

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0107538
Insp Area: 4

Site Address: 5065 TUCKERMAN WY SAC
Parcel No: 225-1510-030 NORTHPT PK 17 LOT 30

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

CONTRACTOR
JOHN LAING HOMES
1536 EUREKA RD STE 100
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: NSFR MP1924/OP1 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 8 of the Business and Professions Code and my license is in full force and effect.

License Class B License Number 68759c Date 6/27/01 Contractor Signature N. Collins

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 one hundred dollars (\$100.00).

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 shall be deemed to be a contractor. I certify that he/she did not build or improve for the purpose of sale.

JUL 11 2001
NEIGHBORHOOD PLANNING
AND DEVELOPMENT SERVICES

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 & C 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 6/27/01 Applicant Agent Signature N. Collins

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 FACET INSURANCE COMPANY Policy Number 1S0002200 Exp Date 04/15/2001

(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 forthwith comply with those provisions.

Date 6/27/01 Applicant Signature N. Collins

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.

RESIDENTIAL BUILDING PERMIT APPLICATION

New Construction Addition Remodels Other

Project Address: 5065 Tuckerman Way Assessor Parcel # 225-1810-030

OWNER INFORMATION:

Lot 30

Legal Property Owner: John Laing Homes Phone # 780-1222
 Owner Address: 1536 Eureka Rd. #100, City Roseville, State Ca. Zip 95661

CONTRACTOR INFORMATION:

Northpointe Park Unit #17

Contractor: John Laing Homes Lic. # 687596 Phone # 780-1222 Fax# 780-1333

PROJECT INFORMATION:

Land Use Zone _____ Occupancy Group _____ Construction Type VN Fed Code A1
 No. of stories: _____ No. of rooms: 10 Street width: _____
 1st Floor Area _____ 2nd Floor Area _____ Basement _____ Roof Material _____

AREA IN SQUARE FOOT OF:

EXISTING NEW

Dwelling/Living	_____	<u>2166</u>
Garage/Storage	_____	<u>413</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK:

FOR OFFICE USE ONLY

- | | | |
|---|---|--|
| <input type="checkbox"/> Information above complete | <input type="checkbox"/> AR Flood Waiver required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation files checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval |
| <input type="checkbox"/> Standard setbacks | <input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Special Fee Districts Apply : _____ |
| <input type="checkbox"/> County Sewer | | |

*** NEW STRUCTURES & ADDITIONS**

*THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

- | | |
|---|---|
| <input type="checkbox"/> 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE | * Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures. |
| <input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA | |
| <input type="checkbox"/> Title 24 Energy Compliance documentation | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> Plan Review Fees |

Date: _____ Received by: (staff) _____

ACTIVITY/PERMIT # _____

residentialapp (rev 3/09/99)

SIGNET

Testing Labs, Inc.

DATE: 9-21-01
 PROJECT NO. 2001
 PROJECT: J.B. / CALYPSO Lot # 30
 LOCATION: SOLE TRUCKERMAN

DSA FILE/APPL. NO. _____
 OSHPD NO. _____
 PERMIT NO. _____
 WEATHER: _____ TEMP: _____

PROOF LOAD **TORQUE** **WITNESSING**

Testing was performed on the following items. All tests were performed with the following calibrated equipment:

RAM: SL # 255 GAGE: SL # 1004 TORQUE WRENCH: _____
 RAM: _____ GAGE: _____ TORQUE WRENCH: _____

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST
<u>HTD-22 EPOXIED ANCHOR BOLT</u>	<u>5/8</u>	<u>1</u>		<u>6855</u>	<u>2670</u>	<u>1</u>	<u>0</u>	<u>0</u>

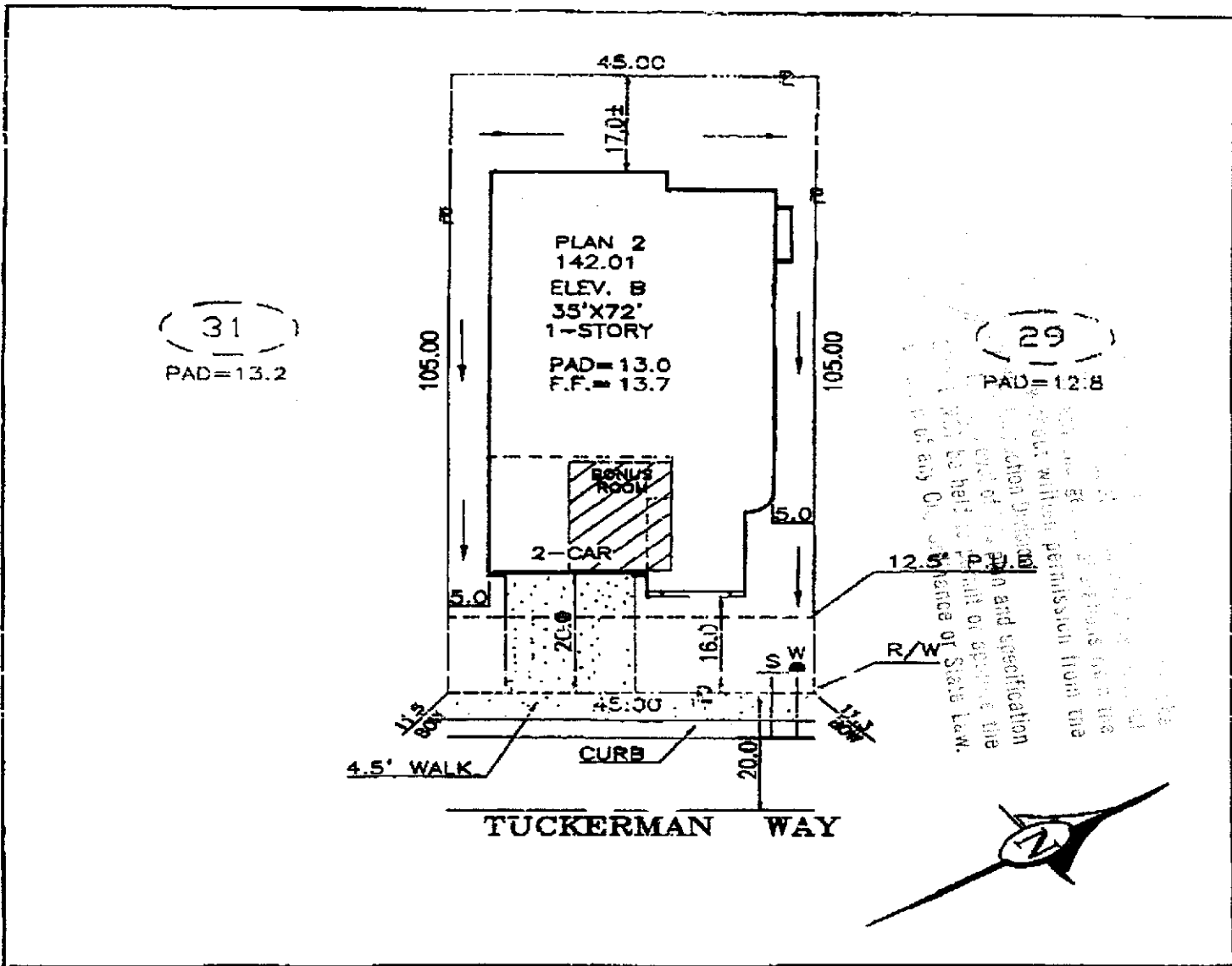
- Type of epoxy / grout used: _____ Method of application / cleaning: _____
- Visual inspection was performed on _____
- Show up / Stand by time. Job Canceled / Delayed due to: _____
- All non-compliance items were brought to the attention of: _____ at the job site.

NON-COMPLIANCE REPORT ATTACHED ADDITIONAL TESTS ATTACHED

NOTES: _____

To the best of my knowledge, the above ~~WAS~~ / WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: _____ Inspector: [Signature]



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

John Laing Homes 1536 KURTKA ROAD SUITE 100 ROSEVILLE, CALIFORNIA 95661 (TEL.) 916-780-1828 (FAX.) 916-780-1333		CALYPSO NORTHPOINTE PARK VILLAGE NO. 17 CITY OF SACRAMENTO CALIFORNIA		PLOT PLAN NOTES:
ADDRESS: 5085 TUCKERMAN WAY		LOT COV: 45 % APN: 225-151-30		LOT 30
PLAN NO.: 2-B	LOT SQ. FT.: 4,725	REAR YARD COVERAGE: %		
DRAWN BY: R.P.	APPROVED BY:	DATE: 5/15/01	SCALE: 1"=20'	



INSULATION CONTRACTORS ASSOCIATION OF AMERICA

INSULATION CERTIFICATE
69625

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:

JOHN KING LOT # 30 TRACT # CALIFSO
STREET 565 TUCKERMAN CITY SACRAMENTO

EXTERIOR WALLS:

MANUFACTURER FG THICKNESS/TYPE 3 1/2 R-VALUE 13

CEILING:

BATTS: MANUFACTURER FG THICKNESS/TYPE 10 R-VALUE 30

BLOWN IN: MANUFACTURER JM THICKNESS 13 R-VALUE 30

SQUARE FOOTAGE COVERED 1740 NUMBER OF BAGS USED 44

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 11-1-01

SIGNATURE RIGMAN TITLE

LOT 30

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

ICZO Report #4004

JOB ADDRESS:

5065 TUCKERMAN WAY
SACRA CA 95835

Date of Job Completion 11-29-01

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC.
Address: 5900 WAREHOUSE WAY, SACRAMENTO, CALIFORNIA 95826
Telephone No: (916) 383-6699
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 12-18-01

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.