

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0209218
Insp Area: 4
Thos Bros:
Sub-Type: NSFR
Housing (Y/N): N

Site Address: 9 NELLIS CT SAC
Parcel No: 225-1710-008

NORTHPT PK 15-2 LOT 10

CONTRACTOR

US HOME
2366 GOLD MEADOW DR STE 100
GOLD RIVER, CA 95670 77041

OWNER

ARCHITECT

Nature of Work: NSFR MP3540 2 STORY 11 RMS

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 451839 Date 7/23/02 Contractor Signature Don McClabrey

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 above-mentioned property for inspection purposes.

Date 7/23/02 Applicant/Agent Signature Don McClabrey

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.

X 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 OLD REPUBLIC INS. CO. Policy Number MWC10815000 Exp Date 11/01/2002

____ (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 7/23/02 Applicant Signature Don McClabrey

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 SUBDIVISION BUILDING PERMIT APPLICATION

Project Address: 9 Nellis Ct.

Assessor Parcel # 225-1710-~~018~~⁰⁰⁸

Lot Number: 10

Subdivision Northpoint Park Village 15-2

OWNER INFORMATION:

Legal Property Owner: <u>US Home</u>	Phone# <u>(916) 858-3900</u>
Owner Address <u>2366 Gold Meadow Way</u>	City <u>Gold River</u> State <u>CA</u> Zip <u>95670</u>

CONTRACTOR INFORMATION:

Contractor: <u>US Home</u>	Lic. # <u>451839</u>	Phone # <u>(916) 858-3900</u>	Fax <u>(916) 858-3925</u>
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Don McCloskey (916) 719-9050

PROJECT INFORMATION:

Land Use Zone <u>R1A</u>	Occupancy Group <u>R3</u>	Construction Type <u>VN</u>	Fed Code <u>1A</u>
No. of Stories: <u>2</u>	No. of Rooms: <u>11</u>	Street Width: _____	
1 st Floor Area <u>2732</u>	2 nd Floor Area <u>808</u>	Basement _____	Roof Material _____
AREA IN SQUARE FOOT OF:			
Dwelling/Living	<u>3540</u>	<u>US 3540</u>	
Garage/Storage	<u>660</u>	<u>\$ 227,311.80</u>	
Decks/Balconies	_____	<u>0209218</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	_____	
THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PERMIT		
<input type="checkbox"/> 2 COMPLETE PLOT PLANS, LEGIBLE & DRAWN TO SCALE		
<input type="checkbox"/> 11 X 17 COPY OF FLOOR PLAN WITH FOLLOWING INFORMATION		
a) Assessors Parcel Number	c) Owners Name	
b) New Floor Area	d) Project Address	

CERTIFICATION OF INSULATION

PART I GENERAL	ADDRESS OR TRACT	SACRAMENTO BUILDING PRODUCTS
	US Homes North Point LOT # 210	<input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202028 <input type="checkbox"/> 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026 <input type="checkbox"/> P.O. BOX 9681, FRESNO, CA 93793-9681 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

WALLS			CEILING			FLOORS		
SQUARE FEET			SQUARE FEET			SQUARE FEET		
TYPE OF INSULATION			TYPE OF INSULATION			TYPE OF INSULATION		
FIBERGLASS			FIBERGLASS			FIBERGLASS		
FORM			FORM			FORM		
BATTS			BATTS & BLOW			BATTS		
MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.			MANUFACTURER'S PRODUCT I.D.		
MANUFACTURER			MANUFACTURER			MANUFACTURER		
CT	OC	JM	CT	OC	JM	CT	OC	JM
R-VALUE INSTALLED			R-VALUE INSTALLED			R-VALUE INSTALLED		
APPLIED THICKNESS			APPLIED THICKNESS			APPLIED THICKNESS		
13			38 38			12 1 3/4		

KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE

MATERIAL	FORM	R-VALUE	MANUFACTURER		
FIBERGLASS	BATTS		CT	OC	JM

AIR INFILTRATION SEALANT

MATERIAL	MANUFACTURER	
Form	HILTI	HANDY FOAM

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

SIGNATURE — INSULATION CONTRACTOR	TITLE	DATE
<i>je</i>	MANAGER	12-4-02
SIGNATURE — GENERAL CONTRACTOR	TITLE	DATE

REMARKS



O'Connor Freeman & Associates, Inc.

Structural Engineering Services

August 30, 2002

Chris Wyly
US Home Corporation
 2366 Gold Meadow Way, Suite 200
 Gold River, CA 95670

Post-it® Fax Note	7671	Date	8-30-02	# of pages	10
To	Chris Wyly	From	Karl Freeman		
Co./Dept.	US Home	Co.	OFA		
Phone #	825-4499	Phone #	441-5721		
Fax #	515-0226	Fax #	441-5697		

Re: Shear Wall Length Adjustment for Plan 3540: Northpointe Subdivision
 O'Connor Freeman Job Number: E001001

Dear Chris:

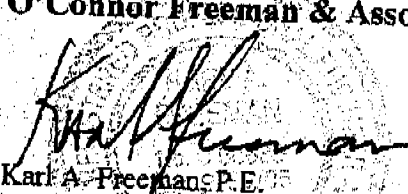
You contacted our office regarding the shear walls in the master bedroom of Plan 3540 in the Northpointe subdivision. Specifically, you indicated the shear wall at the master bedroom closet was shifted below the second floor beam. As a result of this shift, the framer used LTP4 clips to attach the shear walls to the floor beam in lieu of the detail 'A' or the typical shear transfer. Based upon these adjustments, you needed our office to provide you with a letter addressing these changes for the Building Department.

In response to this request, we have revised our plans to reflect these minor adjustments. See the attached partial plan exhibit for reference and review. With regards to the attachment of the first floor shear wall to the floor beam 'FB1', the use of the LTP4 clips is acceptable provided the clips are not spaced greater than 12-inches on center.

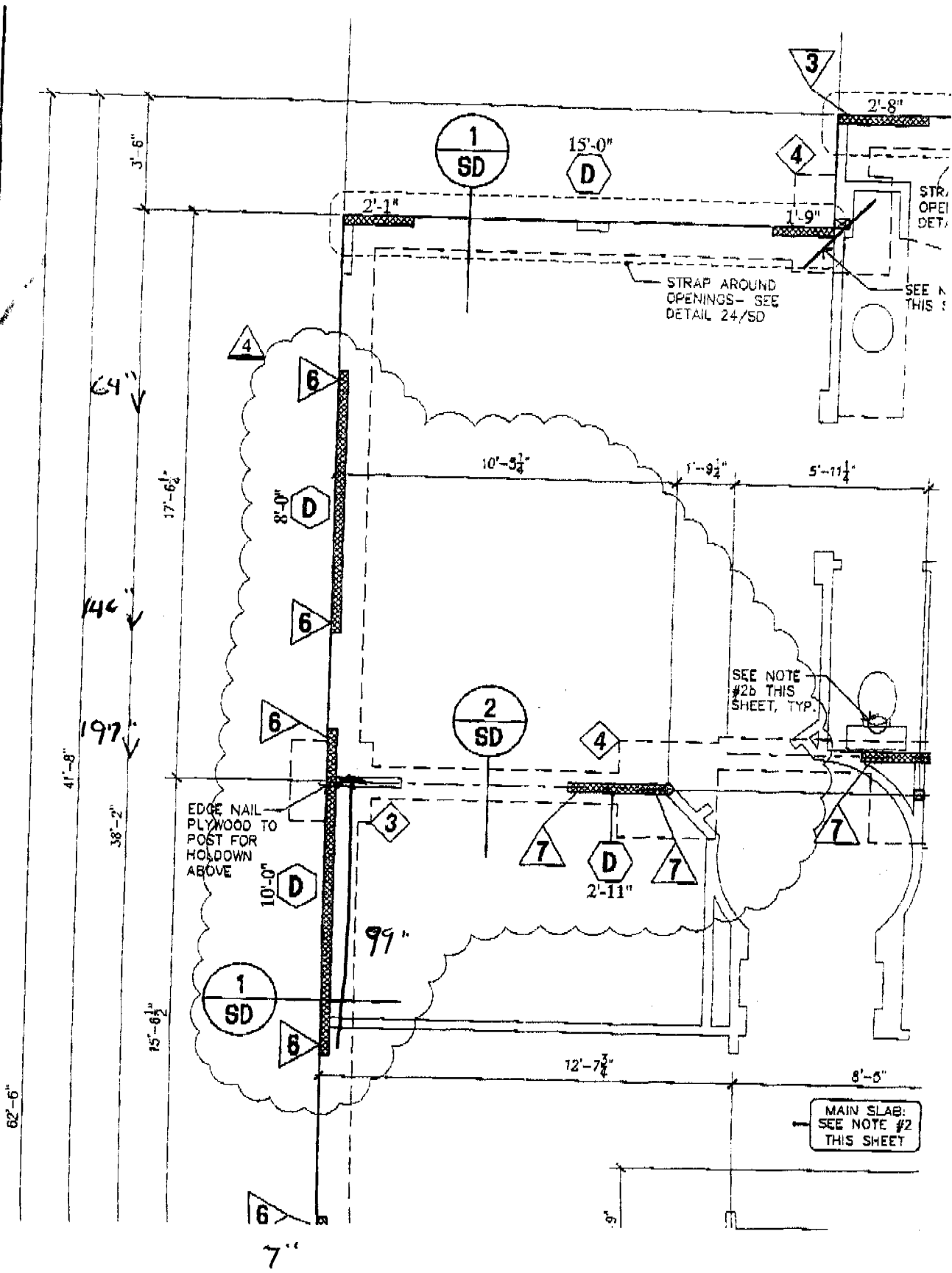
Make sure the two original wet stamped and signed copies of this letter are submitted to the Building Inspector or Building Department for review and approval. If you should have any further questions or comments please do not hesitate to call.

Sincerely,

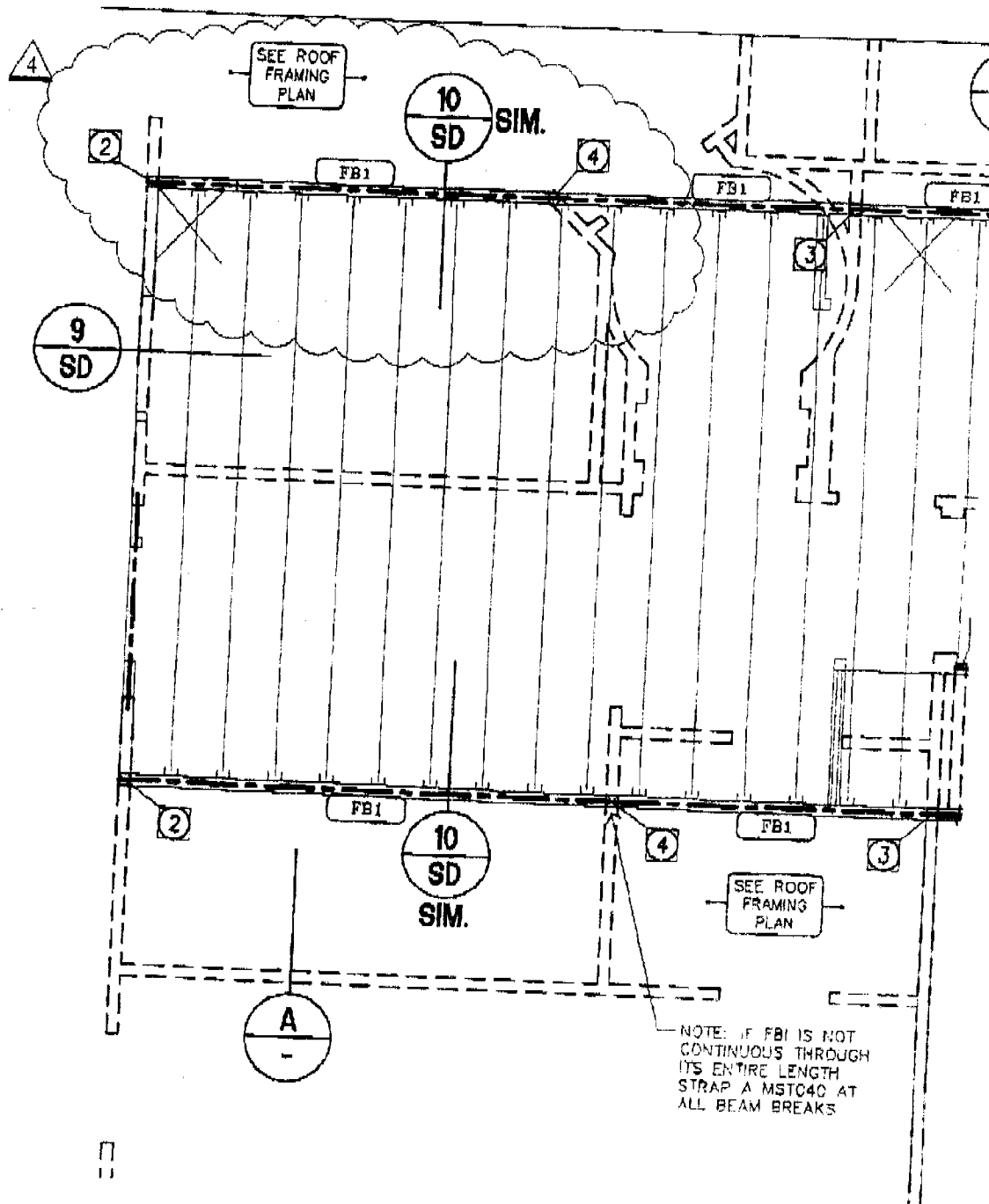
O'Connor Freeman & Associates, Inc.


 Karl A. Freeman, P.E.

Enclosure: (3) Partial Plan Exhibit and (2) Structural Calculations
 cc: File



LAYOUT 2 1/2" x 1/4" AT 1/8" = 1'-0" (SEE SHEET 24/SD)



08/30/2002 15:23 9154415697

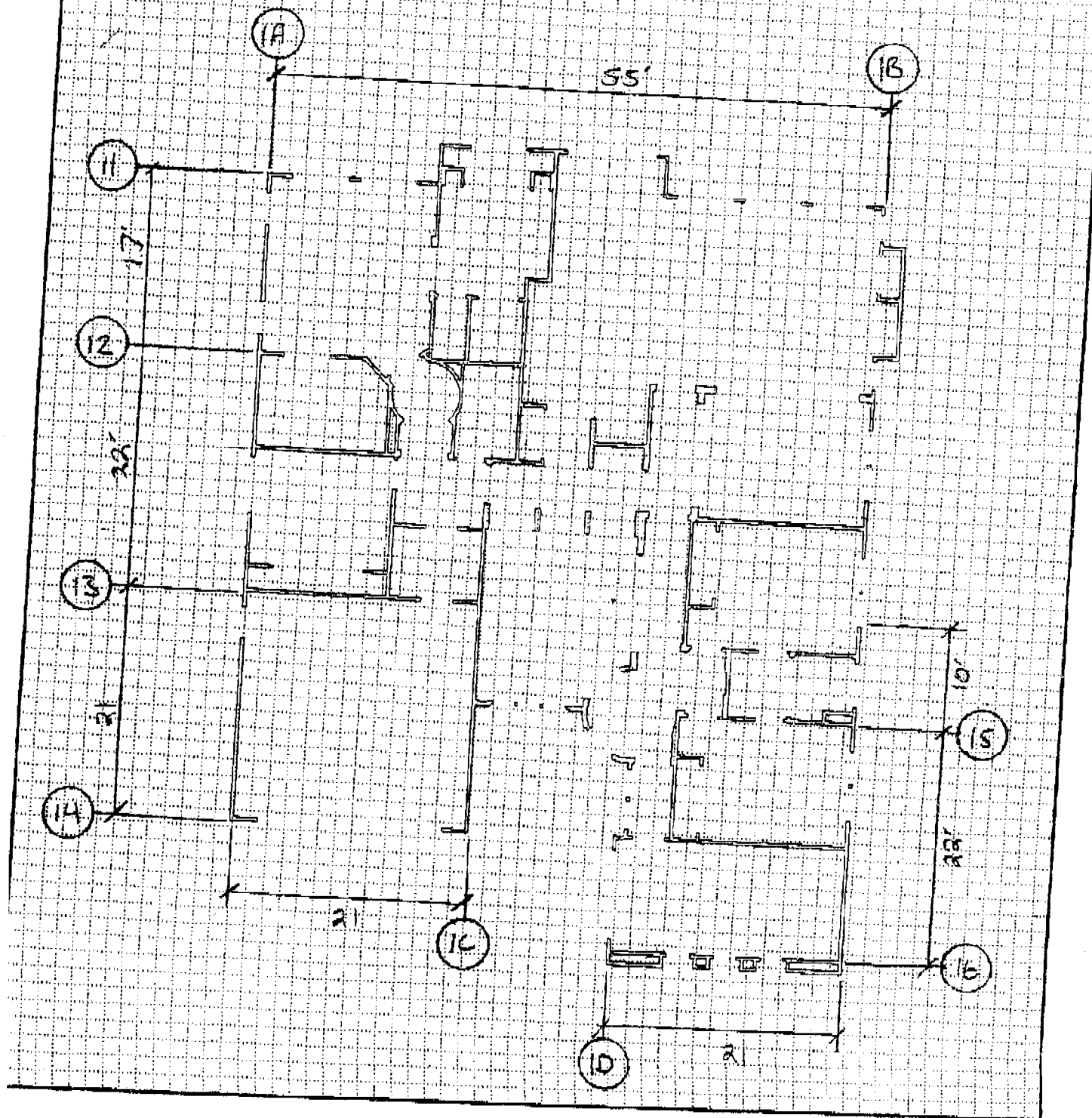



O'Connor Freeman & Associates

Structural Engineering Services
1912 F Street, Suite 120, Sacramento, CA 95814 Phone: (916) 441-5721 Fax: (916) 441-5607

Date	Sheet	Of
	23	101
Job#	By	Revised

Building Schematic - 1st FLR



E ADER																					
	<h1>Plan 3540</h1>																				
	REVISIONS																				
	<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 10%;">DESCRIPTION</th> <th style="width: 10%;">BY</th> </tr> </thead> <tbody> <tr> <td> 1 ARCHITECTURAL REVISIONS 12/18/00 </td> <td>KRT/KT</td> </tr> <tr> <td> 2 BLANCHETT REVISIONS City of Sacramento 4/10/01 </td> <td>KRT/KSS</td> </tr> <tr> <td> 3 ARCHITECTURAL REVISIONS 10/12/01 </td> <td>SLB/KRT</td> </tr> <tr> <td> 4 CLIENT/ARCH. FIELD REVISIONS 8/30/02 </td> <td>SLB/KRT</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	DESCRIPTION	BY	1 ARCHITECTURAL REVISIONS 12/18/00	KRT/KT	2 BLANCHETT REVISIONS City of Sacramento 4/10/01	KRT/KSS	3 ARCHITECTURAL REVISIONS 10/12/01	SLB/KRT	4 CLIENT/ARCH. FIELD REVISIONS 8/30/02	SLB/KRT										
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O'Connor Freeman & Associates

Structural Engineering Services
 228 30th Street, Suite 201, Sacramento, CA 95818 Phone: (916) 441-5721 Fax: (916) 441-5697

Date	Sheet	Of
	24	01
Job#	By	Revised
		8-30-02

Line 1A T.W. ft = 275 275 Load, plf = 100 V.# = 13145

Roof DL, per: 25 Floor DL, per: 10 Added Load, #: 1200
 = LINE 2A - 700# FROM GAMBLE END TRUSSES

Wall DL, per: 10 Rod. wt. plf: 150 Added Load, ht, ft: 3/8" one side w/ 3d @ 3:12

Use Fdn. for overturning? Use Douglas Fir shear values? T_v plf = 498 Allow. Shear, plf = 490

within 5% OK

Panel	Width, ft	Height, ft	Shear Load, #	M _{OT} , #ft
1	8	10	3068.3	30683.0
2	8	10	4960.4	49603.8
3	8	10	4216.3	42163.2
4				
5				
6				
7				
8				
9				
10				

Note: Overturning heights shown are used for overturning purposes only, and should not be confused with the wall pier height, which is used in the height-to-width ratio calculation.

Panel(s)	M _{OT} , #ft	
	131450.00	#N/A
O.T. Length, ft	34	#N/A
Roof T.W., ft	2	
Floor T.W., ft		
Wall T.W., ft	10	#N/A
M.R., #ft	114829.33	#N/A
TDP, #	498	#N/A
Holddown	NONE REQ'D	
Holddown GF, #	500	
Remarks	neglect em; uplift	

Line 1B T.W. ft = 552 275 Load, plf = 100 V.# = 13145

Roof DL, per: 25 Floor DL, per: 10 Added Load, #: 15200
 = LINE 2A - 700# FROM GAMBLE END TRUSSES

Wall DL, per: 10 Rod. wt. plf: 150 Added Load, ht, ft: 3/8" one side w/ 3d @ 2:12

Use Fdn. for overturning? Use Douglas Fir shear values? T_v plf = 542 Allow. Shear, plf = 600

Panel	Width, ft	Height, ft	Shear Load, #	M _{OT} , #ft
1	8	10	2710.3	27103.1
2	12.5	10	1761.7	17617.0
3	4	10	2168.2	21682.3
4	12	10	6504.7	65047.4
5				
6				
7				
8				
9				
10				

Note: Overturning heights shown are used for overturning purposes only, and should not be confused with the wall pier height, which is used in the height-to-width ratio calculation.

Panel(s)	M _{OT} , #ft	
	131450.00	#N/A
O.T. Length, ft	40	#N/A
Roof T.W., ft	2	
Floor T.W., ft		
Wall T.W., ft	10	#N/A
M.R., #ft	168933.33	#N/A
TDP, #		#N/A
Holddown	NONE REQ'D	
Holddown GF, #	500	
Remarks	neglect em; uplift	

