

BUILDING PERMIT



STATE OF OREGON
DEPARTMENT OF COMMERCE
BUILDING CODES DIVISION

No. PO 15B82
Rec 2294

Application for:

- Plan Review & Building Permit
- Plan Review - No Permit
- Plan Review - Fire & Life Safety Only

Jurisdiction of Port Orford
~~XXXXXXXXXXXX~~ City

Applicant to complete numbered spaces only.

JOB ADDRESS		Is building within city limits	
1 <u>12 th and Airzona Street, Port Orford, Oregon</u>		yes	<u>XXX</u>
DIRECTIONS TO JOB SITE			
LEGAL DESCR.	LOT NO.	BLK	TRACT
	<u>1100</u>		<u>33-15-5AC</u>
(<input type="checkbox"/> See Attached Sheet)			
OWNER	MAIL ADDRESS	ZIP	PHONE
2	<u>Oregon State Hwy. Division, P. O. Box 1265, Coos Bay, OR</u>	<u>97420</u>	<u>2 69-9121</u>
CONTRACTOR	MAIL ADDRESS	PHONE	LICENSE NO.
3	<u>Same</u>		
ARCHITECT OR DESIGNER	MAIL ADDRESS	PHONE	LICENSE NO.
4			
ENGINEER	MAIL ADDRESS	PHONE	LICENSE NO.
5	<u>B. E. Brown, District Maintenance Supervisor, P. O. Box 1265, Coos Bay, Oregon</u>	<u>97420</u>	
USE OF BUILDING			
6 <u>Equipment Storage</u>			
7 Class of work: <input type="checkbox"/> NEW <input checked="" type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input type="checkbox"/> REMOVE			
8 Describe work: <u>Construct an additional 24' x 24' of equipment storage on the North end</u>			
9 Change of use from <u>None</u>			
Change of use to <u>None</u>			
10 Declaration of Valuation of work \$ <u>3,500.00</u>			
PLAN CHECK FEE	PERMIT FEE	+ 4% SURCHARGE = \$	
<u>28.93</u>	<u>44.50</u>	<u>75.21</u>	
SPECIAL CONDITIONS:			
Application Accepted By _____ Initial _____ Date _____		Plans Checked By <u>Panel</u> Initial _____ Date _____	
		Approved For Issuance By <u>Panel 7-21-82</u> Initial _____ Date _____	
11 NOTICE			
SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL AND PLUMBING.			
THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 120 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 120 DAYS AT ANY TIME AFTER WORK IS COMMENCED.			
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.			
Signature of Contractor or Authorized Agent <u>E. J. Phillips</u>		(Date) <u>7-7-82</u>	
Signature of Owner (If Owner Builder)		(Date)	
PLANS EXAMINER COMPLETES THIS BOX AND CERTIFIES COMPLIANCE WITH LOCAL REGULATIONS			
Special Approvals			
ZONING			
FIRE ZONE			
SANITARY - PUBLIC		PRIVATE	
OTHER (Specify)			
Type of Const.	Occupancy Group	Division	
<u>V-N</u>	<u>M-1</u>		
Size of Bldg. (Total) Sq. Ft.	No. of Stories	Max. Occ. Load	
<u>24x24</u>	<u>1</u>		
Fire Zone	Use Zone	Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>3</u>	<u>C1</u>		
No. of Dwelling Units	No. of Bedrooms		
DATE PERMIT ISSUED			

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH

III. Access to Land:
A. Name of the road adjacent to the property Arizona Street
Status: _____
County Rd. _____ Public Rd. _____ Private Rd. _____
Other, describe City Street

The above information will be the basis for an approval or disapproval of a development permit, therefore, the person signing below will be responsible for its accuracy.

Signed [Signature] Date 7-7-82

If the above signature is someone other than the owner of record, please fill in below:

Property owner:
Name Oregon State Hwy. Division
Address P. O. Box 1265, Coos Bay, OR 97420
Phone 269-9121

Owner has been contacted: Yes xx No _____

PLANNING DEPARTMENT USE ONLY:
A. Plan Designation of subject property _____
B. Zoning of subject property PF
1. Proposed use is allowed: Outright Conditional _____ Not allowed _____
2. Noted: _____
Plan Changey _____ Zone Changey _____
Conditional Use _____
C. Minimum lot size of zone is _____
1. Division of land if required: Minor Partition _____ Major Partition _____

Name Oregon State Hwy. Division
Address P. O. Box 1265, Coos Bay, Oregon 97420
Phone 269-9121

Property description
Township 33S Range 15W Section 5 Tax Code _____
Tax Assessor Map _____ Tax Lot _____ Tax Code _____
Acreage _____

I. Improvements:
Number of Structures: Existing Proposed

A. Conventional Dwellings none none

B. Mobile Homes none none

C. Accessory Structures none none

D. Other Buildings (Commercial, etc.) 4 4

Other Improvements: _____

A. Domestic Use Water Source: Public Port Orford City Water

Drilled well _____ Bug Well _____ Spring _____ Creek _____ Lake _____
Other water sources and/or use _____

B. On-site Sewage Disposal System: Septic System X Other _____

C. Improved Building Site X

D. Road or Driveway yes

E. Other _____

II. Present Use of Land:

A. Vacant _____

B. Residential _____

C. Commercial Ore. State Hwy. Division Maintenance Station

D. Other _____

i. Feasibility of land if required con't'd:

Subdivision _____
Division of Resource _____
Land _____

D. Dimensional Standards:

Set-back Distance: _____
Front _____ Side _____ Height Limit _____
Variance Required _____

E. Inventory Check:

Inventory Check:	Comment	No Conflict
Agricultural Land		
Forest Land		
Mineral Resource		
Wildlife Resource		
Historical Resource		
Archeological Resource		
Natural Hazards		
Coastal Shorelands		
Estuary		

Planning Department Clearance:

1. No Conflict Signed/Date July 15, 1982
2. Planning Department action required as described below:

(A. Feasibility con't'd)

C. Comments _____

B. Septic Installation Permits

1. Septic installation permit(s) issued:

a. Dates _____
b. Permit number(s) _____
c. Expiration date _____
d. Size & types of system(s) required _____

e. Comments _____

C. Other Problems:

1. Describe any other problem associated with property concerning sewage disposal, domestic use water hazards, or designated health hazard area _____

2. Repair Permits:

a. Repair Permit issued _____
b. Comments _____

DEPARTMENT OF ENVIRONMENTAL SANITATION:

A. Feasibility

1. Septic Feasibility: Approved _____ Denied _____
a. Date _____
b. Size & type of system(s) required _____

Environmental Sanitation Clearance:

1. Approved NOT APPROVED
Signed NA Date _____
2. Comments _____

BUILDING AND PLUMBING DEPARTMENT:

A. Building or Mobile Home Permit

1. Permit issued:

a. Date _____

b. Number _____

2. Permit rejected _____

B. Repair or remodel permit

1. Permit issued:

a. Date _____

b. Number _____

2. Permit rejected _____

C. Other problems:

Describe any special problems associated issuing building permit (if necessary) _____

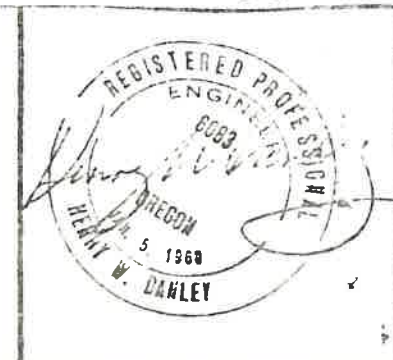
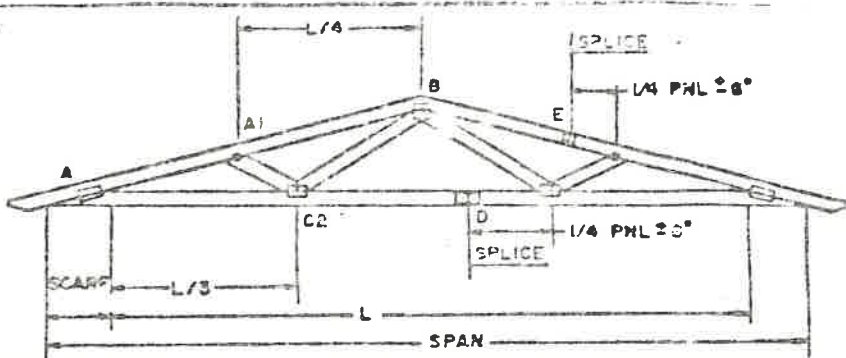
Building Clearance:

Signed

Date

[Signature]

7-28-82



4.00/12 E

FOR SPAN 45'-0" OR LESS MINIMUM LUMBER TOP CHORD=2X 6 DOUG FIR-LAR #1 JOINT A= 3.9X 9.0 JOINT A1=1.3X 1.8 JOINT B=3.9X 5.4 JOINT C2=4.5X 3.6 JOINT D=4.5X 3.6 JOINT E=4.5X 3.6	BOTTOM CHORD=2X 6 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU BRACED WEBS C2-E THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 41'-4" OR LESS MINIMUM LUMBER TOP CHORD=2X 6 DOUG FIR-LAR #1 JOINT A= 3.9X 7.2 JOINT A1=1.3X 1.8 JOINT B=4.5X 3.6 JOINT C2=4.5X 3.6 JOINT D=4.5X 3.6 JOINT E=4.5X 3.6	BOTTOM CHORD=2X 6 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 37'-8" OR LESS MINIMUM LUMBER TOP CHORD=2X 6 DOUG FIR-LAR #1 JOINT A= 3.9X 7.2 JOINT A1=1.3X 1.8 JOINT B=4.5X 3.6 JOINT C2=4.5X 3.6 JOINT D=4.5X 3.6 JOINT E=4.5X 3.6	BOTTOM CHORD=2X 6 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 34'-1" OR LESS MINIMUM LUMBER TOP CHORD=2X 6 DOUG FIR-LAR #1 JOINT A= 3.2X 7.2 JOINT A1=1.3X 1.8 JOINT B=4.5X 3.6 JOINT C2=2.6X 3.4 JOINT D=3.2X 3.6 JOINT E=4.5X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 31'-8" OR LESS MINIMUM LUMBER TOP CHORD=2X 4 DOUG FIR-LAR #1 JOINT A= 4.5X 5.4 JOINT A1=1.3X 1.8 JOINT B=3.2X 3.6 JOINT C2=3.2X 3.6 JOINT D=3.2X 3.6 JOINT E=3.2X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 29'-8" OR LESS MINIMUM LUMBER TOP CHORD=2X 4 DOUG FIR-LAR #1 JOINT A= 3.9X 5.4 JOINT A1=1.3X 1.8 JOINT B=3.2X 3.6 JOINT C2=3.2X 3.6 JOINT D=3.2X 3.6 JOINT E=3.2X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 27'-0" OR LESS MINIMUM LUMBER TOP CHORD=2X 4 DOUG FIR-LAR #1 JOINT A= 3.9X 5.4 JOINT A1=1.3X 1.8 JOINT B=3.2X 3.6 JOINT C2=3.2X 3.6 JOINT D=3.2X 3.6 JOINT E=3.2X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 25'-8" OR LESS MINIMUM LUMBER TOP CHORD=2X 4 DOUG FIR-LAR #1 JOINT A= 3.2X 5.4 JOINT A1=1.3X 1.8 JOINT B=3.2X 3.6 JOINT C2=2.6X 3.6 JOINT D=3.2X 3.6 JOINT E=3.2X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 23'-8" OR LESS MINIMUM LUMBER TOP CHORD=2X 4 DOUG FIR-LAR #1 JOINT A= 3.2X 5.4 JOINT A1=1.3X 1.8 JOINT B=3.2X 3.6 JOINT C2=2.6X 3.6 JOINT D=3.2X 3.6 JOINT E=3.2X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES
FOR SPAN 21'-8" OR LESS MINIMUM LUMBER TOP CHORD=2X 4 DOUG FIR-LAR #1 JOINT A= 4.5X 3.6 JOINT A1=1.3X 1.8 JOINT B=3.2X 3.6 JOINT C2=2.6X 3.6 JOINT D=3.2X 3.6 JOINT E=3.2X 3.6	BOTTOM CHORD=2X 4 DOUG FIR-LAR #1 ALL WEBS=2X 4 DOUG FIR-LAR STU NO BRACED WEBS THE MINIMUM BEARING= 3.5 INCHES

The approval of these plans shall not be construed to be a permit for, or an approval of, any violation of any City or County codes or ordinances, nor prevent the Building Official from thereafter requiring the correction of errors or from suspending building operations being carried on thereunder when a violation of any City or County codes or ordinances.

APPROVED
 CITY/ COUNTY BUILDING DEPT
 JUL 2 1988

THE BEST RESULTS IN TRUSS FABRICATION ARE OBTAINED WITH A MECHANICAL JIG THAT ELIMINATES HARMFUL STRESSES CAUSED BY HANDLING. LACKING SUCH A JIG, GREATER CARE MUST BE EXERCISED IN HANDLING THE TRUSS OR LARGER CONNECTOR PLATES SHOULD BE SUBSTITUTED. J.D. ADAMS CO. BEARS NO RESPONSIBILITY FOR THE ERECTION OF TRUSSES. PERSONS USING TRUSSES ARE CAUTIONED TO SEEK PROFESSIONAL ADVICE IN REGARD TO ERECTION BRACING AND PERMANENT BRACING. ALL JOINTS MUST BE ACCURATELY CUT AND FIT. DIMENSIONS MUST BE VERIFIED. ALL PLATES CENTERED UNLESS SHOWN OTHERWISE. PLATES ARE MINIMUM BASED ON STRESSES. FABRICATOR MAY FIND FROM EXPERIENCE THAT SOME JOINTS MIGHT REQUIRE LARGER PLATES FOR HANDLING. ALL CONTINUOUS BRACING ON WEBS AND CHORDS TO BE ANCHORED AT BOTH ENDS TO A SUITABLE SUPPORT. (ALL BRACING TO BE SUPPLIED BY OTHERS.) ALL WEBS 2X4 UNLESS OTHERWISE SPECIFIED. * MULTISPIKE *(BY J.D. ADAMS CO.) SHALL BE MADE OF 20 GAGE STEEL AND PRESSES INTO BOTH FACES OF JOINTS.

MULTIPLY SPAN BY FACTORS BELOW FOR STRESSES

A-A1= 93.99(C) A1-B= 82.29(C), A-C2= 89.17(T) C2-C1= 60.36(T)
A1-C2= 16.21(C) C2-B= 25.44(T)

FOR ALL BRACED WEBS, USE A 1X4 CONTINUOUS BRACE
 FOR A MINIMUM BEARING GREATER THAN 3 1/2" BUT NOT EXCEEDING 7"
 AND ONE BEARING BLOCK
 REQUIRED NAILS ON BEARING BLOCK=(MIN. BAG.-3.5)X 6.14

TRUSS LOADING
 ROOF
 LL= 25.00 PSF
 DL= 7.00 PSF
 CEILING
 LL= 0.00 PSF
 PL= 10.00 PSF
 2 INCREASE FOR STL=15
 SFACED AT 24°D.C.
 PAGE 11

APPROVED
CURRY COUNTY BUILDING DEPT.
 Engineered Roof Trusses on 7 1/2" centers
 4 to 12 pitch
 (Standard Drawing Attached)

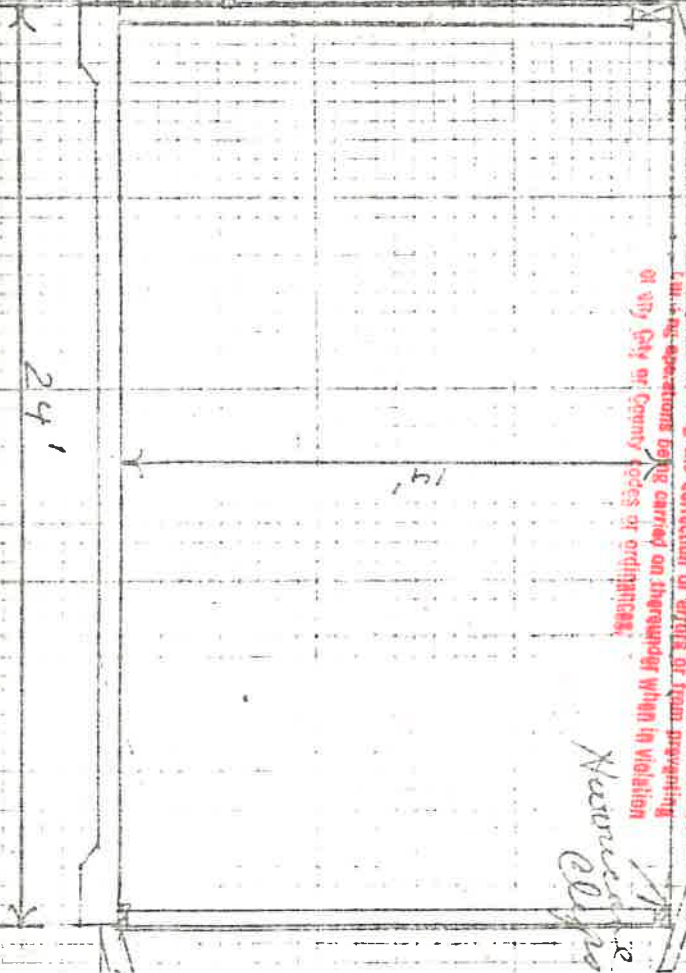
JUL 21 1982

*The erection of these pines shall not be permitted to be...
 permit for an approval of...
 codes and standards, nor prevent the building official from...
 the order requiring the correction of errors or from suspending...
 or city, city or County codes or ordinances.*

*Approved
 [Signature]*

T-111 Plywood Siding
 2" x 4" Studs o.a. 16" centers
 Double top plate
 treated 2" x 6" sole plate

4" x 12" Header
 6" x 6" treated
 Post on 12' centers
*Positive
 connections*
 6" concrete
 floor with 12"
 footings

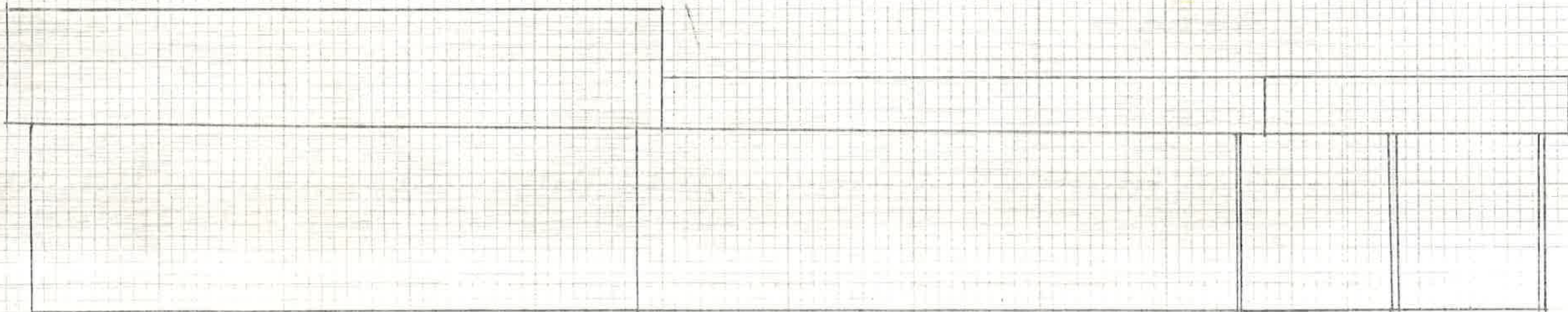


*main 6" clear
 grade*

*To Match existing
 Building*

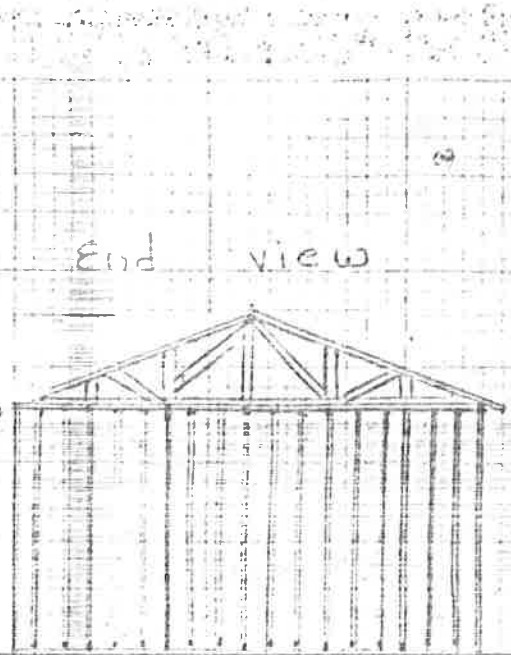
Existing Building

Proposed Addition



96'

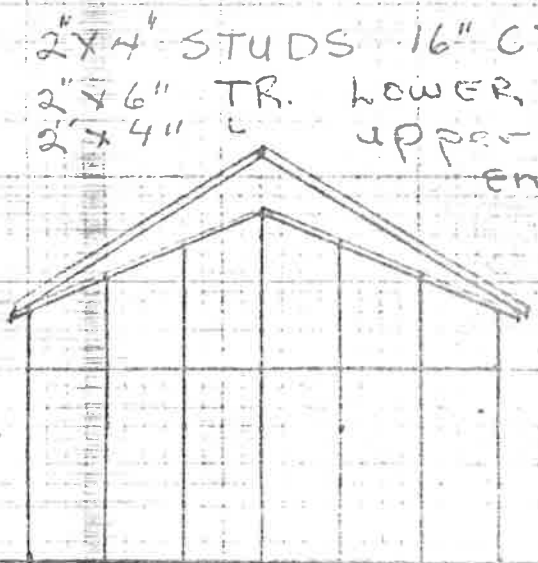
24'



End view



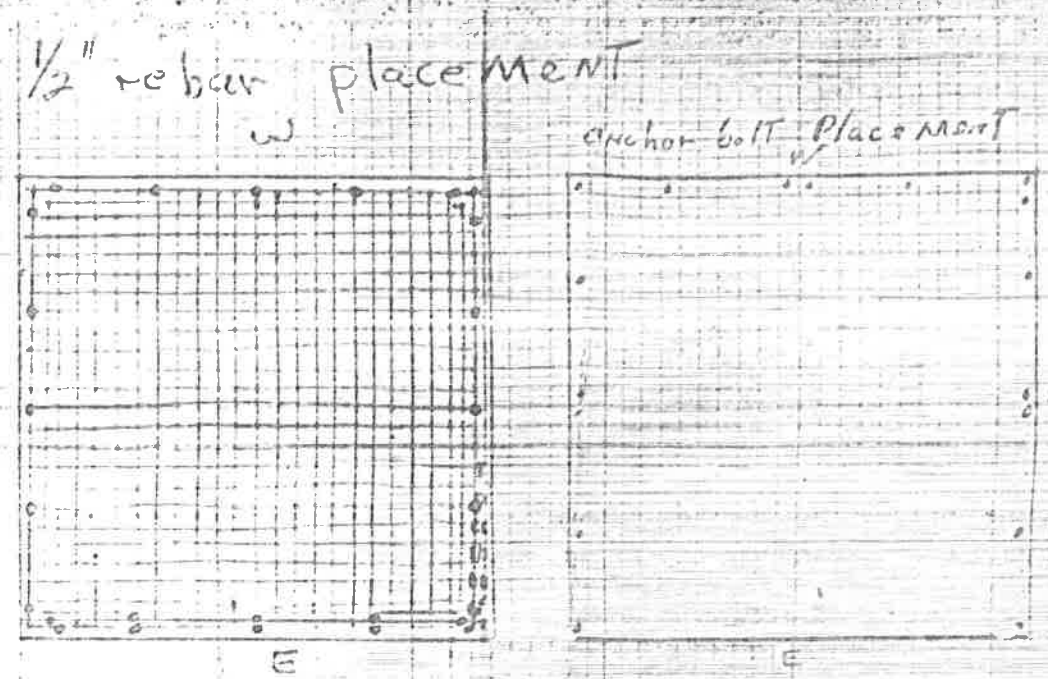
Back wall



Front wall

2x4 STUDS 16" CTRS.
 2x6 TR. lower plate
 2x4 upper plate
 engineered roof trusses 24" CTRS.

T-111 sheeting
 5/8" plywood roof sheeting
 4x12 x 24 TR Header
 4x4 outside upright posts
 6x6 center upright post



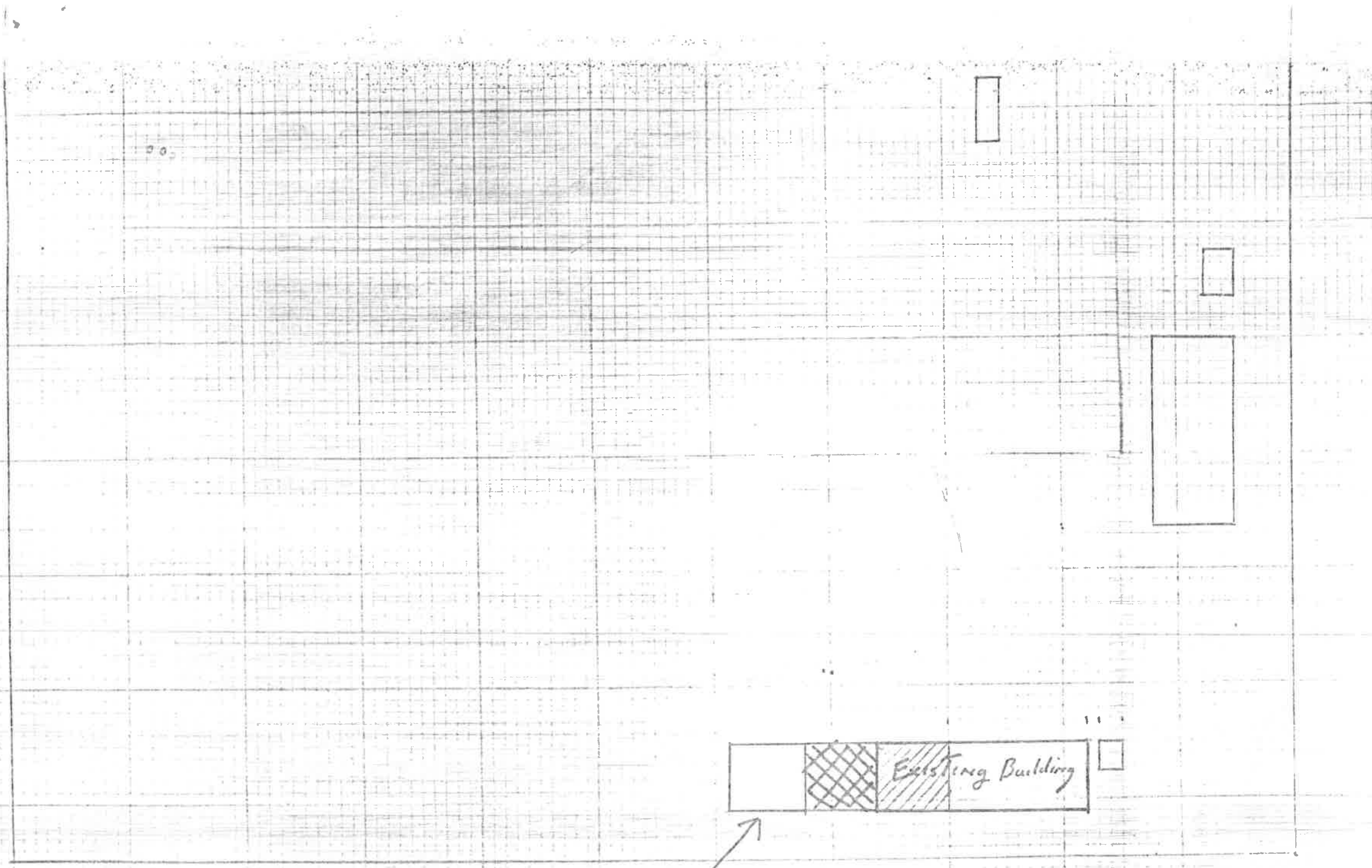
1/2" rebar placement

Anchor Bolt Placement

footing 18" wide 12" Deep
 main floor 6" minimum
 2 Rebar Horizontal on S., W.
 and N. Footings
 3 rebar on E. footing
 VERTICAL rebar 4.5" CTRS.
 concrete reinforcement
 mat wire throughout floor



4 mil black polyethylene
 3" minimum COVER
 for rebar
 1" = 10"



PROPOSED

ADDITION

1" = 40'

Curry County, Oregon
Building Inspection Request

Date 9-9-82 am pm

Name State Hwy Dept

Location 127 Arizona
in Port Orford

① Vertical STEEL not
to be in contact with
EARTH

② Lap rebar AT
CORNERS 30" min

By

Curry County Inspector, Gold Beach, Ore.

487018-0