

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9904065

Insp Area: 4

Site Address: 2879 CHATEAU MONTELENA WY SAC

Parcel No: 225-1160-032

GATEWAY WEST LOT 105

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

BLOODGOOD SHARP BUSTER
2356 GOLD MEADOW WY #201
GOLD RIVER CA 95670

Nature of Work: NEW HOME, MP1232, 5 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 _____ 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 4/29/99 Contractor Signature Sheryl Van Maran

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 4/29/99 Applicant/Agent Signature Sheryl Van Maran

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:
~~I~~ 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 _____ Policy Number _____ Exp Date 4/99

____ (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 4/29/99 Applicant Signature Sheryl Van Maran

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.

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

BUILDING USE

INSPECTION	RESIDENTIAL	SF	<input type="checkbox"/>	MF	<input type="checkbox"/>	UNITS
CSD-1	COMMERCIAL USE					
SRCSO						
CONSTRUCTION						
IN-LETT						
TOTAL FEE						

APPLIC:

PROPERTY
 OR BUSINESS

PROPERTY ADDRESS

OWNER

MAILING ADDRESS

PHONE NO

DATE OF PERMIT ISSUANCE

ISSUED BY



No 18428

INSTALLATION CARD

Contract No. _____
Job No. _____
Date of Report _____

*Referral by _____
Contractor _____
Address _____*

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

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

Contractor: Kenyon Construction
Name: John W. Kenyon III
Address: P.O. Box 377
North Highlands, CA 95660
Telephone: (916) 349-8191

Specimen for testing made as issued by the Stucco Manufacturer: 1

This entry card indicates that the system on the building exterior at the above address had been installed in accordance with the instructions specified above and the manufacturer's instructions.

ICBO Representative: _____

Date: _____

CERTIFICATION OF INSULATION

PART I
GENERAL

ADDRESS OR TRACT LOT #	SACRAMENTO INSULATION CONTRACTORS <input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 3243 INDUSTRIAL DRIVE, YUBA CITY, CA 95993 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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PART II
AREAS INSULATED

WALLS		CEILING			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
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL: FIBERGLASS		FORM: BATTS			R-VALUE: OCF	
AIR INFILTRATION SEALANT						
MANUFACTURER: W R GRACE						

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	TITLE: MANAGER	DATE:
SIGNATURE: GENERAL CONTRACTOR	TITLE:	DATE:
REMARKS:		

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

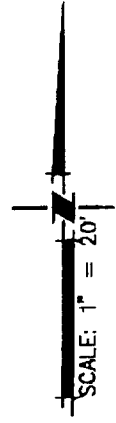
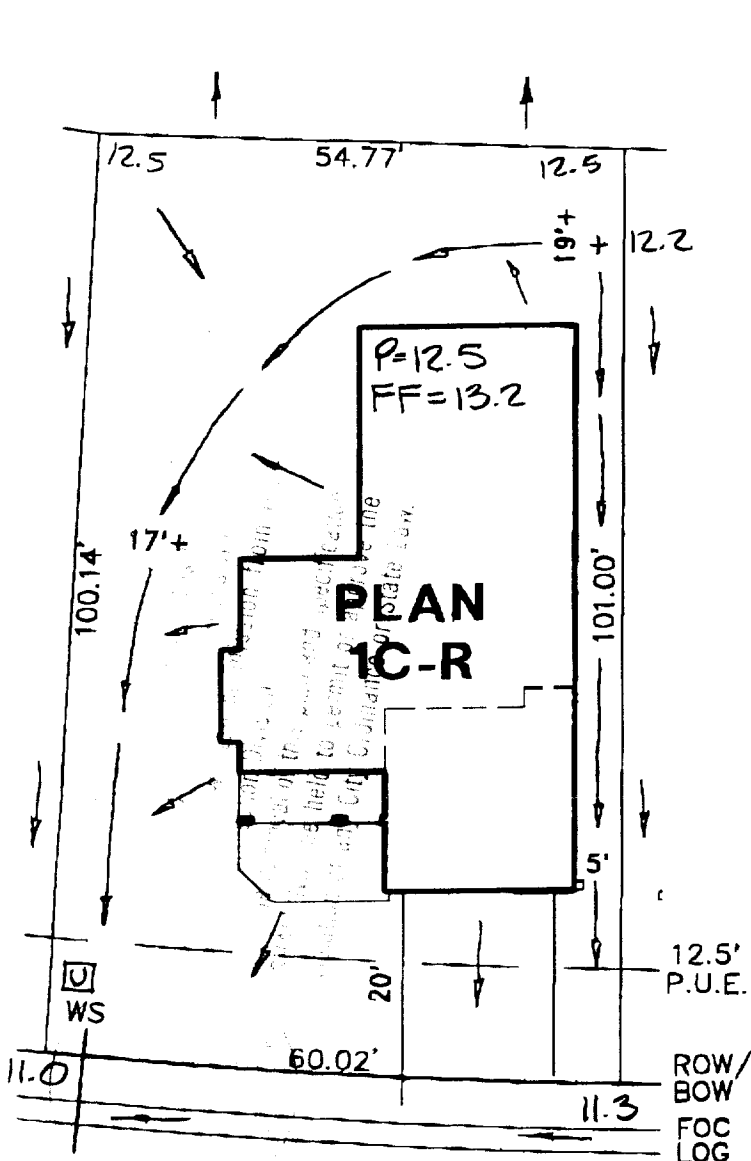
PART I: TO BE COMPLETED BY APPLICANT			
Property Owner's Name _____			
Owner's Address _____			
Project Address _____			
Parcel Number _____			
Subdivision Name _____			
Number of Units _____			
Print Applicant's Name _____		Applicant's Signature _____	
Title of Applicant _____		Telephone Number _____	
Date _____			
PART II: TO BE COMPLETED BY BUILDING DEPARTMENT			
Plan Identification Number _____			
Building Type (Check One)			
<input type="checkbox"/> Residential	<input type="checkbox"/> Apartment/Condominium	<input type="checkbox"/> Commercial/Industrial	
Square Feet of Chargeable Building Area _____			
Signature _____		Date _____	
Title _____			
PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT			
District Certification Number _____			
Fees Collected:			
Residential	Sq. Ft. X \$	= \$	_____
Apartment/Condominium:	Sq. Ft. X \$	= \$	_____
Commercial/Industrial:	Sq. Ft. X \$	= \$	_____
<p>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 or to another public entity authorized to collect them on behalf of the District, whichever is earlier.</p>			
Applicant Signature: _____			Date: _____

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: _____ DATE: _____
 TITLE: _____

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINE, DESIGN DRAINAGE CONTROL ELEVATIONS, AND DIRECTION OF DRAINAGE FLOW TO CONFORM WITH LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN IS APPROXIMATE EXCEPT FOR THOSE SETBACKS WHICH ARE MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.



RF	
President	
Project Development	
Construction	✓ @
Marketing	
Admin.	
Accounting	

CHATEAU MONTELENA WAY

PLOT PLAN
LOT 105
 GATEWAY WEST-VILLAGE NO. 1
 FOR
 BEAZER HOMES
 SACRAMENTO CALIFORNIA

WOOD-RODGERS INC.

DATE:	DRAWN:	CHECKED:	PROJECT NO:
APR. 1999	LCS	JLW 4-21-99	98BEZ-009

□ = UTILITY SERVICE BOX

LOT COVERAGE = 29%
 2879 CHATEAU MONTELENA WAY

Natomas Unified School District
 1515 Sports Drive, #1 • Sacramento, CA 95834-1905
 Phone 916/641-3300 • Fax 916/928-1629

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

Property Owner's Name Beazer Homes	
Owner's Address 3009 Douglas Blvd., Ste. 150., Roseville, CA. 95661	
Project Address 2879 Chateau Mantelena Way	
Parcel Number 225-1160-032	
Subdivision Name Gateway West Village 1 Lot 105	
Number of Units 1	
Print Applicant's Name Sheryl Van Maren	Applicant's Signature <i>Sheryl Van Maren</i>
Title of Applicant Starts Coordinator	Telephone Number 773-3888
Date 4/23/99	
Plan Identification Number 1232	
Building Type (Check One) <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Apartment/Condominium <input type="checkbox"/> Commercial/Industrial	
Square Feet of Chargeable Building Area 1232	
Signature <i>[Signature]</i>	Date 4-23-99
Title SCHOOL	
District Certification Number 99-274	
Fees Collected:	
Residential: 1232 Sq. Ft. X \$ 4.57	= \$ 5630.24
Apartment/Condominium:	Sq. Ft. X \$ = \$
Commercial/Industrial:	Sq. Ft. X \$ = \$
<p>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, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.</p>	
Applicant Signature: <i>Sheryl Van Maren</i>	Date: 4/23/99

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: *Peggy Flynn* DATE: **4/23/99**
 TITLE: **Director Facilities**

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET
 APPLICANT: *Shirley Van Mason*
 ADDRESS: *2879 Chateau Montelena Way*
 DATE: *4/23/99*

APPLICATION NO. *014*
 GENERAL INFORMATION
 THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
 251241 4/23/99
 DEPT 26 \$2,414.00
 TRN 387826 04/23/99
 RECEIPT 695345 031 \$2,414.00

THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE
 BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF	UNITS
CSD-1				
SRCSD				
CONSTRUCTION				
IN-LIEU				
TOTAL FEE				2,414.00

APN: *225-1160-032*
 DESCRIPTION / SUBDIVISION: *Gateway West Village 1* LOT: *105*
 PROPERTY ADDRESS: *2879 Chateau Montelena Way*
 OWNER: *Beazer Homes*
 MAILING ADDRESS: *3009 Douglas Blvd. Suite 150*
 CITY-STATE-ZIP: *Roseville, CA 95661* PHONE: *773-3888*
 ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.
 APPLICANT SIGNATURE: *Shirley Van Mason*
 CONSOLIDATED UTILITY BILLING USE ONLY
 ACCT _____ INPUT _____ START _____



No 18428

INSTALLATION CARD

Job Address: *Beazer Reflections of Sac*
2879 Chateau Montelena
Sacto Lot 105

Stucco System Trade Name: KWIK KOTE
 Name Stucco Manufacturer: KWIK KOTE CORP.
 ICBO Evaluation Service, Inc.
 Report No. 3607
 Date of Job Completion _____

Stucco Contractor Kenyon Construction
 Name John W. Kenyon, III
 Address P.O. Box 2077
North Highlands, CA 95660
 Telephone Number (916) 349-8191
 Approved Contractor Number as issued by the Stucco Manufacturer: 1

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.

Signature of authorized representative of stucco contractor
[Signature]

Date *7/15/99*

CERTIFICATION OF INSULATION

PART I GENERAL

BEAZER

LOT # **105**

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 3243 INDUSTRIAL DRIVE, YUBA CITY, CA 95993 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1631, RENO, NV 89505 LIC. #10675
- 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

DATE INSULATION COMPLETED

8/12/99

GATEWAY WEST

PART II AREAS INSULATED

WALLS	CEILINGS	FLOORS
(SQUARE FEET)	(SQUARE FEET)	(SQUARE FEET)
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.
OCF	OCF	OCF
	BAGS	
STARTED	R VALUE	THICKNESS
13	30 30	9" 12"

KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE

MATERIAL FIBERGLASS	FORM BATTS	R VALUE	MANUFACTURER OCF
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MATERIAL FOAM	MANUFACTURER W R GRACE
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THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES AND STANDARDS FOR THE INDUSTRY

SIGNATURE—INSULATION CONTRACTOR <i>[Signature]</i>	TITLE MANAGER	DATE 7-14-99
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS