

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0104009
Insp Area: 4

Site Address: 3390 ZALEMA WY SAC
Parcel No: 225-1660-010 RIVERVIEW VILL 4-A LOT 10

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

CONTRACTOR
BEAZER HOMES
3009 DOUGLAS BL #150
ROSEVILLE CA 95661

OWNER

ARCHITECT

Nature of Work: MP 1346 1 STORY 6 ROOM SFR

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 4/5/01 Contractor Signature Sheryl VanHaren

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.)

____ 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 above mentioned property for inspection purposes.

Date 4/5/01 Applicant-Agent Signature Sheryl VanHaren

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 4/5/01 Applicant Signature Sheryl VanHaren

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.

4A/4B

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction, Addition, Remodels, Other

Project Address: 3390 Zalema Way Lot # 10 Assessor Parcel #

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: Same as above Lic # B724191 Phone # 773-3888 Fax # 773-0425

PROJECT INFORMATION:

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

Table with 3 columns: AREA IN SQUARE FOOT OF, EXISTING, NEW. Rows include Dwelling/Living, Garage/Storage, Decks/Balconies, Carports.

SCOPE OF WORK: Single Family Homes

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, Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures, 11" x 17" copy of floor plan for County Assessor, Plan Review Fees

Date: Received by: (staff)

ACTIVITY/PERMIT #

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) no
2. I have / have not _____ signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name TBD Address _____
City _____ Telephone _____
Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

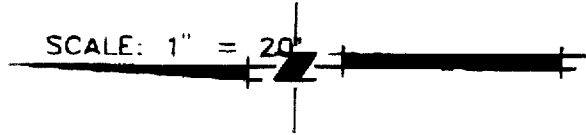
Name	Address	Phone	Type of work

Signed Richard M. Jones

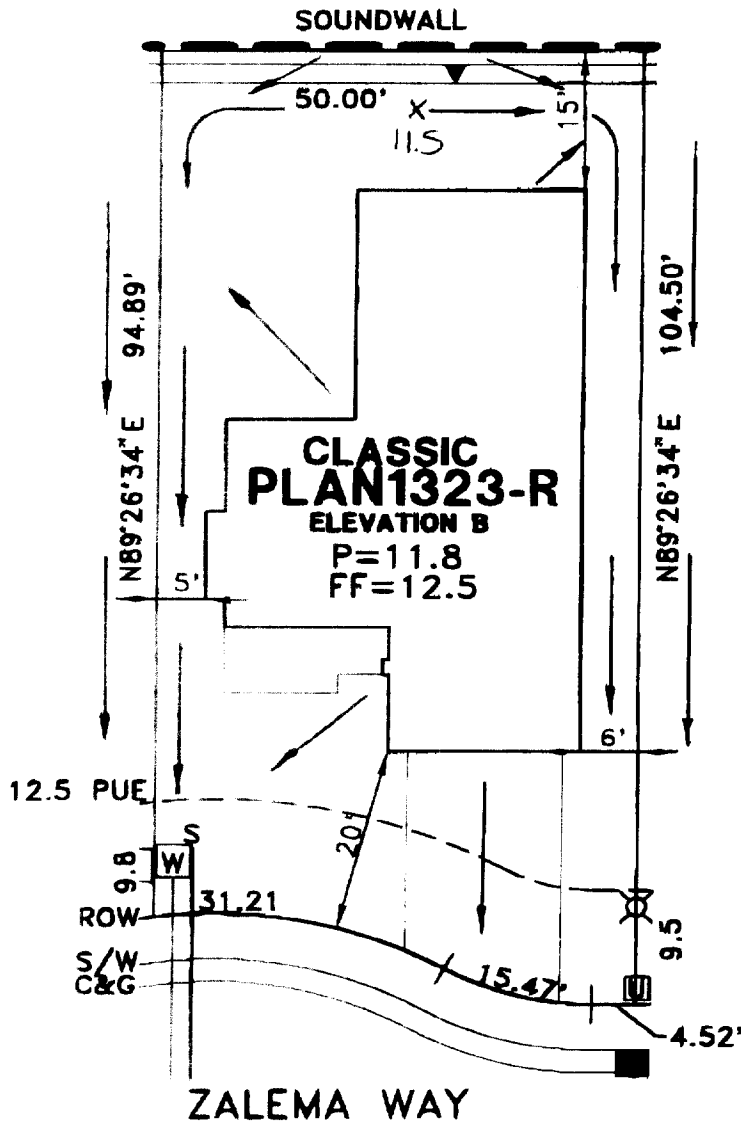
Job Address 2545 DONNER WY

Permit No: 0108533

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 WALL ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.



This is a conceptual plot plan. It is not intended to be used for any legal purposes and it is unlawful to make any changes or alterations from the original plan without the written consent of the engineer.



APPROVALS

INITIALS
✓ [Signature]
✓ [Signature]

⊗-STREET LIGHT
 □-UTILITY SERVICE BOX

PLOT PLAN
LOT 10
 RIVER VIEW #2 VILLAGE 4A
 FOR
 BEAZER HOMES
 CITY OF SACRAMENTO CALIFORNIA

CIVIL ENGINEERING SURVEYING
 MAPPING PLANNING

WOOD RODGERS INC.
 5301 C STREET BLDG. 100B SACRAMENTO, CA 95816
 TEL: 916/341-7760 FAX: 916/341-7767

DATE:	DRAWN:	CHECKED:	PROJECT NO:
MAR2001	MJG		1055.015

3390 ZALEMA.

0104009

No. 200-002130

KwikKote

Stucco System

Installation Card

Job Name: CLASSICS OF SACRAMENTO

Address: 3390 ZALEMA WAY
W. Sac, CA

Lot #: 0000010

Stucco System Trade Name: KWIK KOTE

Stucco System Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.

Report No. 3607

Date of Job Completion: 6-13-01

Home Builder: BEAZER HOMES

Address: 3009 DOUGLAS
ROSEVELLE, CA

Stucco Contractor: KENYON CONSTRUCTION

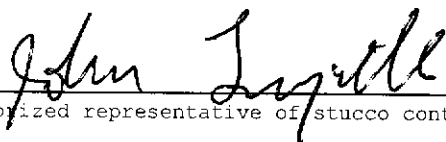
Address: PO BOX 2077
North Highlands, CA

Telephone Number: 916/349-8191

Approved Contractor Number as
issued by the Stucco Manufacturer: 1001

Card Print Date: 05/16/2001

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.



Signature of authorized representative of stucco contractor

7-18-01

Date

CERTIFICATION OF INSULATION

3390 ZAHAMA

PART I GENERAL	ADDRESS OR TRACT	SACRAMENTO INSULATION CONTRACTORS
	BEAZER Homes LOT #0010	<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
	CLASSICS	DATE INSULATION COMPLETED

PART II AREAS INSULATED	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 I.D.		MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.	
	MANUFACTURER		MANUFACTURER			MANUFACTURER	
	OCF		OCF			OCF	
	BAGS						
	R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R-VALUE INSTALLED	APPLIED THICKNESS
13	3 5/8	30	30				
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE							
MATERIAL FIBERGLASS		FORM BATTS		R-VALUE		MANUFACTURER OCF	
AIR INFILTRATION SEALANT							
MATERIAL Foam				MANUFACTURER 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 Gray</i>	MANAGER	6-12-1	
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE	
REMARKS			