

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0006489
Insp Area: 2

Site Address: 7753 LARAMORE WY SAC
Parcel No: 053-0016-007 MEADOWVIEW VIL.-7 LOT 7

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

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 FARMERS MERCHANT Lender's Address Elk Grove, CA

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 714 601 Date _____ 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 abovementioned property for inspection purposes.

Date 10/18/06 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 CITY OF SACRAMENTO Policy Number _____ Exp Date _____

_____, (This section need not be completed if the permit is \$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 laws of California, I shall forthwith comply with those provisions.

Date 10/18/06 Applicant Signature [Signature]

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.



WesPac

insulation

a MASCO Company



809 North Market Blvd., Ste. 11 • Sacramento, CA 95834

(916) 927-7149 • Fax (916) 927-4257

Lic. #487478

Installed Insulation Certificate

We certify that the building insulation listed herein is installed in conformance with current energy conservation regulations, California Administrative Code, Title 24, State of California

R FACTOR	AREA	TYPE	INCHES/BAGS (BLOWN)
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Certified by

Lerrick Stiles

Title

Secretary

Address or Lot Number

Date Installed



BASALITE[®]
PACIFIC STUCCO SYSTEMS

4290 Roseville Road
North Highlands, CA 95660-5710
(916) 486-4094
Fax (916) 486-4187

Installation Card
Fiber Reinforced Stucco

Job Name and Address: New Phase Development

ICBO# 5269

Rainbow Spring Lot - 7

Date of job completion: _____

Sacramento, CA

Plastering Contractor

Name: G. Glenn Plastering

Address: 6330 Main Ave., Suite 4, Orangevale, CA 95662

Telephone No. (916) 989-8755

Approved contractor as issued by Basalite/Pacific Stucco

This is to certify the exterior coating system at the above address, has been installed in accordance with the evaluation report specified above and the manufacturers instructions.

Delores Glenn

Signature of authorized representative of
plastering contractor

_____ Date

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

**CONSOLIDATED ENGINEERING LABORATORIES
CONCRETE, REINFORCING, POST-TENSIONING**

Project Name: Rainbow Springs
 Project Address: _____
 Type of Work: P/T

Date: 1/6/01 Project No.: 51737
 Inspector: Dan Robbins
 Sampling Inspection

Checked materials and operations at batch plant.
 Visually checked loads for proper slump.
 Obtained grab sample of cement.
 Inspected precast operations at _____

Reported to Chris at jobsite.

Inspected rebar placement for _____

Inspected placement of: a. Anchor Bolts;
 b. Holddowns; c. Tiedowns for _____

Monitored loads arriving at jobsite for correct mix and proper slump.

Inspected jobsite placing and vibrating _____ cubic yards of concrete.

Performed air entrainment test: a. tests.

Performed unit weight test: a. tests.

Performed slump test: a. tests.

Cast one set of _____ sets of cylinders;
 b. and one set of shrinkage beams; and
 c. sets of shrinkage beams
 representing Concrete Mix No. _____ placed at:

NOTE: Take specimens from any loads suspected as being out of specification due to high slump or overtime mixing, etc.

14 Returned to plant for duration of pour.

15 Checked ram and gauge calibration. (PT)

16 Inspected stressing operations/elongation for: LOTS 1 THROUGH 8

17 Elongations were within specified limits.
 a. with the following exceptions: _____

18 Job cancelled due to _____

19 Work inspected was in compliance with approved plans and specifications: a. except as noted.

20 per approved drawings no. PT-1

21 Non-Compliance Report left at jobsite. (Lab copy attached.)

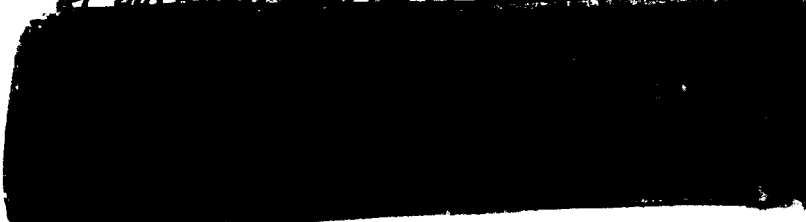
22 _____ hours spent performing reinspection.

Unusual circumstances or problems? No Yes

*Describe below. Notified Chris at jobsite and _____ at CEL

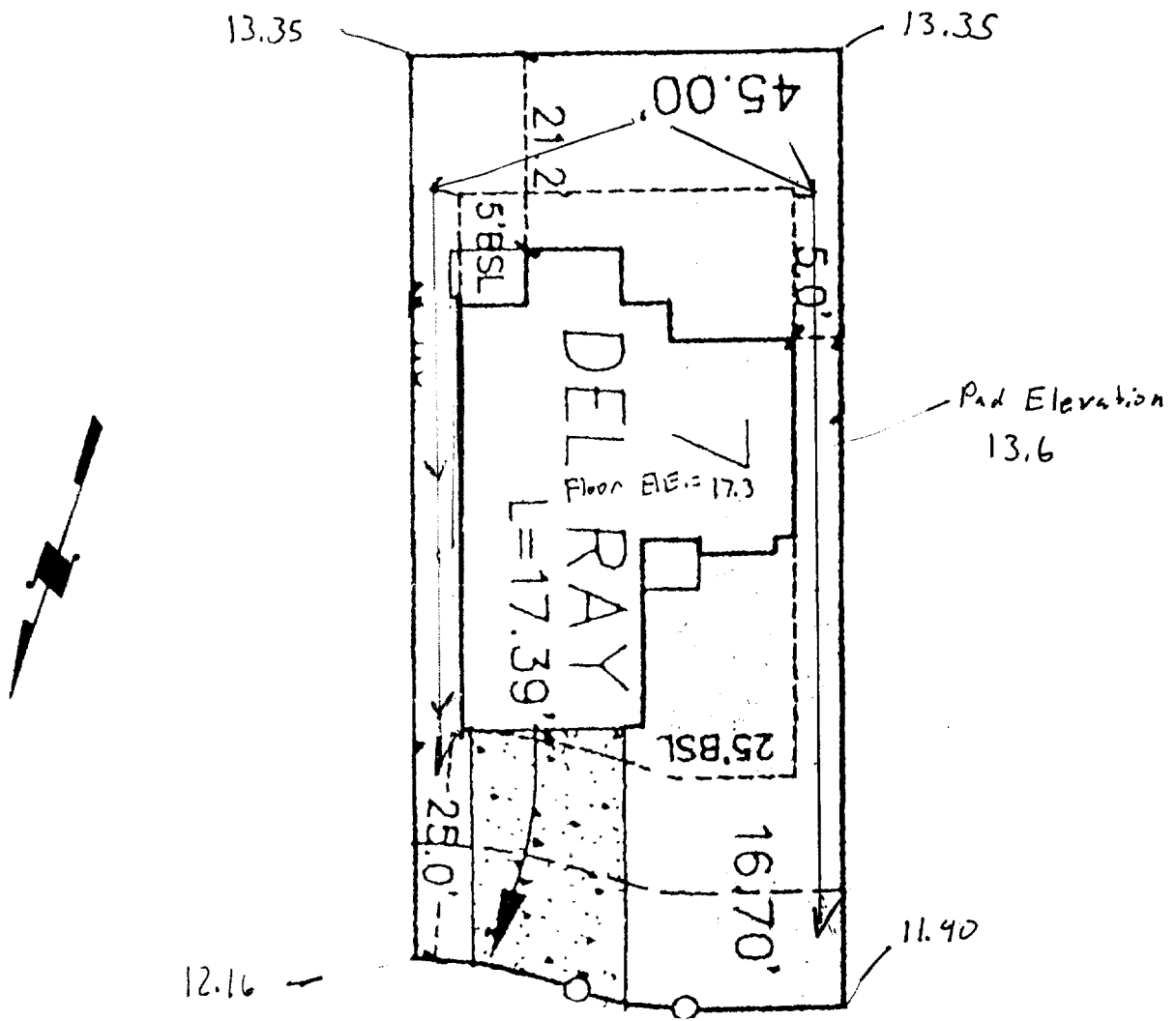
NOTES/COMMENTS: Continued on back of page
ALL LOTS NAMP #1 HAIRPINS INSTALLED AT OUTSIDE CORNER STRIP STRAPS.

WALK IN FILE



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New Faze Development



2377 Gold Meadow Way
 Suite 270
 Gold River, CA
 95670-4443
 916/924.9906
 Fax: 916/924.9936

RAINBOW SPRINGS
 Lot #007 Plan # 1624
 7753 Laramore Way, Sacto
 APN: 053-0016-007
 Scale 1" = 20'

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