

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0106715
Insp Area: 4

Site Address: 150 MENARD CR SAC

Parcel No: 225-1280-043 NORTHPT PK 13-2 LOT 32

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

WESTERN PACIFIC HOUSING
1210 CENTRAL BLVD
BRENTWOOD CA 94513

OWNER

WESTERN PACIFIC HOUSING
1210 CENTRAL BLVD
BRENTWOOD CA 94513

ARCHITECT

Nature of Work: NSFR MP3592/OPT 2 STORY 11 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 617271 Date 6/15/01 Contractor Signature N. 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 6/15/01 Applicant Agent Signature N. 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 EAGLE INS. CO Policy Number 4S-0000273 Exp Date 03/19/2001

_____, (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 6/15/01 Applicant Signature N. 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.

CERTIFICATION OF INSULATION

ADDRESS OR TRACT WESTERN PACIFIC LOT # 32 BELLAGIO	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
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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				
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"	30 30	9" 12"			
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>[Signature]</i>	TITLE MANAGER	DATE 10-11-01
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

Project Address: 150 Menard Circle
Lot Number: 32

Assessor Parcel # 225-1280-043
Subdivision Northpointe Park Unit #13 Ph.

OWNER INFORMATION:

Legal Property Owner: Western Pacific Housing Phone# (925) 634-6023
Owner Address: 1210 Central Boulevard, City Brentwood, State Ca. Zip 94513

CONTRACTOR INFORMATION:

Contractor: Western Pacific Lic# 675709/B Phone # (925) 634-6023 Fax 634-6166

PROJECT INFORMATION:

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code IA
No. of Stories: 2 No. of Rooms: 11 Street Width: 40'
1st Floor Area 1815 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

Dwelling/Living 3659
Garage/Storage 636
Decks/Balconies 143
Carports _____

SCOPE OF WORK: _____

- 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:

THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT

- 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE
- 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION
 - a) Assessor's Parcel Number
 - b) New Floor Area
 - c) Owners Name
 - d) Project Address

236,010⁰⁸

Date: _____ Received by: istatt Permit # _____

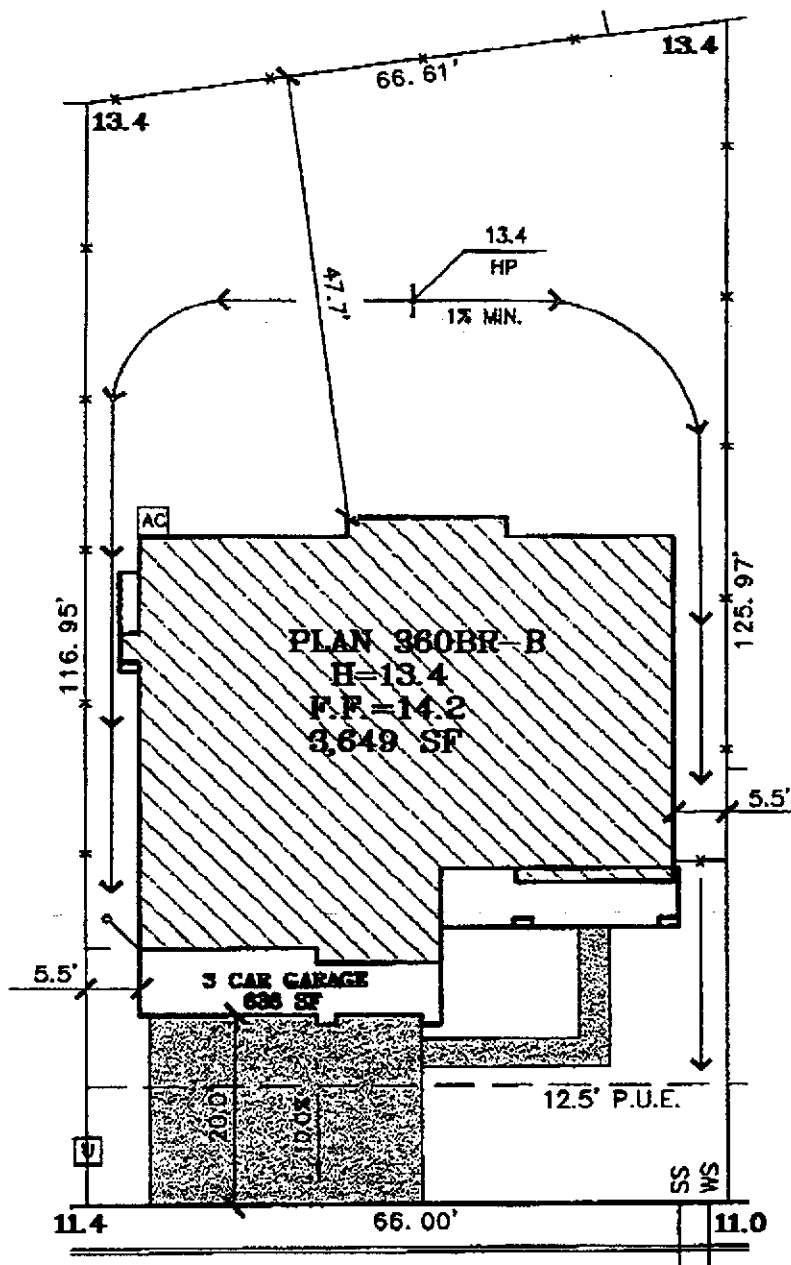
LEGEND

→ SWALE
 □ MAILBOX

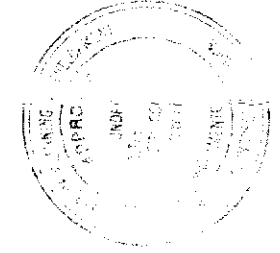
* WOOD FENCE
 ○ SIDEYARD GATE

SS SEWER SERVICE
 WS WATER SERVICE

▣ UTILITY SERVICE
 = F.F. FINISH FLOOR



This set of plans and specifications shall be kept on the job at all times and shall be used to make any change or correction to the same without written approval of the Building Department. The approval of the plan and specifications shall NOT be held to imply any violation of any City ordinance or State law.



ADD
 OK
 4/19

LOT 32
 PLAN 360BR-B
 A.P.N.:
 ADDRESS: 150 MENARD CIRCLE
 LOT AREA: 8,017 SF

MENARD CIRCLE

DUE TO THE UNIQUE CONDITIONS OF THIS LOT, THE BUYER HAS WALKED AND APPROVED THE SITE. FINAL GRADING CONDITIONS MAY VARY. THE INFORMATION ON THIS PLOT PLAN IS PROVIDED FOR YOUR CONVENIENCE AS A GUIDE TO THE GENERAL LOCATION OF THE SUBJECT PROPERTY. 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 MAY VARY OR CHANGE WITHOUT PRIOR NOTICE DUE TO ACTUAL SITE CONDITIONS.

PLAN: 360br
 ELEVATION: B
 ORIENTATION: L
 COLOR: 171

SIGNED (BUYER) _____ DATE _____

The Spink Corporation

2590 VENTURE OAKS WAY
 SACRAMENTO, CA 95833

PH: (916) 925-5550 FAX: (916) 921-0274



1210 Central Boulevard
 Brentwood, CA 94513
 office: (925) 634-6023
 fax: (925) 634-6063

BELLAGIO

NORTHPOINTE PARK VILLAGE 13 PHASE 2
 City of Sacramento, California

Scale: 1"=20'

March 15, 2001

KwikKote

No. 200-003397

Stucco System Installation Card

Job Name: BELLAGIO
Address: 150 MENARD CIR
SACRAMENTO, CA
Lot #: 0003032

Stucco System Trade Name: KWIK KOTE
Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.
Report No. 3607
Date of Job Completion: October 22, 2001

Home Builder: WESTERN PACIFIC
Address: 1210 CENTRAL BLVD. WEST #200
BRENTWOOD, CA

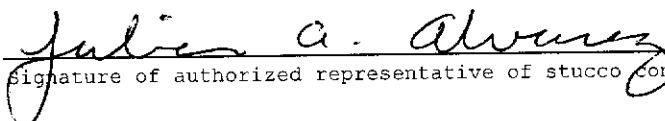
Stucco Contractor: KENYON PLASTERING, INC.
Address: PO BOX 2077
North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 11/13/2001

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

11-13-01
Date