

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0013004**  
**Insp Area: 4**

**Site Address: 2124 BLACKRIDGE AV SAC**  
Parcel No: 225-1400-006 NORTHPT PK 8 LOT 6

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

CONTRACTOR  
MOURIER JOHN CONSTRUCTION INC.  
1830 VERNON ST  
SUITE 9 95687

OWNER

ARCHITECT

**Nature of Work: NSFR MP2400 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. 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 13004 Date 11-1-00 Contractor Signature M. E. Fallon

**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.

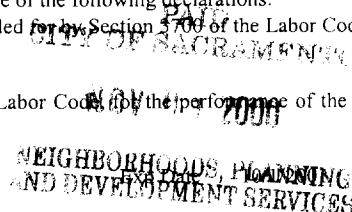
Date 1-1-00 Applicant/Agent Signature M. E. Fallon

**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 COMPENSATION INS FUND Policy Number 156326600



(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 1-1-00 Applicant Signature M. E. Fallon

**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.**



**INSULATION CONTRACTORS  
ASSOCIATION  
OF AMERICA**

INSULATION  
CERTIFICATE  
**67252**

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 799-0356

**THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT**

LOT # 6 TRACT # \_\_\_\_\_

STREET 2124 Blackbridge CITY \_\_\_\_\_

**EXTERIOR WALLS:**

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE 13/19

**CEILING:**

BATT: \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE 30

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE 30

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE \_\_\_\_\_

FLOORS: \_\_\_\_\_ NUMBER OF BAGS USED \_\_\_\_\_ R- \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE \_\_\_\_\_

SLAB ON GRADE: \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE \_\_\_\_\_

WIDTH OF INSULATION \_\_\_\_\_ INCHES \_\_\_\_\_ R- \_\_\_\_\_

FOUNDATION WALLS: \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ VALUE \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_ LICENSE # \_\_\_\_\_

INSULATION CONTRACTOR **ARCADE INSULATION** \_\_\_\_\_ DATE 8-13-1

CALIFORNIA CONTRACTORS LICENSE #263784 \_\_\_\_\_ SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

# OMEGA PRODUCTS INTERNATIONAL, INC.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

J.M.C. NATOMAS

2124 BLACKMIRE

Date of Job Completion 8/22/00

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC

Address: 5900 WAREHOUSE WAY SACRAMENTO CA

Telephone No: (916) 383 66 99

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

Date

11/8/00

[Signature]  
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.

# Pacific Consulting Engineers

2150 Bell Ave., Suite 145 • Sacramento, CA 95838 • (916) 564-6028 • Fax: (916) 564-6029

April 9, 2001

Roy Thorstensen  
John Mourier Construction Inc.  
1830 Vernon St., Suite 9  
Roseville, CA 95678

RE: Response to Field Inspector on Plan 2400/2624. This letter is our Job # 01-0494.

Dear Mr. Thorstensen:

Following are the response to the field inspectors comments on the aforementioned plan:

*With regards to Truss H over the turret on Elevation A .....*

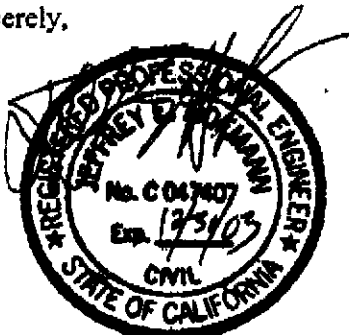
Please be advised that it does not have an adverse affect on the structural design if Truss H is placed such that it runs front to back instead of left to right as shown on the plan.

*With regards to the drag truss at the front of the 2-Car Garage .....*

Please use the attached detail.

If there are any questions or further clarification needed on these matters please feel free to contact me at (916) 564-6028.

Sincerely,



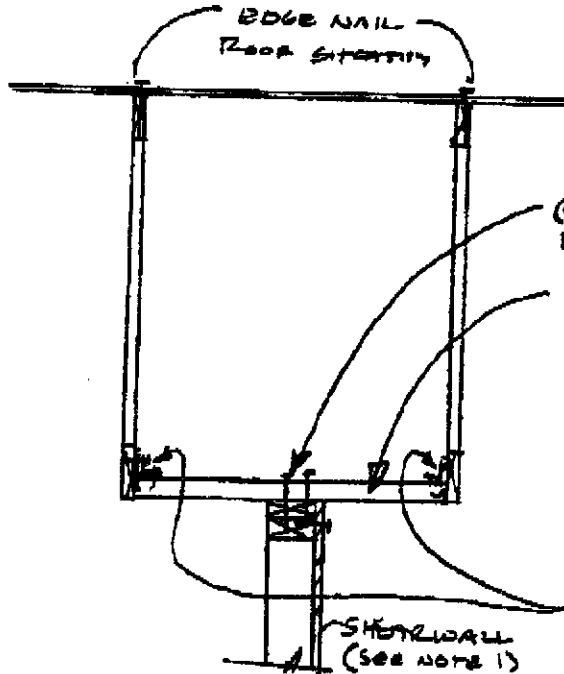
Jeffrey E. Hofmann, P.E.

cc: Daryle Hassler, Tony Foletta

JEH 4/9/01

01-494

STAEDTLER No. 937 811E Engineer's Computation Pad



(4) 2x6 SINKERS EACH BLOCK TO TOP PLATE

2x6 BLOCK (FLAT)

- PLACE MIN OF 1 FOR EACH 12" OF SHEAR WALL IN WALL LINE ROUND UP IF LENGTH MORE THAN 4" OVER EVEN 12" LENGTH -

(12 5'-2" REGD SHEAR PANEL 5 BLOCKS MIN)

(5' 5" REGD SHEAR PANEL 3 BLOCKS MIN)

35 @ EA. END OF BLOCK W/ 8d x 1 1/2" NAILS IN ALL HOLES

ALTERNATE SHEAR TRANSFER - DRAG TROSS TO SHEARWALL  
N.T.S

JMC HOMES

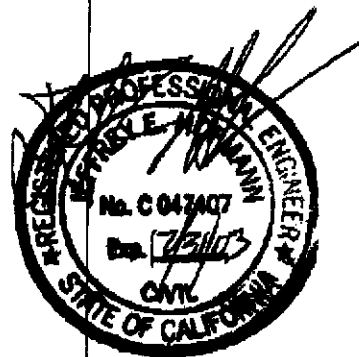
PLAN: ALL FIVE WHICH I HAVE PROVIDED STRUCT DESIGN.

JEH

DATE: 4/9/01

NOTE:

- 1) THIS DETAIL APPLICABLE FOR USE @ SHEAR WALLS WHERE THE REGD EDGE NAILING W/ 8d IS 6" OR 4" C.C.



PACIFIC CONSULTING ENGINEERS  
2150 BELL AVE., SUITE 145  
SACRAMENTO, CA 95836

# DAILY FIELD REPORT

Project #	281-100-00	Date	4/11/00	Day	Wed	Weather	Clear 71/1
Project Name		Project Location		Permit #		Client	John Moorier
General Contractor		Subcontractor		Other Person Contacted		General Contractor	
Type of Work	PULL TEST	Instrumentation		Instrument used		Instrument used	2.0
Type of Work	PULL TEST	Instrumentation		Instrument used		Instrument used	
Plans/Specifications:							
TEST PULLED 2 ALL THREAD RODS 7/8" DIA FOR SEISMIC STRAPS							
#1 @ 2030 NORTH BEND @ BED ROOM #4							
#2 @ 2124 BLACKHOLE @ FRONT OF HOUSE TO LEFT OF PICTURE WINDOWS							
TESTED TO A LOAD OF 2500 P.S.I. AS PER NOTIFICATION FROM CHRIS WHO RECEIVED THAT INFORMATION FROM ENGINEER JEFF HOFFMAN OF PACIFIC ENG. @ 13000 P.S.I. CHECKED 10 TON CHART FOR LOAD OF 2500 P.S.I.							
ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER:							
Copy received by/given to	Arrived:	Departed:	Report by:				
<i>[Signature]</i>	10:00	11:30	A.J. MAGAREWICZ				
	9:30	12:00					