

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0103723

Insp Area: 4

Site Address: 3606 VIADER WY SAC

Sub-Type: NSFR

Parcel No: 225-1300-024

GTWAY W 3 LOT 33

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

MOURIER JOHN CONSTRUCTION INC.  
1830 VERNON ST  
SUITE 9 95687

Nature of Work: NSFR MP2385/OPT 2 STORY 10 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. 3697, 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 D License Number 013004 Date 4/2/01 Contractor Signature M. Collins

**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 4/2/01 Applicant/Agent Signature M. Collins

**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 STAFF COMPENSATION INS FUND Policy Number 156326600 Exp Date 10/01/2001

\_\_\_\_\_, (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 4/2/01 Applicant Signature M. Collins

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.**

JACG 2606

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction
- Addition
- Remodels
- Other

Project Address: 3606 Viader Way Assessor Parcel # 225-1

OWNER INFORMATION:

Lot # 33

Legal Property Owner: John MOURIER Construction Phone # (916) 969-2842  
 Owner Address: 1830 VERNON STREET, #9 City ROSEVILLE State Ca. Zip 95678

CONTRACTOR INFORMATION: Gateway West Village #3

Contractor: J.M.C. Lic. # 613004 Phone # 969-2842 Fax# 782-8903

PROJECT INFORMATION:

Land Use Zone R14 Occupancy Group R3 Construction Type VN Fed Code 14  
 No. of stories: 2 No. of rooms: \_\_\_\_\_ Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area \_\_\_\_\_ 2<sup>nd</sup> Floor Area \_\_\_\_\_ Basement \_\_\_\_\_ Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:

EXISTING NEW

Dwelling/Living	_____	<u>2606</u>
Garage/Storage	_____	<u>623</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK:

FOR OFFICE USE ONLY

- Information above complete
- Violation files checked
- Standard setbacks
- County Sewer
- AR Flood Waiver required
- Flood Elevation Certificate Required
- Water Development Infill Area
- Planning Approval
- Design Review Approval
- Special Fee Districts Apply : \_\_\_\_\_

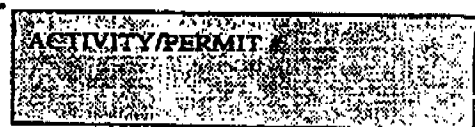
NEW STRUCTURES & ADDITIONS

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
  - Title 24 Energy Compliance documentation
  - Grading and Erosion Control Questionnaire
  - 11" x 17" copy of floor plan for County Assessor
  - Plan Review Fees
- 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) \_\_\_\_\_



# CERTIFICATION OF INSULATION

PART I GENERAL	ADDRESS OR TRACT		SACRAMENTO INSULATION CONTRACTORS				
	<p><i>JMC</i> <i>Gateway West</i></p>		LOT # <b>33</b>	<input 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

PART II AREAS INSULATED	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	
	<b>OCF</b>		<b>OCF</b>			<b>OCF</b>	
	BAGS						
	R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
<b>13</b>	<b>3 1/2"</b>	<b>30</b> <b>30 W/BL</b>	<b>12"</b> <b>10"</b>				
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE							
MATERIAL <b>FIBERGLASS</b>		FORM <b>BATTS</b>		R-VALUE		MANUFACTURER <b>OCF</b>	
AIR INFILTRATION SEALANT							
MATERIAL <b>Foam</b>				MANUFACTURER <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 <b>Jeff Cable</b>				TITLE <b>MANAGER</b>		DATE	
SIGNATURE—GENERAL CONTRACTOR				TITLE		DATE	
REMARKS							

# OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

JT 33

ICBO Report #4004

Date of Job Completion 10-25-01

PLASTERING CONTRACTOR:

Name: STUCCO WORKS

Address: 5900 WAREHOUSE WAY, SAC 95826

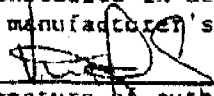
Telephone No: (916) 383-6699

Contractor Number of Diamond Wall System 2175

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 specified above and the manufacturer's instructions.

11-20-01

Date

  
Signature of authorized representative of  
Plastering Contractor

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