

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0401520
Insp Area: 2
Thos Bros: 337-C4

Site Address: 16 MACCAN CT SAC
Parcel No: MEADOWVIEW ESTATES UNIT 2 LOT 128

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

CONTRACTOR
JTS COMMUNITIES
401 WATT AV.
SACRAMENTO CA. 95864

OWNER

ARCHITECT

Nature of Work: MP 1800 1 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 2/02/04 Contractor Signature Ron J. Caldwell

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 _____

PAID
CITY OF SACRAMENTO
FEB 02 2004

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 2/02/04 Applicant/Agent Signature Ron J. Caldwell

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 INSURANCE CO Policy Number WC367556101 Exp Date 03/01/2004

(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 2/02/04 Applicant Signature Ron J. Caldwell

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.

Certification of Compliance
School District Development

Part I—To be completed by the APPLICANT

Owner's Name/Address JTS COMMUNITIES, INC., 401 WATT AVE, SAC, CA 95864
Project Address 16 MACCAN CT.
Parcel Number 052-0010-033 (MOTAR APN) Lot No. 128
Subdivision Name MEADOWVIEW ESTATES UNIT #2 No. of Units 1
Applicant's Signature Ross A Caldwell Title Permit Manager
Phone No. (916) 487-3434 Ext. 348 Date _____

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(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II—To be completed by the BUILDING DEPARTMENT

Plan Identification Number 153
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 1,800
Signature/Title [Signature] Date 1-26-04

Part III—To be completed by the SCHOOL DISTRICT

School District SUSD Certificate No. 8092
 Exempt Comments LED #2
 Residential/Apartment/etc. 1,800 Square ft. x \$ 214 = \$ Ø
Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
Total fees collected..... = \$ Ø

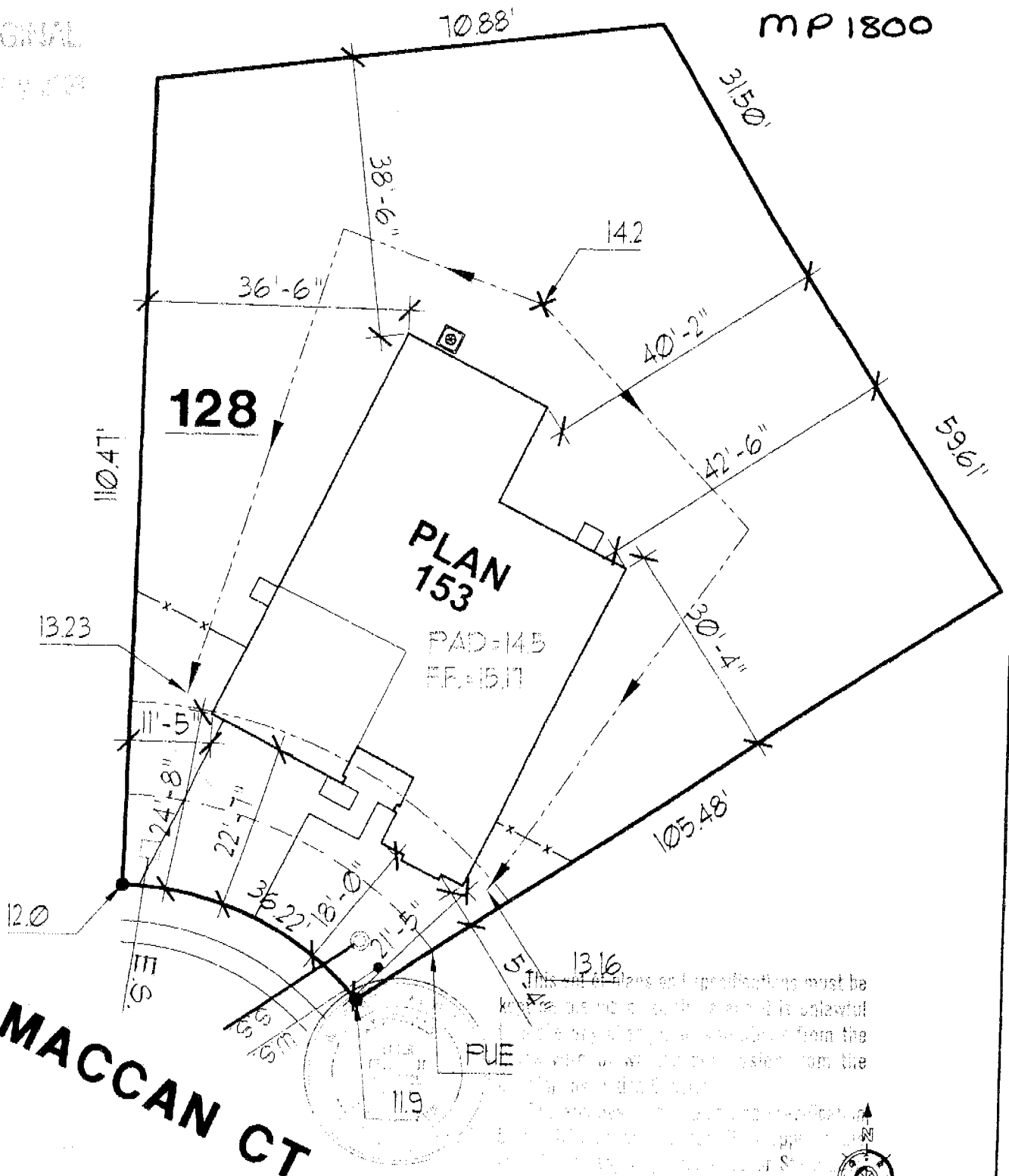
This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school 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 2/5/04

ORIGINAL

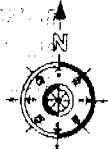
12/15/2003



MACCAN CT.

This set of plans and specifications must be kept as a permanent record and is unlawful to alter, amend, or change in any way from the original as approved and recorded from the County of Colusa.

Approved by the County of Colusa Planning and Zoning Commission on 12/15/2003.



DIMENSIONS SHOWN ARE APPROXIMATE AND ARE FOR THE SOLE PURPOSE OF COUNTY/CITY APPROVAL. ADDITIONAL INFORMATION REFLECTED ON THIS DOCUMENT SUCH AS FENCE, WALL, UTILITY, AND MAILBOX LOCATIONS ARE SUBJECT TO CHANGE WITHOUT NOTIFICATION TO BUYER. THIS PLOT PLAN MAY NOT REFLECT ALL "AS BUILT" CONDITIONS WHICH MIGHT VARY FROM THIS PROPOSED PLOT PLAN.

- 1. STORY HOUSE
 - 2. CAR GARAGE
- APN #

PROPOSED SITE PLAN

JTS Working Together to Achieve Excellence
CONSTRUCTION SERVICES

401 Watt Avenue
 Sacramento, CA 95821 (916) 487 3434

MEADOWVIEW ESTATES

SCALE = 1" = 20' DATE: DEC. 15, 2003

APPROVED FOR RELEASE	DATE	APPROVED FOR RELEASE	DATE
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Planning and Building Department
Building Division

CITY OF SACRAMENTO
CALIFORNIA

November 7, 2003

Downtown Permits Center
1231 I Street, #200
Sacramento, CA 95814-2998
North Permits Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

ADDRESS 16 Maccan ct PERMIT NO. 0401520

INSPECTION COMMENTS	PERMIT DOCUMENTS
B011 P40 AP ECC	
B12 A.P. ECC	2-17-04 P-42643 AP L.JELT <i>(initials)</i>
3-18-04 E67 AP CDG #29074	
3-25-04 AP mys ROOF	
3-31-04 AP VST B-26	
4-7-04 41 AP VST	
4-8-04 14/15 AP VST	
4-15-04 P-47 AP VST	
05/24/04 Finals C/N V. Saml	

FINAL APPROVALS	
BUILDING	<i>(Signature)</i>
ELECTRICAL	
PLUMBING	
MECHANICAL	
FIRE	
SITE	

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

Project Address

16 Maccann Ct
Meadowview Estates
Unit 3 Lot 128

ICBO Evaluation Service, Inc.
Report ER-4004

Date Completed 5-1-04

Plastering Contractor

Name: J. T. S. Stucco Dio.
Address: 11285 White Rock Road
Telephone No. (416) 635-2800

Approved contractor number as issued by Omega Products Int'l, 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 Richth
Signature of authorized representative of
plastering contractor

Date

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

CERTIFICATION OF INSULATION

JTS Comm.
Primer @ Meadowview

LOT # *128*

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 1009 MELODY ROAD, MARTINEZ, CA 94551 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93729 LIC. #202026
- P.O. BOX 1631, RENO, NV 89502 LIC. #10675
- 3528 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

DATE CERTIFICATION COMPLETED

(SQUARE FEET)	(SQUARE FEET)	(SQUARE FEET)
FIBERGLASS	FIBERGLASS	FIBERGLASS
BATS	BATS & BLOW	BATS
MANUFACTURER'S PRODUCT ID	MANUFACTURER'S PRODUCT ID	MANUFACTURER'S PRODUCT ID

CT	OC	JM	CT	OC	JM	CT	OC	JM
THICKNESS	THICKNESS	THICKNESS	THICKNESS	THICKNESS	THICKNESS	THICKNESS	THICKNESS	THICKNESS
13	3 1/2"	30	9"	12"				

MATERIAL	FORM	R-VALUE	MANUFACTURER		
FIBERGLASS	BATS		CT	OC	JM
		MIL/FT			

SIGNATURE - INSULATION CONTRACTOR: *JTS* TITLE: **MANAGER** DATE: *9/15/04*

PROJECT: _____ TITLE: _____ DATE: _____

REMARKS: _____