

CITY OF SACRAMENTO

Permit No: 9807331

1231 I Street, Sacramento, CA 95814

Insp Area: 2

Site Address: 6650 CHESTERBROOK DR SAC

Sub-Type: NSFR

Parcel No: 1171300005

LOT 5/ARLINGTON PARK 2

Housing (Y/N): N

CONTRACTOR

M J BROCK  
3350 WATT AVE #D  
SACRAMENTO CA 95821

OWNER

M J BROCK  
3350 WATT AV #D  
SACRAMENTO CA 95821

ARCHITECT

Nature of Work: NEW HOME, MP1975-94, 9 ROOMS

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 SAME 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 54648 Date 8.6.98 Contractor 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 Professions 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.)

X 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 aforementioned property for inspection purposes.

Date 8.6.98 Applicant/Agent 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.

X 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 Kemper Environmental Policy Number 48200321900

(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 8.6.98 Applicant 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.



# INSULATION CONTRACTORS ASSOCIATION OF AMERICA

INSULATION  
CERTIFICATE

51004

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

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 # \_\_\_\_\_ TRACT # \_\_\_\_\_

STREET \_\_\_\_\_ CITY \_\_\_\_\_

EXTERIOR WALLS:

MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE 3 1/2 R- \_\_\_\_\_ VALUE \_\_\_\_\_

CEILINGS:

BATTS:  
MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE 1 1/2 R- \_\_\_\_\_ VALUE \_\_\_\_\_

BLOWN IN:  
MANUFACTURER \_\_\_\_\_ THICKNESS 15 1/2 R- \_\_\_\_\_ VALUE \_\_\_\_\_

SQUARE FOOTAGE COVERED \_\_\_\_\_ NUMBER OF BAGS USED \_\_\_\_\_

FLOORS:  
MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- \_\_\_\_\_ VALUE \_\_\_\_\_

SLAB ON GRADE:  
MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- \_\_\_\_\_ VALUE \_\_\_\_\_

WIDTH OF INSULATION \_\_\_\_\_ INCHES

FOUNDATION WALLS:  
MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- \_\_\_\_\_ VALUE \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_

CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE TITLE

INSULATION CONTRACTOR **ARCADE INSULATION**  
CALIFORNIA CONTRACTORS LICENSE #263784

\_\_\_\_\_  
DATE 7/1/14

\_\_\_\_\_  
SIGNATURE TITLE

INSTALLATION CARD

WESTERN ONE STUCCO SYSTEM

SACRAMENTO STUCCO PRODUCTS CO., INC.

Job Address:

Lot 5 Arlington Park II

Ryland Homes

ICBO Evaluation Service, Inc.

Report No. 3899

Date of Job Completion

12-14-98

Plastering Contractor

TOLIVER PLASTERING

Name: P.O. BOX 740  
FAIR OAKS, CA 95628-0740

Address: CA LIC. #323018  
NY LIC. #002471

Telephone Number (916) 631-9844

Approved Applicator's License Number as  
issued by Western Stucco Products 507

This is to certify that the plastering system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instruction.

12-14-98

Signature of authorized representative of plastering contractor

Date

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

No. AP11-14

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

# SEWER IMPACT FEE

## PERMIT AND CALCULATION SHEET

APPLICATION NO:		BLDG PERMIT NO:	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1		COMMERCIAL USE	UNITS
SRCSD			
CONSTRUCTION			
IN-LIEU			
<b>TOTAL FEE</b>			
APN: 117 3300 5			
DESCRIPTION/ SUBDIVISION Bayann Hill/Arlington Park 2 LOT: 5			
PROPERTY ADDRESS 6850 CHESTNUTBROOK DR			
OWNER H. BROCK AND SONS			
MAILING ADDRESS 3350 WATT AVE STE 1			
CITY-STATE-ZIP SAC, CA 95821		PHONE 488-4500	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____ INPUT _____ START _____			

# Certification of Compliance School District Development Fees

*(Print or Type) If Printing, press hard for four copies*

## **PART I To be completed by the APPLICANT**

OWNER'S NAME \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_

PARCEL NUMBER \_\_\_\_\_ LOT NO. \_\_\_\_\_

SUBDIVISION NAME \_\_\_\_\_

NUMBER OF UNITS \_\_\_\_\_

*Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.*

APPLICANT'S SIGNATURE \_\_\_\_\_

TITLE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

## **PART II To be completed by BUILDING DEPARTMENT**

PLAN IDENTIFICATION NUMBER \_\_\_\_\_

BUILDING TYPE \_\_\_\_\_

RESIDENTIAL ( ) APARTMENT/CONDOMINIUM ( ) COMMERCIAL/INDUSTRIAL ( )

SQUARE FEET OF CHARGEABLE BUILDING AREA \_\_\_\_\_

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

## **PART III To be completed by SCHOOL DISTRICT**

SCHOOL DISTRICT \_\_\_\_\_

DISTRICT CERTIFICATION NO. \_\_\_\_\_

EXEMPT \_\_\_\_\_ COMMENTS \_\_\_\_\_

RESIDENTIAL/APT/CONDO \_\_\_\_\_ SQ FT X \$ \_\_\_\_\_ = \$ \_\_\_\_\_

COMMERCIAL/INDUSTRIAL \_\_\_\_\_ SQ FT X \$ \_\_\_\_\_ = \$ \_\_\_\_\_

OTHER FEE \_\_\_\_\_ TYPE \_\_\_\_\_ SQ FT X \$ \_\_\_\_\_ = \$ \_\_\_\_\_

TOTAL FEES COLLECTED \_\_\_\_\_ = \$ \_\_\_\_\_

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 district 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.

## **AUTHORIZED SCHOOL DISTRICT OFFICIAL**

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

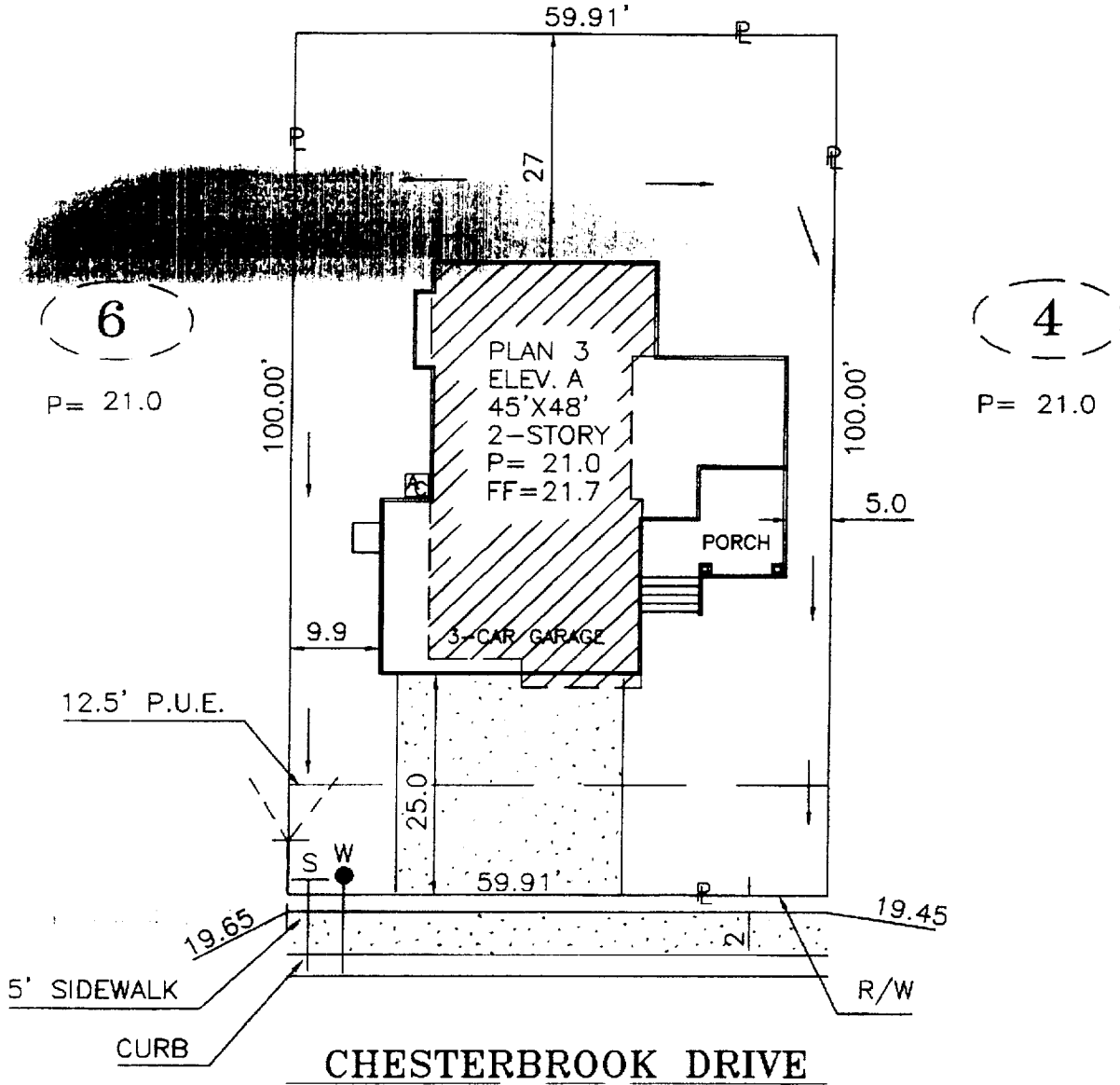
Original: School District

1st copy: School District

2nd copy: Building Department

3rd copy: Applicant

PLOT PLAN  
**ARLINGTON PARK 2**  
**LAGUNA BLUFFS**  
 CITY OF SACTO., COUNTY OF SACTO., CALIF.



LOT COVERAGE: 28 %  
 (MAX. LOT. COV.=40%)

DIMENSIONS SHOWN ARE APPROXIMATE EXCEPT FOR MINIMUMS REQUIRED BY ORDINANCE.  
 THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS AND MAY VARY FROM THIS PLAN.

**LARCHMONT HOMES**

3350 Watt Avenue, Suite D, Sacramento, Calif. 95821-3670 phone (916) 488-4500

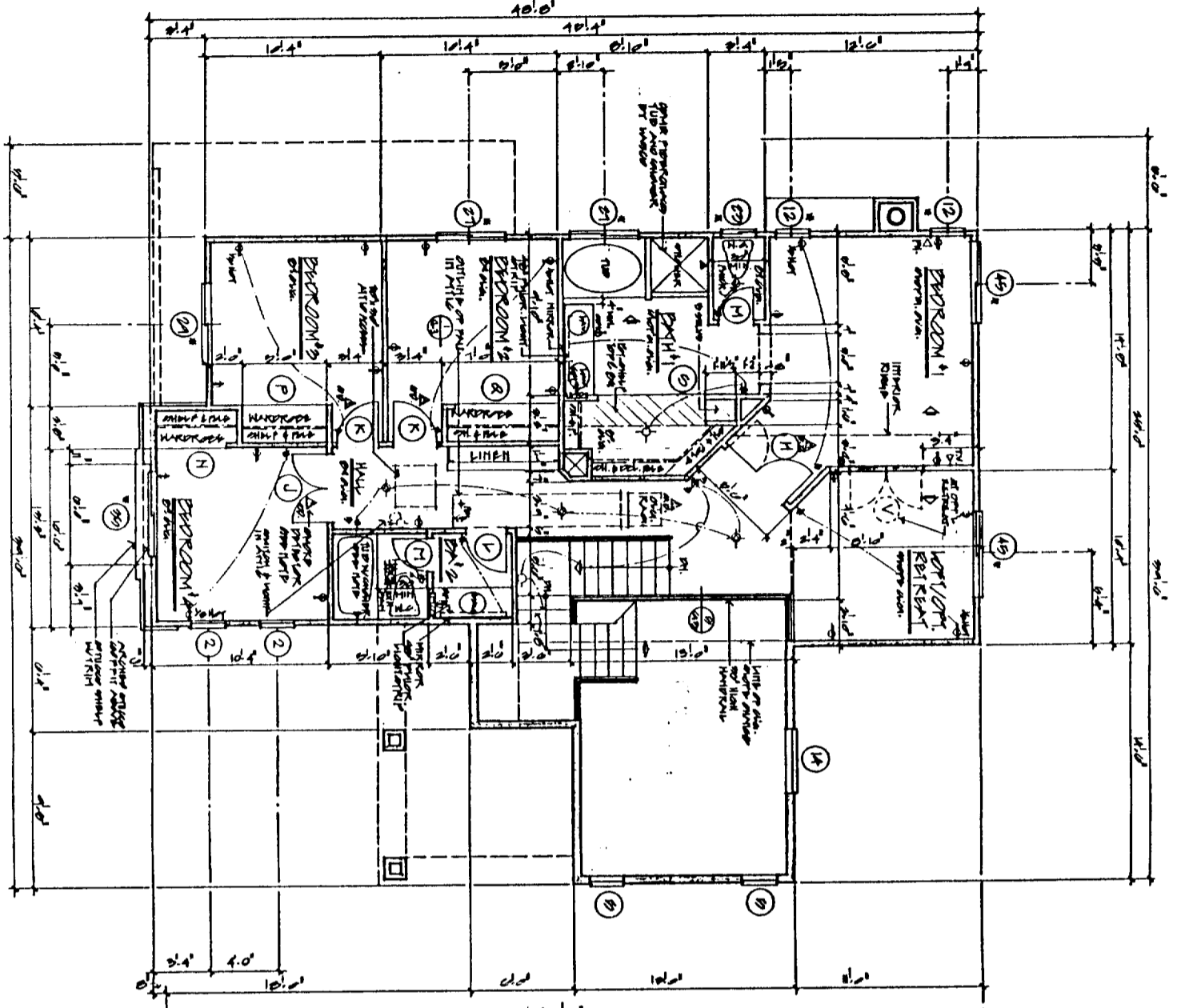
ADDRESS 6650 CHESTERBROOK DRIVE

PLAN NUMBER 3-A SQ. FT. 5,991 DATE 7-21-98

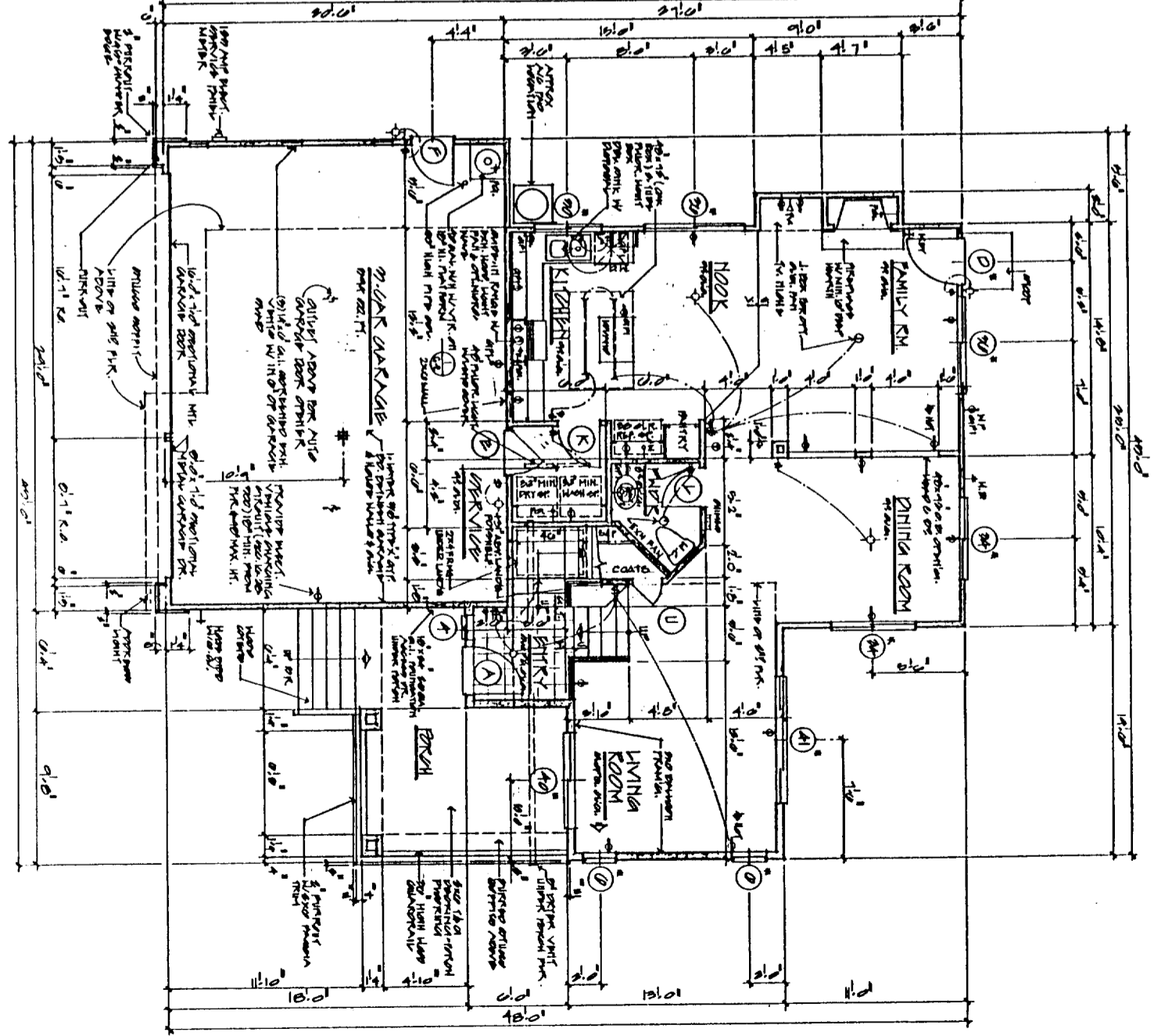
DRAWN BY R.P. APPROVED BY [Signature] SCALE 1"=20'

**LOT 5**

SECOND FLOOR PLAN



FIRST FLOOR PLAN



NOTES

- ◊ INDICATES DIM LIGHT.
- ◐ FLUORESCENT DIM LIGHT, NON-INCANDESCENT.
- ◑ WITH INCANDESCENT DIM LIGHTS.
- ⊙ INDICATIVE
- \* ASTERISK INDICATES WINDOWS THAT ACQUIRE SHADING DEVICES. INTERIOR WHITE SHADE SOLID SHADES.
- BUILDING PAINT.
- ◌ FINISHED COMBINATION EXHAUST FAN WITH LIGHTS.

3-2
FEB 1 1988
3203

PLAN No. 3  
1,972 SQ. FT.  
FLOOR PLAN

LARCHMONT HOMES  
"LARCHMONT LAGUNA CREEK"  
SACRAMENTO, CA.

ARCHITECTURE AND PLANNING  
**L.C. MAJOR & ASSOCIATES, INC.**  
1881 N. TUSTIN AVENUE, SUITE 640, SANTA ANA, CALIFORNIA 92701  
(714) 850-8777 FAX (714) 850-8277



# Certification of Compliance School District Development Fees

*(Print or Type) If Printing, press hard for four copies*

## PART I To be completed by the APPLICANT

OWNER'S NAME MJ BROCK & SONS  
 OWNER'S ADDRESS 3350 WATT AVE STE D SACRAMENTO, CA. 95821  
 PROJECT ADDRESS 6650 CHESTERBROOK DR **6650 Chesterbrook**  
 PARCEL NUMBER 117 1300 5 LOT NO. 5  
 SUBDIVISION NAME LAGUNA BLUES?ARLINGTON PARK 8  
 NUMBER OF UNITS 1

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE Linda S. Steinfeldt  
 TITLE OF APPLICANT Operations Admin  
 DATE 1-22-03 PHONE NUMBER 488-4500

## PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 1575  
 BUILDING TYPE  
 RESIDENTIAL (  ) APARTMENT/CONDOMINIUM (  ) COMMERCIAL/INDUSTRIAL (  )  
 SQUARE FEET OF CHARGEABLE BUILDING AREA \_\_\_\_\_  
 SIGNATURE \_\_\_\_\_  
 TITLE \_\_\_\_\_ DATE \_\_\_\_\_

## PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT 21484  
 DISTRICT CERTIFICATION NO. 21484  

EXEMPT	COMMENTS
RESIDENTIAL/APT/CONDO <input checked="" type="checkbox"/>	<u>1975</u> SQ FT X \$ <u>1.93</u> = \$ <u>3811.75</u>
COMMERCIAL/INDUSTRIAL <input type="checkbox"/>	_____ SQ FT X \$ _____ = \$ _____
OTHER FEE <input type="checkbox"/> TYPE _____	<u>1975</u> SQ FT X \$ <u>1.34</u> = \$ <u>2646.50</u>
TOTAL FEES COLLECTED	<u>1975</u> <u>3.27</u> = \$ <u>6458.25</u>

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 district 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.

## AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Original: School District      1st copy: School District      2nd copy: Building Department      3rd copy: Applicant

Ck # 00003209

Pd  
7:30





**INSULATION CONTRACTORS ASSOCIATION OF AMERICA**

INSULATION CERTIFICATE  
**51004**

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

HIS 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:

PROPERTY: LAZCHINDI LOT # 5 TRACT # \_\_\_\_\_  
6650 CHESTERBROOK SVTC

EXTERIOR WALLS: \_\_\_\_\_  
 MANUFACTURER: S.W. THICKNESS/TYPE: 2 1/2 R- VALUE: 13

CEILING: \_\_\_\_\_  
 ATTIC: \_\_\_\_\_  
 MANUFACTURER: S.W. THICKNESS/TYPE: 1 1/2 R- VALUE: 38

OWN IN: \_\_\_\_\_  
 MANUFACTURER: INSULVOR THICKNESS/TYPE: 1 1/2 R- VALUE: 38

SQUARE FOOTAGE COVERED: 1216 NUMBER OF BAGS USED: \_\_\_\_\_  
 MANUFACTURER: \_\_\_\_\_ THICKNESS/TYPE: \_\_\_\_\_ R- VALUE: \_\_\_\_\_

FOOTING: \_\_\_\_\_  
 MANUFACTURER: \_\_\_\_\_ THICKNESS/TYPE: \_\_\_\_\_ R- VALUE: \_\_\_\_\_

FOUNDATION WALLS: \_\_\_\_\_ INCHES \_\_\_\_\_ R- VALUE: \_\_\_\_\_  
 MANUFACTURER: \_\_\_\_\_ THICKNESS/TYPE: \_\_\_\_\_ R- VALUE: \_\_\_\_\_

GENERAL CONTRACTOR: \_\_\_\_\_  
 CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_ DATE: \_\_\_\_\_

RELATION CONTRACTOR: **ARCADE INSULATION** TITLE: \_\_\_\_\_  
 CALIFORNIA CONTRACTORS LICENSE #263784 DATE: 12/16/98

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE**  
 PERMIT AND CALCULATION SHEET

APPLICATION NO: \_\_\_\_\_ BLDG PERMIT NO: \_\_\_\_\_

GENERAL INFORMATION  
 THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

**FEE CALCULATION**

INSPECTION	RESIDENTIAL	SF	MF	UNITS
CSD-1	290-			
SRCSD	2336-			
CONSTRUCTION				
IN-LIEU				
<b>TOTAL FEE</b>	<b>2626-</b>			

APN: 117 1300 5

DESCRIPTION / SUBDIVISION: Laguna Hills/Arlington Park 2 LOT **5**

PROPERTY ADDRESS: 6650 CHESTERBROOK DR **6650 Chesterbrook**

OWNER: MR BROOK AND SONS

MAILING ADDRESS: 3350 WARE AVE STE 1

CITY-STATE-ZIP: SAC, CA 95821 PHONE: 424-4300

ADDITIONAL FEE MAY BE DUE IF HANDLED BY THE COUNTY OF SACRAMENTO

APPLICANT: \_\_\_\_\_

CONSOLIDATED BIDDING USE ONLY

ACCT: \_\_\_\_\_ INPUT: \_\_\_\_\_ START: \_\_\_\_\_