

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0004570

Insp Area: 1

Site Address: 1320 46TH ST SAC

Parcel No: 008-0272-003

Sub-Type: ASFR

Housing (Y/N): N

CONTRACTOR

*POELMAN CONSTRUCTION INC
5904 VAN ALSTINE AV #2
CARMICHAEL CA 95608

OWNER

ROBERTS DAVID K/PATRICIA A
1320 46TH ST
SACRAMENTO CA 95819

ARCHITECT

CARLILE RICHARD D
1800 27TH ST
SACRAMENTO CA 95816

Nature of Work: 2850 SQ FT ADDITION FOR SFR, GARAGE ADDITION AND INTERIOR REMODEL

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.

X License Class B License Number 515001 Date 7-26-00 Contractor Signature Gary Ford

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.

X Date 7-26-00 Applicant/Agent Signature Gary Ford

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 STATE FUND Policy Number 53818499 Exp Date 10/01/2000

____ (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.

X Date 7-26-00 Applicant Signature Gary Ford

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 COMPLIANCE, 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.

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project
Address: 1320 46TH

Assessor's Parcel Number: 008-0272-0030-0000 / 015

Previous Use: RESIDENTIAL

Description of Request/Proposed Use: RESIDENTIAL

Is This a Change of Use? NO

Prior Applications for Project Site(P#, Z#, DRPB#): Z99-041 Zoning Designation: R-1

Comments: Lot Line Adj. (Z99-041)
adjusted between APN 008-0272-003 + 015
Verify Cert. of Compl. recorded

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: W. J. Stone 4/28/00

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

Certification of Compliance

School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT

OWNER'S NAME _____
 OWNER'S ADDRESS _____
 PROJECT ADDRESS 1320 46th St
 PARCEL NUMBER _____ LOT NO. 151/15-
 SUBDIVISION NAME _____ 24
 NUMBER OF UNITS _____

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE _____
 TITLE OF APPLICANT _____
 DATE _____ PHONE NUMBER _____

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 0004570
 BUILDING TYPE
 RESIDENTIAL) APARTMENT/CONDOMINIUM ()) COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA _____
 SIGNATURE _____
 TITLE _____ DATE _____

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT _____
 DISTRICT CERTIFICATION NO. _____
 EXEMPT _____ COMMENTS _____
 RESIDENTIAL/APT/CONDO 2850 SQ FT X \$ 172 = \$ 4902.00
 COMMERCIAL/INDUSTRIAL _____ SQ FT X \$ _____ = \$ _____
 OTHER FEE _____ TYPE _____ SQ FT X \$ _____ = \$ _____
 TOTAL FEES COLLECTED _____ 06-06-00P03:45 RCVD = \$ 4902 -

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 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.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature]
 TITLE CIVIC CENTER DATE 6/6/00

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

Chris Oliveira and Assoc.

3269 1/2 Folsom
Upper East
Sacramento, CA 95816
(916) 452-4886
(916) 455-9099 (fax)

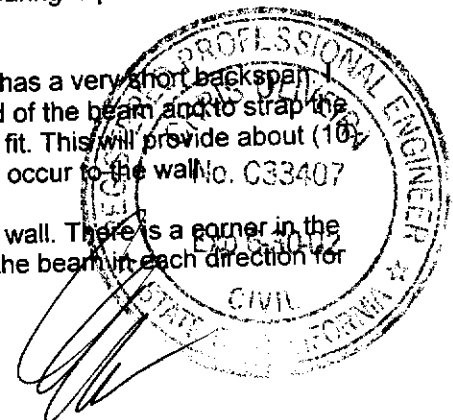
rce33407-CA
22119-AZ
07595-NV
2202-UT
35908-WA

May 30, 2001

Roberts Residence – Inspection report responses of 5/24/01

1. The substitution of LVL beams for Parallams beams, as the allowable stresses of the two materials are close enough to be adequate.
2. I have directed the contractor to use only common nails or the Simpson substitution on all strapping and holdowns.
3. I have directed the contractor to check all holdown bolts for the required size and to tighten all bolts as recommended by Simpson.
4. I have directed the contractor to provide full bearing for all beams both at the plate line and at the point of support.
5. I have directed the contractor to make sure that all beams bear in full on the foundation, particularly in the garage. There is one beam on the North garage wall that is supported on a header which I in turn supported on a single trimmer. I have directed the contractor to install (2) A335F clips on each side of the beam connecting the header to the trimmer. This will provide essentially a double stud in support of the header.
6. There are no epoxied holdowns. They are all in new footings.
7. The plan is approved with skip sheathing because it is the better material for this type of shingle. In fact it is a replacement of the original roofing. The diaphragm stresses are low (less than 140 plf), so the sheathing is adequate. The connection to the rafter is (2) 8ds per rafter, so the couple developed to resist loads at the connection is more than adequate.
8. The rafters in the upper room notched at the knee wall have adequate strength at the notch. See calc attached. The contractor has removed the shims at the rafters so that the vertical loads will not be kicked to the knee wall and thence to the TJ's. I have directed them to install a Simpson DTS clip at every other rafter so that the knee wall is completely supported for out of plane loads.
9. All point loads terminate at a continuous footing. Significant point loads were calculated and approved. I have reviewed the framing to make sure that full bearing is provided all the way to the point of support.
10. There is a cantilevered beam over a wall at the front entry that has a very short backspan. I have directed the contractor to put a 4x4 under the inboard end of the beam and to strap the end of the beam to the 4x4 with the longest MST strap that will fit. This will provide about (10) 16d's on the beam that will kick any uplift that may accidentally occur to the wall.
11. All beams to column to connections are built integrally with the wall. There is a corner in the study where a beam terminates. The contractor has strapped the beam in each direction for added safety. All other connections are adequate.

NOT
DONE



12. The architect will address the draft stop item.
13. I have directed the contractor to review all column support conditions that are not on the exterior wall to make sure that full bearing is achieved and that the load path is complete to the earth.
14. See item 8.
15. I have directed the contractor to sheath both sides of the plumbing wall where the pipes penetrate the studs. In addition, he will place a stud shoe over every penetration. He will also reconstruct those pipes that are protruding beyond the face of the stud.
16. I have directed the contractor to check the studs that support the holdowns for over boring. If any given hole is more that $\frac{1}{4}$ " larger than the bolt, the stud should be replaced. Smaller holes are acceptable.
18. At the Southwest corner of the family room, there is a holdown in each direction. Each holdown is connected to a 4x and each 4x has edge nailing. The bolts do not appear to be over bored. The connections are adequate.



NOTCHED RAFTER

NOTCH ON THE TENSION SIDE

Tributary area reaction: $2 \times 12/2 \times (10 + 16) =$ 312 lbs

$$F_v = \frac{3}{2} * V / b d' * (d/d')$$

V =	312.00	SHEAR IN THE BEAM =	
b =	1.500		
d =	7.50	d / d'	1.21
d' =	6.20	b * d' =	9.30
		V / b d' =	33.55

LDF = 1.25

F_v = 60.87 actual psiF_v =

95.00 psi

O.K.

Allow. F_v =

118.75

adjusted for LDF

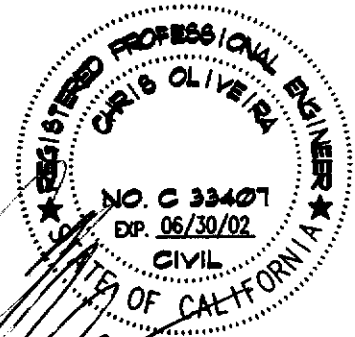




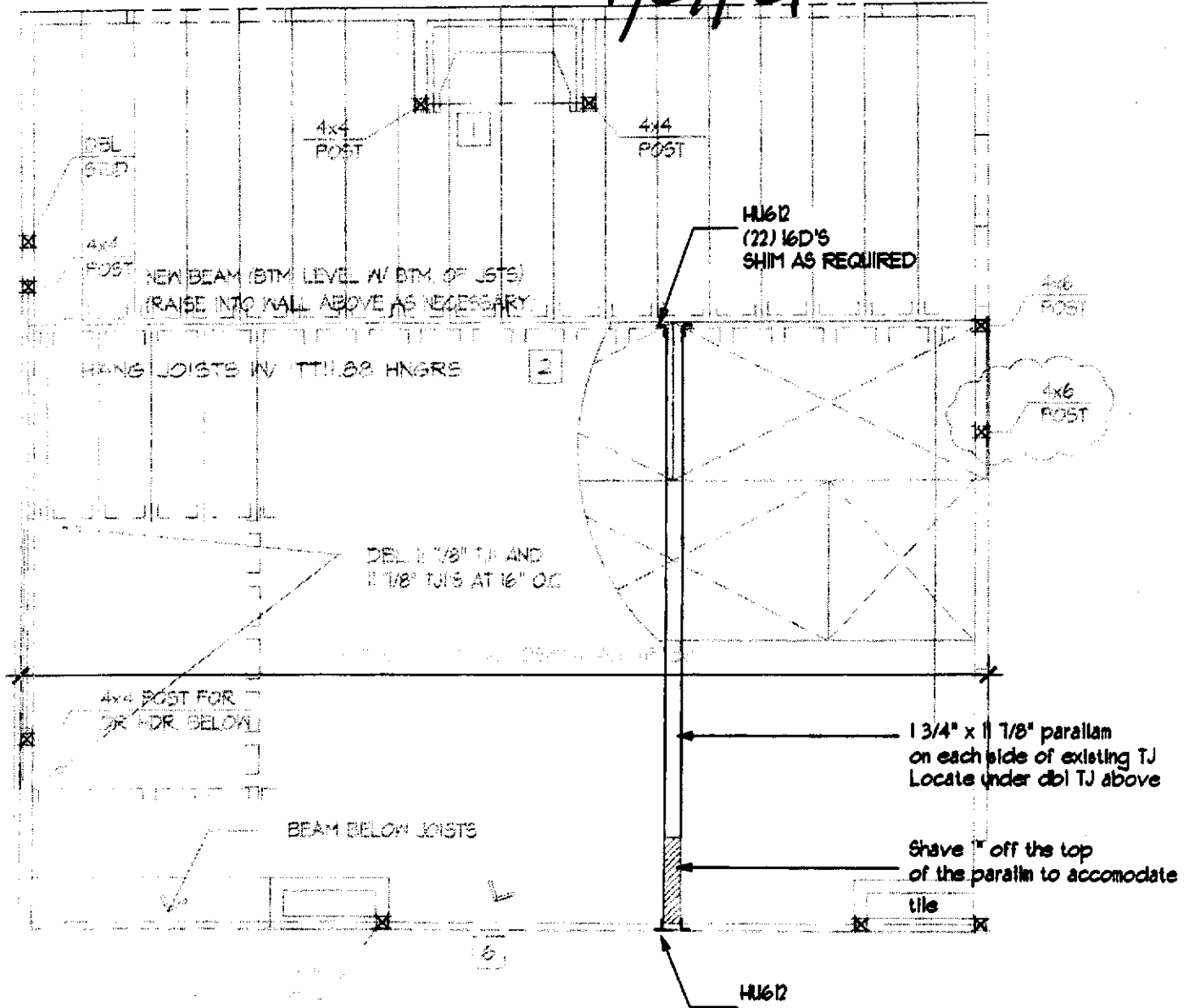
CHRIS OLIVEIRA AND ASSOCIATES

3269 1/2 Folsom Blvd.
Sacramento, CA 95816

Ph (916)452-4886
Fax (916)455-9099 (fax)



C.O. 7/24/01



Provide adequate moisture protection (Not a part of this detail)

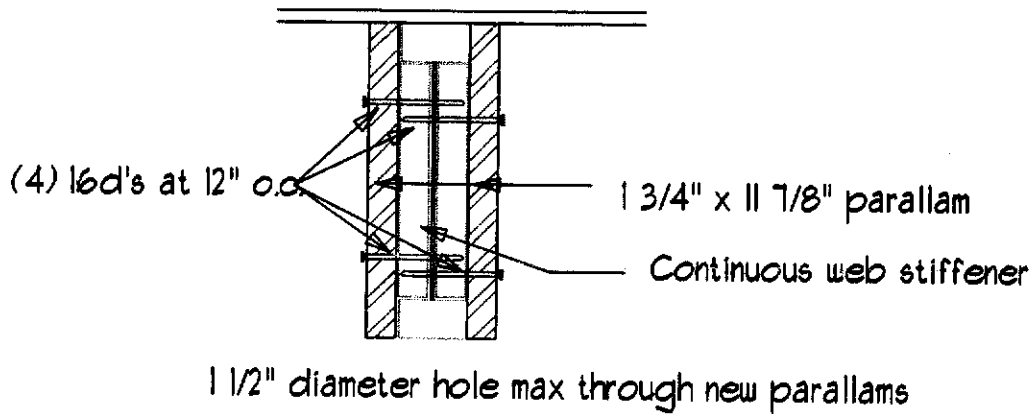
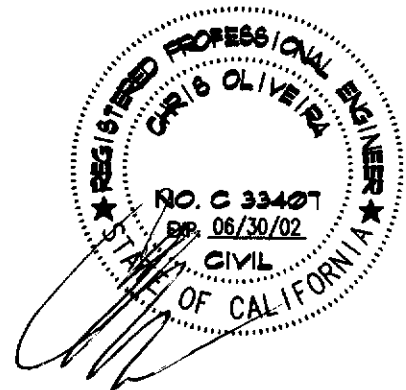
NEW BEAM UNDER TJ'S			1
No Scale	7/21/01	C.O.	



**CHRIS
OLIVEIRA
AND
ASSOCIATES**

3269 1/2 Folsom Blvd.
Sacramento, CA 95816

Ph (916)452-4886
Fax (916)455-9099 (fax)



Provide adequate moisture protection (Not a part of this detail)

PARALLAM CONNECTION TO EXISTING TJ			2
No Scale	7/21/01	C.O.	

Chris Oliveira and Assoc.
 3269 1/2 Folsom Blvd.
 Sacramento, CA 95816
 (916) 452-4886
 (916) 455-9099 fax

Title :
 Dsgnr:
 Description :
 Scope :

Job #
 Date: 10:30PM, 20 JUL 01

Rev: 510300
 User: RW-0901009, Ver 5.1.3, 22-Jun-1999, Win32
 (c) 1993-99 ENERCALC

Timber Beam & Joist

c:\enercalc\roberts 48th.ecw.Calculations

Description multiple parallam under double TJ

Timber Member Information

Calculations are designed to 1997 NDS and 1997 UBC Requirements

Timber Section		2 parallams
Beam Width	in	3.500
Beam Depth	in	10.780
Le: Unbraced Length	ft	0.00
Timber Grade		Truss Joist - MacMill
Fb - Basic Allow	psi	2,900.0
Fv - Basic Allow	psi	290.0
Elastic Modulus	ksi	2,000.0
Load Duration Factor		1.000
Member Type		Manuf/Pine
Repetitive Status		No

1" REDUCTION
 FOR TILE

Center Span Data

Span	ft	15.00
Point #1 DL	lbs	600.00
LL	lbs	2,400.00
@ X	ft	10.000

Results Ratio = 0.6080

Mmax @ Center	in-k	119.52
@ X =	ft	10.02
fb : Actual	psi	1,763.1
Fb : Allowable	psi	2,900.0
		Bending OK
fv : Actual	psi	79.5
Fv : Allowable	psi	290.0
		Shear OK

Reactions

@ Left End DL	lbs	200.00
LL	lbs	800.00
Max. DL+LL	lbs	1,000.00
@ Right End DL	lbs	400.00
LL	lbs	1,600.00
Max. DL+LL	lbs	2,000.00

Deflections

Center DL Defl	in	-0.086
L/Defl Ratio		2,097.7
Center LL Defl	in	-0.343
L/Defl Ratio		524.4
Center Total Defl	in	-0.429
Location	ft	8.160
L/Defl Ratio		419.5



Poelman Construction Inc.

General Contractor • Site Specialists • Commercial • Residential

5904 Van Alstine Ave., Suite 2
Carmichael, CA 95608
(916) 484-4820 FAX #: (916) 484-4821

FAX TRANSMITTAL

TO: J.R. Building
Inspector

DATE: 06-23-01

FROM: Jay Green

NUMBER OF PAGES: 6
(Including cover page)

FAX NUMBER:

PROJECT: ROBERTS
46TH ST

INFORMATION:

- AS REQUESTED
- FOR YOUR FILE
- FOR APPROVAL
- PLEASE RESPOND
- INFORMATION REQUEST
- ORIGINAL TO FOLLOW

CELL 417 2277
FAX 736 2460

REMARKS: NEW BEAM UNDER 2ND FLOOR

Thank you
Jay Green

IF YOU DO NOT RECEIVE THIS FAX IN COMPLETION OR IF RECEIVED AT
INCORRECT NUMBER, PLEASE CALL (916) 484-4820. THANK YOU.

734-2460

Chris Oliveira and Ann E.
3269 W Polson Blvd
Upper East
Sacramento, CA 95816
(916) 452-4886
(916) 452-9099 (fax)
CINO@RHS.net

RC33407-CA
22119-AZ
07898-NV
31111-UT

July 21, 2001

PAGE 1

4
4 PAGES FAX TO LARRY

The stamped versions of these all sets are at my office. The 4" won't fit. It is about 1/3 of the beam, I hope you can work stour it.

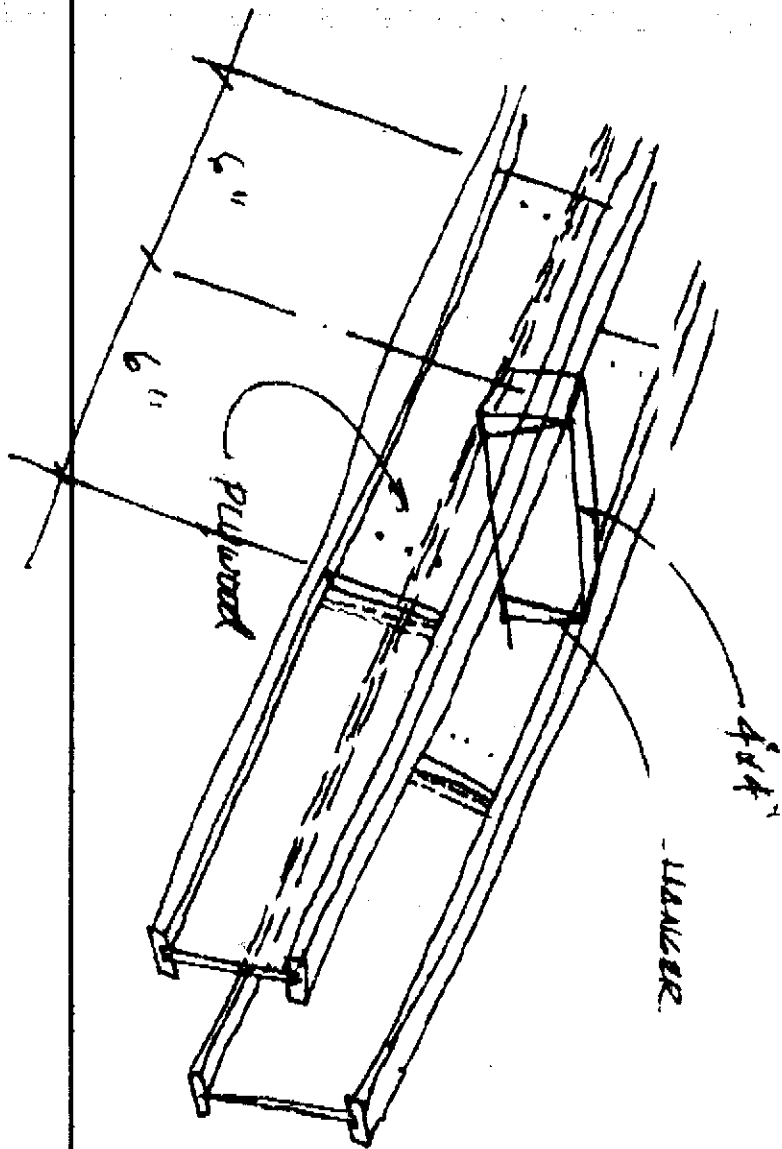
Thanks,

Chris Oliveira

07/23/2001 09:40 9164844821
03/17/2001 12:33 9164844821
07/23/2001 08:23 916-484-4821

POELMAN CONSTRUCTION
POELM N CONST
JUL 21 01 8:30AM

PAGE 02
PAGE 01

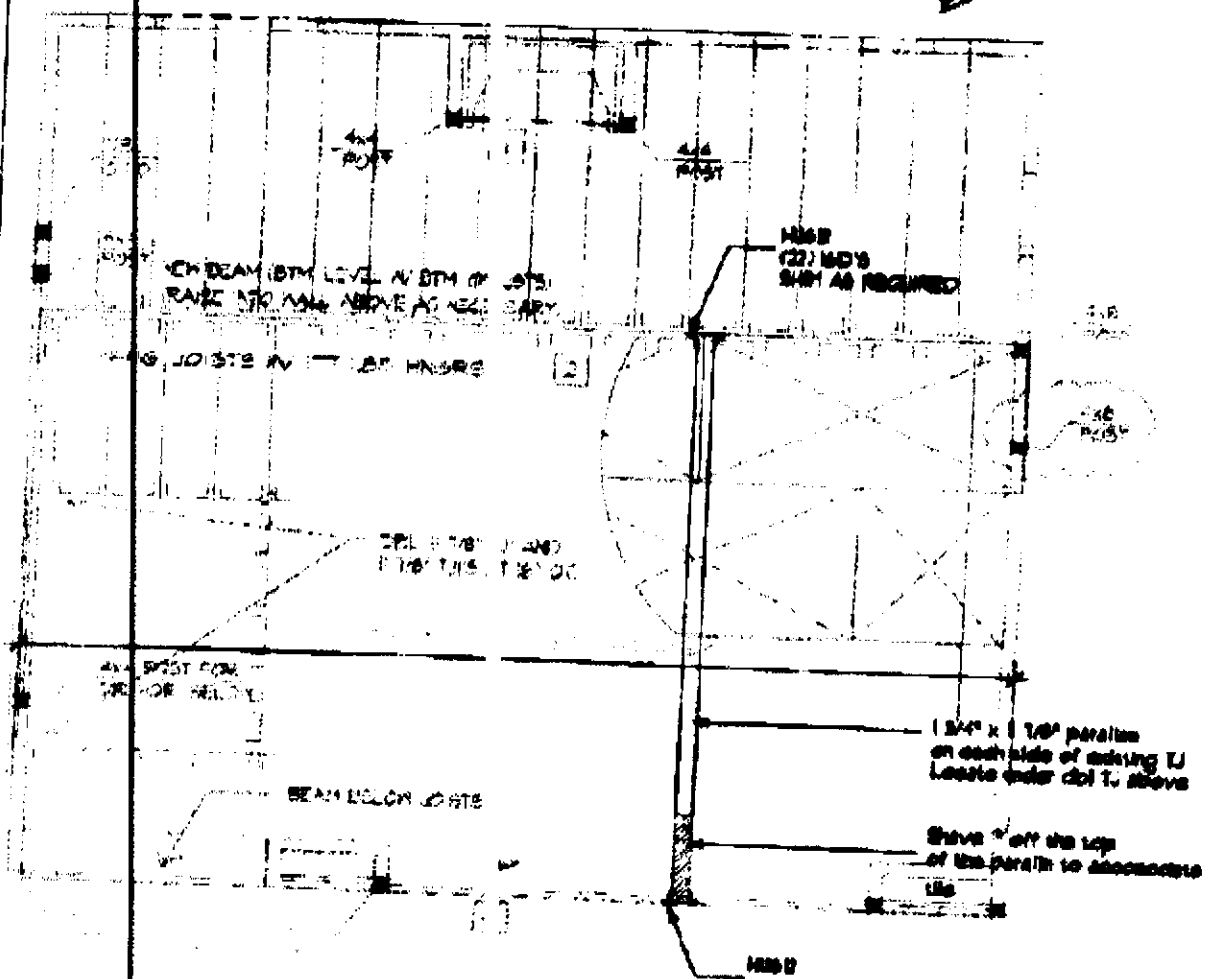
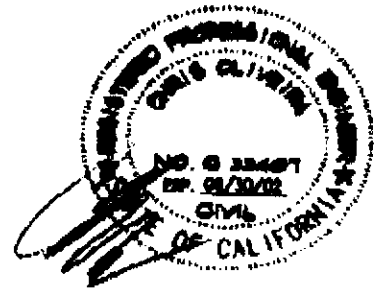


736-2460

JR -
 P106896
 Jim Wickett

COA
CHRIS OLIVEIRA AND ASSOCIATES

326 1/2 Polson Blvd.
 Sacramento, CA 95816
 Ph (916)462-6000
 Fax (916)466-9000 (fax)



PROV. OF ADEQUATE MOISTURE PROTECTION (NOT A PART OF THIS DETAIL)

NEW BEAM UNDER 'J'S

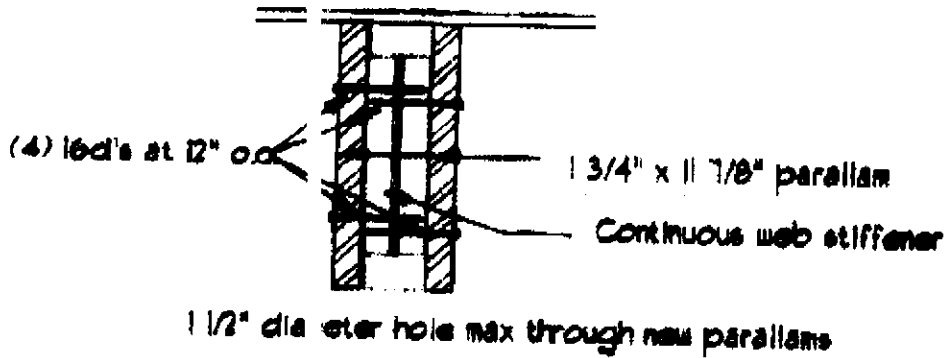
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**CHRIS
OLIVIERA
AND
ASSOCIATES**

326: 1/2 Folsom Blvd.
Sacramento, CA 95816

Ph (916)452-4888
Fax (916)455-8009 (fax)



Provide adequate moisture protection (Not a part of this detail)

PARALLEL CONNECTION TO EXISTING TJ			2
No Scale	7/21/01	CO.	

Chris Oliveira and Assoc.
 3808 1/2 Polaris Blvd.
 Sacramento, CA 95816
 (916) 482-4888
 (916) 482-8098 fax

Title:
 Design:
 Description:
 Scope:

Job #
 Date: 10:30PM, 20 JUL 01

Timber Beam & Joist
 Description: multiple parallel unc r double TJ

Timber Member Information Calculations are designed to 1997 NDS and 1997 UBC Requirements

Timber Species		8 positions
Beam Width	in	3.800
Beam Depth	in	10.750
Lr. Unbraced Length	ft	
Timber Grade		Truss Joist - Mass
Pd - Basic Allow	pcf	2,000.0
Pv - Basic Allow	pcf	200.0
Stress Modulus	ksi	2,200.0
Load Duration Factor		1.000
Member Type		Manufacture
Repetitive Factor		No

-1" REDUCTION
 RE-TILE

Center Span Data

Span	ft	18.00
Point #1	DL	800.00
	LL	2,400.00
	X	10.000

Results Ratio = 0.0000

Minus @ Center	in-lb	119.82
S =	ft	10.00
v: Actual	pcf	1,783.1
Pd: Allowable	pcf	2,000.0
		Bending OK
v: Actual	pcf	79.6
Pv: Allowable	pcf	200.0
		Shear OK

Reactions

@ Left End	DL	800.00
	LL	800.00
Max. DL+LL	800.00	1,600.00
@ Right End	DL	400.00
	LL	1,000.00
Max. DL+LL	400.00	2,000.00

Deflections

Center DL Def	in	-0.088
L/Def Ratio		2,087.7
Center LL Def	in	-0.343
L/Def Ratio		634.4
Center TJ Def	in	-0.489
Location	ft	8.100
L/Def Ratio		418.8

