

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

Permit No: 0101102

Insp Area: 4

Site Address: 18 MENCIA CT SAC  
Parcel No: RIVERVIEW VILLAGE 4A LOT 38  
N

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

CONTRACTOR  
BEAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: MP 1874 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 724191 Date 2/2/01 Contractor Signature Sheyl Van Maer

**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 aforementioned property for inspection purposes.

Date 2/2/01 Applicant/Agent Signature Sheyl Van Maer

**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 LIBERTY MUTUAL INS CO Policy Number WA2-651-004147-080 Exp Date 04/01/2001

(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 2/2/01 Applicant Signature Sheyl Van Maer

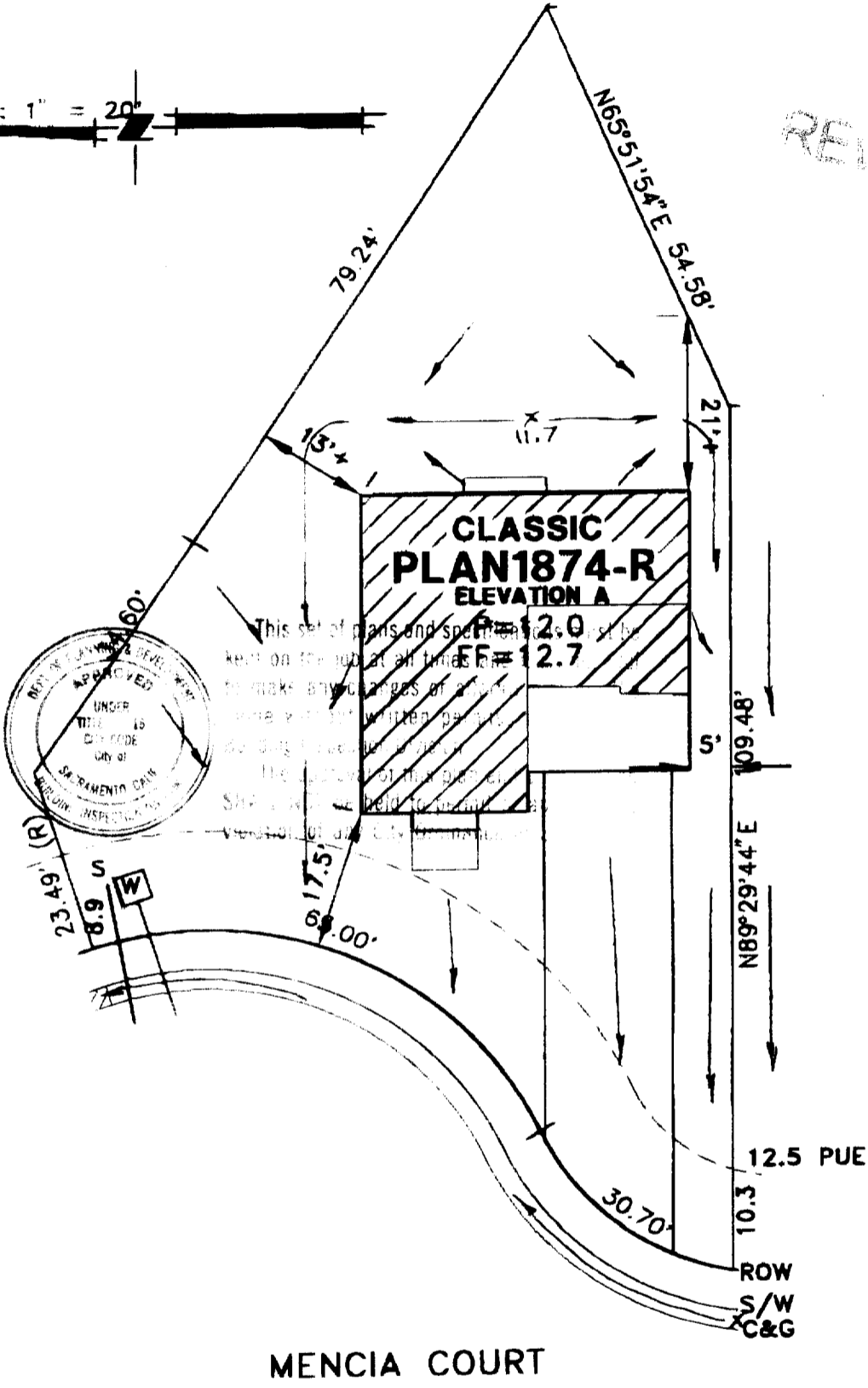
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

**THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.**

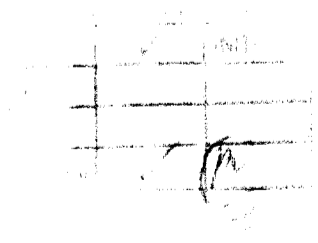
THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALL ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.

SCALE: 1" = 20'

REVISED



MENCIA COURT



**PLOT PLAN**  
**LOT 38**  
RIVER VIEW VILLAGE 4A  
FOR  
BEAZER HOMES  
CITY OF SACRAMENTO CALIFORNIA

CIVIL ENGINEERING SURVEYING  
MAPPING PLANNING

**WOOD RODGERS INC.**  
3301 C STREET BLDG. 100B SACRAMENTO, CA 95814  
TEL: 916/341-7760 FAX: 916/341-7767

DATE: NOV. 2000	DRAWN: HMB	CHECKED: <i>MR</i>	PROJECT NO: 1055.015
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J:\JOBS\RIVERVIEW\DWG\FROMREY\UNIT2\PHASE4A\PLOT PLANS\LOT-38.DWG 11/15/00 16:09

0101102

### RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction    
  Addition    
  Remodels    
  Other

Project Address: 10138 18 MENCLA CT     Assessor Parcel # \_\_\_\_\_

#### OWNER INFORMATION:

Legal Property Owner: Beazer Homes Holdings Corp.     Phone # 916-773-3888  
 Owner Address: 3009 Douglas Blvd. 150     City Roseville     State CA     Zip 95661

#### CONTRACTOR INFORMATION:

Contractor: Same as above     Lic. # B724191     Phone # 773-3888     Fax # 773-0425

#### PROJECT INFORMATION:

Land Use Zone \_\_\_\_\_     Occupancy Group \_\_\_\_\_     Construction Type \_\_\_\_\_     Fed Code \_\_\_\_\_  
 No. of stories: 2     No. of rooms: \_\_\_\_\_     Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 923     2<sup>nd</sup> Floor Area 751     Basement \_\_\_\_\_     Roof Material \_\_\_\_\_

#### AREA IN SQUARE FOOT OF:

#### EXISTING

#### NEW

Dwelling/Living	_____	<del>923</del> <u>1874</u>
Garage/Storage	_____	<u>591</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: Single Family Homes

#### 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

- 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.  
 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA
- Title 24 Energy Compliance documentation      11" x 17" copy of floor plan for County Assessor  
 Grading and Erosion Control Questionnaire      Plan Review Fees

Date \_\_\_\_\_ Received by: (staff) \_\_\_\_\_

ACTIVITY/PERMIT # \_\_\_\_\_

**KWIKKOTE**  
STUCCO SYSTEM  
INSTALLATION CARD

# 21139  
BEAZER HOMES  
CLASSICS OF SACRAMENTO LOT 38  
18 MENCIA COURT SACRAMENTO

Stucco System Trade Name: KWIK KOTE  
Name Stucco Manufacturer: KWIK KOTE CORP  
ICBO Evaluation Service, Inc. Report No. 3607  
Date of Job Completion 5-7-01

Stucco Contractor Kenyon Plastering, Inc.  
Name John W. Kenyon, III  
Address P.O. Box 2077  
North Highlands, CA 95660  
Telephone # (916) 349-8191

Approved Contractor Number as issued by the Stucco Manufacturer: 1

This is to certify that the stucco system on the building exterior at the above address had been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

Signature of authorized representative of stucco contractor:



Date: 5-30-01

Builder Copy

# CERTIFICATION OF INSULATION

ADDRESS OF TRACT <b>BEAZER HOMES</b> LOT <b>38</b>  <b>CLASSICS</b>	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 9851, FRESNO, CA 93793-9851 LIC. #202026 <input type="checkbox"/> P.O. BOX 1831, RENO, NV 89505 LIC. #10675 <input type="checkbox"/> 3328 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675  DATE INSULATION COMPLETED
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CEILING		FLOOR	
SQUARE FEET	SQUARE FEET	SQUARE FEET	SQUARE FEET
TYPE OF INSULATION	TYPE OF INSULATION	TYPE OF INSULATION	TYPE OF INSULATION
MATERIAL <b>FIBERGLASS</b>	MATERIAL <b>FIBERGLASS</b>	MATERIAL <b>FIBERGLASS</b>	MATERIAL <b>FIBERGLASS</b>
FORM <b>BATTS</b>	FORM <b>BATTS &amp; BLOW</b>	FORM <b>BATTS</b>	FORM <b>BATTS</b>
MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.	MANUFACTURER'S PRODUCT I.D.
MANUFACTURER	MANUFACTURER	MANUFACTURER	MANUFACTURER
<b>OCF</b>	<b>OCF</b>	<b>OCF</b>	<b>OCF</b>
	BAGS		

R-VALUE	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
43	3 5/8	30 30	9" 12"			

KNEE WALL R-VALUE IS GREATER THAN WALLS ABOVE

MATERIAL <b>FIBERGLASS</b>	FORM <b>BATTS</b>	R-VALUE	MANUFACTURER <b>OCF</b>
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MATERIAL <b>FOAM</b>	MANUFACTURER <b>W R GRACE</b>
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INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, STANDARDS AND REGULATIONS

SIGNATURE - INSULATION CONTRACTOR <i>[Signature]</i>	TITLE <b>MANAGER</b>	DATE <b>5-29-1</b>
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS