

**CITY OF SACRAMENTO**

**Permit No: 0111998**

**1231 I Street, Sacramento, CA 95814**

**Insp Area: 4**

**Site Address: 5046 TUCKERMAN WY SAC**

**Thos Bros:**

**Parcel No: 225-1510-020**

**NORTHPOINTE PARK VIL. 17 LOT 20**

**Sub-Type: NSFR**

**Housing (Y/N):**

**N**

**CONTRACTOR**

**OWNER**

**ARCHITECT**

JOHN LAING HOMES  
1536 EUREKA RD STE 100  
ROSEVILLE CA. 95661

**Nature of Work: MP 1645/OPT 2 STORY 9 ROOM 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 B License Number 687596 Date 9/20/01 Contractor Signature D. 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 9/20/01 Applicant/Agent Signature D. 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 EAGLE PACIFIC INSURANCE COMPAN Policy Number 1S0002200 Exp Date 04/15/2002

(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 9/20/01 Applicant Signature D. 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.**

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction
- Addition
- Remodels
- Other

0001998

Project Address: 5046 Suckerman Way Assessor Parcel # 225-1510-020

OWNER INFORMATION: Lot 20

Legal Property Owner: John Laing Homes Phone # 780-1222  
 Owner Address: 1536 Curca Rd. #100, City Rossville, State Ca. Zip 95661

CONTRACTOR INFORMATION: Northpointe Park Unit #17

Contractor: John Laing Homes Lic. # 687596 Phone # 780-1222 Fax# 780-1333

PROJECT INFORMATION:

Land Use Zone _____	Occupancy Group _____	Construction Type <u>VN</u>	Fed Code <u>A1</u>
No. of stories: <u>1</u>	No. of rooms: <u>9</u>	Street width: _____	
1 <sup>st</sup> Floor Area <u>1895</u>	2 <sup>nd</sup> Floor Area _____	Basement _____	Roof Material _____

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>1895</u>
Garage/Storage	_____	<u>417</u>
Decks/Balconies	_____	<u>104</u>
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 # \_\_\_\_\_

# OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

ICBO Report #4004

5046 Tucker Manway  
Sac CA, 95835

Date of Job Completion 3-18-62

PLASTERING CONTRACTOR:

Name: STUCCO WORKS INC.

Address: 5900 WAREHOUSE WAY, SACRAMENTO, CALIFORNIA 95826


Telephone No: (916) 383-6699

Contractor Number of Diamond Wall System 2175

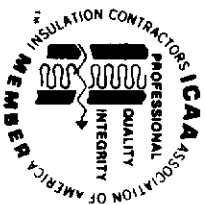
This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

4-10-62

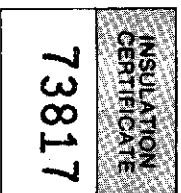
Date

  
Signature of authorized representative of  
Plastering Contractor

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



**INSULATION CONTRACTORS  
ASSOCIATION  
OF AMERICA**



1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

John Kang LOT # 20 TRACT # CAllyss

STREET 5046 TOLKEMAN CITY SULLYWOODS

**EXTERIOR WALLS:**

MANUFACTURER FE THICKNESS/TYPE 3 5/8 R- VALUE 13

**CEILINGS:**

BATTS: MANUFACTURER FE THICKNESS/TYPE 1 1/2 R- VALUE 30

BLOWN IN: MANUFACTURER CF MINIMUM THICKNESS 1 1/2 R- VALUE 30

SQUARE FOOTAGE COVERED 1562 NUMBER OF BAGS USED 29

FLOORS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

SLAB ON GRADE: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

WIDTH OF INSULATION \_\_\_\_\_ INCHES

FOUNDATION WALLS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_ DATE \_\_\_\_\_  
CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

INSULATION CONTRACTOR **ARCADE INSULATION**

CALIFORNIA CONTRACTORS LICENSE #263784

DATE 2-22-02

John Kang SIGNATURE Inspector TITLE

# SIGNET

Testing Labs, Inc.

DATE: 1-11-02  
 PROJECT NO. 9953  
 PROJECT: J.B. / CALYPSO LOT #20  
 LOCATION: 5046 Tuckerman

DSA FILE/APPL. NO. \_\_\_\_\_  
 OSHPD NO. \_\_\_\_\_  
 PERMIT NO. \_\_\_\_\_  
 WEATHER: \_\_\_\_\_ TEMP: \_\_\_\_\_

PROOF LOAD     TORQUE     WITNESSING

Testing was performed on the following items. All tests were performed with the following calibrated equipment:

RAM: \_\_\_\_\_ GAGE: \_\_\_\_\_ TORQUE WRENCH: \_\_\_\_\_  
 RAM: \_\_\_\_\_ GAGE: \_\_\_\_\_ TORQUE WRENCH: \_\_\_\_\_

LOCATION OF TEST	TYPE / SIZE	# TESTED	% of TOTAL	LOAD lb or Ft Lbs	GAGE (PSI)	# ACC.	# REJ.	# RETEST

Type of epoxy grout used: SIMPSON SET-EE Method of application / cleaning: AIR/BRUSH  
 Visual inspection was performed on THE PLACEMENT OF ONE 3/8" O.D. ALL-THREAD IN A PRE-DRILLED AND CLEANED HOLE 3/4" DIA X 10" MIN EMBEDMENT AT A HITTER PILE LOCATION

Show up / Stand by time. Job Canceled / Delayed due to: \_\_\_\_\_  
 All non-compliance items were brought to the attention of: \_\_\_\_\_ at the job site.

NON-COMPLIANCE REPORT ATTACHED     ADDITIONAL TESTS ATTACHED

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

To the best of my knowledge, the above WAS NOT performed in accordance with the approved plans, specifications, and regulatory requirements.

Superintendent/Representative: \_\_\_\_\_ Inspector: [Signature]

