF APPLICANT Superintendent
DATE 10-18-99 PHONE NUMBER (916) 355-1234

PLAN IDENTIFICATION NUMBER 9912081R
BUILDING TYPE
RESIDENTIAL APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
SQUARE FEET OF CHARGEABLE BUILDING AREA 1591
SIGNATURE [Signature] DATE 10/25/99
TITLE Bldg Insp

SCHOOL DISTRICT	DISTRICT CERTIFICATION NO.	EXEMPT	COMMENTS	SQ FT X \$	= \$
<u>26USD</u>	<u>24346</u>			<u>1.93</u>	<u>3070.63</u>
		RESIDENTIAL/APT/CONDO (1)	<u>1591</u>		
		COMMERCIAL/INDUSTRIAL			
		OTHER FEE <u>dry/c</u> TYPE (1)	<u>1591</u>	<u>1.34</u>	<u>2131.94</u>
		TOTAL FEES COLLECTED (1)	<u>1591</u>	<u>3.27</u>	<u>5,202.57</u>

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 authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

SIGNATURE [Signature] DATE NOV 10 1999
TITLE [Signature]

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Facilities Planning School District
Revised 12/12/96 CR# 400/00

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction
 Addition
 Remodels
 Other

Project Address: 7427 SHELBY STREET Assessor Parcel # 117-1350-005
 Lot Number: 5 LAGUNA VEGA
 OWNER INFORMATION:

Legal Property Owner: D.R. Horton Phone # (916) 355-1234
 Owner Address: 110 Blue Ravine Road #209 City Folsom State CA Zip 95630

CONTRACTOR INFORMATION:
 Contractor: D.R. Horton Lic. # 750190 Phone # 355-1234 Fax # 355-8077

PROJECT INFORMATION: PLAN 3C RT. MP # 1591
 Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of stories: 2 No. of rooms: 7 Street width: 44' ROW
 1st Floor Area 716 SF 2nd Floor Area 875 SF Basement _____ Roof Material CONC. TILE
 AREA IN SQUARE FOOT OF:

	EXISTING	NEW
Dwelling/Living		<u>1591 SF.</u>
Garage/Storage		<u>435 SF.</u>
Decks/Balconies		
Carports		

SCOPE OF WORK: New Construction

FOR OFFICE USE ONLY:

- | | | |
|--|--|---|
| <input type="checkbox"/> Information above complete
<input type="checkbox"/> Violation files checked
<input type="checkbox"/> Standard setbacks
<input type="checkbox"/> County Sewer | <input type="checkbox"/> AR Flood Waiver required
<input type="checkbox"/> Flood Elevation Certificate Required
<input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Planning Approval
<input type="checkbox"/> Design Review Approval
<input type="checkbox"/> Special Fee Districts Apply : _____ |
|--|--|---|

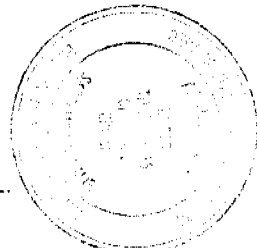
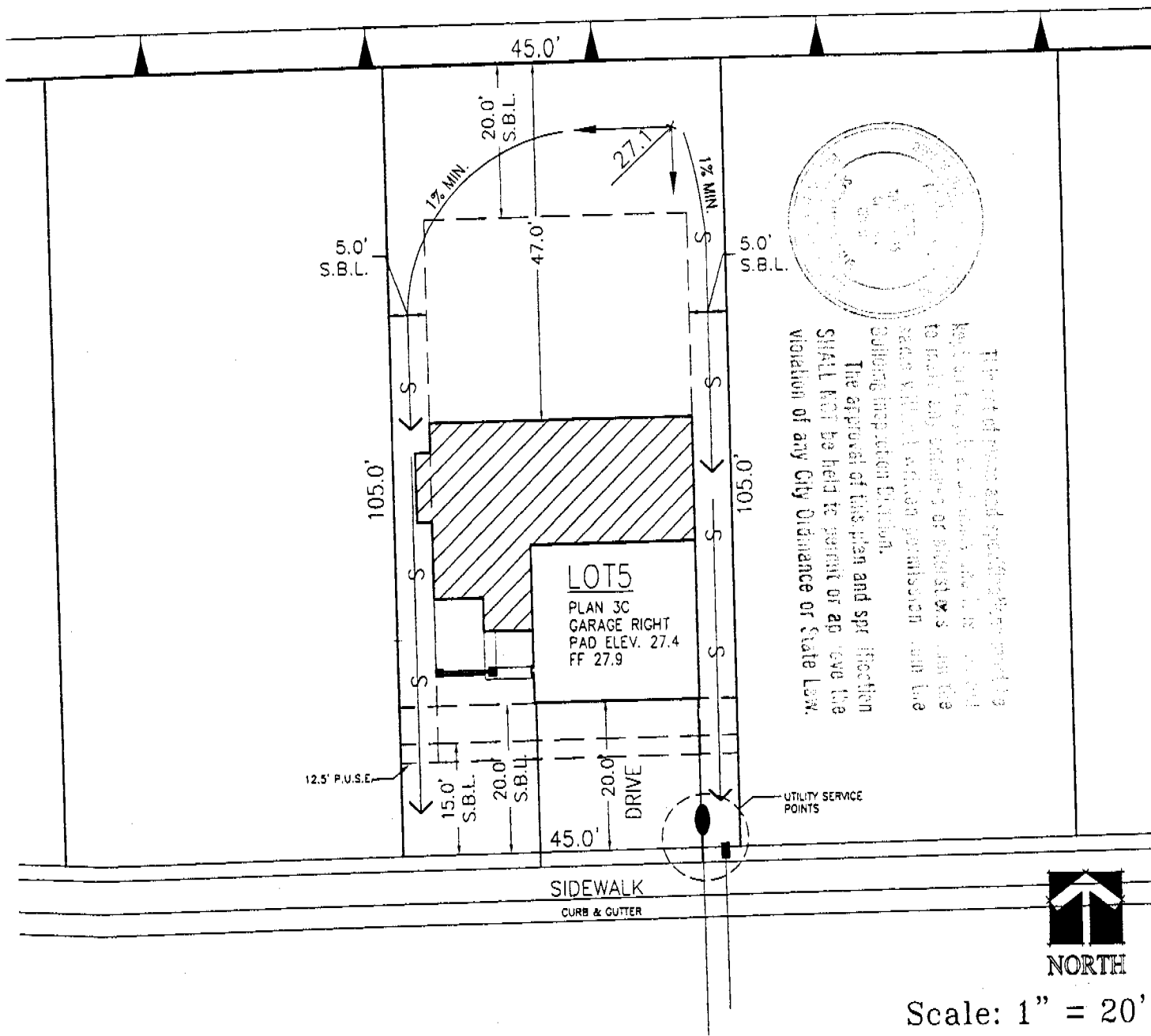
NEW STRUCTURES & ADDITIONS

❖ 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 | ❖ 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"/> Title 24 Energy Compliance documentation
<input type="checkbox"/> Grading and Erosion Control Questionnaire | <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 #



This project of record and specifications prepared by
 BLOODGOOD SHARP BUSTER ARCHITECTS & PLANNERS INC.
 has been reviewed and approved by the City of Sacramento
 to meet city standards of standards and the
 State of California within jurisdiction and the
 California Inspection Division.
 The approval of this plan and specifications
 SHALL NOT be held to permit or approve the
 violation of any City Ordinance or State Law.

SITE INFORMATION

Client: D.R. Horton
 Project: Laguna Vega
 Plat: Laguna Vega North Village 1
 Location: Sacramento, CA. 95758
 Lot: 5
 Street Address: 7427 Shelby Street
 Plan/Elevation: Plan 3 / Elev. C

Use Zone: PUD
 Min. Gar. Setback: 20 ft.
 Min. Front Setback: 15 ft.
 Min. Rear Setback: 20 ft.
 Pad Elev.: 27.4
 Garage: Right
 APN: 117-1350-005

Note:

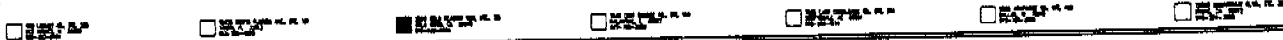
Finish grade shall
 slope away from the
 building at 2% for
 the first five feet (5').
 The minimum slope for
 all grades and swale
 shall be one percent (1%).



Laguna Vega North Village 1

Plot Plan For D.R. Horton

DATE: 10-15-99
 JOB NO: 58322.08



CERTIFICATION OF INSULATION

PART I GENERAL	ADDRESS OR TRACT <i>D.R. Horton</i>	LOT # <i>5</i>	SACRAMENTO INSULATION CONTRACTORS			
			<input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 3243 INDUSTRIAL DRIVE, YUBA CITY, CA 95993 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 <i>2-25-00</i>				
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	R-VALUE INSTALLED	APPLIED THICKNESS
<i>13</i>	<i>3 5/8"</i>	<i>30</i>	<i>9"</i> <i>12"</i>			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL FIBERGLASS		FORM BATTS		R VALUE <i>19</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>M. Smith</i>			TITLE MANAGER		DATE <i>1-7-00</i>	
SIGNATURE - GENERAL CONTRACTOR			TITLE		DATE	
REMARKS:						