

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0401527
Insp Area: 2
Thos Bros: 337-C4

Site Address: 7875 CALDONIA WY SAC
Parcel No: MEADOWVIEW ESTATES LOT 54A

Sub-Type: N1/2PLEX
Housing (Y/N): N

CONTRACTOR
JTS COMMUNITIES
401 WATT AV.
SACRAMENTO CA. 95864

OWNER

ARCHITECT

Nature of Work: MP 1035 1 STORY 5 ROOM 1/2 PLEX

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 767107 Date 2/02/04 Contractor Signature Rona J Caldwell

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 _____

PAID
CITY OF SACRAMENTO
FEB 02 2004
NORTH PERMIT

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 2/02/04 Applicant/Agent Signature Rona J Caldwell

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 ZURICH INSURANCE CO Policy Number WC367556101 Exp Date 03/01/2004

(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 2/02/04 Applicant Signature Rona J Caldwell

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 Compliance
School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address JTS COMMUNITIES, INC., 401 WATT AVE., SAC, CA 95864
Project Address 7875 CALDONIA WY.
Parcel Number 052-0010-033 (MOTHER APN) Lot No. 54A
Subdivision Name MEADOWVIEW ESTATES UNIT #1 No. of Units 1
Applicant's Signature [Signature] Title Permit Manager
Phone No. (916) 487-3434 EXT. 348 Date 1/26/04

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II - To be completed by the BUILDING DEPARTMENT

Plan Identification Number 155 UNIT # 2
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 1,035
Signature/Title [Signature] Date 1-26-04

Part III - To be completed by the SCHOOL DISTRICT

School District SCUSD Certificate No. 807A
 Exempt Comments UID #12
Residential/Apartment/etc. 1,035 Square ft. x \$ 2.14 = \$ 22
Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
Total fees collected..... = \$ 22

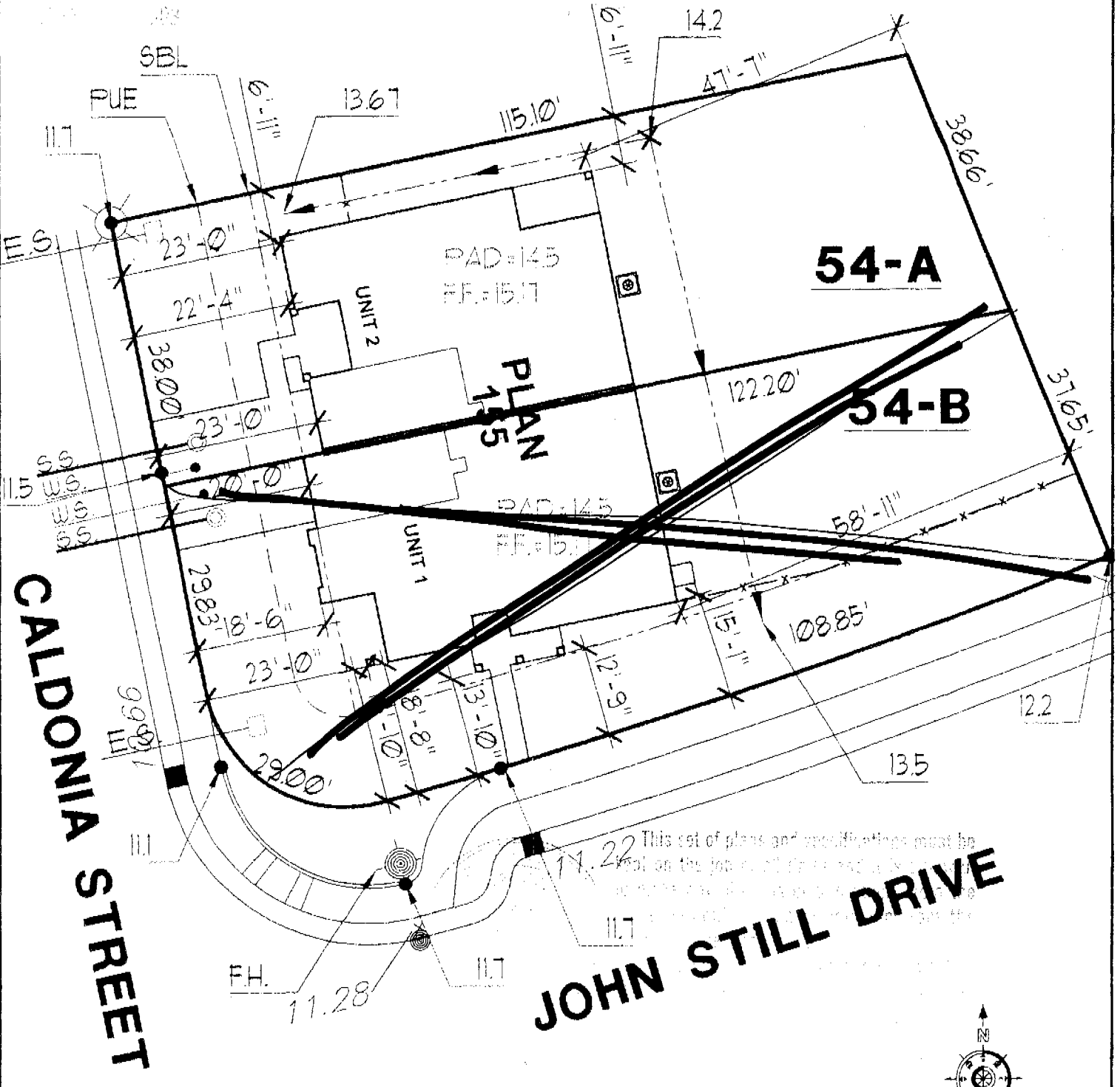
This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 1/26/04

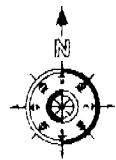
MP 1035

ORIGINAL



CALDONIA STREET

JOHN STILL DRIVE



DIMENSIONS SHOWN ARE APPROXIMATE AND ARE FOR THE SOLE PURPOSE OF COUNTY/CITY APPROVAL. ADDITIONAL INFORMATION REFLECTED ON THIS DOCUMENT SUCH AS FENCE, WALL, UTILITY, AND MAILBOX LOCATIONS ARE SUBJECT TO CHANGE WITHOUT NOTIFICATION TO BUYER. THIS PLOT PLAN MAY NOT REFLECT ALL "AS BUILT" CONDITIONS WHICH MIGHT VARY FROM THIS PROPOSED PLOT PLAN.

<ul style="list-style-type: none"> 1 STORY HOUSE 2 CAR GARAGE 	<p>PROPOSED SITE PLAN</p>	<p>JTS Working Together to Achieve Excellence COMMUNITIES INC.</p>	<p>MEADOWVIEW ESTATES</p>	
APN #	401 Watt Avenue	Sacramento, CA 95821 (916) 487-3434	SCALE = 1" = 20'	DATE: JAN. 20, 2004
APPROVED FOR RELEASE	DATE	APPROVED FOR RELEASE	DATE	

INSTALLATION CARD
Diamond Wall One Coat System
Omega Products International, Inc.

Project Address

7875 Esdonia Wy

ICBO Evaluation Service, Inc.
Report ER-4004

Date Completed 7-23-04

Plastering Contractor

Name: J. T. S. Stucco Div.
Address: 11285 White Rock Road
Telephone No. (916) 635-2800

Approved contractor number as issued by Omega Products Int'l, Inc. P.N. # 2227

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 and the manufacturer's instructions.

Don Richth
Signature of authorized representative of
plastering contractor

7-23-04
Date

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

CERTIFICATION OF INSULATION

PART I GENERAL

ADDRESS OR TRACT <div style="font-size: 2em; font-family: cursive;">JTS</div> <div style="font-size: 2em; font-family: cursive;">Premier</div> <div style="margin-left: 200px; font-size: 1.5em; font-family: cursive;">LOT # 54</div> <div style="margin-left: 200px; font-size: 1.5em; font-family: cursive;">A+13</div>	SACRAMENTO BUILDING PRODUCTS <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 <div style="text-align: center; font-size: 1.5em; font-family: cursive;">6-18-04</div> 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 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			
CT	OC	JM	CT	OC	JM	CT	OC	JM	
BAGS									
R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS			
13/19	3 1/4 / 5 1/2	30	9 12						
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE									
MATERIAL FIBERGLASS		FORM BATTS		R VALUE			MANUFACTURER		
							CT	OC	JM
AIR INFILTRATION SEALANT									
MATERIAL <i>Loqu</i>					MANUFACTURER				
					HILTI		HANDY FOAM		

PART III CERTIFICATION

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

SIGNATURE — INSULATION CONTRACTOR <div style="font-size: 1.5em; font-family: cursive;">JC</div>	TITLE MANAGER	DATE <div style="font-size: 1.5em; font-family: cursive;">6-18-04</div>
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

March 23, 2004

JTS Communities, Inc
410 Watt Avenue
Sacramento, CA 95821

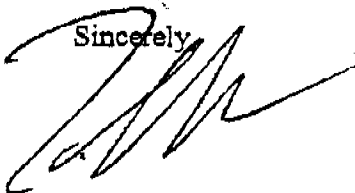
Re: The Meadows, Plan 155 – Truss Bearing at Left Entry (Job # HS3067)

To Whom It May Concern:

This letter is in response to a request to modify the entry at the left unit. A request was made to increase the length of the wall forward of the kitchen wall to 1'-6" (see attached partial floor plan). Since the two beam #2s no longer line up with the exterior wall, an alternate method of supporting the trusses is required. For Elevations A, C, F and H a girder truss will be installed to carry the trusses. A 3 1/2 x 9 1/2 Gang-Lam (2650 F_b) beam will be used to carry the trusses for Elevations B and G. Both the girder and beam will also be used to transfer drag loads across the break in top plates by installing a Simpson MSTC28 strap on each end as shown on the attached partial roof plans. When the girder/beam is offset from the top plates, a Simpson DSC4-SDS3 connector will be used to transfer the drag on each end. Typical corner stud framing and a continuous footing is adequate to support the point load from the beam/girder.

Please call if you have any questions.

Sincerely,



Tim Sloan, P.E.

TS:pjc

Enclosures: Beam #4 calculation
Partial floor plans
Partial roof plans
Additional details

Cc: Ted Jones, General Truss



Harris & Sloan Consulting Group
 213 E Street, Suite B
 Davis, CA 95616
 (530) 753-5300 phone
 (530) 753-5380 fax

Title : Premier Series
 Dsgnr: EA
 Description : JTS Communities Inc.

Job # HS3067

Date: 11:45AM, 23 MAR 04

Scope :

2 of 9

Rev: 560100
 User: KW-0604839, Ver 5.6.1, 25-Oct-2002
 (c)1993-2002 ENERCALC Engineering Software

Timber Beam & Joist

g:\jobfiles\2002\hs3067\enercalc\hs3067.dwg

Description Plan 155 Beams

Timber Member Information Calculations are designed to 1997 NDS and 1997 UBC Requirements

	BM #1	BM #2	BM #3	Beam #4	4' HEADER	6' HEADER
Timber Section	4x12	4x12	4x8	3.5x9.5	4x6	4x10
Beam Width	3.500	3.500	3.500	3.500	3.500	3.500
Beam Depth	11.250	11.250	7.250	9.500	5.500	9.250
La: Unbraced Length	0.00	0.00	0.00	0.00	0.00	0.00
Timber Grade	Douglas Fir - Larch	Douglas Fir - Larch	Douglas Fir - Larch	L.P. GangLam 1.2g	Douglas Fir - Larch	Douglas Fir - Larch
Fb - Basic Allow	875.0	875.0	875.0	2,650.0	875.0	875.0
Fv - Basic Allow	95.0	85.0	85.0	285.0	95.0	95.0
Elastic Modulus	1,600.0	1,300.0	1,800.0	1,900.0	1,600.0	1,600.0
Load Duration Factor	1.000	1.000	1.000	1.000	1.150	1.000
Member Type	Sawn	Sawn	Sawn	Manuff/Pine	Sawn	Sawn
Repetitive Status	No	No	No	No	No	No

Center Span Data

	Span	8.00	11.00	6.00	10.00	4.00	6.00
Dead Load	#/ft	252.00	116.00	116.00	105.00	504.00	504.00
Live Load	#/ft	192.00	88.00	88.00	80.00	384.00	384.00

Results Ratio =

	Ratio =	0.5998	0.5211	0.3158	0.1969	0.9830	0.9666
Mmax @ Center @ X =	in-k ft	42.62 4.00	37.03 5.50	11.02 3.00	27.75 5.00	21.31 2.00	47.85 3.00
Fb : Actual	psi	577.3	501.5	359.3	527.1	1,207.8	960.7
Fb : Allowable	psi	962.5	982.5	1,137.5	2,650.0	1,308.1	1,050.0
		Bending OK	Bending OK	Bending OK	Bending OK	Bending OK	Bending OK
Fv : Actual	psi	52.0	35.8	28.9	35.4	107.4	91.8
Fv : Allowable	psi	95.0	85.0	95.0	285.0	109.3	95.0
		Shear OK	Shear OK	Shear OK	Shear OK	Shear OK	Shear OK

Reactions

	DL	LL	Max. DL+LL	DL	LL	Max. DL+LL	DL	LL	Max. DL+LL											
@ Left End	lbs	1,008.00	768.00	1,776.00	lbs	638.00	484.00	1,122.00	lbs	348.00	284.00	612.00	lbs	525.00	400.00	925.00	lbs	1,008.00	768.00	1,776.00
@ Right End	lbs	1,008.00	768.00	1,776.00	lbs	638.00	484.00	1,122.00	lbs	348.00	284.00	612.00	lbs	525.00	400.00	925.00	lbs	1,008.00	768.00	1,776.00

Deflections Ratio OK Deflection OK Deflection OK Deflection OK Deflection OK Deflection OK

	Ratio OK	Deflection OK	Deflection OK	Deflection OK	Deflection OK	Deflection OK
Center DL Defl	in	-0.035	-0.071	-0.019	-0.050	-0.037
L/Defl Ratio		2,748.7	1,864.9	3,785.5	2,413.4	1,283.8
Center LL Defl	in	-0.027	-0.054	-0.014	-0.038	-0.028
L/Defl Ratio		3,805.0	2,458.3	4,989.9	3,187.6	1,685.0
Center Total Defl	in	-0.082	-0.124	-0.033	-0.088	-0.066
Location	ft	4.000	5.500	3.000	6.000	2.000
L/Defl Ratio		1,588.9	1,080.4	2,152.5	1,369.8	728.8

Check OK
 1/25/04
 JTS

A1.2

UNIT 2

GARAGE
8'-0" CIG
CONCRETE

KITCHEN
3'-0" CIG
VINYL

4
DT-14-2004

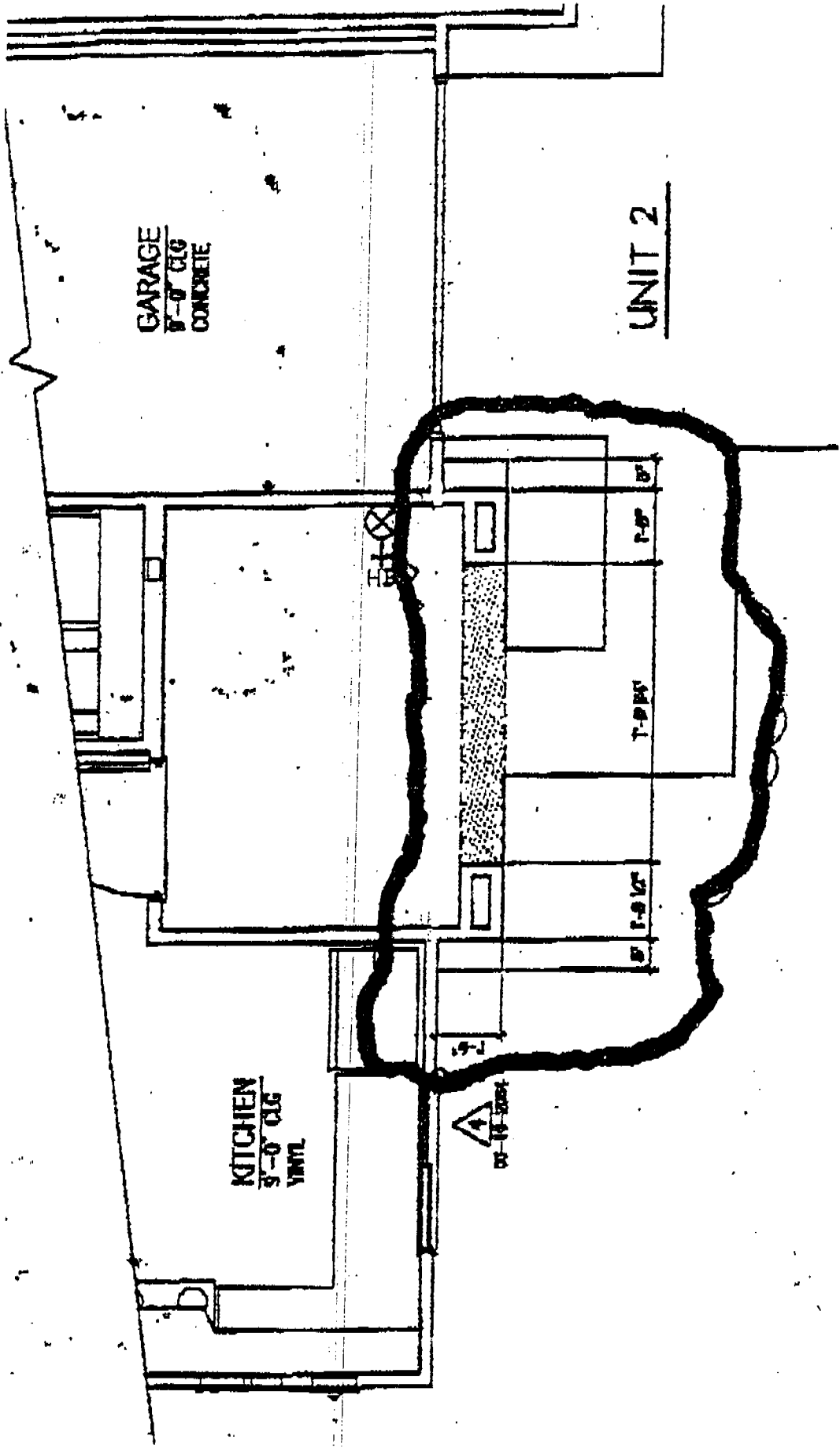
1'-0" W

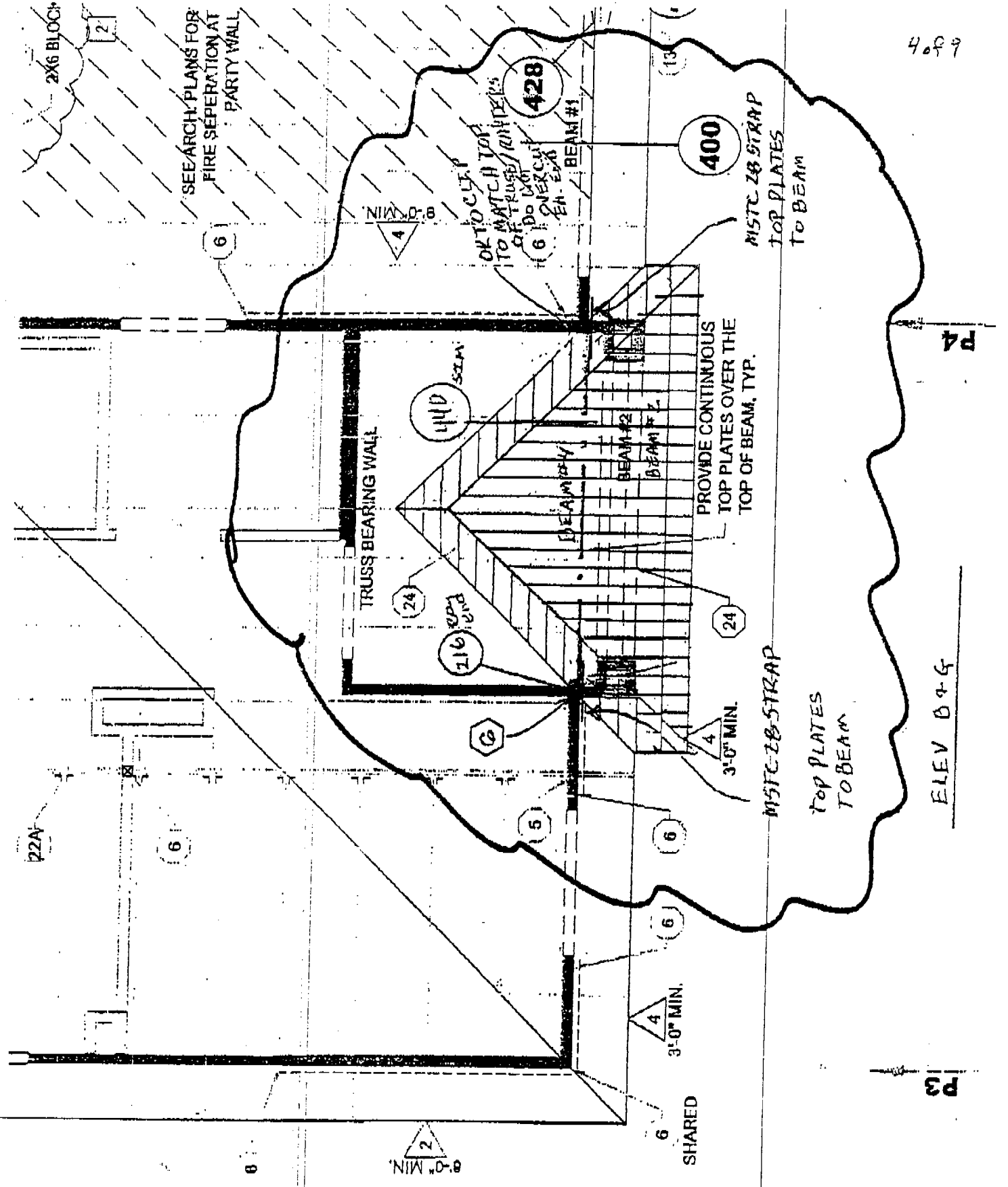
8' 1'-0" W

1'-0" W

1'-0" W

PARTIAL FLOOR PLAN

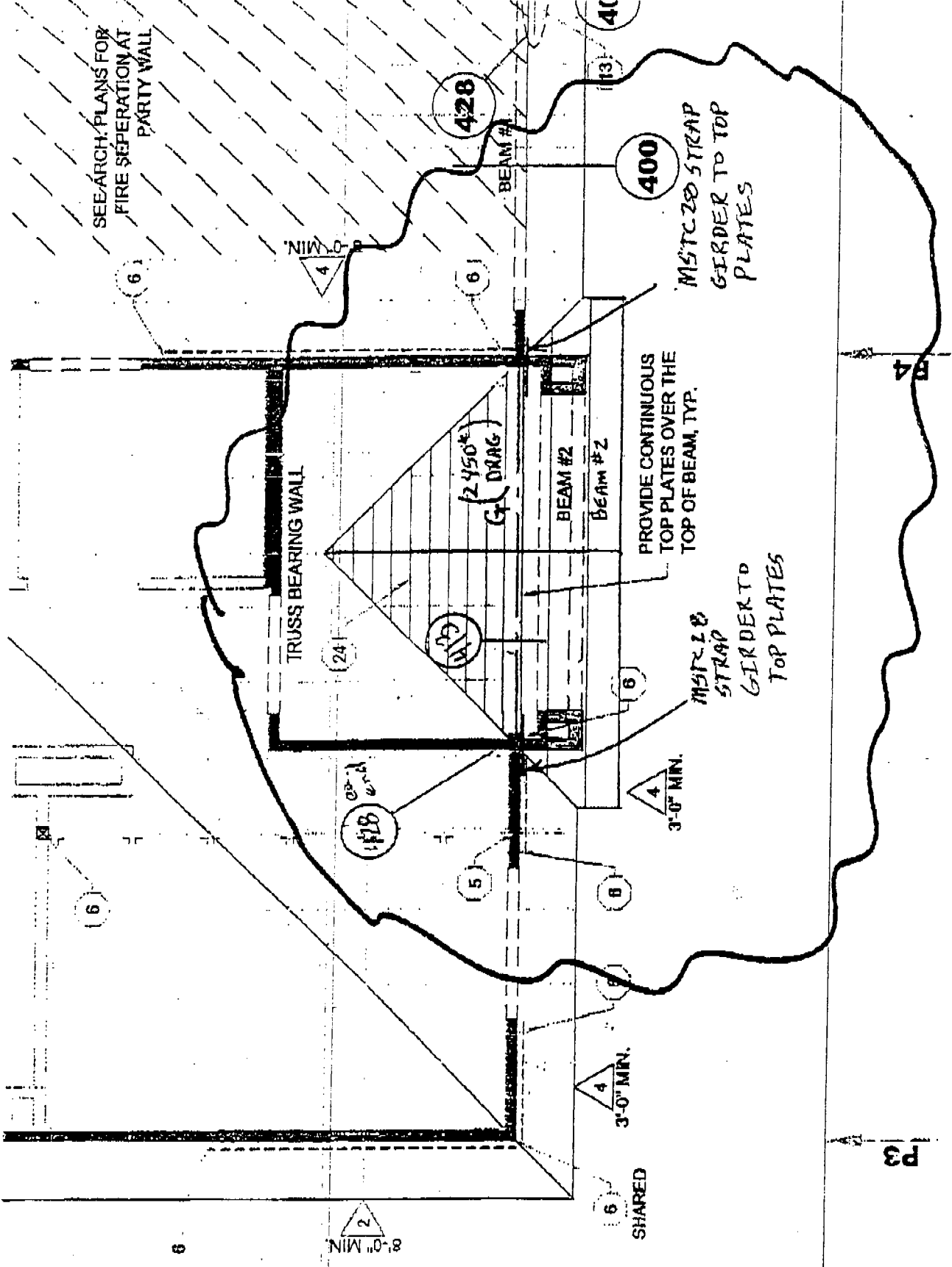




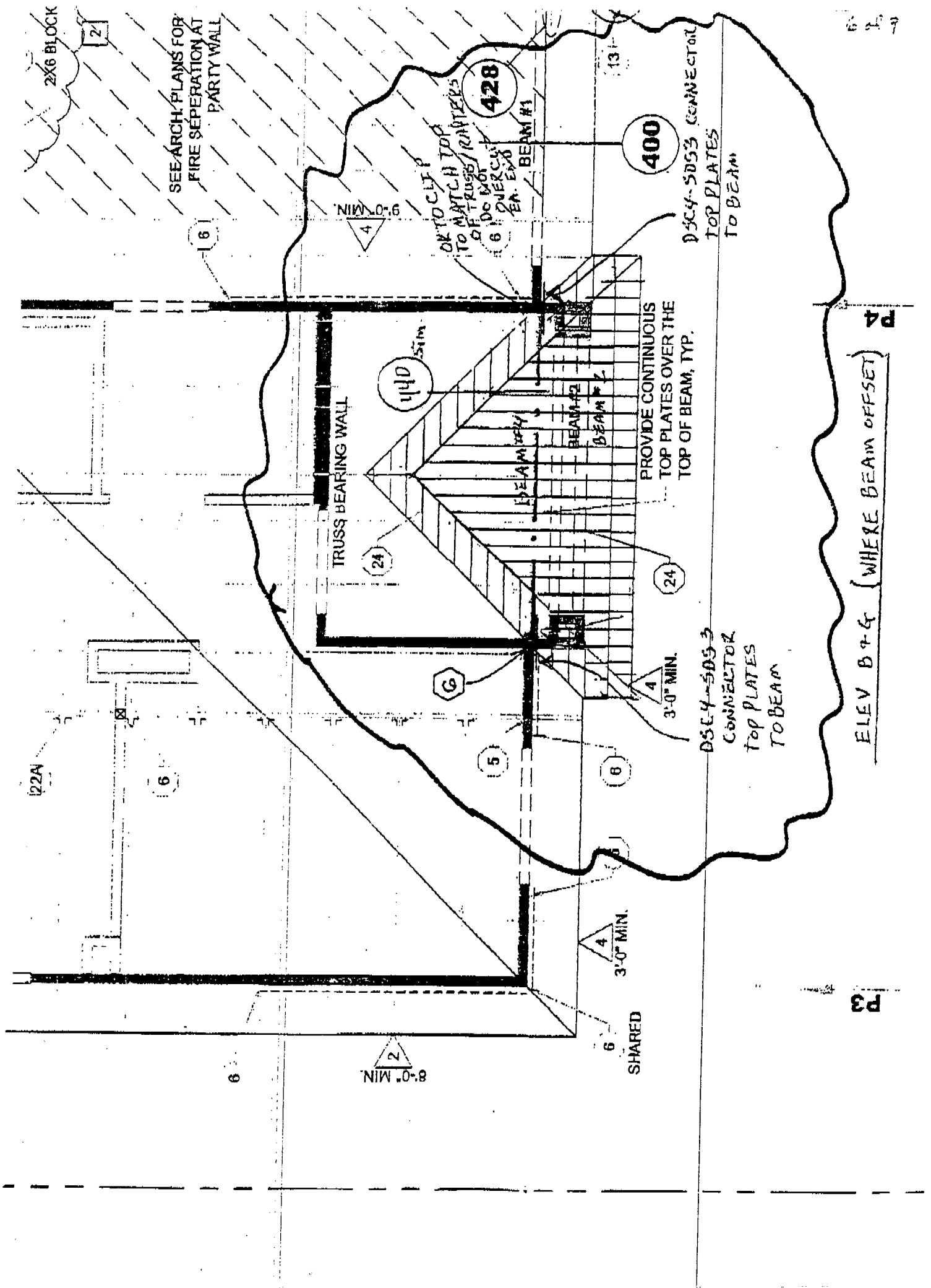
P4

ELEV 0+6

P3



ELEV A,C,F,G,H



2X6 BLOCK

SEE ARCH PLANS FOR
FIRE SEPERATION AT
PARTY WALL

NIM 0:6
4

OR TO CLIP
TO MATCH TOP
OF TRUSS/RAINERS
OR TO NOT
OVERCUT
EA. END

400

D5C4-SDS3 CONNECTOR
TOP PLATES
TO BEAM

TRUSS BEARING WALL

PROVIDE CONTINUOUS
TOP PLATES OVER THE
TOP OF BEAM, TYP.

D5C4-SDS3
CONNECTOR
TOP PLATES
TO BEAM

ELEV B+C (WHERE BEAM OFFSET)

73

74

8'-0" MIN.
2

SHARED
6

3'-0" MIN.
4

3'-0" MIN.
4

140
SIM

BEAM #1

BEAM #2

BEAM #2

22A

6

6

24

6

5

6

24

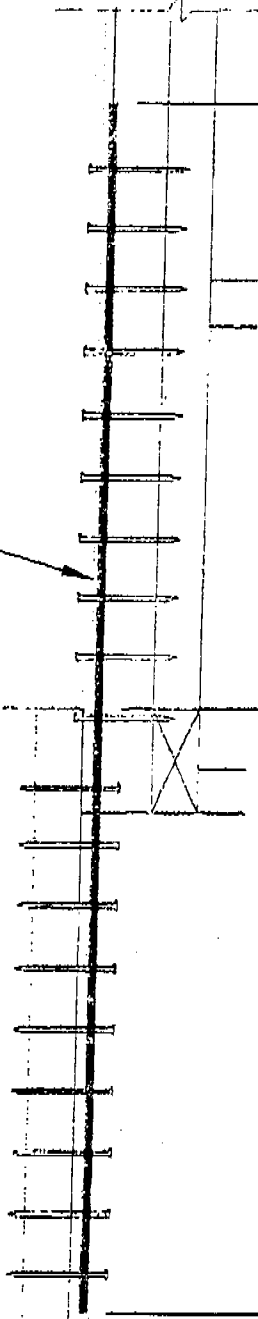
13

428

79

FLUSH BEAM/JOIST PER PLAN

STRAP PER PLAN

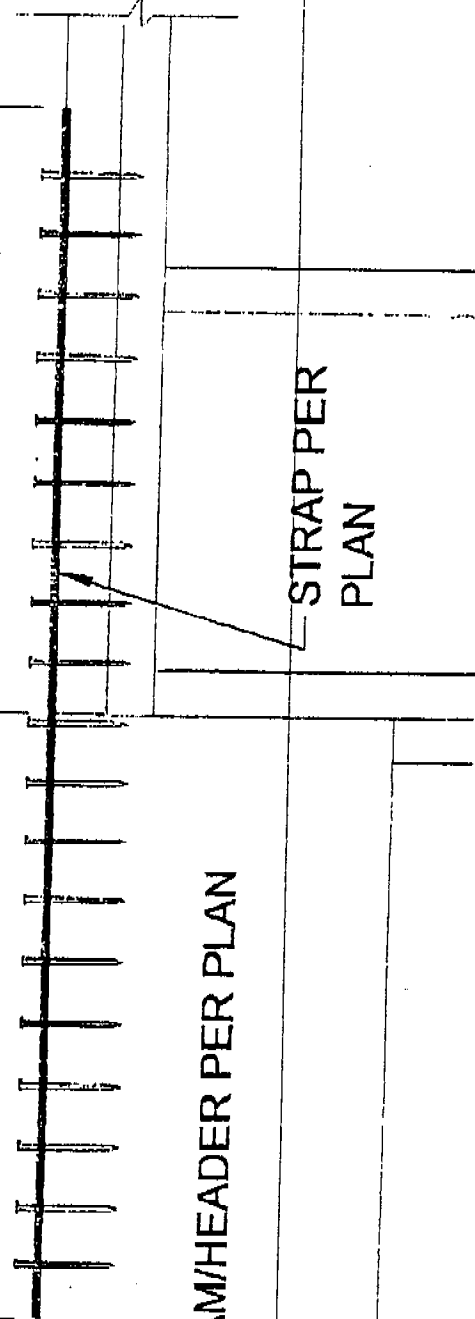


EQ. LENGTH

EQ. LENGTH

NOTE:
INSTALL STRAPS
PER MANUF.
SPECIFICATIONS

DROP BEAM/HEADER PER PLAN



STRAP PER PLAN

216 STRAP BEAM/JOIST TO TOP PLATE

ROOF SHEATHING
TRUSSES/OVERFRAMING
WHERE OCCURS

BEAM PER PLAN

E.N. ROOF
SHEATHING
INTC 2X
BLOCKING

ROOF SHEATHING
PER PLAN

TRUSSES PER PLAN

HANGER
PER PLAN

440 FLUSH BEAM

