

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0015026**  
**Insp Area: 1**

**Site Address: 1741 38TH ST SAC**  
Parcel No: 008-0451-039

Sub-Type: ASFR  
Housing (Y/N): N

CONTRACTOR  
BILL WARD CONSTRUCTION  
PO BOX 1613  
FAIR OAKS CA 95628

OWNER  
HOLMES AMY  
1741 38TH ST  
SACRAMENTO CA 95816

ARCHITECT

**Nature of Work:** ADDITION 2 BEDROOM 2 BATH, KITCHEN 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 338928 Date 1/8/01 Contractor Signature Bil Ward

**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 \_\_\_\_\_ **JAN 08 2001**

**IN ISSUING THIS BUILDING PERMIT,** the applicant represents, and the city relies on the information provided by the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvements to be constructed do 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.

**PAID**  
**CITY OF SACRAMENTO**  
**NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES**

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 1/8/01 Applicant/Agent Signature Bil Ward

**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 Clarendon Nat'l Policy Number 03KR4 837184 Exp Date \_\_\_\_\_

\_\_\_\_ (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 1/8/01 Applicant Signature Bil Ward

**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.**

0015026R

Date of Request: \_\_\_\_\_  
By: \_\_\_\_\_

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION  
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 1741 38th Street

Assessor's Parcel Number: 008-0451-039-0000

Previous Use: \_\_\_\_\_

Description of Request/Proposed Use: Bedroom & Bath.

Is This a Change of Use? No

Prior Applications for Project Site(P#, Z#, DRPB#): 0 Zoning Designation: R-1

Comments: No planning entitlements required

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: D Decker 12/27/00

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 (MUST BE FILLED OUT COMPLETELY)**

OWNER'S NAME Amy & Jon Helms  
 OWNER'S ADDRESS 1711 38th Street  
 PROJECT ADDRESS 1711 38th Street  
 PARCEL NUMBER 008-0451-039-0000 LOT NO. \_\_\_\_\_  
 SUBDIVISION NAME \_\_\_\_\_  
 NUMBER OF UNITS 1

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 [Signature]  
 TITLE OF APPLICANT Contractor  
 DATE 1/4/01 PHONE NUMBER 916-966-1122

**PART II To be completed by BUILDING DEPARTMENT**

PLAN IDENTIFICATION NUMBER 00150262  
 BUILDING TYPE  
 RESIDENTIAL (X) APARTMENT/CONDOMINIUM ( ) COMMERCIAL/INDUSTRIAL ( )  
 SQUARE FEET OF CHARGEABLE BUILDING AREA 782 sq ft  
 SIGNATURE [Signature]  
 TITLE [Signature] DATE 1/4/01

**PART III To be completed by SCHOOL DISTRICT**

SCHOOL DISTRICT SCUSD  
 DISTRICT CERTIFICATION NO. 6954  
 EXEMPT \_\_\_\_\_ COMMENTS \_\_\_\_\_  

|                             |            |            |                             |             |                       |
|-----------------------------|------------|------------|-----------------------------|-------------|-----------------------|
| RESIDENTIAL/APT/CONDO       | <u>782</u> | SQ FT X \$ | <u>1.72</u>                 | = \$        | <u>1345.04</u>        |
| COMMERCIAL/INDUSTRIAL       |            | SQ FT X \$ |                             | = \$        |                       |
| OTHER FEE                   | TYPE       | SQ FT X \$ |                             | = \$        |                       |
|                             |            |            | <u>01-00-01-110-39 RCVD</u> | = \$        |                       |
| <b>TOTAL FEES COLLECTED</b> |            |            |                             | <b>= \$</b> | <b><u>1345.04</u></b> |

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 CIVIL CENTER PLUMBER DATE 1/9/01

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

- CHECK INTERMEDIATE DBL 2x4 PLATES TO RESIST HINGING ACTION @ VAULTED WALL.

WIND LOAD EXP. "B" WIND SPEED 75 MPH

$$P = C_e C_g q_z F$$

$$= 0.67 \times 0.8 \times 14.5 \times 1 = 7.75 \text{ psf.}$$

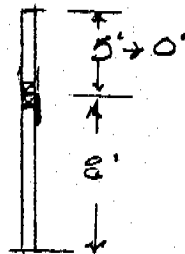
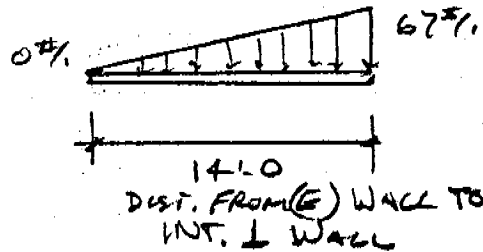
$$C_e = 0.67$$

$$C_g = 0.8$$

WINDWARD SIDE ONLY  
 $q_z = 14.5$

$$\text{MAX} = 7.75 \times 1.33 \times 6.5 = 67\% \Rightarrow \text{OVER 14 DIST.}$$

USE DBL 2x4 PLATE AS BM W/ VARIING LOAD



SEE COMP. PB. 547 #2

$$\text{STRESS RATIO} = 0.945 < 1.0 \text{ OK.}$$

DBL 2x4'S AS INTERMEDIATE R IS OK





STRUCTURAL SYSTEMS  
 2221 CLAREMONT RD  
 CARMICHAEL, CA 95608  
 (916) 488-7654  
 (916) 483-0171 FAX

Title: **HOLMES REMODEL** Job #  
 Dsgnr: GMP Date: 1:15PM, 21 MAR 01  
 Description: **1741 38<sup>TH</sup> STREET**  
**SACRAMENTO, CA**  
 Scope: Structural member design for house addition

SW# 2063

Rev: 510300  
 User: KW-0601009, Ver 5.1.3, 22-Jun-1999, Win32  
 (c) 1983-99 ENERCALC

**General Timber Beam**

c:\ec\mcdonald\_res.ecw:Calculations

Description HOLMES REMODEL - DBL 2X4 AS BM TO RESIST HINGE AT GABLE END WALL

**General Information**

Calculations are designed to 1997 NDS and 1997 UBC Requirements

|                  |          |                           |             |         |         |
|------------------|----------|---------------------------|-------------|---------|---------|
| Section Name     | 2-2x4    | Center Span               | 14.00 ft    | .....Lu | 0.00 ft |
| Beam Width       | 3.000 in | Left Cantilever           | ft          | .....Lu | 0.00 ft |
| Beam Depth       | 3.500 in | Right Cantilever          | ft          | .....Lu | 0.00 ft |
| Member Type      | Sawn     | Douglas Fir - Larch, No.2 |             |         |         |
| Load Dur. Factor | 1.330    | Fb Base Allow             | 875.0 psi   |         |         |
| Beam End Fixity  | Pin-Pin  | Fv Allow                  | 95.0 psi    |         |         |
|                  |          | Fc Allow                  | 625.0 psi   |         |         |
|                  |          | E                         | 1,600.0 ksi |         |         |

|              |      |            |            |           |           |
|--------------|------|------------|------------|-----------|-----------|
| #1 DL @ Left | #/ft | LL @ Left  | #/ft       | Start Loc | 0.000 ft  |
| DL @ Right   | #/ft | LL @ Right | 67.00 #/ft | End Loc   | 14.000 ft |

**Summary**

Beam Design OK

Span= 14.00ft, Beam Width = 3.000in x Depth = 3.5in, Ends are Pin-Pin  
 0.945 : 1

|                          |              |                |            |                     |                   |
|--------------------------|--------------|----------------|------------|---------------------|-------------------|
| Max Stress Ratio         | 0.84 k-ft    | at             | 8.064 ft   | Maximum Shear * 1.5 | 0.5 k             |
| Maximum Moment Allowable | 0.8 k-ft     |                |            | Allowable           | 1.3 k             |
| Max. Positive Moment     | 0.84 k-ft    | at             | 8.064 ft   | Shear:              | @ Left 0.16 k     |
| Max. Negative Moment     | -0.00 k-ft   | at             | 14.000 ft  |                     | @ Right 0.31 k    |
| Max @ Left Support       | 0.00 k-ft    |                |            | Camber:             | @ Left 0.000 in   |
| Max @ Right Support      | 0.00 k-ft    |                |            |                     | @ Center 0.000 in |
| Max. M allow             | 0.89         |                |            |                     | @ Right 0.000 in  |
| fb                       | 1,650.42 psi | f <sub>v</sub> | 44.67 psi  | Reactions...        |                   |
| Fb                       | 1,745.63 psi | Fv             | 126.35 psi | Left DL             | 0.00 k            |
|                          |              |                |            | Right DL            | 0.00 k            |
|                          |              |                |            | Max                 | 0.16 k            |
|                          |              |                |            | Max                 | 0.31 k            |

**Deflections**

| Center Span... | Dead Load | Total Load | Left Cantilever...  | Dead Load | Total Load |
|----------------|-----------|------------|---------------------|-----------|------------|
| Deflection     | 0.000 in  | -1.691 in  | Deflection          | 0.000 in  | 0.000 in   |
| ...Location    | 14.000 ft | 7.280 ft   | ...Length/Defl      | 0.0       | 0.0        |
| ...Length/Defl | 0.0       | 99.33      | Right Cantilever... |           |            |
|                |           |            | Deflection          | 0.000 in  | 0.000 in   |
|                |           |            | ...Length/Defl      | 0.0       | 0.0        |

**Stress Calcs**

**Bending Analysis**

|    |        |    |          |     |           |      |            |
|----|--------|----|----------|-----|-----------|------|------------|
| Ck | 30.071 | Le | 0.000 ft | Sxx | 6.125 in3 | Area | 10.500 in2 |
| Cf | 1.500  | Rb | 0.000    | Cl  | 0.000     |      |            |

|                 |                   |  |                  |                     |
|-----------------|-------------------|--|------------------|---------------------|
|                 | <u>Max Moment</u> |  | <u>Sxx Req'd</u> | <u>Allowable fb</u> |
| @ Center        | 0.84 k-ft         |  | 5.79 in3         | 1,745.63 psi        |
| @ Left Support  | 0.00 k-ft         |  | 0.00 in3         | 1,745.63 psi        |
| @ Right Support | 0.00 k-ft         |  | 0.00 in3         | 1,745.63 psi        |

**Shear Analysis**

|               |                |                 |
|---------------|----------------|-----------------|
|               | @ Left Support | @ Right Support |
| Design Shear  | 0.23 k         | 0.47 k          |
| Area Required | 1.856 in2      | 3.712 in2       |
| Fv: Allowable | 126.35 psi     | 126.35 psi      |

**Bearing @ Supports**

|                     |        |                      |          |
|---------------------|--------|----------------------|----------|
| Max. Left Reaction  | 0.16 k | Bearing Length Req'd | 0.083 in |
| Max. Right Reaction | 0.31 k | Bearing Length Req'd | 0.167 in |

**Query Values**

| M, V, & D @ Specified Locations | Moment  | Shear     | Deflection |
|---------------------------------|---------|-----------|------------|
| @ Center Span Location =        | 0.00 ft | 0.00 k-ft | 0.16 k     |
| @ Right Cant. Location =        | 0.00 ft | 0.00 k-ft | 0.00 k     |
| @ Left Cant. Location =         | 0.00 ft | 0.00 k-ft | 0.00 k     |



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Sketch & Diagram

