

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0114067**  
**Insp Area: 4**  
Thos Bros:  
Sub-Type: NSFR  
Housing (Y/N): N

**Site Address: 4709 WYNDVIEW WY SAC**  
Parcel No: 225-1570-010 WESTBR. 1-1 LOT 33

CONTRACTOR  
WOODSIDE HOMES OF N. CALIF.  
15 AUTO PLAZA DR #102  
FOLSOM CA. 95630

OWNER

ARCHITECT

**Nature of Work: MP 2653 2 STORY 9 RM 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 \_\_\_\_\_ License Number 744379 Date 11-6-01 Contractor Signature Hector B...

**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 11-6-01 Applicant/Agent Signature Hector B...

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm under penalty of perjury one of the following declarations:  
HE 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 INSURANCE CO. OF THE WEST Policy Number WSL170169001 Exp Date 12/12/2001

\_\_\_\_ (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 forthwith comply with those provisions.

Date 11-6-01 Applicant Signature Hector B...

**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.**

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE** *10/31/01*  
 PERMIT AND CALCULATION SHEET

APPLICATION NO: **44CITY224**  
 GENERAL INFORMATION

BLDG PERMIT NO:  
 THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER

*paid 1/4/01*

*SWD2001-00797*

THIS PERMIT TO CONNECT EXPIRES  
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL	SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>
CSD-1	<i>600</i>	COMMERCIAL USE	<input checked="" type="checkbox"/> UNITS
SRCSD	<i>3500</i>		
CONSTRUCTION			
IN-LIEU			
<b>TOTAL FEE</b>	<i>4100</i>		

APN: 225-1570-010

DESCRIPTION/  
 SUBDIVISION: **Westborough Village I, Ph 1** LOT: **33**

PROPERTY ADDRESS: **4709 Wyndview Drive**

OWNER: **Woodside Westlake, Inc.**

MAILING ADDRESS: **15 Plaza Drive #102**

CITY-STATE-ZIP: **Folsom, CA 95630** PHONE: **608-9600**

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE: *Kenneth M. Roberts*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

**Natomas Unified School District**

1515 Sports Drive, #1 • Sacramento, CA 95834-1905  
 Phone 916/641-3300 • Fax 916/928-1629

**CERTIFICATION OF COMPLIANCE**  
**SCHOOL DISTRICT DEVELOPMENT FEES**

<b>PART I: TO BE COMPLETED BY APPLICANT</b>	
Property Owner's Name	Woodside Westlake, Inc.
Owner's Address	15 Plaza Drive #101 Elson, CA 95630
Project Address	4709 Wyndview Drive Lot 33
Parcel Number	225-1570-010
Subdivision Name	Westborough Village I, Phase I
Number of Units	1
Print Applicant's Name	Woodside Homes of CA, Inc. Applicant's Signature
Title of Applicant	Construction Admin.
Date	10/18/01 Telephone Number (916) 608-9600
<b>PART II: TO BE COMPLETED BY BUILDING DEPARTMENT</b>	
Plan Identification Number	01145678
Building Type (Check One)	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Apartment/Condominium <input type="checkbox"/> Commercial/Industrial
Square Feet of Chargeable Building Area	
Signature	
Title	Blndsp Date 10/20/01
<b>PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT</b>	
District Certification Number	02-451
Fees Collected:	
Residential:	2000 Sq. Ft. X \$ 37 = \$ 8887.55
Apartment/Condominium:	Sq. Ft. X \$ = \$
Commercial/Industrial:	Sq. Ft. X \$ = \$
<b>NOTICE TO APPLICANT:</b> 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, or to another public entity authorized to collect them on behalf of the District, whichever is earlier.	
Applicant Signature:	Date: 10/18/01

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 authorize Natomas Unified School District official, I hereby certify that the requirements of Government Code Section 95995 have been complied with by the above signed applicant.

SIGNATURE: Michael Morman DATE: 10/18/01  
 TITLE: Construction Admin. Michael Morman  
Facilities Planning Director

# CERTIFICATION OF INSULATION

PART I GENERAL  
PART II AREAS INSULATED  
PART III REMARKS

ADDRESS OR TRACT <b>WOODSIDE HOMES</b> LOT # <b>33</b>  <b>WESTLAKE</b>	SACRAMENTO INSULATION CONTRACTORS <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  DATE INSULATION COMPLETED
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WALLS		CEILING		FLOORS	
SQUARE FEET		SQUARE FEET		SQUARE FEET	
TYPE OF INSULATION		TYPE OF INSULATION		TYPE OF INSULATION	
MATERIAL <b>FIBERGLASS</b>		MATERIAL <b>FIBERGLASS</b>		MATERIAL <b>FIBERGLASS</b>	
FORM <b>BATTS</b>		FORM <b>BATTS &amp; BLOW</b>		FORM <b>BATTS</b>	
MANUFACTURER'S PRODUCT I.D.		MANUFACTURER'S PRODUCT I.D.		MANUFACTURER'S PRODUCT I.D.	
MANUFACTURER		MANUFACTURER		MANUFACTURER	
<b>OCF</b>		<b>OCF</b>		<b>OCF</b>	
BAGS					
R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS	R-VALUE INSTALLED	APPLIED THICKNESS
<b>13</b>	<b>3 5/8"</b>	<b>30</b> <b>30</b>	<b>9"</b> <b>12"</b>		

**KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE**

MATERIAL <b>FIBERGLASS</b>	FORM <b>BATTS</b>	R-VALUE	MANUFACTURER <b>OCF</b>
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**AIR INFILTRATION SEALANT**

MATERIAL <b>FOAM</b>	MANUFACTURER <b>W R GRACE</b>
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**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 Cobb</i>	TITLE <b>MANAGER</b>	DATE <b>2/28/02</b>
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS

# KwikKote

No. 200-005002

## Stucco System Installation Card

Job Name: WESTLAKE  
Address: 4709 WYNDVIEW DR.

Lot #: 0000033

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

ICBO Evaluation Service, Inc.  
Report No. 3607  
Date of Job Completion:

Home Builder: WOODSIDE HOMES  
Address: 15 PLAZA DR. #102  
FOLSOM, CA

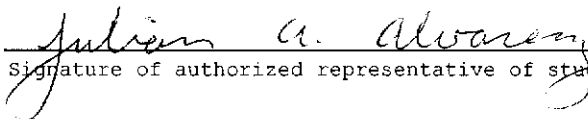
Stucco Contractor: KENYON PLASTERING, INC.  
Address: PO BOX 2077  
North Highlands, CA

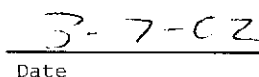
Telephone Number: 916/349-8191

Approved Contractor Number as  
issued by the Stucco Manufacturer: 1001

Card Print Date: 03/07/2002

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