

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0011946
Insp Area: 4

Site Address: 47 PORT HENLEY CT SAC
Parcel No: 201-0400-022 NORTHBR 1-1 LOT 22

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

CONTRACTOR
LENNAR RENAISSANCE INC.
2240 DOUGLAS BL
ROSEVILLE CA. 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP173 2 STORY 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 732348 Date 2/28/01 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 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 10-23-00 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

[Signature] 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 FRANSCONTINENTAL INSURANCE CO Policy Number WC166792277 Exp Date 6/1/2001

____ (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 10-23-00 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.

CERTIFICATION OF INSULATION

PART I GENERAL

ADDRESS OR TRACT <div style="font-size: 1.5em; margin-top: 10px;">Winncrest</div> <div style="margin-top: 10px;">LOT # 022</div> <div style="font-size: 1.5em; margin-top: 10px;">ASHFORD PLACE</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 <div style="font-size: 1.5em; margin-top: 5px;">4/18/01</div>
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PART II AREAS INSULATED

WALLS		CEILINGS			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		APPLIED THICKNESS		R-VALUE INSTALLED		APPLIED THICKNESS	
13 19		3 5/8 6 1/4		38 38		12 1/4 14 3/4	
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE							
MATERIAL FIBERGLASS		FORM BATTS		R VALUE		MANUFACTURER OCF	
AIR INFILTRATION SEALANT							
MATERIAL FOAM				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>Bill Grayson</i>	TITLE MANAGER	DATE 3/26/01
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS:

KWIKKOTE
STUCCO SYSTEM
INSTALLATION CARD

#C30156
LENNAR RENAISSANCE
ASHFORD PLACE LOT # 22
47 PORT HENLEY CT. SACRAMENTO

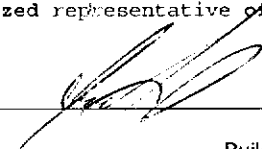
Stucco System Trade Name: KWIK KOTE
Name Stucco Manufacturer: KWIK KOTE CORP
ICBO Evaluation Service, Inc. Report No. 3607
Date of Job Completion _____

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: 3/2/00

Builder Copy

KWIKKOTE
STUCCO SYSTEM
INSTALLATION CARD

#C30156
LENNAR RENAISSANCE
ASHFORD PLACE LOT # 22
47 PORT HENLEY CT. SACRAMENTO

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

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: 3/2/00

Subcontractor Copy



O'Connor Freeman & Associates, Inc.

structural engineering services

February 22, 2001

Todd Speece
Winncrest Homes
2240 Douglas Blvd., Suite 250
Roseville, CA 95661

Re: Ashford Place - Plan 3, DSC4 Connection
O'Connor Freeman Job Number: E991101

Dear Todd:

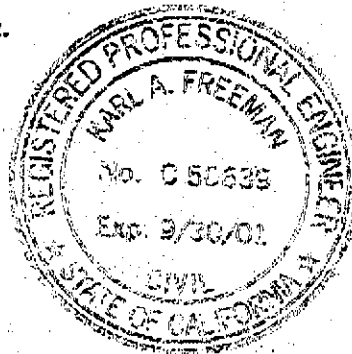
Our office was contacted by Jeff Turk, the construction manager for the Ashford Place project, about the connection of the DSC4 strap over bedroom 3 on plan 3. Specifically, he informed our office that because the top was dropped at the front of bedroom 3 by a foot, it would be impossible to connect the girder truss with the strap. We have reviewed this situation and have determined that the DSC4 strap may be replaced with a CS16 collector strap and blocking. Which is to run parallel to the girder truss and extend across the 9'-0" high top plate and nail into the eave blocking. Please see the attached exhibit for reference and review.

If you should have any further questions or comments please do not hesitate to call.

Sincerely,

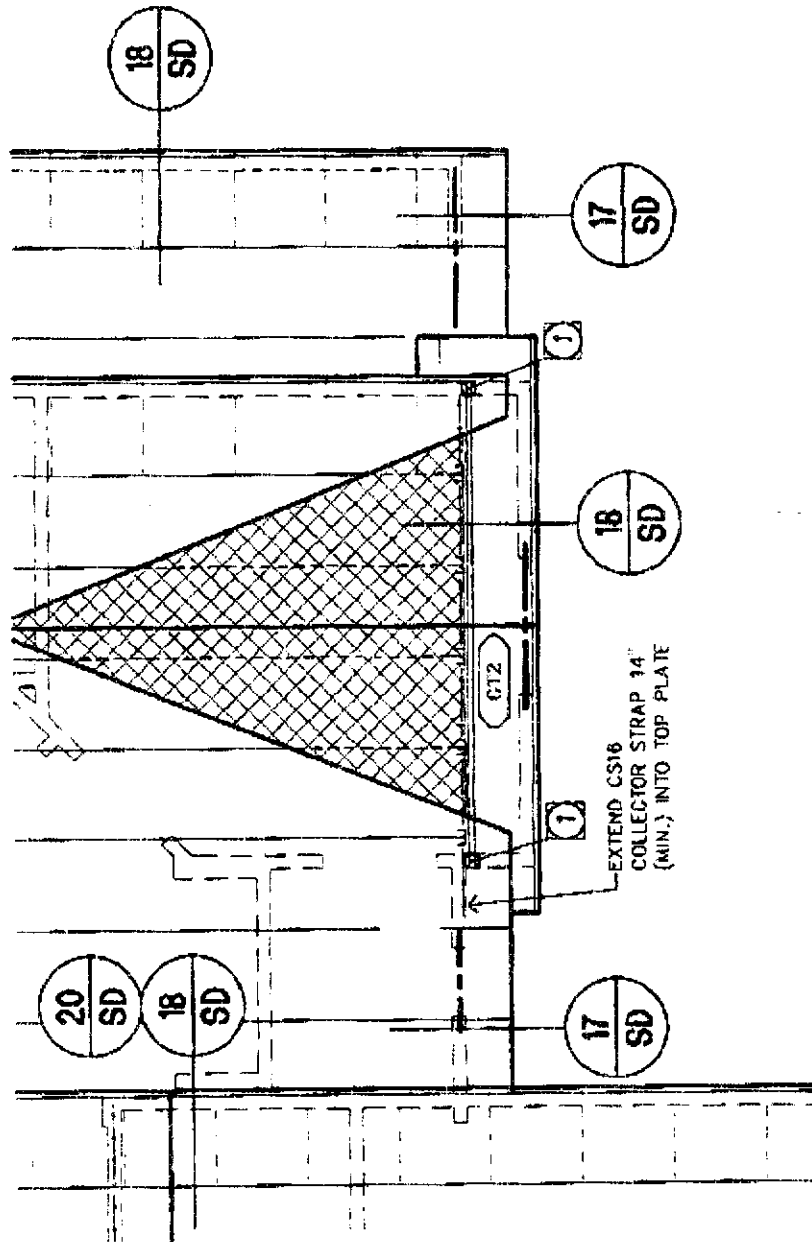
O'Connor Freeman & Associates, Inc.

Karl A. Freeman, P.E.
jmg/KAF



enclosures: Exhibit - A
cc: file

Post-it® Fax Note	7671	Date	# of pages ▶ 2
To	JEFF	From	JOE
Co./Dept.		Co.	
Phone #		Phone #	441-5721
Fax #	928-1083	Fax #	





O'Connor Freeman & Associates, Inc.

structural engineering services

September 7, 2000

Todd Speece
Winncrest Homes
2240 Douglas Blvd., Suite 250
Roseville, CA 95661

Post-it® Fax Note		7671	Date	# of pages
To	Jeff Turk		From	Joe Goldbronn
Co./Dept.			Co.	
Phone #			Phone #	441-5721
Fax #	928-1083		Fax #	

Re: Ashford Place
O'Connor Freeman Job Number: E991101

Dear Todd:

Our office was contacted by Jeff Turk, the construction manager for the Ashford Place project. Specifically, he informed us that on the model home of plan 4 the top plate along the 12'-0" shear wall along the garage to house fire wall had been cut and he wanted to know what could be done to correct this problem. After reviewing the plans it has been determined that if a LS50 clip are attached on each side of the cut on the top plate to the roof truss running parallel to the shear wall, proper shear transfer may be achieved. We have provided exhibit "A" for your reference and review.

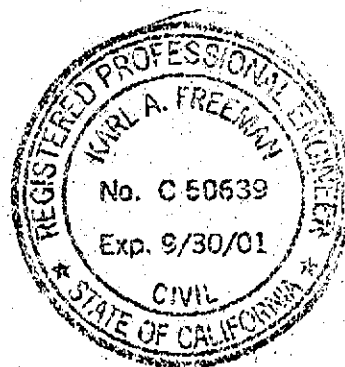
Jeff also requested for an alternate truss to top plate connection opposed to the LS50 clips at 48" o.c as shown on 17/SD. It has been determined that if HI clips are used at 24" o.c. a proper connection may be obtained.

If you should have any further questions or comments please do not hesitate to call.

Sincerely,

O'Connor Freeman & Associates, Inc.

Karl A. Freeman, P.E.
jmg/KAF



cc: file
enclosures: Exhibits: A

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction

Addition

Remodels

Other

LOT # 22

Project Address: 47 PART HENLEY COURT

Assessor Parcel # 201-040-022

OWNER INFORMATION: NORTHBOROUGH VILLAGE #1

Legal Property Owner: LENNAR RENAISSANCE

Phone # (916) 773-7471

Owner Address: 2240 DOUGLAS BLVD.

City ROSEVILLE

State CA

Zip 95661

CONTRACTOR INFORMATION:

Contractor: LENNAR RENAISSANCE

Lic. # 732348

Phone # (916) 773-7471 Fax# (916) 773-4086

PROJECT INFORMATION:

Land Use Zone R/A

Occupancy Group R3

Construction Type VM

Fed Code LA

No. of stories: TWO

No. of rooms: _____

Street width: 40'

1st Floor Area 939

2nd Floor Area 1068

Basement N/A

Roof Material TILE

AREA IN SQUARE FOOT OF:

EXISTING

NEW

Dwelling/Living

2007

Garage/Storage

496

Decks/Balconies

Carports

SCOPE OF WORK:

NEW CONSTRUCTION SFD

FOR OFFICE USE ONLY:

Information above complete

AR Flood Waiver required

Planning Approval

Violation files checked

Flood Elevation Certificate Required

Design Review Approval

Standard setbacks

Water Development Infill Area

Special Fee Districts Apply : _____

County Sewer

NEW STRUCTURES & ADDITIONS

❖ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE

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.

Title 24 Energy Compliance documentation

11" x 17" copy of floor plan for County Assessor

Grading and Erosion Control Questionnaire

Plan Review Fees

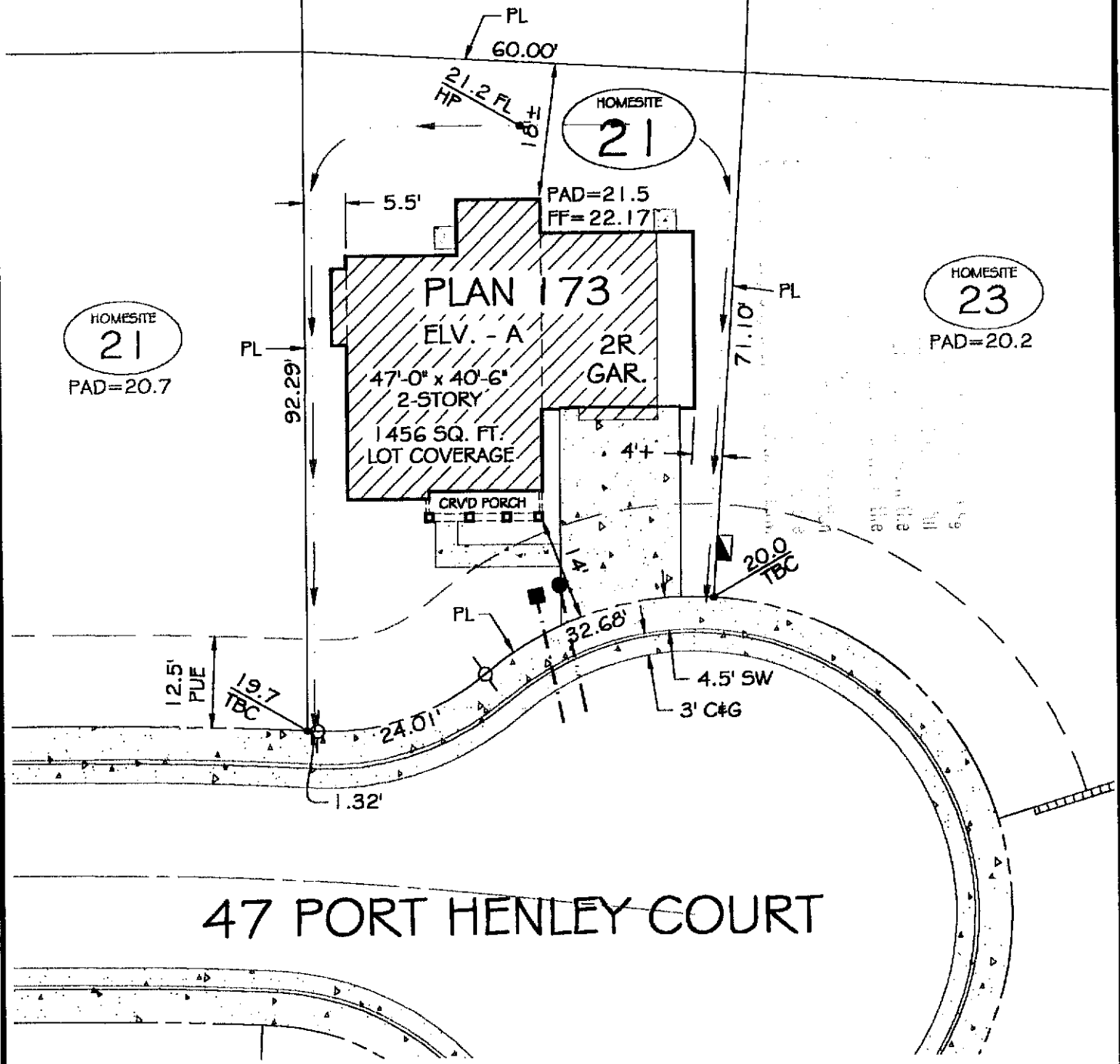
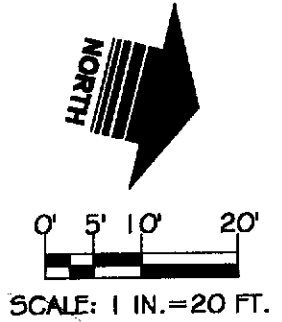
Date: _____

Received by: (staff) _____

ACTIVITY/PERMIT #

PLOT PLAN

THIS PLOT PLAN IS FOR THE PURPOSE OF SHOWING THE HOUSE TO BE CONSTRUCTED ON THE LOT AND MAY NOT REPRESENT THE FINAL AS-BUILT CONFIGURATION OF THE PROPERTY OR IMPROVEMENTS THEREON. THE ACCURACY OF THIS PLOT PLAN IS NOT GUARANTEED, NOR IS IT A PART OF ANY POLICY, REPORT OR GUARANTEE TO WHICH IT MAY BE ATTACHED. ACTUAL DIMENSIONS, OTHER THAN MINIMUM ORDINANCE, MAY VARY OR CHANGE WITHOUT PRIOR NOTICE, DUE TO ACTUAL SITE CONDITIONS.



47 PORT HENLEY COURT

LOT COVERAGE

LOT AREA: 4652 S.F.
 BUILDING: 1456 S.F.
 BLDG./
 LOT AREA: 31 %

RETAINING WALL

HEIGHT: _____
 LENGTH: _____
 DISTANCE
 FROM P.L.: _____

SYMBOLS LEGEND

- DROP INLET:
- ELECTRIC SERVICE BOX:
- FIRE HYDRANT:
- GAS SERVICE:
- PAD-MOUNT TRANSFORMER:
- SEWER SVC.:
- STREET LIGHT:
- SPOT ELEVATION: 123.4
- SWALE (FLOW DIRECTION):
- WATER SVC.:
- EXTENTS OF UPPER STORY LEVEL:



**Winncrest
Homes**

Phase 2.1

ASHFORD PLACE
at Natomas Park

HOME SITE #22

NORTHBOROUGH VILLAGE I
 CITY OF SACRAMENTO, CALIFORNIA
 A.P.N.: 201-040-022-000

NOTES

1. MEASUREMENTS ALONG CURVED LINES ARE CHORD LENGTHS, U.O.N.
2. MAXIMUM ALLOWABLE LOT COVERAGE IS 45% FOR 1-STORY & 40% FOR 2-STORY
3. SETBACK DIMENSIONS ARE ROUNDED DOWN TO NEAREST HALF UNIT, U.O.N.

BCB	9/20/00	20:1
DRAWN BY	ISSUE	SCALE