

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0100239

Insp Area: 2

Site Address: 7892 SHASTA AV SAC

Parcel No: 117-1370-003

JACINTO N 2 LOT 3

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

BEAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1232 5 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 724191 Date 1/10/01 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 1/10/01 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 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 become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 1/10/01 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.**

## RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction    
  Addition    
  Remodels    
  Other

Project Address: 1912 Shasta Avenue Lot 3 Assessor Parcel # 117 1370 003

**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: 1 No. of rooms: \_\_\_\_\_ Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1232 2<sup>nd</sup> Floor Area \_\_\_\_\_ Basement \_\_\_\_\_ Roof Material \_\_\_\_\_

**AREA IN SQUARE FOOT OF:**

	<u>EXISTING</u>	<u>NEW</u>
Dwelling/Living	_____	<u>1232</u>
Garage/Storage	_____	<u>42.6</u>
Decks/Balconies	_____	_____
Carpools	_____	_____

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

- |   |   |
|---|---|
| <input type="checkbox"/> 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE<br><input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA<br><br><input type="checkbox"/> Title 24 Energy Compliance documentation<br><input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor<br><input type="checkbox"/> Plan Review Fees<br><br>♦ Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures. |
|---|---|

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

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

**KWIKKOTE**  
STUCCO SYSTEM  
INSTALLATION CARD

#C30347  
BEAZER HOMES  
BELLEFLEUR II LOT 3  
~~7892~~ SHASTA AVE 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  
Name  
Address

Kenyon Plastering, Inc.  
John W. Kenyon, III  
P.O. Box 2077  
North Highlands, CA 95660  
(916) 349-8191

Telephone # \_\_\_\_\_  
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: 3-30-01

Builder Copy

# CERTIFICATION OF INSULATION

<p style="text-align: center;"><b>ADDRESS OR TRACT</b></p> <p style="font-size: 2em; font-family: cursive;">BEAZER</p> <p style="text-align: right; margin-right: 50px;">LOT # 0003</p> <p style="font-size: 2em; font-family: cursive; margin-top: 20px;">BELLE FLEUR</p>	<p style="text-align: center;"><b>SACRAMENTO INSULATION CONTRACTORS</b></p> <p><input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026</p> <p><input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675</p> <p><input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675</p> <p style="margin-top: 10px;">DATE INSULATION COMPLETED</p>
--	--

WALLS		CEILINGS			FLOORS		
( SQUARE FEET )		( SQUARE FEET )			( SQUARE FEET )		
TYPE OF INSULATION		TYPE OF INSULATION			TYPE OF INSULATION		
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>	
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	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS	
13	3 5/8	38	12 1/4				
		38	14 3/4				
<b>KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE</b>							
MATERIAL	FORM	R VALUE		MANUFACTURER			
<b>FIBERGLASS</b>	<b>BATTS</b>			<b>OCF</b>			
<b>AIR INFILTRATION SEALANT</b>							
MATERIAL				MANUFACTURER			
FOAM				<b>W R GRACE</b>			

**THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.**

SIGNATURE - INSULATION CONTRACTOR	TITLE	DATE
Bill George	MANAGER	3/5/01
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

**N**orman

**S**cheel

**S**tructural

**E**ngineer

**Sacramento**  
5022 Sunrise Blvd.  
Fair Oaks, CA 95628  
(916) 536-9385  
(916) 536-0260 (fax)

**NORMAN SCHEEL**  
Structural Engineer  
Email: [norm@nsse.com](mailto:norm@nsse.com)

**ROBERT COON**  
Project Manager  
Email: [rob@nsse.com](mailto:rob@nsse.com)

**PAULO IBAÑEZ**  
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**STACY MARLIN**  
Office Manager  
Email: [stacy@nsse.com](mailto:stacy@nsse.com)

**Davis**  
213 E Street Suite B  
Davis, CA 95616  
(530)753-5300  
(530)753-5380(fax)

**TRACY HARRIS P.E.**  
Project Engineer  
Email: [tracy@nsse.com](mailto:tracy@nsse.com)

**DARRELL PEREIRA**  
Design Engineer  
Email: [darrell@nsse.com](mailto:darrell@nsse.com)

February 12, 2001

Beazer Homes  
3009 Douglas Blvd. Suite 150  
Roseville, CA 95661

**Re: Bellefleur (Job #20234)  
Inspection Clarifications**

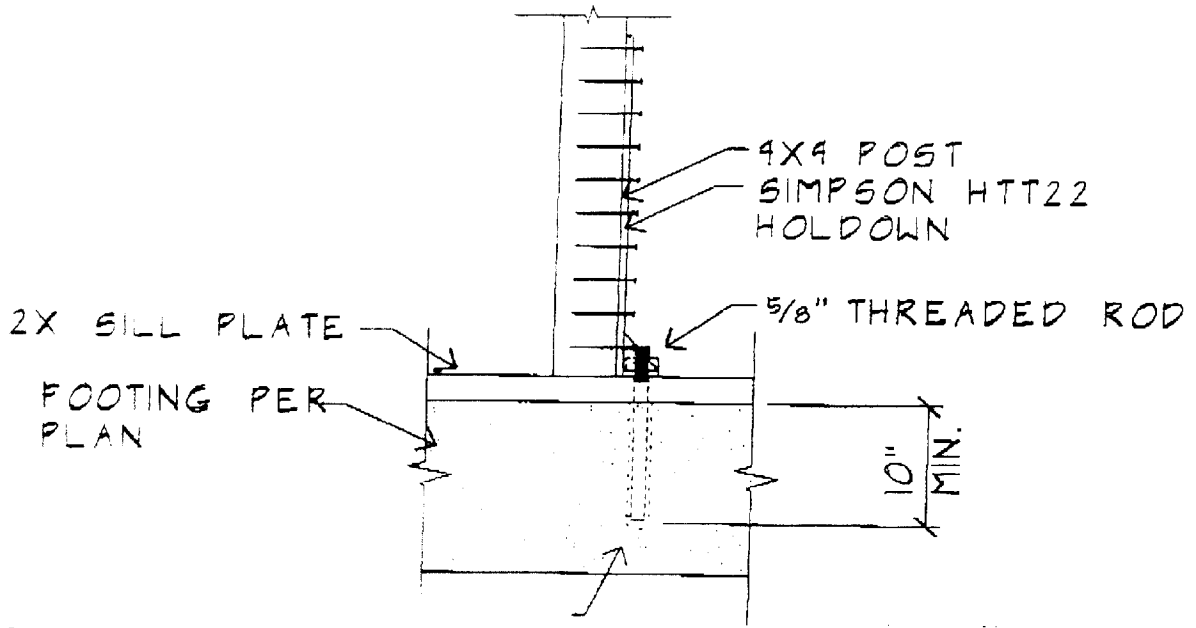
1. In our opinion, the MAS anchors may be installed on 3x sill plates for the lateral loads. However, you may consider installing a few wedge anchors for the overall stability of the wall.
2. 6" plus or minus on shear walls over 8'-0" long is acceptable with the same hardware and nailing specified on the plans.
3. Anchor bolts may be repaired or replaced with either wedge anchors or epoxy bolts. The only condition with wedge anchors is that when they are at the edge of the slab, they require 2 bolts per each existing anchor bolt at the shear walls.

If you have any questions, please call Rob Coon.

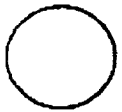
  
**NORMAN SCHEEL**  
STRUCTURAL ENGINEER



PLAN ADDENDUM



DRILLED 3/4"  $\phi$  HOLE AND EPOXY WITH SIMPSON SET EPOXY SYSTEM PER MANUFACTURES SPECIFICATIONS

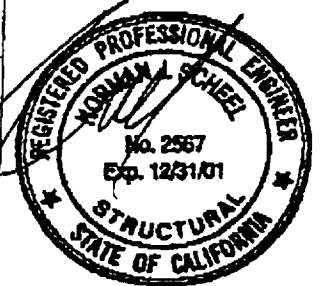


HTT22 HOLDOWN REPAIR DETAIL WITH EPOXY SYSTEM

HPAHD22 EPOXY Fix

NORMAN SCHEEL  
STRUCTURAL ENGINEER  
5022 SUNRISE BLVD  
FAIR OAKS, CA 95628  
VOICE (916) 536-9585  
FAX (916) 536-0260

PROJECT BELEFLUER II  
CLIENT BELZER HOMES  
JOB NO. 20234  
PROJECT MGR. ROB  
DATE 2/9/01  
PAGE 1 OF 1





CAPITOL ENGINEERING LABORATORIES, INC.

631 Commerce Drive, Suite #200 • Roseville, California 95678 • (916) 786-2488

JOB REPORT

PROJECT NAME: Belle Fleur II - BLAZER PAGE: \_\_\_\_\_  
 INSPECTOR: Harold Lyden FILE NO. 5222  
 PERSONS CONTACTED: CVC DATE: 2-20-01  
 REFERENCE DOCUMENTS: ICBO REPORT # 4945 PERMIT #: \_\_\_\_\_  
 WEATHER: CLOUDY  
 SERVICE PROVIDED: CONCRETE (INSP/SAMPLE ONLY/PU)  MASONRY  WELDING (SHOP/FIELD)  SOILS   
 OTHER  KEYWAY BOLTS

1000 Lbs. of 1/2" rods to 150% of Newell  
via ICBO 4945 or 10 bolts 1/2" dia 5/8"

- Bolt 3 - Corner 2-5/8" with movement
- Bolt 12 - Corner 2-5/8" " "
- Bolt 27 - Corner 1-5/8" " "
- Bolts 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

COMPLIANCE OF WORK: \_\_\_\_\_

ATTACHMENTS: \_\_\_\_\_

EQUIPMENT/SUPPLIES USED: \_\_\_\_\_

NEXT VISIT: \_\_\_\_\_

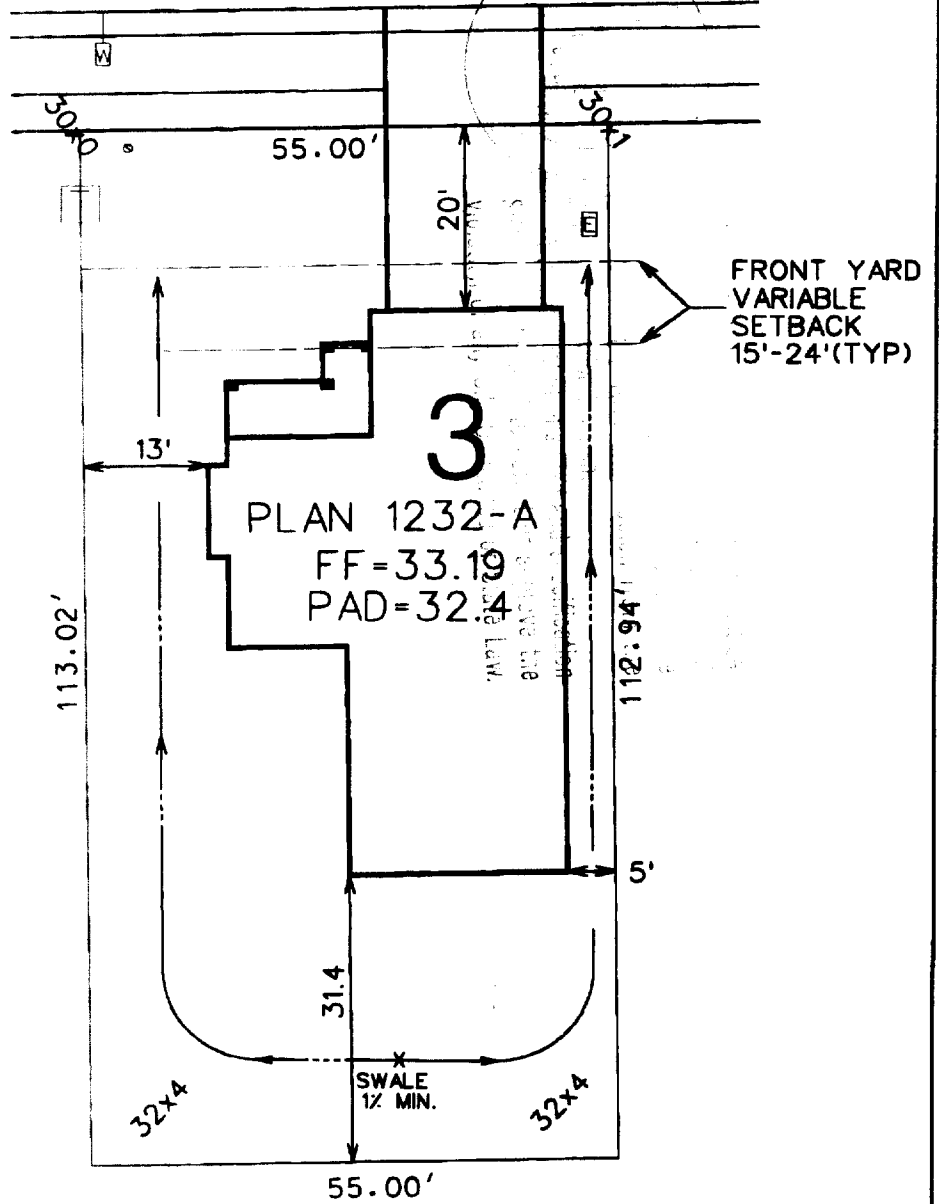
REMARKS: \_\_\_\_\_

REVIEWED BY: Harold Lyden DATE: \_\_\_\_\_

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 WALLS ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.

# SHASTA AVE.

- Ⓜ — WATER METER BOX
- ⓔ — ELECTRICAL BOX
- ⊕ — UTILITY RISERS
- ⦿ — SEWER CLEANOUT
- ⊗ — STREET LIGHT
- ⦿ — FIRE HYDRANT
- ⓧ — TRANSFORMER
- ⓧ — ELECTRICAL VAULT
- ⓧ — TELEPHONE PED.
- — DRAIN INLET

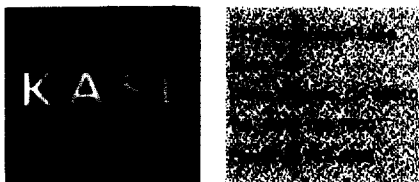


CHECKING/APPROVAL	
✓	INITIALS
✓	W
✓	W



SCALE: 1"=20'

6214 SQUARE FEET



CIVIL - WATER RESOURCES - SURVEYING

PLOT PLAN FOR LOT 3		SCALE: 1"=20'
		DATE: 12-05-00
JACINTO VILLAGE NORTH		REVISED:
		DRAWN BY: PWG
A.P.N. ADDRESS: COUNTY: SACRAMENTO		CHK'D. BY: LK
		W.O. 0434-02