

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0100259
Insp Area: 2

Site Address: 8478 TAMBOR WY SAC
Parcel No: 117-1370-039 JACINTO N 3 LOT 89

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

CONTRACTOR
BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1441 7 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 724191 Date 2/20/01 Contractor Signature Sheuyf Van Maeren

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 2/20/01 Applicant-Agent Signature Sheuyf Van Maeren

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 LIBERTY MUTUAL INS CO Policy Number WA2-651-004147-080 Exp Date 04/01/2001

____ (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 comply with those provisions.

Date 2/20/01 Applicant Signature Sheuyf Van Maeren

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.

RIVER VIEW 4A/4B

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 10771 ~~3411~~ ^{8A78} ~~3411~~ ~~10771~~ Assessor Parcel # 117 1370 039

OWNER INFORMATION:

Legal Property Owner: Beazer Homes Holdings Corp. Phone # 916-773-3888
Owner Address: 3009 Douglas Blvd. 150 City Roseville State CA Zip 95661

CONTRACTOR INFORMATION:

Contractor: Beazer Homes Lic. # B724191 Phone # 916-773-3888 Fax# 916-773-0425

PROJECT INFORMATION:

Land Use Zone _____ Occupancy Group _____ Construction Type _____ Fed Code _____

No. of stories: 1 No. of rooms: _____ Street width: _____

1st Floor Area 1441 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1441</u>
Garage/Storage	_____	<u>439</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: Single Family Dwelling

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) _____

ACTIVITY/PERMIT #

CERTIFICATION OF INSULATION

PART I GENERAL
PART II AREAS INSULATED

ADDRESS OR TRACT READER ... SELLE ...	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 ID		MANUFACTURER'S PRODUCT ID			MANUFACTURER'S PRODUCT ID	
MANUFACTURER		MANUFACTURER			MANUFACTURER	
OCF		OCF			OCF	
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
13	2 1/2	13	2 1/2			

KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE

MATERIAL	FORM	R-VALUE	MANUFACTURER
FIBERGLASS	BATTS		OCF

AIR INFILTRATION SEALANT

MATERIAL	MANUFACTURER
FOAM	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	TITLE	DATE
<i>Bill</i>	MANAGER	3-25-1
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

KwikKote

No. 200-000301

Stucco System Installation Card

Job Name: BELLEFLEUR II
Address: 8478 TAMBOR WY
Santa, CA
Lot #: 0000089

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

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

Home Builder: BEAZER HOMES
Address: 3009 DOUGLAS BLVD STE #150
ROSEVILLE, 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: 06/07/2001

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.



Stucco Contractor

6-7-01
Date

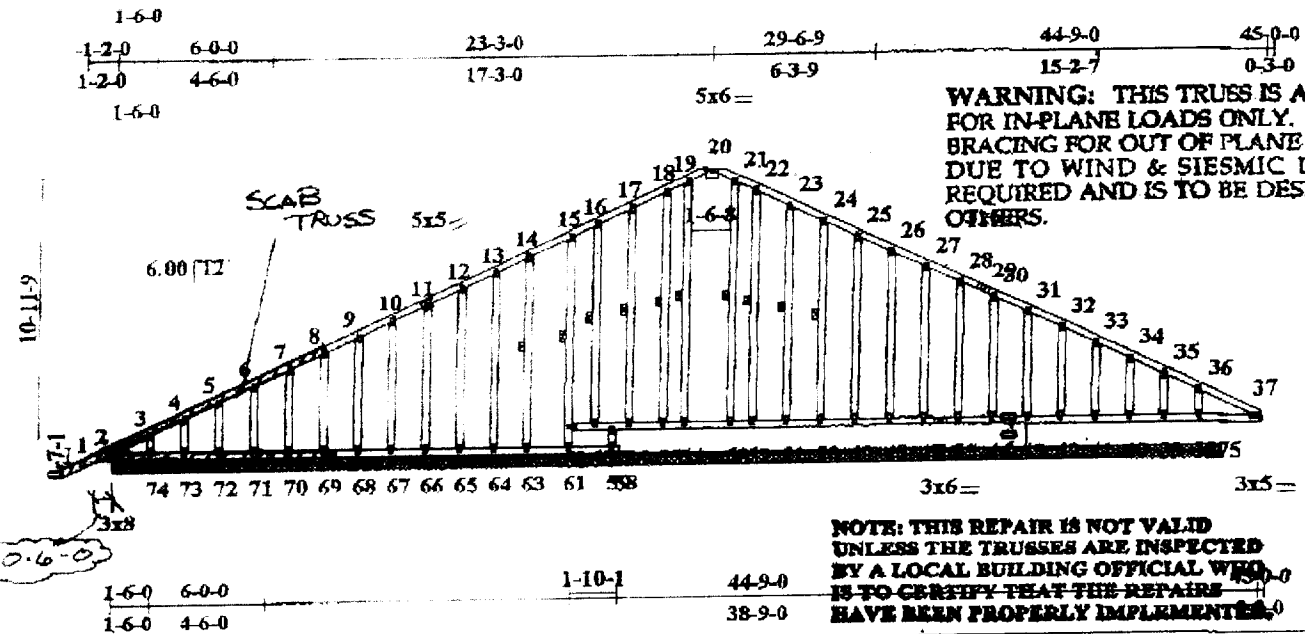


Plate Offsets (XCY): [2:0-5-6,0-0-6], [2:0-1-14,edge], [11:0-2-8,0-3-0]

LOADING (psf)	SPACING	2-0-0	CSI	DEFL	(in)	(loc)	l/defl	PLATES	GRIP
TCLL 18.0	Plates Increase	1.25	TC 0.11	Vert(LL)	n/a	-	n/a	M20	189/148
TCDL 18.0	Lumber Increase	1.25	BC 0.08	Vert(TL)	0.01	1-2	>999		
BCLL 0.0	Rep Stress Inar	YES	WB 0.11	Horz(TL)	0.00		n/a		
BCDL 8.0	Code	UBC/CBO	(Matrix)	1st LC LL Min l/defl	= 360			Weight:	387 lb

LUMBER	BRACING	
TOP CHORD 2 X 4 DF No.1&Btr-G	TOP CHORD	Sheathed or 10-0-0 on center purlin spacing.
BOT CHORD 2 X 4 DF No.1&Btr-G	BOT CHORD	Right ceiling directly applied or 6-0-0 on center bracing.
WEBS 2 X 4 DF Stud-G		Except:
OTHERS 2 X 4 DF Stud-G	WEBS	1 Row at midpt 15-81
WEDGE Left: 2 X 4 DF No.1&Btr		1 Row at midpt 18-54, 21-53, 24-50, 23-51, 22-52, 14-63, 16-60, 17-58, 18-55

REACTIONS (lb/size) 46 = 5/43-3-0, 2 = 132/43-3-0, 58 = 8/43-3-0, 84 = 161/43-3-0, 53 = 162/43-3-0, 74 = 78/43-3-0, 38 = 299/43-3-0, 38 = 0/43-3-0, 40 = 138/43-3-0, 41 = 107/43-3-0, 42 = 113/43-3-0, 43 = 112/43-3-0, 44 = 113/43-3-0, 48 = 109/43-3-0, 47 = 109/43-3-0, 48 = 113/43-3-0, 49 = 112/43-3-0, 50 = 113/43-3-0
 Max Horz 2 = -78(load case 4), 38 = 78(load case 4)
 Max Up/Eft 58 = -22(load case 2), 38 = -2(load case 3)
 Max Grav 46 = 11(load case 2), 2 = 155(load case 3), 54 = 161(load case 1), 53 = 162(load case 1), 74 = 85(load case 2), 38 = 298(load case 1), 39 = 24(load case 2), 40 = 138(load case 1), 41 = 107(load case 4), 42 = 113(load case 1), 43 = 112(load case 4), 44 = 113(load case 1), 45 = 109(load case 4), 47 = 109(load case 4), 48 = 113(load case 4), 49 = 112(load case 1), 50 = 113(load case 1)

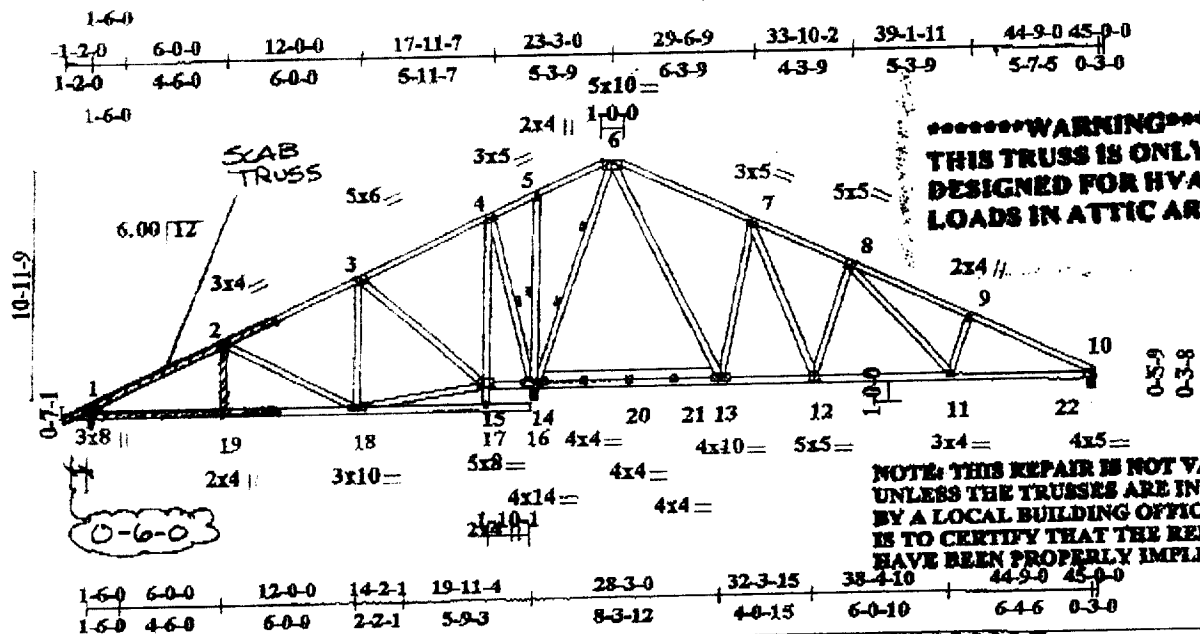
FORCES (lb) - First Load Case Only
 TOP CHORD 1-2=20, 2-3=111, 3-4=108, 4-5=105, 5-6=105, 6-7=105, 7-8=105, 8-9=105, 9-10=105, 10-11=105, 11-12=108, 12-13=107, 13-14=107, 14-15=113, 15-16=98, 16-17=109, 17-18=109, 18-19=103, 19-20=69, 20-21=69, 21-22=103, 22-23=109, 23-24=107, 24-25=107, 25-26=107, 26-27=107, 27-28=107, 28-29=107, 29-30=71, 30-31=107, 31-32=107, 32-33=107, 33-34=107, 34-35=111, 35-36=83, 36-37=140
 BOT CHORD 60-62=-11, 67-60=-11, 56-57=-11, 55-56=0, 54-55=0, 53-54=0, 52-53=0, 51-52=0, 50-51=0, 49-50=0, 48-49=0, 47-48=0, 46-47=0, 45-46=0, 44-45=0, 43-44=0, 42-43=0, 41-42=0, 40-41=0, 39-40=0, 38-39=0, 38-75=-78, 37-75=-78, 2-74=0, 73-74=0, 72-73=0, 71-72=0, 70-71=0, 69-70=0, 68-69=0, 67-68=0, 66-67=0, 65-66=0, 64-65=0, 63-64=0, 61-63=0, 59-61=0, 58-59=0, 57-58=-128, 15-82=-104
 WEBS 18-54=-137, 21-53=-137, 3-74=-66, 38-38=-183, 38-38=-38, 34-40=-100, 39-41=-89, 32-42=-91, 31-43=-91, 30-44=-91, 28-45=-91, 27-47=-91, 26-48=-91, 25-49=-91, 24-50=-92, 23-51=-84, 22-52=-71, 4-73=-97, 8-72=-89, 6-71=-91, 7-70=-91, 8-69=-91, 9-88=-91, 10-87=-88, 11-86=-91, 12-85=-94, 13-84=-90, 14-83=-88, 16-80=-85, 17-56=-81, 18-55=-70, 57-59=-62

EXTEND TRUSS SPAN 0-6-0 INCHES AT TRUSS BG.

- CUT TAIL OFF TRUSS AT JOINT 2, PLACE PREFABRICATED SCAB TRUSS 0-6-0 INCHES PAST END OF TRUSS BG.

ATTACH SCAB USING 16D NAILS 2 INCHES O.C. ALL MEMBERS.





*******WARNING*******
THIS TRUSS IS ONLY DESIGNED FOR HVAC LOADS IN ATTIC AREA!

NOTE: THIS REPAIR IS NOT VALID UNLESS THE TRUSSES ARE INSPECTED BY A LOCAL BUILDING OFFICIAL WHO IS TO CERTIFY THAT THE REPAIRS HAVE BEEN PROPERLY IMPLEMENTED.

Plate Offsets (X,Y): [1:0-1-14,edge], [1:0-5-5,0-0-8], [3:0-2-12,0-3-4], [8:0-2-8,0-3-0], [12:0-2-5,0-3-0], [15:0-5-6,0-2-8]

LOADING (psf) TCLL 18.0 TCDL 18.0 BCLL 0.0 BCDL 8.0	SPACING 2-0-0 Plates Increase 1.25 Lumber Increase 1.25 Rep Stress Inor YES Code UBC/CBO	CSI TC 0.38 BC 0.34 WB 0.84 (Matrix)	DEFL (in) (loc) l/defl Vert(LL) -0.04 11-12 >999 Vert(TL) -0.10 11-12 >999 Horz(TL) 0.02 10 n/a 1st LG LL Min l/defl = 360	PLATES GRIP M20 186/148 Weight: 295 lb
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LUMBER
 TOP CHORD 2 X 4 DF No. 1&Btr-G
 BOT CHORD 2 X 4 DF No. 1&Btr-G *Except*
 WEBS 2 X 4 DF Stud-G *Except*
 WEDGE Left: 2 X 4 DF No. 1&Btr

BRACING
 TOP CHORD Sheathed or 5-1-3 on center purlin spacing.
 BOT CHORD Rigid ceiling directly applied or 5-0-0 on center bracing.
 WEBS 1 Row at midpt 4-14, 5-14
 2 Rows at 1/3 pts 6-14

REACTIONS (lb/size) 10 = 800/0-3-8, 1 = 520/0-3-8, 14 = 2547/0-3-8
 Max Grav 10 = 842(load case 4), 1 = 575(load case 3), 14 = 2547(load case 1)

FORCES (lb) - First Load Case Only
 TOP CHORD 1-2 = -748, 2-3 = -181, 3-4 = 596, 4-5 = 763, 5-6 = 823, 6-7 = -338, 7-8 = -571, 8-9 = -1250, 9-10 = -1356
 BOT CHORD 14-15 = -457, 14-20 = -208, 20-21 = -208, 13-21 = -209, 12-13 = 380, 11-12 = 687, 11-22 = 1125, 10-22 = 1125, 1-19 = 578,
 19-18 = 578, 17-18 = -3, 16-17 = 0
 WEBS 2-18 = 125, 3-18 = 351, 3-15 = -727, 15-18 = 78, 4-14 = -792, 6-13 = 1023, 7-13 = -761, 7-12 = 565, 8-12 = -507, 8-11 = 564,
 9-11 = -325, 15-17 = 76, 4-15 = 588, 2-18 = 588, 5-14 = -94, 5-14 = -1598

NOTES
 1) This truss has been checked for unbalanced loading conditions.
 2) 100lb AC unit load placed on the bottom chord, 24-0-0 from left end, supported at two points, 2-8-0 apart.
 3) Except as shown below, special connection(s) required to support concentrated load(s). Design of connection(s) is delegated to the building designer.
 4) All plates are M20 plates unless otherwise indicated.
 5) This truss has been designed for a 10.0 psf bottom chord live load nonconcurrent with any other live loads per Table No. 16-B, UBC-84.
 6) A plate rating reduction of 20% has been applied for the green lumber members.
 7) This truss has been designed for both UBC-84 and ANSI/TPI 1-1995 plating criteria.

LOAD CASE(S) Standard

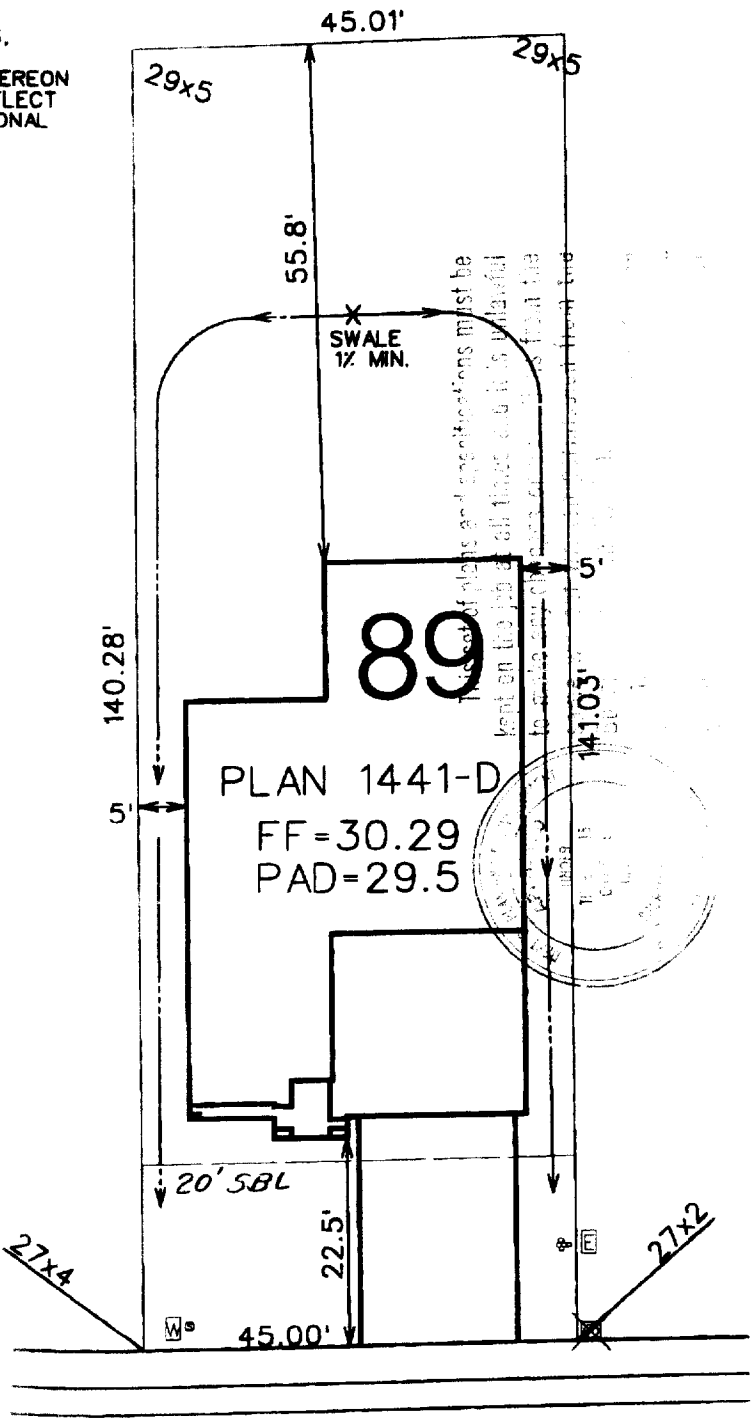
EXTEND TRUSS SPAN 0-6-0 INCHES AT TRUSS B.

- CUT TAIL OFF TRUSS AT JOINT 1, PLACE PREFABRICATED SCAB TRUSS 0-6-0 INCHES PAST END OF TRUSS B.
- ATTACH SCAB USING 16D NAILS AS FOLLOWS, 12 NAILS AT TOP AND 12 NAILS AT BOTTOM, 3 INCHES O.C. AT VERTICAL.



THIS PLOT PLAN IS NOT FOR SALES PURPOSES.
 THIS PLOT PLAN IS FOR THE PURPOSES OF
 INDICATING COMPLIANCE WITH ZONING SET BACKS,
 GENERAL DRAINAGE DIRECTION, AND APPROXIMATE
 UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON
 IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT
 AS-BUILT CONDITION. RETAINING WALLS ARE OPTIONAL
 AND MAY OR MAY NOT BE CONSTRUCTED.

- ⊞ — WATER METER BOX
- ⊞ — ELECTRICAL BOX
- ⊞ — UTILITY RISERS
- ⊞ — SEWER CLEANOUT
- ⊞ — STREET LIGHT
- ⊞ — FIRE HYDRANT
- ⊞ — TRANSFORMER
- ⊞ — ELECTRICAL VAULT
- ⊞ — TELEPHONE PED.
- — DRAIN INLET




APPROX
 INCHES



SCALE: 1"=20' 6330 SQUARE FEET

TAMBOR WAY

 <p>CIVIL - WATER RESOURCES - SURVEYING</p>	PLOT PLAN FOR LOT 89		SCALE: 1"=20'
	JACINTO VILLAGE UNIT 3		DATE: 12-29-00
	A.P.N. ADDRESS: COUNTY: SACRAMENTO		REVISED: DRAWN BY: PWG
			CHK'D. BY: LK W.O. 0435-02