

**CITY OF SACRAMENTO**

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

**Permit No: 9905804**

**Insp Area: 4**

**Site Address: 2848 CHATEAU MONTELENA WY SAC**

**Parcel No: 225-1160-041**

**LOT 114**

**Sub-Type: NSFR**

**Housing (Y/N): N**

**CONTRACTOR**

BEAZER HOMES  
3009 DOUGLAS BL. #150  
ROSEVILLE CA 95661

**OWNER**

**ARCHITECT**

**Nature of Work: NEW HOME, MP1232, 5 ROOMS**

**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 1 License Number 724121 Date 6/11/99 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 6/11/99 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 LIBERTY MUTUAL INS CO. Policy Number WA2-65D-004147-059 Exp Date 04/01/2000

\_\_\_\_ 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 6/11/99 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.**





No 18534

### INSTALLATION CARD

*1000 Reflections II NW  
Atlanta, GA 30328  
11/12*

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

CBO Evaluation Service, Inc  
Report No. 3607  
Date of Job Completion \_\_\_\_\_

Main Contractor: Konyak Construction  
Name: John W. Konyak III  
Address: PO Box 2777  
North Highlands, GA 30560  
Phone: (404) 819-8191  
CBO Evaluation Number (as issued by the Stucco Manufacturer): 1

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I warrant that the stucco system on the building exterior at the above address had been installed in accordance with the evaluation report referred to above and the manufacturer's instructions.

Signature \_\_\_\_\_

Date 8/24/12

# CERTIFICATION OF INSULATION

ADDRESS OR TRACT  LOT #	<b>SACRAMENTO INSULATION CONTRACTORS</b> <input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026 <input type="checkbox"/> 1453 GARDEN HWY., YUBA CITY, CA 95991 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: <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 ID	MANUFACTURER'S PRODUCT ID	MANUFACTURER'S PRODUCT ID
MANUFACTURER	MANUFACTURER	MANUFACTURER
<b>OCF</b>	<b>OCF</b>	<b>OCF</b>
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED
APPLIED THICKNESS	R - VALUE INSTALLED	APPLIED THICKNESS
R - VALUE INSTALLED	APPLIED THICKNESS	MIN. INSTALLED WEIGHT PER SQUARE FOOT
R - VALUE INSTALLED	APPLIED THICKNESS	R - VALUE INSTALLED
APPLIED THICKNESS	APPLIED THICKNESS	APPLIED THICKNESS
KNEE WALLS IF R-VALUE IS OTHER THAN WALLS ABOVE		
MATERIAL: <b>FIBERGLASS</b>	FORM: <b>BATTS</b>	R VALUE
MATERIAL: <b>FIBERGLASS</b>	FORM: <b>BATTS</b>	MANUFACTURER: <b>OCF</b>
AIR INFILTRATION SEALANT		
MANUFACTURER: <b>W R GRACE</b>		

**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
SIGNATURE: GENERAL CONTRACTOR	MANAGER	DATE
TITLE		DATE
REMARKS:		

**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**

**PART I: TO BE COMPLETED BY APPLICANT**

Property Owner's Name \_\_\_\_\_  
 Owner's Address \_\_\_\_\_  
 Project Address \_\_\_\_\_  
 Parcel Number \_\_\_\_\_  
 Subdivision Name \_\_\_\_\_  
 Number of Units \_\_\_\_\_  
 Print Applicant's Name \_\_\_\_\_  
 Title of Applicant \_\_\_\_\_  
 Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

**PART II: TO BE COMPLETED BY BUILDING DEPARTMENT**

Plan Identification Number \_\_\_\_\_  
 Building Type (Check One)  
 Residential                       Apartment/Condominium                       Commercial/Industrial  
 Square Feet of Chargeable Building Area \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Title \_\_\_\_\_  
 Date \_\_\_\_\_

**PART III: TO BE COMPLETED BY NATOMAS UNIFIED SCHOOL DISTRICT**

District Certification Number \_\_\_\_\_  
 Fees Collected  
 Residential:                                      Sq. Ft. X \$                                      = \$  
 Apartment/Condominium:                      Sq. Ft. X \$                                      = \$  
 Commercial/Industrial:                      Sq. Ft. X \$                                      = \$

**NOTICE TO APPLICANT:** 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: \_\_\_\_\_

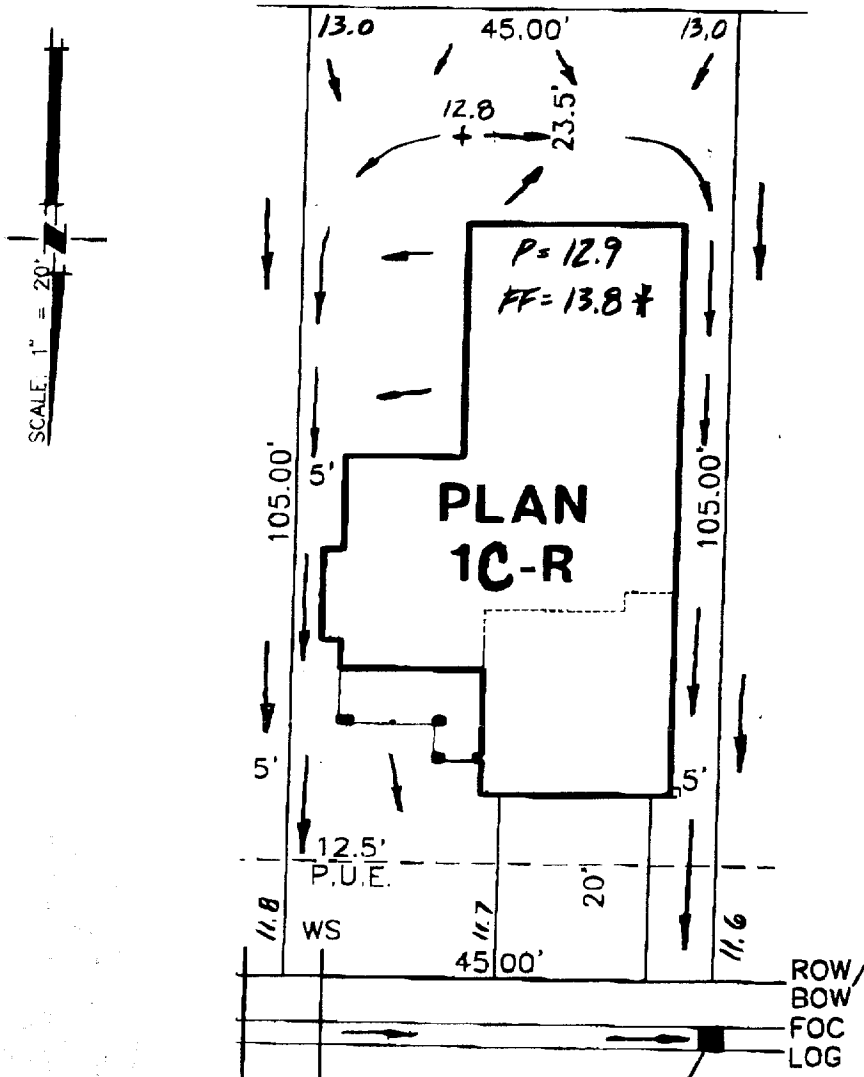
This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

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: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_

THIS PLAN IS PREPARED TO SHOW THE DIMENSIONAL RELATIONSHIP FROM BUILDING FOUNDATION TO PROPERTY LINE, DESIGN DRAINAGE CONTROL ELEVATIONS, AND DIRECTION OF DRAINAGE FLOW TO CONFORM WITH LOCAL ORDINANCES FOR THE PURPOSE OF BUILDING PERMIT ISSUANCE. INFORMATION SHOWN IS APPROXIMATE EXCEPT FOR THOSE SETBACKS WHICH ARE MINIMUMS REQUIRED BY ORDINANCE. THIS PLOT DOES NOT REFLECT AS BUILT CONDITIONS WHICH WILL LIKELY VARY FROM THIS PLAN.



ROUTING/APPROVAL		
	✓	INITIALS
President		
Project Development		
Construction	✓	<i>[Signature]</i>
Marketing	✓	<i>[Signature]</i>

### CHATEAU MONTELENA WAY

\* ADDITIONAL 0.2' FOUNDATION HEIGHT REQUIRED

LOT COVERAGE = 35%  
2848 CHATEAU MONTELENA WAY

PLOT PLAN  
**LOT 114**  
GATEWAY WEST-VILLAGE NO. 1  
FOR  
BEAZER HOMES  
SACRAMENTO CALIFORNIA

**WOOD-RODGERS INC.**

DATE: MAY, 1999	DRAWN: PDM	CHECKED: JWH 5-25-99	PROJECT NO: 98BEZ-009
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# 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

Property Owner's Name	Beazer Homes		
Owner's Address	3009 Douglas Blvd. #150, Roseville, Ca. 95661		
Project Address	2848 Chateau Montelena Way		
Parcel Number	225-041	Lot	114
Subdivision Name	Gateway West Village I		
Number of Units			
Print Applicant's Name	DEANNA COLLINS	Applicant's Signature	D. Collins
Title of Applicant	Operations		
Date	6/1/99	Telephone Number	773-3888
Plan Identification Number			
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	1232		
Signature	[Signature]		
Title	Bldg Ins III	Date	6/5/99
District Certification Number	99-412		
Fees Collected:			
Residential:	1232	Sq. Ft. X \$ 4.57	= \$ 5630.24
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:	[Signature]		Date: 6/1/99

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: [Signature] DATE: 6/10/99  
TITLE: FP Dir

**SEWER IMPACT FEE**  
 PERMIT AND CALCULATION SHEET

Application No.                      WQ                       
 BLDG PERMIT NO.                     

GENERAL INFORMATION  
 THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER

DEPT 26 \$2,414.00  
 TRN 391068 06/11/99  
 RECEIPT 703616 052 \$2,414.00  
 252209 6-11-99

THIS PERMIT TO CONNECT EXPIRES  
 ONE YEAR FROM DATE OF ISSUANCE

BUILDING USE

INSPECTION	RESIDENTIAL	SF	<input type="checkbox"/>	MF	<input type="checkbox"/>
GSD-1	COMMERCIAL USE		<input checked="" type="checkbox"/>		UNITS
SRCS					
CONSTRUCTION					

<b>TOTAL FEE</b>	<b>2,414</b>				
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APN: 225-1660-041

DESCRIPTION/  
 SUBDIVISION Gateway West Village #1 LOT: 114

PROPERTY ADDRESS 2848 Chateau Montelena Way

OWNER Beazer Homes

MAILING ADDRESS 3009 Douglas Blvd, Suite #160,

CITY-STATE-ZIP Roseville, Ca 95661 PHONE (916) 773-3888

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

APPLICANT SIGNATURE [Signature]

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT:                      INPUT                      START                     

**KWIK KOTE**  
 STUCCO SYSTEM  
**INSTALLATION CARD**

No 18534

Job Address: Beazu Reflections Lot 114  
2848 Chateau Montelena  
Roseville

Stucco System Trade Name: KWIK KOTE  
 Name Stucco Manufacturer: KWIK KOTE CORP.  
 ICBO Evaluation Service, Inc.  
 Report No. 3607  
 Date of Job Completion                     

Stucco Contractor Kenyon Construction  
 Name John W. Kenyon, III  
 Address P.O. Box 2077  
North Highlands, CA 95660  
 Telephone Number (916) 349-8191  
 Approved Contractor Number as issued by the Stucco Manufacturer: 1

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]  
 Signature of authorized representative of stucco contractor

8/24/99  
 Date

# CERTIFICATION OF INSULATION

PART I GENERAL

<p>BEAZER</p> <p style="text-align: right;">LOT # 114</p>	<p><input checked="" type="checkbox"/> P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026</p> <p><input type="checkbox"/> 1453 GARDEN HWY., YUBA CITY, CA 95991 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026</p> <p><input type="checkbox"/> P.O. BOX 1631, RENO, NV 89505 LIC. #10675</p> <p><input type="checkbox"/> 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675</p>
<p>GATEWAY West</p>	<p>DATE INSULATION COMPLETED</p> <p style="text-align: right; font-size: 1.5em;">8/16/99</p>

PART II AREAS INSULATED

WALLS	CEILINGS	FLOORS
( SQUARE FEET)	( SQUARE FEET)	( SQUARE FEET)
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.
<b>OCF</b>	<b>OCF</b>	<b>OCF</b>
	BAGS	

13	3 5/8"	38 38	12 1/4" 14 3/4"			
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MATERIAL <b>FIBERGLASS</b>	FORM <b>BATTS</b>	R VALUE	MANUFACTURER <b>OCF</b>
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MATERIAL <b>FOAM</b>	MANUFACTURER <b>W R GRACE</b>
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SIGNATURE—INSULATION CONTRACTOR <i>[Signature]</i>	TITLE MANAGER	DATE 7-27-99
SIGNATURE—GENERAL CONTRACTOR	TITLE	DATE

REMARKS

TOLVED ES CABRON  
ATT. SUMACHO