CITY OF SACRAMENTO 1231 I Street, Sacramento, CA 95814

Site Address: 5380 CALABRIA WY SAC

Parcel No:

NORTHPOINTE PARK VIL. 20 LOT 94

OWNER

Permit No: 0215334 Insp Area: 4

Insp Area: Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

ARCHITECT

CONTRACTOR
LENNAR RENAISSANCE INC
2240 DOUGLAS BL
ROSEVILLE, CA 95661

Nature of Work: LENNAR MP322 1 STORY 8 ROOM SFR

the work for which this permit is issued	AGENCY: I hereby affirm under pent (Sec. 3097, Civ. C).	alty of perjury that there is a co	onstruction lending agen	cy for the performance of
Lender's Name	Le	nder'sAddress		
(commencing with section 7000) of Dr	DECLARATION: I hereby affirm vision 3 of the Business and Professions per 732348 Date	Code and my license is in full	force and effect.	provisions of Chapter 9
OWNER-BUILDER DECLARA reason (Sec. 7031.5, Business and Prof	TION: I hereby affirm under penalty fessions Code; any city or county which pplicant for such permit to file a signed with Section 7000) of Division 8 of the	of perjury that I am exempt fr requires a permit to construct, statement that he or she is lices	om the contractors Licer alter, improve, demolish unsed pursuant to the pro-	h, or repair any structure
I, as a owner of the property, or sale (Sec. 7044, Business and Profession who does such work himself or herself the building or improvement is sold with the purpose of sale.)	of through his/her own employees, pro-	w does not apply to an owner of wided that such improvements	of property who builds o	or improves thereon, and
I, as owner of the property, am The Contractors License Law does not a licensed pursuant to the Contractors Licensed	exclusively contracting with licensed or apply to an owner of property who build ense Law).	ontractors to construct the proj ds or improves thereon, and wh	ect (Sec. 7044, Busines, to copy and for such pro	s and Professions Code: igets with a contractor(s)
I am exempt under Sec	B & PC for this reason:	1 m		
	Owner Signature		1 0 4 5005	
IN ISSUING THIS BUILDING PER measurements and locations shown on private agreement relating to permissibl improvement or the violation of any priv	the application or accompanying draw- le or prohibited locations for such impro-	ings and that the improvement	to be confident, that to be confidented does not authorize an	the applicant verified all not violate any law or y illegal location of any
I certify that I have read this application building construction and herby authoriz Date	and state that all information is correct. e representative(s) of this city to enter u Applicant/Agent Signature	pon the abovementioned prope	and county ordinances	and state laws relating to es.
WORKER'S COMPENSATION	DECLARATION: I hereby affirm to cate of consent to self-insure for worker	under penalty of perjury one of	the following declaration for by Section 3700 of the	ns: he Labor Code, for the
I have and will maintain workers this permit is issued. My workers comp	compensation insurance, as required be ensation insurance carrier and policy nur	y Section 3700 of the Labor C mber are:	Code, for the performance	e of the work for which
Carrier OLD REPUBLIC IN	S. CO. Policy N	Number MWC10815000	Exp Date	11/01/2002
(This section need not be complet not employ any person in any manner so workers' compensation provisions of Sec	ed if the permit is for \$100 or less) I ce as to become subject to the workers' co tion 3700 of the Labor Code, I shall forth	mpensation laws of California	and agreet that if I should	permit is issued, Ishall d become subject to the
Date 11-4-02	Applicant Signature_	-1/2	AME1	<i>-</i>
WARNING: FAILURE TO SECURE CRIMINAL PENALTIES AND CIVIL COMPENSATION DAMAGES AS PROCESSES.	FINES UP TO ONE HUNDRED T	FRAGE IS UNLAWFUL AT THOUSAND DOLLARS (\$10	, ND SHALL SUBJECT 00,000) IN ADDITION	AN EMPLOYER TO 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: 5380 CAL	ABRIA WAY Assessor Parcel #	201-0540-008
Lot Number: 94	ABRIA WAY Assessor Parcel #Subdivision_North	HPOINTS PARK VILLAGE#2
OWNER INFORMATION:	MONTHOINTE PANK VIL	LAGE #20 PHASE 1,2
Legal Property Owner: LEN	MAR/WIHHCREST Ph	one#_773~7471
Owner Address: 2240 Aoua	ins Blub City ROSEVILLE	State CA Zip 9 5661
8		
CONTRACTOR INFORM	IATION:	<i>UZIS334</i>
Contractor: WIHNCREST	Lic. # <u>732345</u> Phone #	‡ <u>773-747 </u> Fax
PROJECT INFORMATION:		•
·	upancy Group R3 Construction Ty	·
No. of Stories: OME	No. of Rooms: Str	eet Width: 401
1 st Floor Area 1507 2 nd Floo	or Area A Basement H/A	Roof Material TILE
AREA IN SQUARE FOOT OF:	'	·
D	welling/Living /507	
Ga	arage/Storage <u>440</u>	
De	ecks/Balconies	
Ca	rports	
SCOPE OF WORK:	1P# 3ZZ	
<u></u>	IEW CONSTRUCTION	5 FD
☐ Information Above Complete	□ AR Flood Waiver Required	D Planning Annual
□ Violation Files Checked	☐ Flood Elevation Certificate Required	
□ Standard Setbacks □ County Sewer	☑ Water Development Infill Area	□ Special Fee Districts Apply:
→THE FOLLOWING MUST BE	PROVIDED IN ORDER TO SUBMIT FOR PERM	IT+<
2 COMPLETE PLOT PLANS, LEGIBLE	& DRAWN TO SCALE	
a) Assessors Parcel Number	FOLLOWING INFORMATION c) Owners Name	
b) New Floor Area	d) Project Address	



INSULATION CONTRACTORS ASSOCIATION OF AMERICA

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1321 DUKE STREET, SUITE 303 • A	1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356
THIS IS TO CERTIFY THAT INSULATION HAS CURRENT ENERGY REGULATIONS, CALIFORN CALIFORNIA, IN THE BUILDING LOCATED AT:	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:
Wandy Boarday	LOT # 94 TRACT # AND WAY THE
STREET 5390 Calabria Wan	CITY_
EXTERIOR WALLS:	
MANUFACTURER	THIOKNESS/TYPE
BATTE:	THICKNESS/TYPE CONTINUE TO VALUE TO VAL
MANUFACTURER C.F.T	THICKNESS VALUE 38
SQUARE FOOTAGE COVERED 1017	_NUMBER OF BAGS USED
MANUFACTURER	THICKNESS/TYPE VALUE
SLAB ON GRADE: MANUFACTURER	THICKNESS/TYPE YALUE
WIDTH OF INSCLATION	INCHES
MANUFACTURER	THICKNESS/TYPE VALUE VALUE
GENERAL CONTRACTOR	
	DATE

INSULATION CONTRACTOR ARCADE INSULATION CALIFORNIA CONTRACTORS LICENSE #815298

SIGNATURE

HILLE

NEVADA CONTRACTORS LICENSE #55201

SIGNATURE

CAUTIE CONTRACTOR

KwikKote

Stucco System

Installation Card

Job Name: AMBER LANE @ REGENCY PARK

Address: 5380 CALABRIA WAY

SACRAMENTO,

Lot #: 0094-20

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: LENNAR RENAISSANCE/WINNCREST

Address: 2240 DOUGLAS BLVD #250

ROSEVILLE, 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: 01/15/2003

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

6-5-03 Date

Certification of Compliance

School District Development Fees

PART I To be completed by APPLICANT	· ·				
Owner's Name & Address <u>CE HARA WINNERS</u>	ST 2240 HOIGEA. BIND POPULLE				
Project Address <u>5380 CALABRIA (</u>	WAN				
Parcel Number 2010540-008 Lot No. 90 •					
Subdivision Name MATHROLLE MARK VILLAGE ZONumber of Units OHE					
Applicant's Signature & Title					
Date <u> </u>	Phone No. <u>5.43.3531</u>				
NOTICE TO APPLICANT: Pursuant to Goverment Code Section period in which you may protest the fees or other payment idention installation permit for this project is issued or on which they are proplect them on behalf of the district(s), whichewver is earlier.	fied above will begin to run on the date in which the building or				
PART II To be completed by BUILDING DEI	PARTMENT				
Plan Identification Number 322 Square Feet of Chargeable Building Area 50 Signature	Building Type (CHECK ONE) (**) Residential (**) Apartment / Condominium (**) Commercial / Industrial				
	Date / Commercial I Industrial				
PART III To be completed by SCHOOL DIST	Date				
PART III To be completed by SCHOOL DIST Grant Joint Union High School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM	Pobla Elementary School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM				
PART III To be completed by SCHOOL DIST Grant Joint Union High School District District Certification No. EXEMPT Comments	TRICTS Robia Elementary School District District Certification No. EXEMPT Comments				
PART III To be completed by SCHOOL DIST Grant Joint Union High School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM	Pobla Elementary School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM				
PART III To be completed by SCHOOL DIST Grant Joint Union High School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM Sq. Ft. X \$ 2.12 = \$ 2.14	Pobla Elementary School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM Sq. Ft. X \$ = \$				
PART III To be completed by SCHOOL DIST Grant Joint Union High School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM Sq. Ft. X \$ = \$	Flobia Elementary School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM Sq. Ft. X \$ = \$ COMMERCIAL / INDUSTRIAL Sq. Ft. X \$ = \$				
PART III To be completed by SCHOOL DIST Grant Joint Union High School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM Sq. Ft. X \$ = \$	Pobla Elementary School District District Certification No. EXEMPT Comments RESIDENTIAL / APARTMENT / CONDOMINIUM Sq. Ft. X \$ = \$ COMMERCIAL / INDUSTRIAL Sq. Ft. X \$ = \$				

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

	GRANT	Authorized School	District Official ROBLA
Signature 🗶	10 4° 1	Francis	Signature
Title	<u> </u>		Title
Date \\	() () () () () () () () () ()		Date

Original:

Grant Joint Union High School District

1st Copy:

Robla Elementary School District

2nd 3rd Copy: **Building Department**

Applicant

GJUHSD: Facilities Planning and Construction Department Certificate of Compliance Form (rev. 4/97) bep

