

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9912285
Insp Area: 4

Site Address: 3665 FAR NIENTE WY SAC
Parcel No: LOT 43 GATEWAY WEST

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, MP1441, 7 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 _____ License Number 7100 Date 12/1/99 Contractor Signature A. Collins

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 _____ Applicant/Agent Signature A. Collins

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 State Farm Indemnity Policy Number CA 21651000414768 Exp Date 6/30/00

(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 _____ Applicant Signature A. Collins

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.

CERTIFICATION OF INSULATION

BEAZER

LOT # **43**

3665 Far Niente

Gateway West

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202028
- 1309 MELODY ROAD, MARYSVILLE, CA 95901 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


GENERAL PART AREA

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.
OCF	OCF	OCF
	BAGS	

13	35/16	38 38	12 1/4 14 3/4			
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MATERIAL FIBERGLASS	FORM BATTS	R VALUE	MANUFACTURER OCF
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MATERIAL FOAM	MANUFACTURER W R GRACE
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SIGNATURE—INSULATION CONTRACTOR 	TITLE MANAGER	DATE 1-4-00
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS



No 18859

INSTALLATION CARD

Job Address: *2434 Reflections*
Lot 43 Stucco
3605 Fox Niente

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

ICBO Evaluation Service, Inc.
 Report No. 3607
 Date of Job Completion *10/20/89*

Stucco Contractor Name: *Kenyon Construction*
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

Date

10/20/89

RESIDENTIAL BUILDING PERMIT APPLICATION

 New Construction

 Addition

 Remodels

 Other

 Project Address: 3665 Far Niente Way

Assessor Parcel # _____

OWNER INFORMATION:

 Legal Property Owner: BEAZER HOMES Phone # (916) 773-3888
 Owner Address: 3009 Douglas Blvd. #150, City ROSEVILLE, State Ca. Zip 95661
CONTRACTOR INFORMATION:

 Contractor: BEAZER HOMES Lic. # 724191 Phone # 773-3888 Fax # 773-0425
PROJECT INFORMATION:

 Land Use Zone R14 Occupancy Group R3 Construction Type VN Fed Code 14
 No. of stories: 1 No. of rooms: 5 Street width: _____
 1st Floor Area 1441 2nd Floor Area N/A Basement N/A Roof Material _____

AREA IN SQUARE FOOT OF:
EXISTING
NEW

 Dwelling/Living _____ 1441

 Garage/Storage _____ 439

 Decks/Balconies _____ 106

Carports _____

SCOPE OF WORK: _____

FOR OFFICE USE ONLY!

- | | | |
|---|---|--|
| <input type="checkbox"/> Information above complete | <input type="checkbox"/> AR Flood Waiver required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation files checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval |
| <input type="checkbox"/> Standard setbacks | <input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Special Fee Districts Apply : _____ |
| <input type="checkbox"/> County Sewer | | |

NEW STRUCTURES & ADDITIONS

*THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

- | | |
|---|---|
| <input type="checkbox"/> 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE | * Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures. |
| <input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA | |
| <input type="checkbox"/> Title 24 Energy Compliance documentation | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> Plan Review Fees |

Date: _____

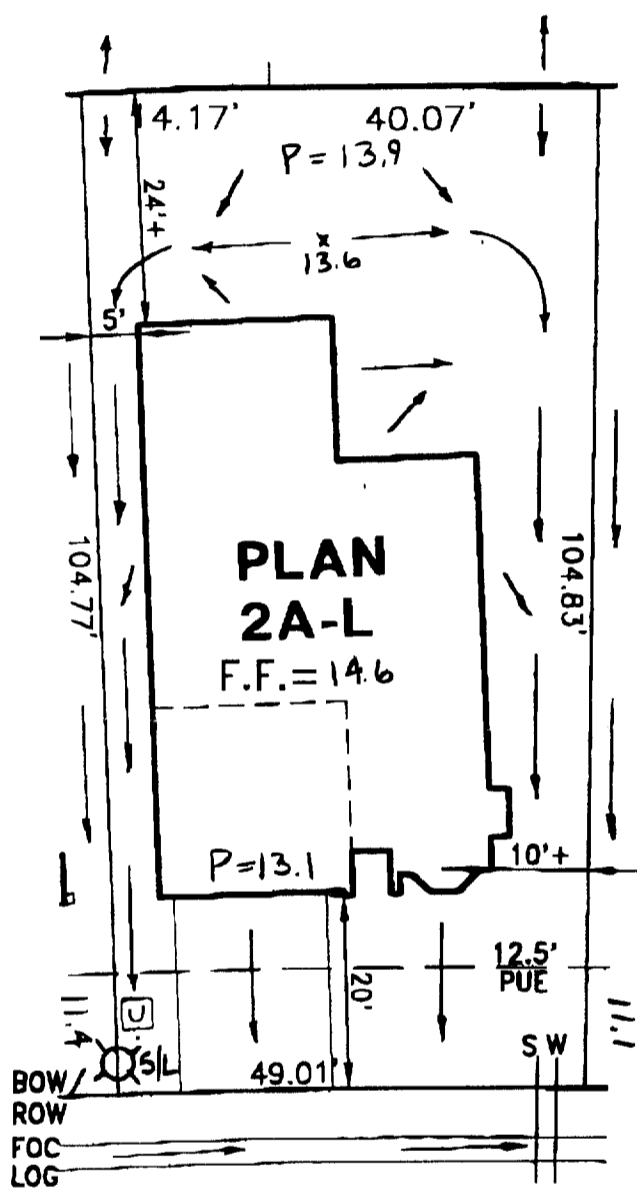
Received by: (staff) _____

ACTIVITY/PERMIT # _____

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.



SCALE: 1" = 20'



NIENTE WAY

ROUTING/APPROVAL		INITIALS
	✓	
President		
Project Development		
Construction	✓	<i>[Signature]</i>
Marketing	✓	<i>[Signature]</i>

U = UTILITY SERVICE BOX

LOT COVERAGE = 35%

PLOT PLAN
LOT 43
GATEWAY WEST-VILLAGE NO.4
FOR
BEAZER HOMES
SACRAMENTO CALIFORNIA

WOOD-RODGER INC.

DATE: SEPT.1999	DRAWN: D.P.B.	CHECKED: JLW 9-28-99	PROJECT NO: BEZ-026
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