

Permit No: 0100564
Insp Area: 2

Site Address: 7720 LARAMORE WY SAC
Parcel No: 053-0160-067

ARCHITECT

OWNER

CONTRACTOR
NEW FAZE DEVELOPMENT
2377 GOLD MEADOW WY STE.270
GOLD RIVER CA. 95670

Nature of Work: NSFR MP1200 6 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 3 of the Business and Professions Code and my license is in full force and effect.

License Class **B** License Number **714601** Date **6-1-01** Contractor Signature *[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 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. 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 & P.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 above mentioned property for inspection purposes.

Date **6-1-01** Applicant Agent Signature *[Signature]*

WORKERS' 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 **State Fund** Policy Number **1536963-98** Exp Date _____

(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 **6-1-01** Applicant Signature *[Signature]*

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS A VIOLATION 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



INSTALLATION CARD
 WESTERN ONE KOTE STUCCO SYSTEM
 WESTERN STUCCO PRODUCTS CO. INC.



Job Address:

New Faze Development, Inc.Rainbow Springs, Lot - 67Sacramento, CAICBO Evaluation Service, Inc.
Report No. 3899

Date of Job Completion _____

Plastering Contractor

Name: G. Glenn PlasteringAddress: 6330 Main Ave., #4, Orangetvale, CA 95662Telephone Number (916) 989-8755

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 instructions.

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 _____

Certification of Compliance
School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address NEW FAZE DEVELOPMENT
Project Address 7720 LARAMORE WAY
Parcel Number 053-0016-067 Lot No. 67
Subdivision Name RAINBOW SPRINGS No. of Units 1
Applicant's Signature [Signature] Title [Signature]
Phone No. (916) 924-9906 EXT # 208 Date 6-1-2001

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(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II - To be completed by the BUILDING DEPARTMENT

Plan Identification Number MP - 1232
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 1232
Signature/Title [Signature] Date 6-1-2001

Part III - To be completed by the SCHOOL DISTRICT

School District 11550 Certificate No. 1111
 Exempt Comments _____
Residential/Apartment/etc. _____ Square ft. x \$ _____ = \$ 2119.04
Commercial/Industrial _____ Square 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 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.

Signature [Signature] Date 6/1/01

CERTIFICATION OF INSULATION

PART I GENERAL

ADDRESS OR TRACT <i>New FAZE Dev. Rainbow Spring Sacto. CA</i>	SACRAMENTO INSULATION CONTRACTORS <input 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
LOT # <i>67</i>	DATE INSULATION COMPLETED

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 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
<i>13</i>	<i>3 1/2</i>	<i>38</i>				
		<i>38</i>	<i>BATTS</i>			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL FIBERGLASS		FORM BATTS		R VALUE	MANUFACTURER OCF	
AIR INFILTRATION SEALANT						
MATERIAL <i>FOAM</i>				MANUFACTURER W R GRACE		

PART III CERTIFICATION

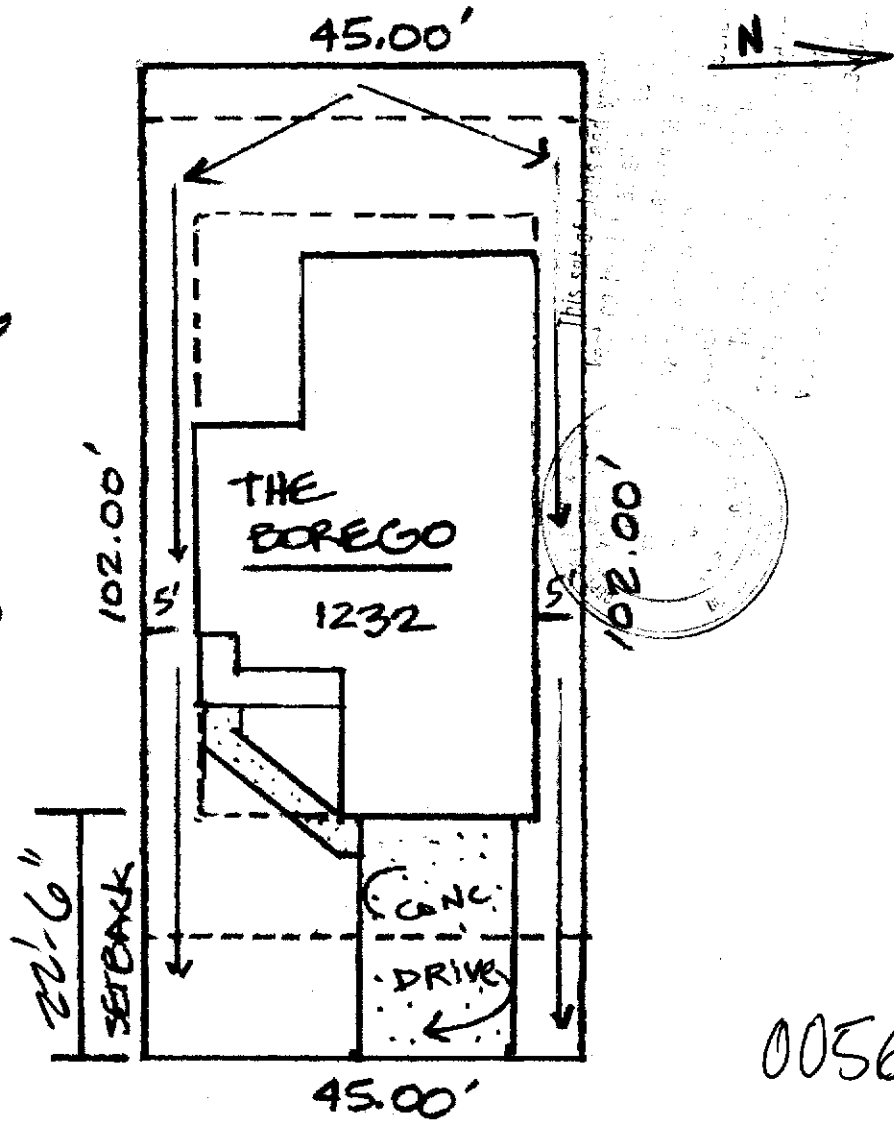
THIS IS TO CERTIFY THAT INSULATION AND/OR SEALANT HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES, MATERIAL STANDARDS AND REGULATIONS.

SIGNATURE—INSULATION CONTRACTOR <i>Jeff Cash</i>	TITLE MANAGER	DATE
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE
REMARKS		

NEW FAZE DEVELOPMENT, INC.
3187 DEL PASO BLVD
SACRAMENTO, CA 95815

OFFICE:
(916) 924-9906
(916) 924-9936

SITE:
(916) 421-2749
(916) 421-2741



00564

RAINBOW SPRINGS
LOT #67 PLAN # 1232
7720 LARAMORE WAY, SACTO.
APN: 053-0016-067
SCALE 1" = 20'