## 0302428

ACTIVITY/PERMIT #

RESIDENTIAL BUILDING PERMIT APPLICATION ☐ Other □ Remodels □ Addition ☑ New Construction COT#13 Project Address: 176 ODELL CINCLE Assessor Parcel #\_ NORTHPOINTE PARK UILLAGE#21 OWNER INFORMATION: Phone # (916) 920-0200 Legal Property Owner: <u>Forecast Homes</u> Phone # <u>(916) 920-0200</u> Owner Address: <u>1796 Tribute Rd. #100 City Sacramento</u> State <u>CA</u> Zip <u>95815</u> CONTRACTOR INFORMATION: Contractor: Forecast Homes Lic. # 606862 Phone # 920-0200 Fax# 920-0379 PROJECT INFORMATION: Land Use Zone R/A Occupancy Group R5 Construction Type 1/1/ Fed Code 1A No. of stories: 6HE No. of rooms: 7 Street width: 401 M/A Roof Material TILE 1<sup>st</sup> Floor Area 1765 2<sup>nd</sup> Floor Area 8 Basement \_\_\_\_ EXISTING AREA IN SQUARE FOOT OF: Dwelling/Living Garage/Storage Decks/Salconies Carports SCOPE OF WORK: New SFD FOR OFFICE USE ONLY Planning Approval AR Flood Waiver required ☐ Flood Elevation Certificate Required ☐ Design Review Approval Information above complete Violation files checked ☐ Special Fee Districts Apply :\_\_ ☐ Water Development Infill Area ☐ Standard setbacks County Sawer NEW STRUCTURES & ADDITIONS ◆THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW ☐ 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE . Plans to include: site plan, floor plan, elevations. roof/ceiling plan, foundation and structural framing 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA details, and structural calculations for nonconforming structures. ☐ Title 24 Energy Compliance documentation ☐ 11" x 17" copy of floor plan for County Assessor Grading and Erosion Control Questionnaire Delan Review Fees

Received by: (staff) \_\_\_\_\_

residentialapp [rev 3/09/99]



## INSULATION CONTRACT ASSOCIATION OF AMERICA

TITLE	SIGNATURE
DATE 5/12/03	- m - i
	INSULATION CONTRACTOR ARCADE INSULATION
Sup 2R-	SIGNATURE
60686- DATEG-23.03	CALIFORNIA CONTRACTORS LICENSE #
cast Homes	GENERAL CONTRACTOR Force
R- VALUE	MANUFACTURERT
- INCHES	WIDTH OF INSULATION
RVALUE	SLAB ON GRADE:  MANUFACTURERT
R- VALUEVALUE	
NUMBER OF BAGS USED 33	FOOTAGE COVERED 1277
12/2	Fle
THICKNESS/TYPE /2/2 VALUE 30	BATTS: MANUFACTURER T
THICKNESS/TYPEVALUE	MANUFACTURER F/G
0	EXTERIOR WALLS:
CITY Sac. Cal.	STREET 170 Ddall Cr.
LOT # 2013 TRACT # Canterbury	Forecast H 10
A ADMINISTRATIVE CODE TITLE 24. STATE OF	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.

INSULATION ( ASSOCIATIVE STATEMENT S	INSULATION CONTRACTORS ASSOCIATION OF AMERICA  42456
1321 DUKE STREET, SUITE 303 • AL	1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356
TO CERTIFY THAT INSULATION HAT ENERGY REGULATIONS, CALIFORNIA, IN THE BUILDING LOCATED AT	TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH ATTEMPT OF THE BUILDING LOCATED AT ADMINISTRATIVE CODE. TITLE 24 STATE OF THE BUILDING LOCATED AT
brecost H	LOT # 2013 TRACT # Canterbury
170 Odell Cr.	CITY Sac Cal.
NEWALLS:	THICKNESS/TYPE VALUE
r i	ņ
CTURER 7/6	THICKNESS/TYPE /2/2 VALUE 30
FOOTAGE COVERED /277	NUMBER OF BAGS USED 33
CTURER	R- THICKNESS/TYPEVALUE R-
CTURER	/TYPE
TION WALLS:	THICKNESS/TYPE
L CONTRACTOR For C	cast Homes
RNIA CONTRACTORS LICENSE #	60686 - DATEG -23.03
SIGNATURE	SUPLE
ION CONTRACTOR ARCADE INSULATION INIA CONTRACTORS LICENSE #815286 CONTRACTORS LICENSE #55201	SULATION  DATE 5/12/03
SIGNATURE	TITLE

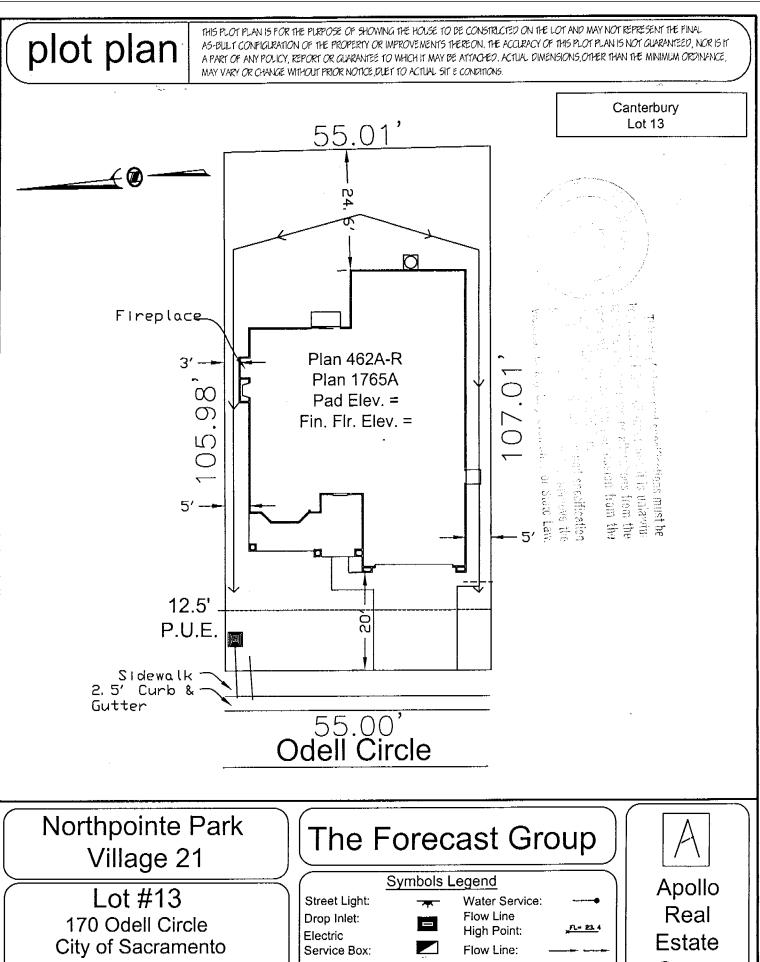


4290 Roseville Road North Highlands, CA 95660-5710 (916) 486-4094 Fax (916) 486-4187

## Installation Card Fiber Reinforced Stucco

Job Name and Address: CANTERBURY	ICBO# 5269
170 ODELL CIR.	Date of job completion
Plastering Contractor	
Name: VISION PLASTERING	
Address: 8974 GREENBACK LANE OF	TRACEVALE, CA. 95662
Telephone No. (116) 937-3324	,
Approved contractor as issued by Basalite/Pacific Stud	eco
This is to certify the exterior coating system at the aboaccordance with the evaluation report specified above	we address, has been installed in and the manufacturers instructions.
Signature of authorized representative of plastering contractor	5-12-63 Date

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



A.P.N.:

4	MAH	2/17/03	1"=20'
Phase	Drawn By	Date	Scale

Fire Hydrant: Elevation Back 123. 4 TOV Pad-Mount of Sidewalk: **(4)** 2nd Story Element: Transformer: Sewer Service:

Group

1204 El Sur Way cramento, CA 95864 (916) 978-9726