CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0010755

Insp Area: 4

ARCHITECT

Site Address: 29 SOUTHBURY CT SAC	Sub-	-Type:	NSFR

Parcel No: 201-0410-068 NORTHBR 2-1 LOT 18 Housing (Y/N): N

CONTRACTOR OWNER

MORRISON HOMES

11344 COLOMA RD

(CALD DIVER CA. 05670

11344 COLOMA RD GOLD RIVER CA 95670	
Nature of Work: NSFR MP1428 6 RMS	
CONSTRUCTION LENDING AGENCY: 1 hereby affin of the work for which this permit is issued (Sec. 3097, Civ. C).	rm under penalty of perjury that there is a construction lending agency for the performance
i ender's Name	Lender'sAddress
LICENSED CONTRACTORS DECLARATION: 1 h commencing with section 7000) of Division 3 of the Business a License Class License Number 5/9/65	nd Professions Code and my license is in full force and effect. Date Contractor Signature
following reason (Sec. 7031.5, Business and Professions Code; any structure, prior to its issuance, also requires the applicant foo; the Contractors License Law (Chapter 9 (commencing with	n under penalty of perjury that I am exempt from the contractors License Law for the any city or county which requires a permit to construct, alter, improve, demolish, or repair r such permit to file a signed statement that he or she is licensed pursuant to the provisions Section 7000) of Division 8 of the Business and Professions Code) or that he or she is violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil
for sale (Sec. 7044, Business and Professional Code: The Co	es as their sole compensation, will do the work, and the structure is not intended or offered intractors. License Law does not apply to an owner of property who builds or improves his/her own employees, provided that such improvements are not intended or offered for one year of completion, the owner-builder will have the burden of proving that he/she did
Las owner of the property, am exclusively contracting Code: The Contractors License Law does not apply to an owne contractor(s) licensed pursuant to the Contractors License Law).	with licensed contractors to construct the project (Sec. 7044, Business and Professions or of property who builds or improves thereon, and who contracts for such projects with a
I am exempt under SecB & PC for	this reason:
DateOwner Sign	nature
all measurements and locations shown on the application or acc	esents, and the city relies on the representation of the applicant, that the applicant verified ompanying drawings and that the improvement to be constructed does not violate any law ons for such improvements. This building permit does not authorize any illegal location of ing to location of improvements.
I certify that I have read this application and state that all inforelating to building construction and herby authorize representat	rmation is correct. I agree to comply with all city and county ordinances and state laws ive(s) of this city to enter upon the above entioned property for inspection purposes.
Date 10-2-00 Applicant/	Agent Signature
WORKER'S COMPENSATION DECLARATION: 11 I have and will maintain a certificate of consent to self-in performance of work for which the permit is issued	hereby affirm under penalty of perjury one of the following declarations: sure for workers' compensation as provided for by Section 3700 of the Labor Code, for the
* I have and will maintain workers' compensation insuran which this permit is issued. My workers' compensation insurance	ce, as required by Section 3700 of the Labor Code, for the performance of the work for the carrier and policy number are:
Carrier ZURICH-AMERICAN INS. CO	Policy Number WC2815412-01 Exp Date 11/1/1999
(This section need not be completed if the permit is for \$ shall not employ any person in any manner so as to become subject to the workers' compensation provisions of Section 3700	S100 or less) I certify that in the performance of the work for which this permit is issued, I ubject to the workers' compression laws of falling and surge, that if I should become
Date 10200 Applicant S	
	SATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO

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.

RESIDENTIAL SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 29 500 ot Number: 18	thoung ct.	Assessor Parcel Subdivision	# 201-0 Northboroug	71-065 h Village
OWNER INFORMATION:				
Legal Property Owner: Mor Owner Address: 1130 Iron	rison Homes Point Rd #12	Oity_Folsom	Phone# (9 State	016) 355-8900 CA Zip_95630
CONTRACTOR INFOR				
Contractor: Morrison Hon	nes Lic. # <u>51</u>	9465 <u></u>	Phone # _355-8	355-0100 Fax 355-0100
PROJECT INFORMATION	:			
Land Use Zone R1A O	ccupancy Group R	3 Constru	ction Type <u>VN</u>	Fed Code <u>1A</u>
No. of Stories: /	No. of Rooms:	6	Street Widt	h:
1 st Floor Area /428 2 nd F	Floor Area	Basement	Roof	Material
AREA IN SQUARE FOOT (Dwelling/Living _			
	Garage/Storage	425		
	Decks/Balconies	30)	
	Carports			
SCOPE OF WORK: New	Single Family	y Dwelling		
☐ Information Above Complete☐ Violation Files Checked☐ Standard Setbacks☐ County Sewer	□ Flood Elev	Waiver Required vation Certificate relopment Infill	Required De	nning Approval sign Review Approval ecial Fee Districts Apply:
→THE FOLLOWING MUS □ 2 COMPLETE PLOT PLANS, LEC □ 11 X 17 COPY OF FLOOR PLAN a) Assessors Parcel Number b) New Floor Area	GIBLE & DRAWN TO SC	ALE ORMATION me	FOR PERMIT ~	

Received by: (staff)

Permit #

FOR OFFICE USE ONLY

Date:

KWIKKOTE STUCCO SYSTEM

INSTALLATION CARD

OD Address: Morrison Symos Ulla Colletin LOL Sacramento	~ # <u>318</u>	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 Plastering, Inc.			
	Name	John W. Kenyon, III			
	Address	P.O. Box 2077			
		North Highlands. CA 95660			
	Telephone Number	(916) 349-8191			
	Approved Contractor Nu	mber as issued by the Stucco Manufacturer: 1			
This is to certify that the stucce 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 authorited (esentative of stucco c	ontractor:,			
	Charles .	Date: 2/9/00/			
	* * * * * * * * * * * * * * * * * * *	- /			



WesPac



insulation

+ MASCO Company

#05 North Market Blvd., Ste. 11 • Sacramento, CA 95834 #16) 927-7149 • Fax (916) 927-4257 Lic. #487478

Installed Insulation Certificate

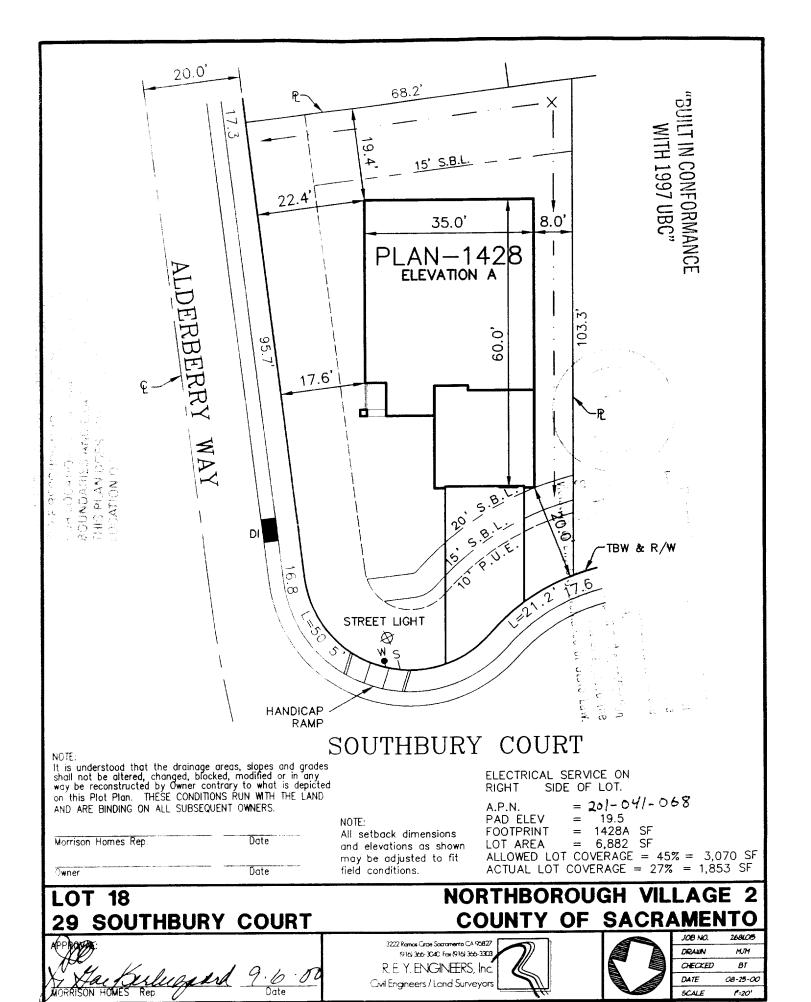
We certify that the building insulation listed herein is installed in conformance with current energy tensor cation organizations. California Administrative Code, Title 24, State of California

R FACTOR AREA TYPE INCHES/BAGS (BLOWN)

Certified by

Address or Lot Number

Date Installed



5: \6022 \015 \LOTOIB

f=20°

SCALE