

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0009230
Insp Area: 4

Site Address: 2419 WATERS EDGE WY SAC
Parcel No: 274-0510-029 RIVERWALK UNIT 1 LOT 29

Sub-Type: NSFR
Housing (Y/N): N

CONTRACTOR
MYERS HOMES INC.
3500 FITZGERALD RD.
RANCHO CORDOVA CA 95742

OWNER

ARCHITECT

Nature of Work: NSFR MP2421 8 RMS 1 STORY

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 744473 Date 8-11-00 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. 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 8-11-00 Applicant/Agent Signature [Signature]

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 RELiance NAT INS CO Policy Number NWAO154613-01 Exp Date 04/01/2001

_____, (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 8-11-00 Applicant Signature [Signature]

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.

W1
29 5

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction Addition Remodels Other

Project Address: 2419 WATER'S EDGE WAY Assessor Parcel # 274-0510-029
SACRAMENTO, CA 95833

OWNER INFORMATION:

Legal Property Owner: MYERS HOMES OF CALIFORNIA, LLC Phone # 916-851-0530
 Owner Address: 3300 FITZGERALD RD CITY RANCHO CORDOVA State CA Zip 95742

CONTRACTOR INFORMATION:

Contractor: MYERS HOMES, INC. Lic. # 744473 Phone # 916-851-0530 Fax # 916-851-0535

PROJECT INFORMATION:

Land Use Zone R-1A RD Occupancy Group R-3 Construction Type VN Fed Code 1A
 No. of stories: 1 No. of rooms: 13 Street width: 50 FT
 1st Floor Area 2421 2nd Floor Area N/A Basement N/A Roof Material TILE

AREA IN SQUARE FOOT OF:

EXISTING

NEW

Dwelling/Living	_____	<u>2421</u>
Garage/Storage	_____	<u>609</u>
Decks/Balconies	_____	<u>192 COVERED FRONT PORCH</u>
Carports	_____	_____

SCOPE OF WORK: NEW CONSTRUCTION OF SINGLE FAMILY RESIDENCE ; RIVERWALK
SERIES II, PLAN 5 / 2421 # IN MASTER PLAN COMMUNITY P99-075

P97-005 AMEND B

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

- PLOT 8.5' x 11" DRAINAGE INFO
- 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.*
 - 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA
 - Title 24 Energy Compliance documentation
 - 11" x 17" copy of floor plan for County Assessor
 - Grading and Erosion Control Questionnaire
 - Plan Review Fees

Date: _____

Received by: (staff) _____

ACTIVITY/PERMIT # _____

CERTIFICATION OF INSULATION

PART I GENERAL
PART II AREAS INSULATED
PART III CERTIFICATE

ADDRESS OR TRACT <div style="font-size: 2em; font-family: cursive;">MEYERS</div> <div style="font-size: 2em; font-family: cursive;">RIVER WALK</div>	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		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 ID		MANUFACTURER'S PRODUCT ID			MANUFACTURER'S PRODUCT ID	
MANUFACTURER		MANUFACTURER			MANUFACTURER	
OCF		OCF			OCF	
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT	R - VALUE INSTALLED	APPLIED THICKNESS
13	3 5/8"	30 30	9" 12"			
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE						
MATERIAL FIBERGLASS		FORM BATTS		R VALUE 19	MANUFACTURER OCF	
AIR INFILTRATION SEALANT						
MATERIAL FOAM				MANUFACTURER W R GRACE		

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

SIGNATURE - INSULATION CONTRACTOR <div style="font-size: 1.5em; font-family: cursive;">Bill Hirschgo</div>	TITLE MANAGER	DATE 11-13-00
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

OMEGA PRODUCTS CORP.

GLASSING WALL INSULATED FRAME SYSTEM

JOB NUMBER:

ICB Report #A214

Lot 29
2419 WATERS WOODWAY

Date of Job Completion 11-14-00

PLASTER CONTRACTOR:

Name: Masabi Plastering
Address: Box 355, Lumberton, GA 30548
Telephone No: (770) 845-7337
Contractor Number of Dimpled Wall System 2150

This is to certify that the exterior covering system on the building exterior as the above address has been installed in accordance with the evaluator report specified above and the manufacturer's instructions.

11/16/00
Signature of Installer Representative or
Plastering Contractor

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

PLAN 4 ROOF VENTILATION REQUIRED

ROOF 2966 / 300 PER UBC 1505.3
9.85 SQ. FT. X 144 SQ. IN.
1,419 SQ. IN. FREE AREA REQUIRED
ROOF VENTS @ 135 SQ. IN.
3 1/2" X 22 1/2" G.I. EAVE VENT = 47 SQ. IN.

9 BAYS @ 47 SQUARE INCHES = 423 SQ. INCHES
8 ROOF VENTS @ 135 SQ. INCHES = 1080 SQ. INCHES

1,503 SQ. INCHES PROVIDED

PLAN 6 ROOF VENTILATION REQUIRED

ROOF 2398 / 300 PER UBC 1505.3
7.99 SQ. FT. X 144 SQ. IN.
1,151 SQ. IN. FREE AREA REQUIRED
ROOF VENTS @ 135 SQ. IN.
ATTIC VENTS 14x30 @ 216 SQ. IN.
3 1/2" X 22 1/2" G.I. EAVE VENT = 47 SQ. IN.

4 BAYS @ 47 SQUARE INCHES = 188 SQ. INCHES
4 ROOF VENTS @ 135 SQ. INCHES = 540 SQ. INCHES
2 ATTIC VENT @ 216 SQ. INCHES = 432 SQ. INCHES

1,160 SQ. INCHES PROVIDED

PLAN 5 ROOF VENTILATION REQUIRED

ROOF 3229 / 300 PER UBC 1505.3
10.76 SQ. FT. X 144 SQ. IN.
1,550 SQ. IN. FREE AREA REQUIRED
ROOF VENTS @ 135 SQ. IN.
ATTIC VENTS 14x30 @ 216 SQ. IN.
3 1/2" X 22 1/2" G.I. EAVE VENT = 47 SQ. IN.

4 BAYS @ 47 SQUARE INCHES = 188 SQ. INCHES
9 ROOF VENTS @ 135 SQ. INCHES = 1215 SQ. INCHES
1 ATTIC VENT @ 216 SQ. INCHES = 216 SQ. INCHES

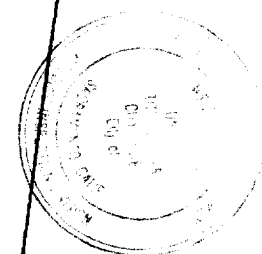
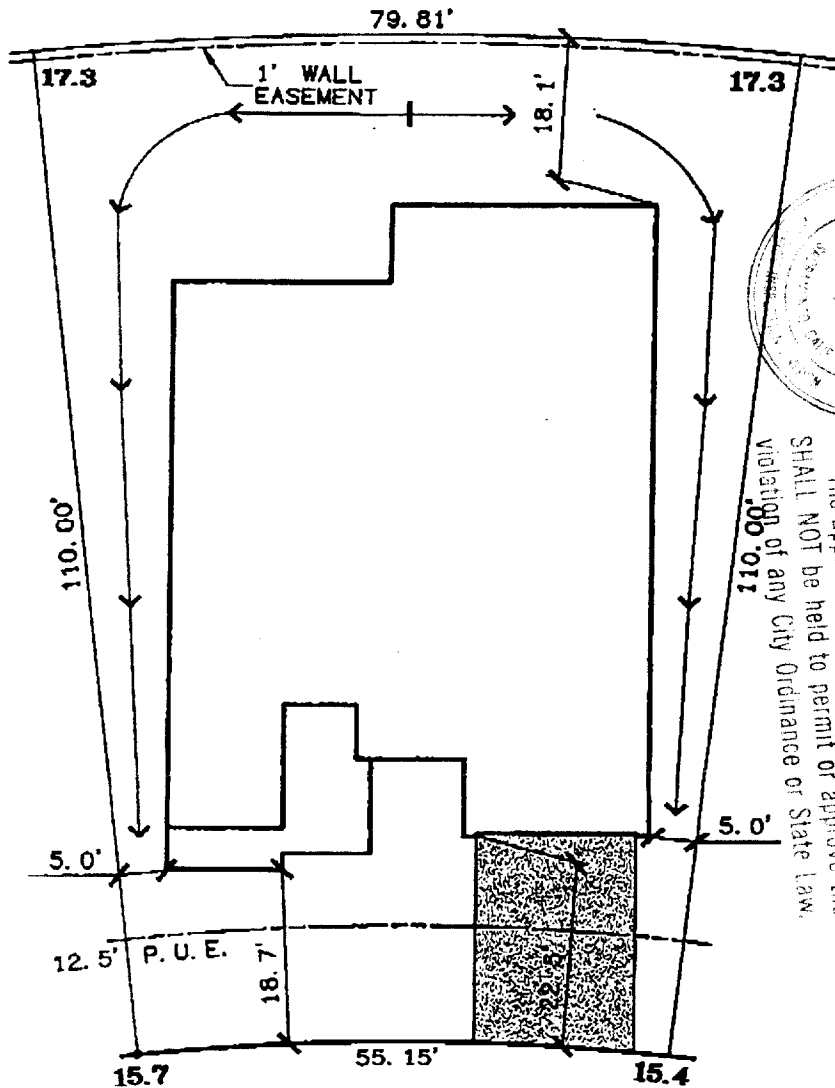
1,619 SQ. INCHES PROVIDED

PLAN 6 W/ BONUS ROOM ROOF VENTILATION REQUIRED

ROOF 2398 / 300 PER UBC 1505.3
7.99 SQ. FT. X 144 SQ. IN.
1,151 SQ. IN. FREE AREA REQUIRED
ROOF VENTS @ 135 SQ. IN.
ATTIC VENTS 14x30 @ 216 SQ. IN.
3 1/2" X 22 1/2" G.I. EAVE VENTS = 47 SQ. IN.

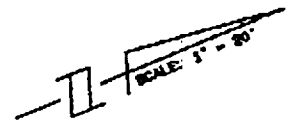
7 BAYS @ 47 SQUARE INCHES = 329 SQ. INCHES
3 ROOF VENTS @ 135 SQ. INCHES = 405 SQ. INCHES
2 ATTIC VENT @ 216 SQ. INCHES = 432 SQ. INCHES

1,166 SQ. INCHES PROVIDED



The lot, plans and specifications must be approved by the City at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.
 The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

WATERS EDGE WAY



DATE: 8-7-00

A.P.N.:

ADDRESS: WATERS EDGE WAY

LOT AREA: 7,439 SF
LOT COVERAGE: 41%

The Splink Corporation
 2590 VENTURE OAKS WAY
 SACRAMENTO, CA 95833
 PH:(916)925-5550 FAX:(916)921-9274

**RIVERWALK
 UNIT NO. 1
 LOT 29
 PLAN 2421B**

RIVERWALK
 CITY OF SACRAMENTO, CA.
 CLIENT: MYERS HOMES
 JOB NO.: 1456-001