

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0110777
Insp Area: 2
Thos Bros:
Sub-Type: NSFR
Housing (Y/N): N

Site Address: 7730 DIXIE LOU ST SAC
Parcel No: 053-0016-037 LOT 37 MEADOWVIEW VILL 7

CONTRACTOR
NEW FAZE DEVELOPMENT
2377 GOLD MEADOW WY STE.270
GOLD RIVER CA. 95670

OWNER

ARCHITECT

Nature of Work: NSFR MP1624 8 RMS 2 STORY

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 Parsons & Merchante Lender's Address Elk Grove

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 71460 Date 12-12-01 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 above mentioned property for inspection purposes.

Date 12-12-01 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 State Fund Policy Number 1536963-98 Exp Date 4-15-02

(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 12-12-01 Applicant Signature [Signature]

WARNING: FAILURE TO SECURE WORKERS 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 ATTORNEYS FEE.

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

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO:

BLDG PERMIT NO:

GENERAL INFORMATION

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

| INSPECTION | RESIDENTIAL | SI <input checked="" type="checkbox"/> | MF <input type="checkbox"/> | UNITS |
|------------------|----------------|--|-----------------------------|-------|
| CSD-1 | COMMERCIAL USE | | | |
| SRCSD | | | | |
| CONSTRUCTION | | | | |
| IN-LIU | | | | |
| | | | | |
| | | | | |
| TOTAL FEE | | | | |

APN: 053-0016-037

DESCRIPTION / SUBDIVISION: RAINBOW SPRINGS LOT: 37

PROPERTY ADDRESS: 7730 DIXIE LOU ST

OWNER: NEW FARE DEVELOPMENT INC.

MAILING ADDRESS: 2187 DEL PASO BLVD

CITY-STATE-ZIP: SAKTO CA 95815 PHONE: 916-929-9906

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE: 

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

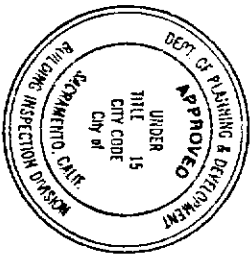
CERTIFICATION OF INSULATION

| | | |
|--|---|---|
| P A R T I G E N E R A L | ADDRESS OR TRACT | SACRAMENTO BUILDING PRODUCTS |
| | New Faze LOT # 37 Rainbow Springs | <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 |

| P A R T II A R E A S I N S U L A T E D | 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 | MANUFACTURER | MANUFACTURER | | | | | | | | | | | | | | | | | | |
| | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">CT</td> <td style="width: 33%;">OC</td> <td style="width: 33%;">JM</td> </tr> <tr> <td colspan="3" style="text-align: center;">BAGS</td> </tr> </table> | CT | OC | JM | BAGS | | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">CT</td> <td style="width: 33%;">OC</td> <td style="width: 33%;">JM</td> </tr> <tr> <td colspan="3" style="text-align: center;">BAGS</td> </tr> </table> | CT | OC | JM | BAGS | | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">CT</td> <td style="width: 33%;">OC</td> <td style="width: 33%;">JM</td> </tr> <tr> <td colspan="3" style="text-align: center;">BAGS</td> </tr> </table> | CT | OC | JM | BAGS | | |
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| BAGS | | | | | | | | | | | | | | | | | | | | | |
| CT | OC | JM | | | | | | | | | | | | | | | | | | | |
| BAGS | | | | | | | | | | | | | | | | | | | | | |
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| 13 | 3 1/2" | | | | | | | | | | | | | | | | | | | | |
| R - VALUE INSTALLED | APPLIED THICKNESS | | | | | | | | | | | | | | | | | | | | |
| 38 | 12" | | | | | | | | | | | | | | | | | | | | |
| 38 | 14 3/4" | | | | | | | | | | | | | | | | | | | | |
| MIN. INSTALLED WEIGHT PER SQUARE FOOT | R - VALUE INSTALLED | APPLIED THICKNESS | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| | KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE | | | | | | | | | | | | | | | | | | | | |
| | MATERIAL FIBERGLASS | FORM BATTS | R VALUE | | | | | | | | | | | | | | | | | | |
| | | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">MANUFACTURER</td> </tr> <tr> <td style="width: 33%;">CT</td> <td style="width: 33%;">OC</td> <td style="width: 33%;">JM</td> </tr> </table> | MANUFACTURER | | | CT | OC | JM | | | | | | | | | | | | |
| MANUFACTURER | | | | | | | | | | | | | | | | | | | | | |
| CT | OC | JM | | | | | | | | | | | | | | | | | | | |
| | AIR INFILTRATION SEALANT | | | | | | | | | | | | | | | | | | | | |
| | MATERIAL Foam | MANUFACTURER | | | | | | | | | | | | | | | | | | | |
| | | HILTI | HANDY FOAM | | | | | | | | | | | | | | | | | | |

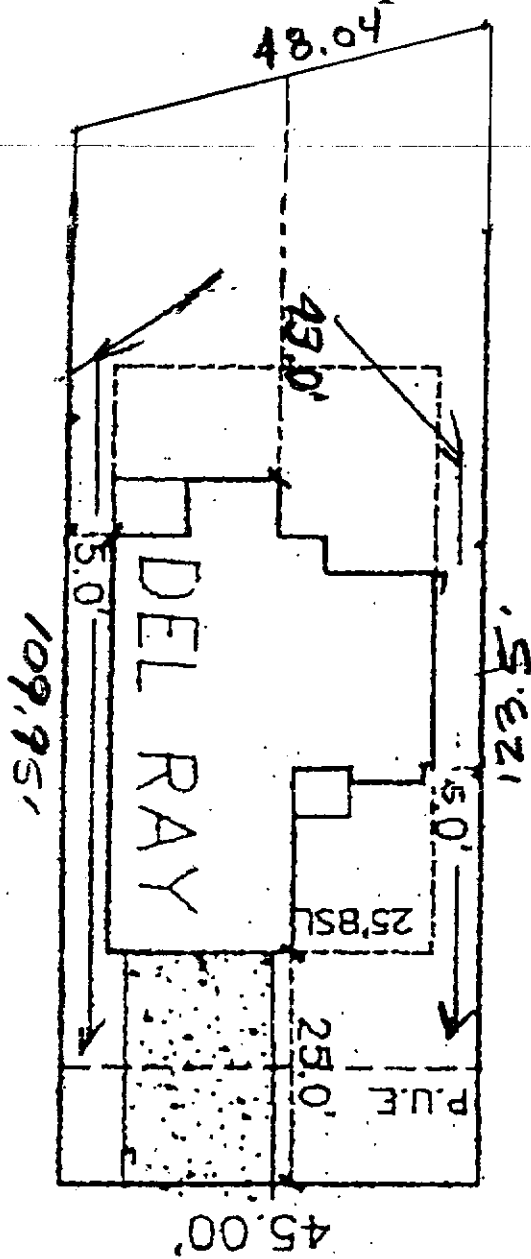
| | | | |
|--|---|------------------|-----------------|
| P A R T III C E R T I F I C A T I O N | THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS. | | |
| | SIGNATURE — INSULATION CONTRACTOR <i>Jeff Cable</i> | TITLE MANAGER | DATE 9/19/02 |
| | SIGNATURE — GENERAL CONTRACTOR | TITLE | DATE |
| | REMARKS | | |

New Faze Development, Inc.



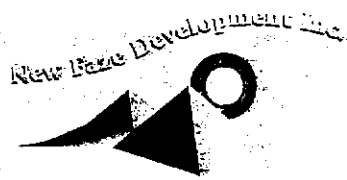
This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State L.M.



Marc Hammond
Director of Residential
Construction

3187 Del Paso Blvd.
Raleigh, NC 27605
Tel: 919.998.9900
Fax: 919.924.9938
marc@newfaze.com
<http://www.newfaze.com>



RAINBOW SPRINGS
Lot # 37 Plan # 1624
7730 DIXIE LOU STREET
APN: 053-0016-037
Scale 1" = 20'