

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0011451
Insp Area: 1

Site Address: 8651 FOLSOM BL SAC
Parcel No: 078-0180-016

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

CONTRACTOR
PERRYS CONSTRUCTION
31630 RAILROAD CANYON RD #14
CANYON LAKE CA

OWNER
BEACON OIL COMPANY
525
HANFORD CA 93230

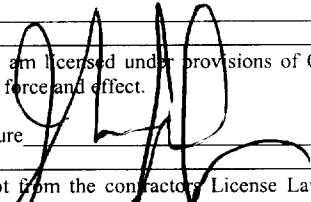
ARCHITECT

Nature of Work: RAISE GAS STATION CANOPY

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 731569 Date 10-6-00 Contractor Signature 

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor 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 10-6-00 Applicant/Agent 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 VIRGINIA SURETY CO. Policy Number 050000510 Exp Date 01/01/2001

____ (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 10-6-00 Applicant 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.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0011451	Insp. Area IC
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 8651 Nelson Blvd Suite _____
PARCEL # 078-0185-016

CONTACT

Name Perry Green
 Street Address 31630 Railroad Canyon Rd #14
 City/State/Zip Canyon Lake, CA 92587
 Phone 909 246-9616 FAX 909 246-9716
 E-mail: _____

LICENSED CONTRACTOR Lic No. # _____

Name Perry's Construction
 Address 31630 Railroad Canyon Rd #14
 City/State/Zip Canyon Lake, CA 92587
 Phone 909 246 9616 FAX 909 246-9716
 E-mail: _____

ARCHITECT/ENGINEER

Name David Poyter
 Address 754 Town + Country Rd
 City/State/Zip Orange, CA 92668
 Phone 714 245 4930 FAX 714 245 4933
 E-mail: _____

OWNER

Name Ultramar
 Address 525 W. Third St.
 City/State/Zip Hanford CA
 Phone 559 583-3235 FAX _____
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → **INSURANCE CO:** Virginia Safety
 → **WORKER'S COMPENSATION POLICY #** CS-00005101 **EXPIRATION DATE:** 3-14-2001

NATURE OF WORK IN DETAIL:
Raise existing canopy from 11'-9" to 14'-6"

OCCUPANT/TENANT: _____ **VALUATION:** \$ 10,000.00

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC		SITE	FIRE	
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Viol. File	
				S		SPR	ALARM	13	[H]	[Quad]
(B)	(L)	P	M	E	F	S		D	PW	UTIL

COMMENTS:

REGIONAL SANITATION FEES? Yes No **HEALTH DEPARTMENT?** Yes No
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

APPLICATION FOR COMMERCIAL BUILDING PERMIT

Express

SACRAMENTO
 COUNTY DEPARTMENT OF PERMITTING
 1200 Capitol Mall, Room 200
 Sacramento, CA 95814

ACTIVITY # 001451	Insp. Area IC
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 865 Tolson Bl Suite _____

<p style="text-align: center;">CONTACT</p> <p>Name _____</p> <p>Street Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail _____</p>	<p style="text-align: center;">OWNER</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____ EXPIRATION DATE: _____

→ WORKER'S COMPENSATION POLICY # _____

NATURE OF WORK IN DETAIL: _____

OCCUPANT/TENANT: _____ VALUATION: \$ _____

FLOOD STATUS:			S.C.A.T.							
JOB DESCRIPTION			SHELL	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BLDG	MECH	PLUMB	ELEC		SITE	FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
						SPR	ALARM		[H]	[Quad]
B	L	P	M	E	F	S		D	PW	UTIL

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 8651 Folsom Blvd

Assessor's Parcel Number: 078-0180-016

Previous Use: Gas Sta

Description of Request/Proposed Use: Raising Canopy

Is This a Change of Use? No

Zoning Designation: CR

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: _____

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: [Signature] 10-2-00

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

MICROFILM AFTER FINAL

30'-0" x 80'-0" THREE COLUMN CANOPY
1997 UBC

20 PSF LL
80 MPH, EXP C
3 SEISMIC ZONE

ESTIMATE EXIST. ROOF WEIGHT

3 PSF DECK
1.5 PSF FASCIA
3 PSF STEEL
7.5 PSF TOTAL

WIND UPLIFT:

Ce= 1.06
Cq= -1.3
qs= 16.4 PSF
p= -22.60 PSF

ISSUED

OCT 06 2000

Sacramento Building Division

COLUMN LOADS:

PDL= 7.5 PSF X 30.77 FT X
PLL= 20 PSF X 30.77 FT X
PDL= -22.60 PSF X 30.77 FT X

30 FT = 6923 LBS
30 FT = 18462 LBS
30 FT = -20861 LBS

BASE MOMENTS:

LATERAL WIND ON PROJECTED AREA:

Ce= 1.13 ROJ. HT.= 3 FT
Cq= 1.3 TRIB.= 61.54 FT
qs= 16.4 PSF OL. WD.= 0.90 FT
p= 24.09 PSF CLR. HT.= 14.5 FT

MWL= 73432 FT-LBS

UNBALANCED LIVE LOAD:

TRIB.= 461.54 SQ.FT.
LL= 16 PSF
MULL= 55385 FT-LBS

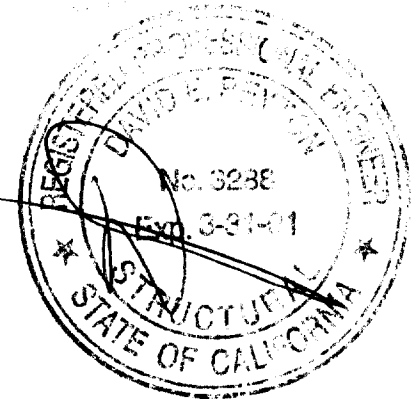
FOR SEISMIC BASE MOMENT SEE NEXT SHEET

EXISTING FOOTING & BASE CONNECTION:

EXIST. CLR.HT. = 11.75 FT
MWL= 56679 FT-LBS (EXIST.)
MULL= 55385 FT-LBS (EXIST.)
MEL= 25226 FT-LBS (EXIST.)

MWL= 73432 FT-LBS (NEW)
MULL= 55385 FT-LBS (NEW) (UNCHANGED)
MEL= 34985 FT-LBS (NEW)

X0.75= 55074 FT-LBS
X1.0= 55385 FT-LBS
X0.75= 26239 FT-LBS
55385 FT-LBS CONTROLS



CONTROLLING MOMENT REMAINS UNCHANGED, THEREFORE, THE EXIST. FOOTING AND BASE CONNECTION SEE NO INCREASE IN DESIGN LOAD AND ARE OK

This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



Handwritten: Copy

PIPE WIND COLUMN DESIGN

f

P(DL)=	7.81 K	fa(DL)=	0.49 KSI
P(ULL)=	18.46 K	fa(LL)=	1.15 KSI
P(WL)=	-20.86 K	fa(WL)=	-1.30 KSI
M(DL)=	0.00 FT-K	fb(DL)=	0.00 KSI
M(ULL)=	55.38 FT-K	fb(LL)=	16.87 KSI
M(WL)=	73.43 FT-K	fb(WL)=	22.36 KSI
M(EL)=	34.99 FT-K	fb(EL)=	10.66 KSI

USE: 10" DIA. XS.

A=	16.10 SQ.IN.	
I=	212.00 IN.^4	
S=	39.40 CU.IN.	
r=	3.63 IN.	
b=	10.75 IN.	
t=	0.50 IN.	
Fy=	36.00 KSI	
K=	2.00	
L=	16.25 FT	
KL/r=	107.44	OK
Cc=	126.10	
Fa=	12.01	
D/t=	21.50	COMPACT OK
Fb=	23.76 KSI	

DL+LL	fa/Fa=	0.14
	F'ex=	12.94 KSI
	fb/Fb=	0.71
	fa/Fa+fb/Fb=	0.85 OK
DL+WL	fa/1.33Fa=	-0.03
	1.33F'ex=	17.25 KSI
	fb/1.33Fb=	0.71
	fa/Fa+fb/Fb=	0.74 OK
DL+EL	fa/1.33Fa=	0.03
	fb/1.33Fb=	0.34
	fa/Fa+fb/Fb=	0.37 OK

CANOPY SEISMIC LOADING : (PER 1997 UBC)

SEISMIC ZONE: 3

CALCULATE PERIOD:

Icol=	212 IN ⁴	M=	228.81 LB-S ² /FT
LENGTH=	16.25 FT	k=	2487.43 LB/IN
DL=	7368 LBS		

T(A)=	0.16 SECONDS	T(MAX)=	0.23
T(B)=	0.55 SECONDS		
T=	0.23 SECONDS		

BASE SHEAR (30-4)

Cv=	0.54 PER TABLE 16-R
I=	1.00 PER TABLE 16-K
R=	2.20 PER TABLE 16-P
V=	1.08 W

BASE SHEAR (30-5)

Ca=	0.36 PER TABLE 16-Q
V=	0.41 W

DESIGN BASE SHEAR

V= 0.41 W

EARTHQUAKE LOAD

Rmax=	0.38	DESIGN SHEAR / TOTAL SHEAR	
WIDTH=	30.00 FT		
LENGTH=	80.00 FT	AREA=	2400 FT ²

RHOc=	0.93	RHOmin=	1
		RHOmax=	1.5

RHO= 1.00

DESIGN EARTHQUAKE SHEAR= 2153 LBS DL+EL/1.4

DESIGN EARTHQUAKE MOMENT= 34985 FT-LBS

