

**CITY OF SACRAMENTO**

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

**Permit No: 0005767**

**Insp Area: 4**

**Site Address: 140 CAKEBREAD CR SAC**

**Sub-Type: NSFR**

Parcel No: 225-1360-013

LOT 13 GATEWAY W 5

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

BEAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

**Nature of Work: NSFR MP 2462 10 RMS 2 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 724191 Date 6/15/00 Contractor Signature Sheyf VanMaeren

**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 6/15/00 Applicant/Agent Signature Sheyf VanMaeren

**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 WA2-651-004147-080 Exp Date 4/1/2001

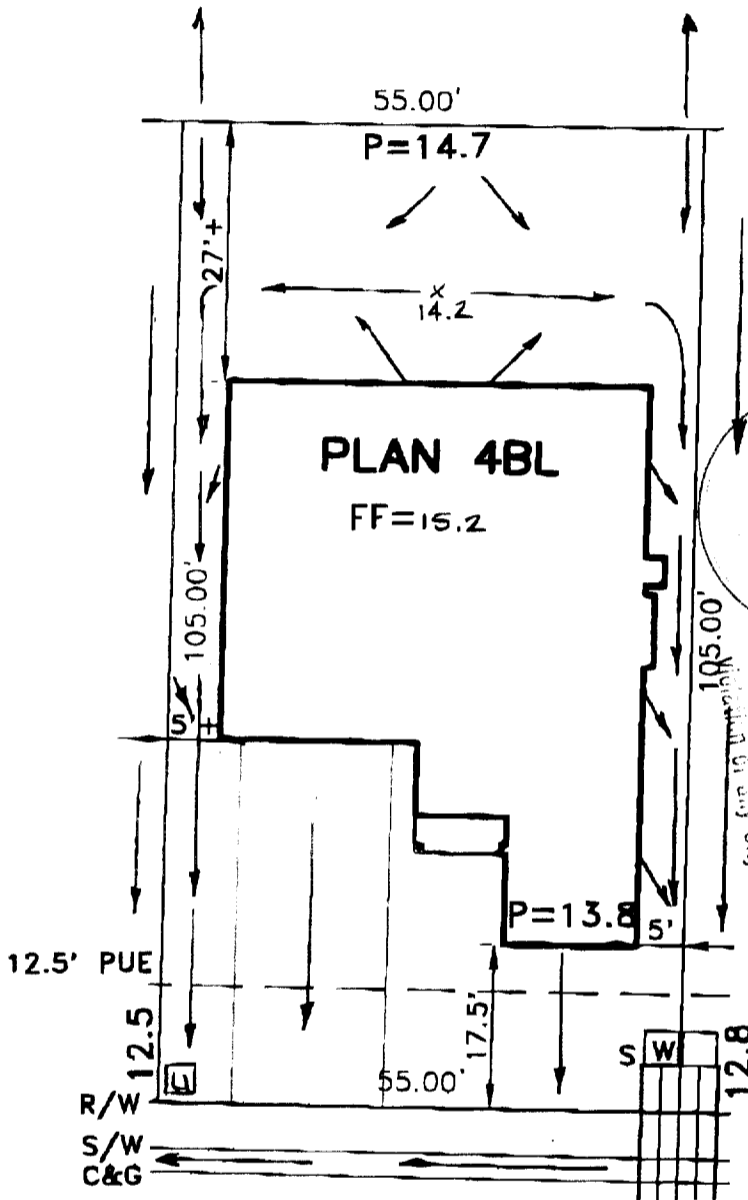
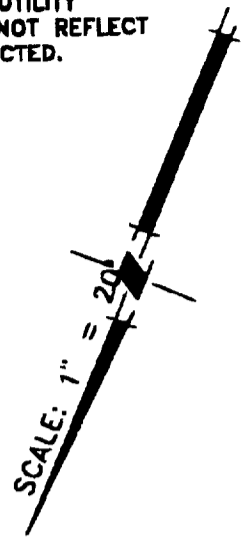
\_\_\_\_ (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 6/15/00 Applicant Signature Sheyf VanMaeren

**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.**

THIS PLOT PLAN IS NOT FOR SALES PURPOSES. THIS PLOT PLAN IS FOR THE PURPOSES OF INDICATING COMPLIANCE WITH ZONING SET BACKS, GENERAL DRAINAGE DIRECTION, AND APPROXIMATE UTILITY CONNECTION. ALL OTHER DATA SHOWN HEREON IS CONCEPTUAL. THIS PLOT PLAN DOES NOT REFLECT AS-BUILT CONDITION, RETAINING WALL ARE OPTIONAL AND MAY OR MAY NOT BE CONSTRUCTED.



NOT BEING IN COMPLIANCE WITH THE CITY OF SACRAMENTO'S ZONING ORDINANCES AND THE CITY'S DEVELOPMENT REGULATIONS. THIS PLOT PLAN IS CONCEPTUAL AND DOES NOT REPRESENT THE AS-BUILT CONDITION OF THE PROPERTY. THE PROPERTY OWNER IS ADVISED THAT THIS PLOT PLAN IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT TO BE USED FOR ANY OTHER PURPOSE.

# CAKE BREAD CIRCLE

☐ UTILITY SERVICE BOX

ROUTING/APPROVAL		INITIALS
President	✓	
Project Development		
City of Sacramento		
City of Sacramento		

<p align="center"><b>PLOT PLAN</b>  <b>LOT 13</b>                  GATEWAY WEST VILLAGE NO.5                  FOR                  BEAZER HOMES                  SACRAMENTO COUNTY CALIFORNIA</p>			
<p align="center"><b>WOOD-RODGER</b></p>		<p align="center"><b>INC.</b></p>	
DATE:	DRAWN:	CHECKED:	PROJECT NO.:
APR. 2000	HMB	JWR 4-21-00	1031.017

LOT COVERAGE = 50.6%

### RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction    
  Addition    
  Remodels    
  Other

Project Address: 140 Cake Bread Circle

Assessor Parcel # 225-136-13

#### OWNER INFORMATION:

Legal Property Owner: Beazer Homes Phone # 773-3888  
 Owner Address: 3009 Douglas Blvd #150 City Roseville State CA Zip 95661

#### CONTRACTOR INFORMATION:

Contractor: Beazer Homes Lic. # 224191 Phone # 773-3888 Fax # 773-0425

#### PROJECT INFORMATION:

Land Use Zone \_\_\_\_\_ Occupancy Group \_\_\_\_\_ Construction Type \_\_\_\_\_ Fed Code \_\_\_\_\_  
 No. of stories: 1 No. of rooms: \_\_\_\_\_ Street width: \_\_\_\_\_  
 1<sup>st</sup> Floor Area 1278 2<sup>nd</sup> Floor Area 1184 Basement  Roof Material \_\_\_\_\_

AREA IN SQUARE FOOT OF:	EXISTING	NEW
Dwelling/Living	_____	<u>2402</u>
Garage/Storage	_____	<u>808</u>
Decks/Balconies	_____	_____
Carports	_____	_____

SCOPE OF WORK: new SFD

#### FOR OFFICE USE ONLY

Information above complete    
  AR Flood Waiver required    
  Planning Approval  
 Violation files checked    
  Flood Elevation Certificate Required    
  Design Review Approval  
 Standard setbacks    
  Water Development Infill Area    
  Special Fee Districts Apply : \_\_\_\_\_  
 County Sewer

#### NEW STRUCTURES & ADDITIONS

◆ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

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

BEAZER

LOT # 13  
5013

140 Cakebread Cir

MEMPHIS

- P.O. BOX 854, WEST SACRAMENTO, CA 95691 LIC. #202026
- 1309 MELODY ROAD, MARYSVILLE, CA 95901 LIC. #202026
- P.O. BOX 9651, FRESNO, CA 93793-9651 LIC. #202026
- P.O. BOX 1631, RENO, NV 89505 LIC. #10675
- 3326 A PONDEROSA WAY, LAS VEGAS, NV 89118 LIC. #10675

DATE INSULATION COMPLETED

PART II AREAS INSULATED

WALLS	CEILINGS	FLOORS
(                      SQUARE FEET)	(                      SQUARE FEET)	(                      SQUARE FEET)
<b>TYPE OF INSULATION</b>	<b>TYPE OF INSULATION</b>	<b>TYPE OF INSULATION</b>
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>MANUFACTURER</b>	<b>MANUFACTURER</b>	<b>MANUFACTURER</b>
<b>OCF</b>	<b>OCF</b>	<b>OCF</b>
	BAGS	
<b>R-VALUE INSTALLED</b>	<b>APPLIED THICKNESS</b>	<b>R-VALUE INSTALLED</b>
<b>13</b>	<b>3 5/8</b>	<b>30</b>
		<b>30</b>
		<b>9</b>
		<b>17</b>

**Knee Walls R-Value is Other than Walls Above**

MATERIAL <b>FIBERGLASS</b>	FORM <b>BATTS</b>	R VALUE	MANUFACTURER <b>OCF</b>
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**AIR INFILTRATION SEALANT**

MATERIAL <b>FOAM</b>	MANUFACTURER <b>W R GRACE</b>
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**INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH APPLICABLE CODES**

SIGNATURE - INSULATION CONTRACTOR <i>Bill Thurlby</i>	TITLE <b>MANAGER</b>	DATE <b>9-1-00</b>
SIGNATURE - GENERAL CONTRACTOR	TITLE	DATE

REMARKS

19873



INSTALLATION CARD

Job Address:

*Beazer Homes*  
*Memories of Sac Lot # 5013*  
*140 Lake Broad Cir. Sac*

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 of authorized representative of stucco contractor

Date

*9/7/2004*