

RS. 01.176348

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CITY OF
PORTLAND, OREGON

OFFICE OF PLANNING AND DEVELOPMENT REVIEW

1900 SW 4th Ave, Suite 5000

Portland, OR 97201



STATUS CHECK		Residential 1 & 2 Family Permit		Application # 01-176348-000-00-RS	
Status Date: January 10, 2002				IVR Number: 2140344	
APPLICANT GROVE DEVELOPMENT INC		Phone: (503) 977-2166			
OWNER VIRGINIA H ROBINSON		Phone:			
CONTRACTOR GROVE DEVELOPMENT INC		Phone:			
PROJECT INFORMATION		Description of Work: NSFR- PARTITION PLAT2001-129 PARCEL 3			
Street 4709 SW FLOWER CT					
Address					
Occupancy Group	Construction Type	Sub Type	Work Proposed		
R3 U1	V-N	Single Family Dwelling	New Construction		
This report shows those reviews which have been assigned as of January 10, 2002 at 9:13 am. Technical reviews may trigger additional review assignments.					
Review Type/Process	Mandatory	Status	Action Date	Reviewer	Phone
Completeness Check - RS	X	Closed	1/10/02	Heltman, Nancy	503-823-7360
Process Manager		Open		Hansen, Keith	503-823-0655
Assign plan and file location		Closed	12/19/01	Hansen, Keith	503-823-0655
Assign Reviews - RS		Closed	12/19/01	Hansen, Keith	503-823-0655
Corrections Received - RS		Open		DOCUMENT SERVICES	503-823-7357
Assign address	X	Checksheet		McBee, Carol	503-823-5115
Planning and Zoning Review	X	Approved	1/10/02	Wood, Sandra	503-823-7827
Erosion Control Plan Review	X	Approved	1/10/02	Wood, Sandra	503-823-7827
Life Safety Review	X	Open	1/10	Heltman, Nancy	503-823-7360
Structural Review	X	Open		STRUCTURAL	503-823-7301
Residential Plumbing Review	X	Open		Ebeling, Mike	503-823-7247
Residential Subsurface Site Evaluation	X	Open		COMMERCIAL/RESIDENTIAL PLUMB	
BES Sanitary Review	X	Open		BES	503-823-7761
BES Stormwater Review	X	Open		BES	503-823-7761
BES - SDC Review	X	Open		BES	503-823-7761
Transportation SDC - review	X	Open		PDOT	503-823-7002
Parks SDC Review	X	Open		Raschke, Glenn	503-823-1697
Trans - Street Systems Review	X	Open		PDOT	503-823-7002
Street Systems - Assign Reviews		Open		PDOT	503-823-7002
Water Available	X	Open		WATER	503-823-7479
Urban Forestry Review	X	Open		Black, Myles	503-823-4018
Send Letter of intent to expire		Open		DOCUMENT SERVICES	503-823-7357
Plans checked out to Applicant		Open			
Pre-Issuance check	X	Open		PRE-ISSUANCE RS, MI, MP	503-823-7357
Payment Received		Open			



Mechanical Permit Application

City of Portland

1900 SW 4th, Ste 5000, PO Box 8120, Portland, OR 97201

Phone: (503) 823-7363, Fax: (503) 823-3018

TDD: (503) 823-6868, Website: www.opdr.ci.portland.or.us

OFFICE USE ONLY

Date received:

Permit no.:

By:

TYPE OF PERMIT

- ☐ 1 & 2 family dwelling or accessory ☐ Commercial/Industrial ☐ Multi-family ☐ Tenant improvement
☒ New construction ☐ Addition/alteration/replacement ☐ Other:

JOB SITE INFORMATION

Job address: Unit C1-00410 MP Parcel 3

Bldg. no.: Suite no.:

Tax map/tax lot/account no.:

Lot: Block: Subdivision:

Project name:

City/county: ZIP:

Description and location of work on premises:

Building Permit #, if applicable:

Est. date of completion/inspection:

Will you call for inspection within 24 hours? ☐ Yes ☐ No

Tenant improvement or change of use:

Is existing space heated or conditioned? ☐ Yes ☐ No

Is existing space insulated? ☐ Yes ☐ No

MECHANICAL CONTRACTOR

Business name:

Address:

City: State: ZIP:

Phone: Fax: E-mail:

CCB no.:

City/metro lic. no.:

Name (please print):

CONTACT PERSON

Name:

Address:

City: State: ZIP:

Phone: Fax: E-mail:

OWNER

Name: Carol Hunt

Mailing address:

City: State: ZIP:

Phone: 503/9772166 Fax: E-mail:

ENGINEER

Name:

Address:

City: State: ZIP:

Phone: Fax: E-mail:

Applicant's signature:

Date:

Name (print):

COMMERCIAL VALUATION SCHEDULE

Indicate equipment quantities in boxes below. Indicate the dollar value of all mechanical materials, equipment, labor, overhead, profit. Value \$

*See checklist for important application information and jurisdiction's fee schedule for residential permit fee.

1 & 2 FAMILY DWELLING PERMIT FEE SCHEDULE AND COMMERCIAL/INDUSTRIAL/EQUIPMENT SCHEDULE

Description	Qty.	Fee (ea.) Res. only	Total Res. only
HVAC:			
Air handling unit _____ CFM		\$19	
Air conditioning (site plan required)		\$19	
Alteration of existing HVAC system		\$24	
Boiler/compressors			
State boiler permit no.:			
HP _____ Tons _____ BTU/H		\$24	
Fire/smoke dampers/duct smoke detectors			
Heat pump (site plan required)		\$38	
Install/replace furnace/burner _____ BTU/H			
Including ductwork/vent/liner <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	\$40	
Install/replace/relocate heaters - suspended, wall, or floor mounted		\$19	
Vent for appliance other than furnace	1	\$16	
Refrigeration:			
Absorption units _____ BTU/H			
Chillers _____ HP			
Compressors _____ HP			
Environmental exhaust and ventilation:			
Appliance vent		\$16	
Dryer exhaust	1	\$10	
Hoods, Type I/II/res. kitchen/hazmat hood fire suppression system	1	\$10	
Exhaust fan with single duct (bath fans)	4	\$10	
Exhaust system apart from heating or AC		\$16	
Fuel piping and distribution (up to 4 outlets)			
Type: LPG <input checked="" type="checkbox"/> NG <input type="checkbox"/> Oil	1	\$11	
Fuel piping each additional over 4 outlets		\$2	
Process piping (schematic required)			
Number of outlets			
Other listed appliance or equipment:			
Decorative fireplace	1	\$19	
Insert - type _____		\$42	
Woodstove/pellet stove		\$42	
Other: (including oil tanks, gas and diesel generators, gas and electric ceramic kilns, gas fuel cells, jewelry torches, crucibles and other appliance/equipment not included above)		\$24	

Notice: This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

Permit fee\$
 Minimum fee (\$50)\$
 Commercial Plan review (at 60%) \$
 State surcharge (8%)\$
 TOTAL\$



Office of Planning and Development Review, City of Portland

New One and Two Family Dwelling Submittal Checklist

Folder Number: 116-508

Stock Plan Number: _____

Review Date: 4/10/02

The information listed below is the minimum information required for a "complete" submittal package. Failure to provide any of the following material that is deemed to be applicable to your project will be cause to reject your submittal. Incomplete plans will not be taken in for review.

		Provided	Not Applicable	Accepted (Staff use)
1	Four (4) Complete sets of legible plans drawn to scale, showing conformance to the applicable local and state building codes. Lateral design details and connectors must be incorporated into the plans or on a separate full size sheet attached to the plans with cross-references between plan location and details. Plan review cannot be completed if copyright violations exist.	✓		NA
2	Site/Plot plan drawn to scale. The plan must show: lot and building setback dimensions; property corner elevations (if there is more than 4-ft. elevation differential, the site plan must show contour lines at 2-ft. intervals); location and dimensions of easements and driveway, footprint of structure (including decks), location of wells/septic systems, utility locations, north arrow, lot area, building coverage area, percentage of coverage, impervious area (structures, paving, etc.), existing structures on site, location of utilities (storm and sanitary sewers, water, electric, etc.), surface drainage, width of adjacent right of way and curb height.	✓		✓
3	Geotechnical/soils report: provide geotechnical or soils report as applicable for sites within soils hazard areas or with slopes in excess of 20% or where a special foundation system relying on lateral soil bearing is employed (e.g. pole buildings, etc.).		✓	—
4	Foundation plan. Show dimensions, anchor bolts, any hold-downs and reinforcing pads, connection details, vent size and location, location and size of crawl space access.	✓		✓
5	Floor plans. Show all dimensions, room identification, window size, location of smoke detectors, water heater, furnace, ventilation fans, plumbing fixtures, balconies and decks, location and construction details for stairs and handrails, etc.	✓		✓
6	Cross section(s) and details. Show sizes and spacing for all framing members, such as floor beams, headers, joists, sub-floor, wall construction, roof construction. More than one cross section may be required to clearly portray construction. Show details of all wall and roof sheathing, roofing, roof slope, ceiling height, siding material, footings and foundation, stairs, fireplace construction, thermal insulation, etc.	✓		✓
7	Elevation views. Provide elevations for all sides for new construction; minimum of three elevations for additions and remodels. Exterior elevations must reflect the actual grade. Full size sheet addendums showing foundation elevation drawings with cross-references are acceptable.	✓		✓
8	Wall bracing (prescriptive path) and/or lateral analysis plans. Details and locations for lateral force resisting elements must be shown on plans; for non-prescriptive path analysis, specifications and calculations to engineering standards must be provided as well.	✓		✓
	Floor/roof framing plans are required for all floor and roof assemblies. Plans shall indicate member sizing, spacing and bearing locations. Show location of attic vent location and size and location of attic access.	✓		✓
9	Basement and retaining wall cross sections and details showing placement of rebar, footing sizes, etc. shall be provided. For engineered systems, see item 11 for "Engineer's calculations."	✓		—
11	Beam calculations. Provide two sets of calculations using current code design values for all beams and multiple joists over ten feet in length and/or any beam/joist carrying a non-uniform load or for cantilever conditions.	✓		—
12	Manufactured floor/roof truss design details. Note: roof truss design details and calculations may be submitted as a "deferred submittal" item with approval of the building plans examiner doing this completeness check. Truss layout plan, however, must be provided at time of submittal and any details pertaining to lateral force resisting requirements of the trusses must be included. Manufactured floor system designs and calculations must be provided at time of submittal.	✓		—
13	Energy Code Compliance. Identify the prescriptive path or provide calculations.	✓		—
14	Engineer's calculations when required or provided and prepared by an architect or engineer shall be stamped by an engineer or architect licensed in Oregon and shall be shown to be applicable to the project under review.	✓		—

I certify that the items checked above represent a complete submittal package for the application being made. I understand that this information is being reviewed by OPDR to determine completeness. I understand that if the submittal is determined to be incomplete plans will not be accepted and the plan review process will not start.

Applicant name (print): Care Ann A.Signature: [Signature]Date: 4/10/02Reviewed By: _____ Accepted as complete: 4/10/02 Rejected as incomplete: _____

Notes: _____



JAN 3rd Thu 9AM

City of Portland Development Services Center

1900 SW 4th Avenue, First Floor Portland, OR 97201 (503) 823-7310

Request for Application Intake Appointment (page 1)

☒ NSFR ☐ NSFR w/ADU ☐ Duplex ☐ 2-unit rowhouse
☐ 2-unit rowhouse w/ 1 ADU ☐ 2-unit rowhouse w/2 ADU's ☐ Mid home on lot

PLEASE NOTE—The City of Portland NEEDS A MINIMUM OF 5 WORKING DAYS from the time we receive your request to the day of your appointment. Staff will set up your computer file, perform the necessary zoning research, and assign a site address prior to your appointment.

Appointments are available Monday through Friday mornings (circle your preference)
 8:15, 9:00, 10:00 & 10:45 a.m. (Mo) Tu We Th Fr
 Thursday Evenings at 5:30 & 6:30 p.m. First Available Time ☒

4709
SW Flower
CA

Applicant Fill Out Completely Below (Please Print Clearly)

INCOMPLETE APPLICATIONS WILL BE RETURNED

Applicant (Company): Grove Development, Inc.	
Contact Person: Grove Hunt	
Applicant Mailing Address: 8627 SW Rustling Leaves Portland, OR 97203	
Office Phone: (503) 977-2166	Cell Phone: (503) 793-3299
Fax Number: (503) 246-1981	Email:
Contractor: Grove Dev. Inc.	CCB Number: 109694
Tax Account Number: R508380 <small>If you do not know your Tax Account Number, please call Multnomah County at (503) 988-3326 to get this information</small>	
Cross Streets: Cameron & Shattuck	Tax Lot Number:
Plat Name/Number: 2001-129	Block/Lot: 129/31 Qtr Sec #
Sq. Ft. Living area: 2600 sf	Basement: _____ sf
Garage/Carport attached? (Y) N (circle one)	Garage/Carport: 16 sf
Number of Stories: 2	Number of Units: 3 individual single family
How many exterior feet of pipe to connect your Sewer: 40 Water: 40 Raindrains: 40	Electrical: Limited Energy? (Y) N (circle one)
How many Bathrooms: 2 Kitchens: 1	Electric Temporary? (Y) N (circle one)
Land Use Review Case Numbers: Partition Plat # 2001-129	
Is this a Master House Plan? Y (N) Plan #:	

01-176160-IQ



City of Portland Development Services Center

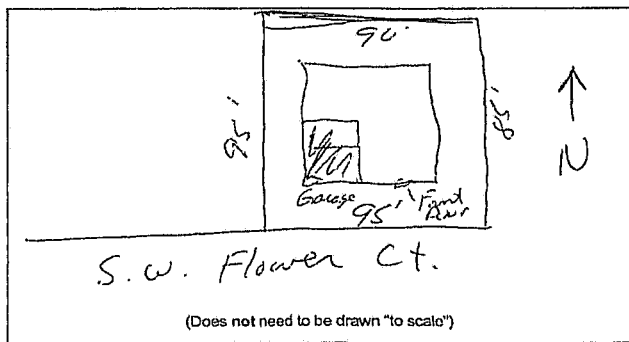
1900 SW 4th Avenue, First Floor Portland, OR 97201 (503) 823-7310

Request for Application Intake Appointment (page 2)

- Addressing / Lot Verification

Prior to your appointment, the location of your lot must be verified. If your lot does not yet have a street address, one will be assigned. In the box below, draw a diagram of your lot and all structures (including detached garages). Indicate the following:

- ☐ dimensions of the lot
- ☐ streets, and street names for all streets adjoining your lot
- ☐ if more than one street adjoins your lot, indicate the front door entrance to the structure
- ☐ if multiple units, show all front door entrances
- ☐ place a North arrow in the box



Full Legal Description: (Required)

(If lot division is in progress, please provide the LUR or Partition Plat Number AND the Parcel Number)

Partition Plat # 2001.129

Parcel # 3

To request an appointment, fax both completed pages of this form to (503) 823-4224.
You will receive a fax confirmation of your appointment date and time.



Intake Appointment Confirmation

Regarding your Application for:

Port 3. P.P. 2001-129
Property Identification R Number, Plat Name & Block, Permit Number

Your appointment is scheduled for:

Date: Jan 13rd 02

Day: Thursday Time: from 9:00 to 9:45 am pm

at the Development Services Center / 1st floor / 1900 SW 4th Avenue

You have been given the next available appointment. Let us know if you are unavailable at this time by calling us at (503) 823-0672 to reschedule your appointment -- *48 hours in advance

*Appointments cancelled with less than 48 hour notice, or "no shows" are subject to a \$75 rescheduling fee (applied to application)

What to bring to your appointment:

The information listed below is the minimum required for acceptance of a Building Permit application. No incomplete information will be accepted. Incomplete submittal materials will be returned to applicants. Applications will not be processed or routed for any reviews until the required plan check fees have been paid in full.

The intake appointment program is designed to have submittal accomplished in one visit. Applicants are expected to arrive with complete submittal materials. There will be a \$75 charge for each additional intake appointment required due to incomplete or insufficient application materials, missed appointments, or cancellation without proper notice.

- ☐ CONSTRUCTION DRAWINGS (4 sets of all plans)
- ☐ SITE PLANS (see handout)
- ☐ FOUNDATION PLAN - label hold-downs for lateral design
- ☐ FLOOR PLANS - to include all floors and lateral shear wall requirements
- ☐ CROSS SECTION(S) and DETAILS - engineered details must be on plans
- ☐ ELEVATION VIEWS - for all faces; must reflect slope of lot
- ☐ WALL BRACING/LATERAL ANALYSIS - indicate method of providing lateral bracing

The following information/forms are also required -

- ☐ NSFR submittal checklist (includes sample site plan diagram)
- ☐ Erosion Control plan (on site plan)
- ☐ Combination SDC form, and MIT or SIM form
- ☐ Mechanical Permit application form

* ADDITIONAL REQUIREMENTS - PROVIDE IF APPLICABLE TO YOUR PROJECT

- ☐ BASEMENT AND RETAINING WALLS provide details/engineering when necessary
- ☐ BEAM CALCULATION for beams over 10' in length or with point loads
- ☐ MANUFACTURED ROOF/FLOOR TRUSS LAYOUT if using engineered wood systems
- ☐ SOILS REPORT if site is over 20% slope



JAN 3rd THUR 9AM
 City of Portland Development Services Center

1900 SW 4th Avenue, First Floor Portland, OR 97201 (503) 823-7310

Request for Application Intake Appointment (page 1)

☒ NSFR ☐ NSFR w/ADU ☐ Duplex ☐ 2-unit rowhouse
☐ 2-unit rowhouse w/ 1 ADU ☐ 2-unit rowhouse w/2 ADU's ☐ Mid home on lot

PLEASE NOTE—The City of Portland NEEDS A MINIMUM OF 5 WORKING DAYS from the time we receive your request to the day of your appointment. Staff will set up your computer file, perform the necessary zoning research, and assign a site address prior to your appointment.

Appointments are available Monday through Friday mornings (circle your preference)

8:15/ 9:00, 10:00 & 10:45 a.m. (Mo) Tu We Th Fr

Thursday Evenings at 5:30 & 6:30 p.m. First Available Time ☒

Applicant Fill Out Completely Below (Please Print Clearly)

INCOMPLETE APPLICATIONS WILL BE RETURNED

Applicant (Company): <u>Grove Development, Inc.</u>	
Contact Person: <u>Grove Hunt</u>	
Applicant Mailing Address: <u>8627 SW Rustling Leaves</u> <u>Portland, OR 97223</u>	
Office Phone: <u>(503) 977-2166</u>	Cell Phone: <u>(503) 793-3299</u>
Fax Number: <u>(503) 216-1981</u>	Email: _____
Contractor: <u>Grove Dev. Inc.</u>	CCB Number: <u>129694</u>
Tax Account Number: <u>R508380 151632</u> If you do not know your Tax Account Number, please call Multnomah County at (503) 988-3326 to get this information	
Cross Streets: <u>Cameron & Shattuck</u>	Tax Lot Number: _____
Plat Name/Number: <u>2001-129</u>	Block/Lot: <u>14831</u> Qtr Sec # _____
Sq. Ft. Living area: <u>2600</u> sf	Basement: _____ sf Garage/Carport <u>600</u> sf
Garage/Carport attached? <input checked="" type="radio"/> (Y) <input type="radio"/> (N) (circle one)	
Number of Stories: <u>2</u>	Number of Units: <u>3 individual single family</u>
How many exterior feet of pipe to connect your: Sewer? <u>40</u> Water? <u>40</u> Raindrains? <u>40</u>	Electrical: Limited Energy? <input checked="" type="radio"/> (Y) <input type="radio"/> (N) (circle one)
How many Bathrooms? <u>2</u> Kitchens? <u>1</u>	Electric Temporary? <input checked="" type="radio"/> (Y) <input type="radio"/> (N)
Land Use Review Case Numbers: <u>Parishan Plat # 2001-129</u>	
Is this a Master House Plan? <input checked="" type="radio"/> (Y) <input type="radio"/> (N) Plan # _____	

01-176345-R5
01-176160-IQ

KH



CITY OF
PORTLAND, OREGON
BUREAU OF ENVIRONMENTAL SERVICES
1900 SW 4TH AVE, SUITE 2100
Portland, OR 97201



BES PLAN EXAMINATION CHECK SHEET

Application # **01-176348-000-00-RS**
01-176344-000-00-RS
IVR# **2140344**

Review Date: **February 12, 2002**

To:	CONTRACTOR R/BUILDER	GROVE DEVELOPMENT INC 8627 SW RUSTLING LEAVES PORTLAND OR 97223	Work	503 977-2166
			Fax	503 246-1981
From:	BES	IGNATIUS DECHABERT	Phone	503-823-7116
			Fax	503 823-4591
			E-Mail	IGNATIUSD@BES.CI.PORTLAND.OR. US
cc:	OWNER	VIRGINIA H ROBINSON 10606 SW CAPITOL HWY #206 PORTLAND, OR 97219-6870		

PROJECT INFORMATION

Street Address: **4709 SW FLOWER CT**

Description of Work **NSFR- PARTITION PLAT2001-129 PARCEL 3**

The following are items that will need to be addressed prior to plan approval by the Bureau of Environmental Services. Approval of your plan for sanitary and storm management facilities by BES does not mean your building permit can be immediately issued; BES is only one of many bureaus that review your building plan.

Item #	Location on plans	Clarifications / Corrections Required
1.	Site Plan - 01-176348-RS	Your submitted SIM Form does not indicate the amount of Non-Mitigated Impervious area to be treated by your stormwater facility (sand filter). Please properly complete the SIM Form and return to Document Services as prescribed below.
2.	01-176344-RS	Per your conversation with Judy Russell, please also properly complete the SIM Form for 4710 SW Cameron Rd. and submit as prescribed below NOTE: You may submit these forms concurrently with the O&M Forms you will be submitting for all four lots in the development, as per our prior conversation.

To respond to this checksheet, come to Document Services (the second floor of 1900 SW Fourth Ave., between 7:30 a.m. and 3:00 p.m.) and update all four sets of the originally submitted drawings. To update the drawings, you may either replace the original sheets with new sheets, or edit the originally submitted sheets. (Specific instructions for updating plans are posted in Document Services.)

Please complete the attached Checksheet Response Form and include it with your re-submittal.

If you have specific questions concerning this Checksheet, please call me at 503-823-7116. To check the status of your project please call (503) 823-7000 and select option 4. Your Plan Review Status will be faxed to you, so please be ready to provide a fax number. If you don't have a fax number you may dial 503 823-7357 to request a Plan Review Status or visit Document Services.



City of Portland Development Services Center

1900 SW 4th Avenue First Floor Portland, OR 97201 (503) 823-7310

Intake Appointment Confirmation

Regarding your Application for: resub 3 PT 2001-129

Property Identification R Number, Plat Name & Block, Permit Number

Your appointment is scheduled for: 11/10/02

Date:

Day: Thursday

Time: from 8:5 to 9:00 am pm

at the Development Services Center / 1st floor / 1900 SW 4th Avenue

You have been given the next available appointment. Let us know if you are unavailable at this time by calling us at (503) 823-0672 to reschedule your appointment -- *48 hours in advance

*Appointments cancelled with less than 48 hour notice, or "no shows" are subject to a \$75 rescheduling fee (applied to application)

What to bring to your appointment:

The information listed below is the minimum required for acceptance of a Building Permit application. No incomplete information will be accepted. Incomplete submittal materials will be returned to applicants. Applications will not be processed or routed for any reviews until the required plan check fees have been paid in full.

The intake appointment program is designed to have submittal accomplished in one visit. Applicants are expected to arrive with complete submittal materials. There will be a \$75 charge for each additional intake appointment required due to incomplete or insufficient application materials, missed appointments, or cancellation without proper notice.

- ☐ CONSTRUCTION DRAWINGS (4 sets of all plans)
- ☐ SITE PLANS (see handout)
- ☐ FOUNDATION PLAN -- label hold-downs for lateral design
- ☐ FLOOR PLANS -- to include all floors and lateral shear wall requirements
- ☐ CROSS SECTION(S) and DETAILS -- engineered details must be on plans
- ☐ ELEVATION VIEWS -- for all faces; must reflect slope of lot
- ☐ WALL BRACING/LATERAL ANALYSIS -- indicate method of providing lateral bracing

Notified person

*1-3-02
8:08*

The following information/forms are also required --

- ☐ NSFR submittal checklist (includes sample site plan diagram)
- ☐ Erosion Control plan (on site plan)
- ☐ Combination SDC form, and MIT or SIM form
- ☐ Mechanical Permit application form

* ADDITIONAL REQUIREMENTS -- PROVIDE IF APPLICABLE TO YOUR PROJECT

- ☐ BASEMENT AND RETAINING WALLS provide details/engineering when necessary
- ☐ BEAM CALCULATION for beams over 10' in length or with point loads
- ☐ MANUFACTURED ROOF/FLOOR TRUSS LAYOUT if using engineered wood systems
- ☐ SOILS REPORT if site is over 22% slope

Life Safety Checksheet Response

Permit #: 01-176348-000-00-RS

Date: 02/27/02

Customer name and phone number: GROVE HUNT 503-793-3299

Note: In the spaces below, please provide specific information concerning the changes that you have made in response to the checksheet. Note the checksheet item number, your response or a description of the revision, and the location of the change on the plans (i.e. page number and/or detail number). Use as many lines as needed. *If the item is not in response to a checksheet, write "Applicant" in the column labeled "Checksheet item number."*

[illegible]

Plan Bin Location: 48



CITY OF
PORTLAND, OREGON
OFFICE OF PLANNING AND DEVELOPMENT REVIEW
PO Box 8120
Portland, OR 97207-8120



LIFE SAFETY CHECKSHEET

Review Date: February 14, 2002

Application #: 01-176348-000-00-RS
IVR #: 2140344

To:	CONTRACT OR/BUILDER	GROVE DEVELOPMENT INC 8627 SW RUSTLING LEAVES PORTLAND OR 97223	Work:	503 977-2166
			Fax:	503 246-1981 ext.

From:	PLANS EXAMINER	NANCY HETTMAN	Phone:	503-823-7360
			Fax:	
			e-mail:	hettmann@ci.portland.or.us

cc:	OWNER	VIRGINIA H ROBINSON 10606 SW CAPITOL HWY #206 PORTLAND, OR 97219-6870	
-----	--------------	--	--

PROJECT INFORMATION

Street Address:	4709 SW FLOWER CT					
Description of Work:	NSFR- PARTITION PLAT2001-129 PARCEL 3					
The following assumptions were made when reviewing your project:						
Occupancy group	Construction Type	Square Footage	Stories	Sprinklers	Alarms	Detection
R3	V-N	3041	2	N/A	N/A	Y

PLAN REVIEW

Based on the plans submitted, the following items appear to be missing or not in conformance with: ☐ Oregon Structural Specialty Code OR ☒ Oregon 1&2 Family Dwelling Specialty Code, and/or other city, state, or federal requirements:

Item #	Location on plans	Code Section	Clarification / Correction Required
1	Pg. 1	112.1 IOTFDC	Show and correspond finished grade elevations at the corners of the house on the site plan and the façade drawings. Make sure that the cross sections then agree with the slopes shown.
2	Pg. 4-6	112.1 IOTFDC	At the Wall Key on the referenced pages, clarify what the page number of the Bracing Page is. Do not leave "X/X".
3	Pg. 5	112.1 IOTFDC	Why are you not referencing the details, but showing open circle designations?
4	Pg. 6	112.1 IOTFDC	Show the use of the "Attic Room".
5	Pg. 7	314 IOTFDC	Show the minimum clear headroom at the stair detail or provide a cross-section that shows the clear headroom requirement will be met.
6	Pg. 6	OR Energy	Show the required insulation at the roof and attic area on cross-sections.

7		Beams	Cross-reference the beams by ID #, page # of calculation packet, etc. to where the beam is used on the construction plans. Clearly show spans of members (rafters, joists, etc.) that bear on the beam.
8	Pg. 6	Structure	Indicate the rafter, joist, beam and post sizes, etc. on the cross-sections.
9		Prescriptive Bracing IR01-03	<p>The following issues need to be resolved for the lateral bracing of this residence:</p> <ol style="list-style-type: none"> The upper floor has exterior braced walls that do not align vertically with the "nor below and they do not meet the requirements of unusually shaped buildings. They must be redesigned to meet prescriptive or be engineered. Note: The right, exterior wall of Bedroom-2 and the rear, braced walls near the upper floor baths do not align vertically to the exterior walls below, nor do they meet the 4x the joist depth. Bedroom-2 has a BP shown at the rear, corner. This is actually only wide enough for an ABP. Show it as an ABP. It falls over the 5-1/8" x 10-1/2 GLB below. Provide calculations that show that all loads are being considered for this beam – inclusive of tension/compression uplift of ABP. Be sure that the hip reaction is included. The Brace Panel at the right, exterior wall of Bedroom-2's bath falls over beams that are offset too far from exterior walls to meet prescriptive code. Bedroom-3's front, right Brace Panel at corner, is too narrow to be a brace Panel. Show it as an Alternate Brace Panel and provide a Two-Story Brace Panel detail. Make sure all hardware is for the correct loads. Mark all brace panels that fall inside of the exterior walls as IBP (Interior Brace Panels). Include "IBP" on the Wall Bracing Schedule and clarify the construction of these panels. Be aware of the wall bracing percentages. Add details for connection of trusses, Detail Pages 12 & 13 of the Interpretive Ruling 01-03.

To respond to this checklist, come to Document Services (the second floor of 1900 SW Fourth Ave., between 7:30 a.m. and 3:00 p.m.) and update all four sets of the originally submitted drawings. To update the drawings, you may either replace the original sheets with new sheets, or edit the originally submitted sheets. (Specific instructions for updating plans are posted in Document Services.)

Please complete the attached Checklist Response Form and include it with your re-submittal.

If you have specific questions concerning this Checklist, please call me at 503-823-7360. To check the status of your project, please call 503 823-7000 and select option 4. Your Plan Review Status will be faxed to you, so please be ready to provide a fax number. If you don't have a fax number you may dial 503 823-7357 to request a Plan Review Status or visit Document Services.

You may receive separate Checksheets from other City agencies that will require separate responses.

1 copy to each set of plans

1 copy to DSC file

Plancheck # 01-176348 RS

SANDRA

Planner: WOOD

ONE & TWO FAMILY RESIDENTIAL PLAN REVIEW SHEET

Date: 1/10/02Zone: R7Addition and Lot: Purichen Plat 2001-124LUR History: WR 01-910MPParcel # 3

Substandard Lot

Y

(N)
(N)

PUD/Cluster

Y

ADU

Y

(N)
(N)

Detached Access. Structure

Y

Lot size: 8104 #Plan District: ---MinimumRequiredProposed

Front Setback

15'15'

Side Setback

5'L = 10' R = 10'

Rear Setback

5'35.67'

Parking Setback

18'25'

Outdoor Area

N/AN/A

Trees (preservation, planting, or fund)

18"24" preservationMaximum

Vehicle Paving

40 % 540 #345 # 26%

Building Coverage

35 % 2836 #2714 # 34%

Height

30'27'

Impervious Surface

% N/AN/A %Base Zone Design Standards

- ✓ Main Entrance on longest st from road of front street
- ✓ Street Facing Façade 15% proposed
- ✓ Length of Garage Wall 39% proposed
- ✓ Street Lot Line Setbacks behind

Other Req./Notes

1. Plan Check	2. Plan Review
3. Plan Review	4. Plan Review
5. Plan Review	6. Plan Review
7. Plan Review	8. Plan Review
9. Plan Review	10. Plan Review
11. Plan Review	12. Plan Review
13. Plan Review	14. Plan Review
15. Plan Review	16. Plan Review
17. Plan Review	18. Plan Review
19. Plan Review	20. Plan Review
21. Plan Review	22. Plan Review
23. Plan Review	24. Plan Review
25. Plan Review	26. Plan Review
27. Plan Review	28. Plan Review
29. Plan Review	30. Plan Review
31. Plan Review	32. Plan Review
33. Plan Review	34. Plan Review
35. Plan Review	36. Plan Review
37. Plan Review	38. Plan Review
39. Plan Review	40. Plan Review
41. Plan Review	42. Plan Review
43. Plan Review	44. Plan Review
45. Plan Review	46. Plan Review
47. Plan Review	48. Plan Review
49. Plan Review	50. Plan Review
51. Plan Review	52. Plan Review
53. Plan Review	54. Plan Review
55. Plan Review	56. Plan Review
57. Plan Review	58. Plan Review
59. Plan Review	60. Plan Review
61. Plan Review	62. Plan Review
63. Plan Review	64. Plan Review
65. Plan Review	66. Plan Review
67. Plan Review	68. Plan Review
69. Plan Review	70. Plan Review
71. Plan Review	72. Plan Review
73. Plan Review	74. Plan Review
75. Plan Review	76. Plan Review
77. Plan Review	78. Plan Review
79. Plan Review	80. Plan Review
81. Plan Review	82. Plan Review
83. Plan Review	84. Plan Review
85. Plan Review	86. Plan Review
87. Plan Review	88. Plan Review
89. Plan Review	90. Plan Review
91. Plan Review	92. Plan Review
93. Plan Review	94. Plan Review
95. Plan Review	96. Plan Review
97. Plan Review	98. Plan Review
99. Plan Review	100. Plan Review

SR 01/10/02



CITY OF

PORTLAND, OREGON

OFFICE OF PLANNING AND DEVELOPMENT REVIEW

Micro
 1903 S.W. 4TH Avenue, Suite 5000
 Portland, Oregon 97201
 (503) 823-7000
 FAX: (503) 823-7692
 TDD: (503) 823-6868
 www.ci.portland.or.us/buildings

GENERAL NOTES AND SUPPLEMENTAL INFORMATION 2000 OREGON ONE AND TWO FAMILY DWELLING CODE

Date : March 7, 2002 Folder number: 02-176348 RS
 Project Address: 4709 SW Flower Ct.

1 & 2 Code prescriptive wall bracing ☒ Engineered lateral design ☐ total # pages eng'r'g: _____

Energy Conservation: Path 1 ☒ Path 8 ☐ Retaining walls >4' or surcharged ☐

The following "General Notes and Supplemental Information" are now part of your approved plans.

- It is the responsibility of the contractor to comply with these requirements during construction.
- Where there is a conflict between a general note and the plans, the more restrictive shall apply.
- If you have any questions regarding any of these items, please contact

Plans Examiner: NANCY HETTMAN Phone # (503) 823-7360

E-mail address: hettmann@ci.portland.or.us Fax # (503) 823-7692

Foundation/ Under-floor

322.1

8c

Protection against decay is required under the following conditions must be met:

- Maintain 18" clearance under floor joists, 12" under girders.
- Provide 3" of bearing at beam pockets and 1/2" air space at sides and ends.

502.4

322.1.1

All wood in direct contact with concrete, and all exposed wood supporting porches and decks, to be pressure treated or of natural resistance to decay.

403.1.1

Foundation and anchorage shall comply with the more restrictive of the following or the approved plans.

Foundation footing shall be 18" below finish grade and:

Number of floors	Wall Thickness	Footing Width	Footing Thickness
1	6"	12"	6"
2	8"	15"	7"
3	10"	18"	8"

403.1.5

Foundation anchor bolts shall be not less than 1/2" diameter bolts embedded at least 7" into concrete, or masonry, spaced 6'-0" on center maximum, with at least two bolts per plate and within 12" of ends and corners.

404.1.6

Foundation wall shall extend at least 6" above the finished grade adjacent to the foundation at all points.

405.1

Foundation drainage shall be provided around foundations enclosing habitable or usable space below grade.

406.2

Foundation wall enclosing habitable space requires waterproofing on the outside surface.

408.3 Columns and posts shall be adequately anchored to prevent lateral displacement. Columns less than 4' in length, bearing on a pier or footing within a crawl space are not required to be restrained at the bottom end.

409.1 Ventilation openings at the crawl space are required within 3' of each corner. The minimum net area of ventilation openings shall not be less than one (1) square foot vent area per 150 square feet of under-floor area.

409.2 An 18" x 24" access is required to the under-floor space.

Garages

309.1 Provide a 1-3/8" minimum solid core door, a 20-minute rated fire door or a metal insulated exterior door between garage and residence.

309.1.1 Ducts penetrating the wall or ceiling separating the dwelling from the garage shall be of not less than 26 gauge steel, with no duct openings in the garage.

309.2 Separation required between dwelling unit and garage by means of minimum 1/4" gyp board applied to garage side. Where separation is a floor-ceiling assembly, structure supporting the separation shall be protected by 1/4" gyp board, including wrapping of all beams and supporting posts.

1307.2 Seismic anchorage of water heaters is required.

1307.3

- Appliances installed in the garage generating a glow, spark or flame are to be located 18" above the floor.
- Furnaces or water heaters located in a garage shall be protected from vehicle impact by 2" dia. steel post embedded 18" deep in 6" diameter hole, concrete filled, extending 36" above garage floor.

Dwelling Unit

303.3 Bath and laundry rooms require windows with a min. of 3 sq. ft. with 1.5 sq. ft. openable area or mechanical ventilation system capable of producing a change of air every 12 minutes (5 air changes per hour) or 20 cfm of continuous ventilation.

303.4 Safety glazing shall be provided at hazardous locations such as:

- Tub or shower enclosures where the glazing is less than 60" above the drain.
- Within 24" of a door and less than 60" above the floor.
- Panes greater than 9 sq. ft. and less than 18" above the floor.

312.1 Every sleeping room shall have at least one openable window or door for emergency egress with a net clear opening of 5.7 square feet (5 for grade floor windows).

- Minimum clear opening height 22"; width 20".
- Sill height above finished floor is 44" max.

311.1 & 312.1.1 A minimum of one egress door is required. Such door shall be provided a minimum 36" landing on both sides of the door. The landing shall not be more than 8" below the top of the threshold.

316.1 Provide 112V interconnected smoke alarms with battery backup, in each sleeping room, outside of each separate sleeping area in the immediate vicinity of the bedrooms, and on each additional story, including basement. Certain required locations may disallow the use of ionization-type alarms. Photoelectric-type alarms are suitable for all code-required locations.

Stairs &
Guardrails

314

Stairs must comply with the following dimensions:

- 36" minimum width. 6'-8" headroom height measured vertically from the plane of the nosings of the treads.
- 8" maximum rise and 9" minimum run.

315

Stairs with more than 3 risers must comply with the following:

- Provide a 1-1/2" minimum to 2-5/8" maximum diameter rail with 1-1/2" minimum between handrail and wall and mounted at +30" -38" above the tread nosing.
- Handrails which also function as guardrails shall be 34" - 38" above the tread nosing.
- Guardrail(s) require a minimum height of 36" with intermediate rails spaced such that a sphere 5" in diameter cannot pass through.

NOTE: Guardrails on decks, platforms and balconies require max. 4" openings.

314.8

Walls and soffits of enclosed accessible space under stairs shall be protected with 1/2" gypsum board.

4403.2

All exterior and interior stairways are to be provided illumination. Such lighting shall be located in the immediate vicinity of exterior landings and controlled from inside. For interior stairs, such lighting shall be in the vicinity of top and bottom landings and controlled from top and bottom.

Attics

806.1

Provide cross-ventilation at each enclosed rafter space.

806.2

Attic ventilation shall be not less than 1 square foot per each 150 square foot of attic area. The total area may be reduced to 1 to 300 with 1/2 venting at ridge and 1/2 at eaves.

807.1

Provide a 22" x 30" minimum attic access to all attic areas with 30" or more headroom.

C401.2.1

Provide a rigid baffle, extending above the insulation at eave or soffit vents.

Energy
Code

C401.1(1)

PATH 1: Wall: R-21; Under-floor: R-25; Flat Ceilings: R-38; Vaulted Ceilings: R-30; Main Entry Door (max. 24 sf.) U=0.54; other exterior doors U=0.20

PATH 8: 12% maximum glazing, and 1,500 square feet or less Wall: R-15; Under-floor: R-21; Flat Ceilings: R-49; Vaulted Ceilings: R-38; Main Entry Door (max. 24 sf.) U=0.20

All: Windows U=0.40; Other exterior doors U=0.20; Skylights (max. 2% of floor area): U=0.50; Basement Walls: R-15; Slab Floor Edges: R-15; Forced Air Ducts: R-8

2- STORY ABP TO ABP

Micro - "A"

Double 2X's
(TYP. each end)

2nd Story

Sheathed (1) side
 $\frac{3}{8}$ " MIN. wood structural panel

Nail 8d @ 6" O.C. edge
(3) 12" O.C. Fields

32" MIN.
WIDTH

Alternate Brace
Panel

1800# Holdowns
ST6236

Floor Framing

1st Story

SAME AS ABOVE, but

$\frac{3}{8}$ " MIN. wood structural
PANEL Both Sides

10'
BOTH FLOORS
MAXIMUM HT.

Alternate Brace
Panel

2000#
(2) Holdowns
STHD 14RT SMD

MAR 11 2007
(3) $\frac{1}{2}$ " dia x 10" Long
ANCHOR BOLTS @ $\frac{1}{8}$ points

Foundation WALL

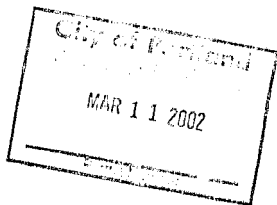
Foundation: MIN. (2) #4 - 1-ft top of WALL
1-3" from Bottom of Footing
EXTENDING MIN. 5' from CENTER
Both Ways

OR (2) #4's LOCATED
A MIN 3" from
Bottom of
Footing

MITCHELL IMLAY
Designer
(503)309-9026

Re: Permit application No. 01-176348-000-00-rs
NOTE: LIVE LOADS PER 2000 OTFDC, TABLE 301.4
Loading used:

ROOFS	DEAD LOADS		EXT. WALLS	DEAD LOADS	
	2x8 Rrafters @ 24" o/c	1.5# psf		2x6 studs @ 16" o/c	1.6# psf
	comp. shingles	3.0# psf		sheathing	1.5# psf
	sheathing	1.5# psf		gypsum bd.	2.5# psf
	felt	0.5# psf		batt insulation	1.9# psf
	total	6.5# psf		felt	0.5# psf
	increase for 9:12 roof (125%)	8.3# psf		siding	2.0# psf
	USED FOR CALCS.	10# psf		TOTAL DEAD LOAD	10.0#psf
	LIVE LOAD	25# psf			
	TOTAL LOADING USED	35# psf	INT. WALLS		
			(INSULATED)		
VAULT	DEAD LOAD			2x6 studs @ 16" o/c	1.6# psf
	gypsum board	2.5# psf		sheathing	1.5# psf
	batt insulation	2.5# psf		gypsum bd.	2.5# psf
	additional rafters or furring	.7#psf		batt insulation	1.9# psf
	total from roof structure above	6.5# psf		TOTAL DEAD LOAD	7.5# psf
	total	12.2#psf			
	increase for 9:12 roof (125%)	15.25#psf	INT. WALLS		
	LIVE LOAD	25# psf	(NO PLYWOOD)	2x6 studs @ 16" o/c	1.6# psf
	TOTAL LOADING USED	40.25# psf		gypsum bd.	2.5# psf
				batt insulation	1.9# psf
				TOTAL DEAD LOAD	6.0# psf
CEIL'G	DEAD LOAD				
	2x8 joists @ 24" o/c	1.5# psf			
	gypsum board	2.5# psf			
	batt or loose insulation	3.0# psf			
	total	6.0# psf			
	LIVE LOAD :				
	AREAS REASONABLY ASSUMED				
	TO HAVE NO ATTIC STORAGE	10# psf			
	TOTAL LOADING USED	16.0 #psf			
	LIVE LOAD :				
	AREAS W/ LIMITED STOR.	20# psf			
	DEAD LOAD	16# psf			
	LOADING USED USED	26#psf			
	AREAS W/ PLYWOOD				
	DEAD LOAD	15.2# psf			
	(NO INSULATION & 2x12s)	25.2#			
	AREAS W/ PLYWOOD				
	DEAD LOAD	8.2# psf			
	(INCLUDING CEILING INSUL)	28.2#psf			



Parcel 3

MITCHELL INLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE

ATTIC

RIDGE BOARD / REAR

Date: 11/18/01

BeamChk 2.2

Choice

1-3/4x9-1/2 1.9E TJ Microlam® LVL

ConditionsMin. Bearing Area $R1 = 2.3 \text{ in}^2$ $R2 = 2.3 \text{ in}^2$ Data

Beam Span	13.0 ft	Reaction 1	1718 #
Beam Wt per ft	4.27 #	Reaction 2	1718 #
Beam Weight	56 #	Maximum V	1718 #
Max Moment	5583 #'	Max V (Reduced)	1509 #
TL Max Defl	L / 180	TL Actual Defl	L / 219

Attributes

Actual
Critical
Status
Ratio

Section (in ²)	Shear (in ²)	TL Defl (in)
26.32	16.63	0.71
21.70	6.90	0.87
OK	OK	OK
82%	42%	82%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2600	285	1.9	750
Base Adjusted	3087	328	1.9	750

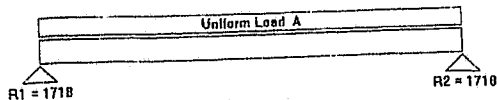
Adjustments

CF Size Factor	1.032
Cd Duration	1.15
Cr Repetitive	
Ch Shear Stress	
Cm Wet Use	

BeamChk has automatically added the beam self-weight into the calculations.

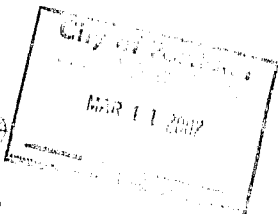
Loads

Uniform TL: 260 = A



Uniform and partial uniform loads are lbs per linear ft.

Discard & Ref. to
Beams to where
the beam is
properly bearing
the moment & support
by the beam



04176348RS

MITCHELL INLAY
* Designer *

2
GROVE DEVELOPMENT, CONWAY RESIDENCE
RIDGE BOARD / FRONT

ATTIC

Date: 11/18/01

BeamChk 2.2

Choice

1-3/4x 9-1/2 1.9E TJ Microlam® LVL

Conditions

Date

Min Bearing Area	R1= 1.7 in ²	R2= 1.7 in ²	
Beam Span	13.0 ft	Reaction 1	1282 #
Beam Wt per ft	4.27 #	Reaction 2	1282 #
Beam Weight	56 #	Maximum V	1282 #
Max Moment	4167 'ft	Max V (Reduced)	1126 #
TL Max Defl	L / 180	TL Actual Defl	L / 293

Attributes

Actual

Critical

Status

Ratio

Section (in ²)	Shear (in ²)	TL Defl (in)
26.32	16.63	0.53
16.20	5.15	0.87
OK	OK	OK
62%	31%	61%

Values

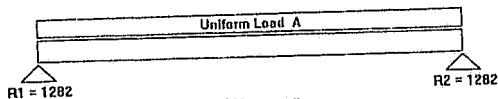
Adjustments

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2600	285	1.9	750
Base Adjusted	3087	328	1.9	750
CF Size Factor	1.032			
Cd Duration	1.15	1.15		
Cr Repetitive				
Ch Shear Stress				
Cm Wet Use				

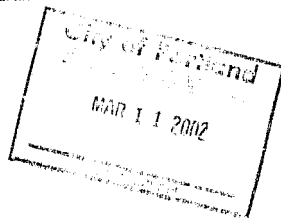
BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 193 = A



Uniform and partial uniform loads are lbs per lineal ft.



3

MITCHELL LMLAY
* Designer *GROVE DEVELOPMENT, CONWAY RESIDENCE
FLUSH BM UNDER RIDGES

ATTIC

Date: 11/18/01

BeamChk 2.2

Choice

3-1/8x9 GLB 24F-V4 DF/DF

BASE Fb = 2460

ADJ Fb = 2760

ConditionsMin Bearing Area R1 = 2.5 in² R2 = 2.5 in²**Data**

Beam Span	11.5 ft	Reaction 1	1654 #
Beam Wt per ft	6.83 #	Reaction 2	1654 #
Beam Weight	79 #	Maximum V	1654 #
Max Moment	9069 #	Max V (Reduced)	1634 #
TL Max Defl	L / 180	TL Actual Defl	L / 219

AttributesActual
Critical
Status
RatioSection (in²) Shear (in²) TL Defl (in)

42.19	20.13	0.63
33.43	11.22	0.77
OK	OK	OK
93%	40%	82%

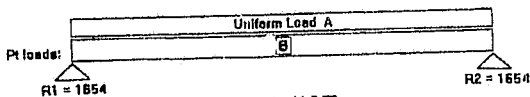
Values**Adjustments**

	Fb (psi)	Fv (psi)	E (psi x 10 ⁶)	Fc.L (psi)
Base Values	2460	190	1.8	650
Base Adjusted	2760	219	1.8	650
Cv Volume	1.000			
Cd Duration	1.15	1.15		
Cr Repetitive				
Ch Shear Stress				
Cm Wet Use				

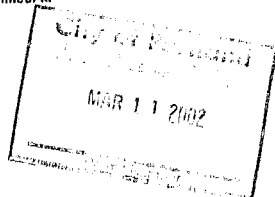
BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 20 = A

Point TL Distance
B = 3000 6.75

Uniform and partial uniform loads are the per lineal ft.



4

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE
FLOOR JOISTS ABOVE

MASTER SUITE

Date: 11/19/01

BeamChk 2.2

Checks

2x12 DF-L #2 @ 12 in. oc

BASE Fb = 875

ADJ Fb = 1006

Conditions

Repetitive Use, '91 NDS

Min Bearing Area

R1 = 0.5 in² R2 = 0.9 in²**Data**

Beam Span	15.0 ft	Reaction 1	337 #
Beam Wt per ft	0 #	Reaction 2	548 #
Beam Weight	0 #	Maximum V	548 #
Max Moment	2114 #	Max V (Reduced)	501 #
TL Max Defl	L / 240	TL Actual Defl	L / 585

Attributes

Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	31.64	16.88
Critical	25.22	7.92
Status	OK	OK
Ratio	80%	47%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	875	95	1.6	625
Base Adjusted	1006	95	1.6	625

Adjustments

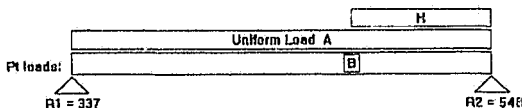
CF Size Factor	1.000
Cd Duration	1.00
Cr Repetitive	1.15
Ch Shear Stress	
Cm Wet Use	

The beam self-weight was not automatically added to the loads by BeamChk.

Loads

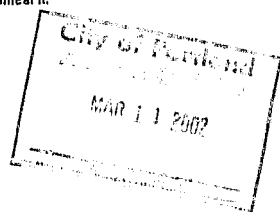
Uniform TL: 25 = A

Point TL	Distance	Per Unit TL	Start	End
B = 385	10.0	H = 25	10.0	15.0



SPAN = 15 FT

Uniform and partial uniform loads are lbs per linear ft.



5

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE
FLOOR JOISTS ABOVE

MASTER SUITE

Date: 11/19/01

BeamCheck 2.2

Choice

2x12 DF-L #2 @ 16 in. oc

BASE Fb = 875

ADJ Fb = 1005

Conditions

Repetitive Use, '91 NDS

Min Bearing Area R1 = 0.6 in² R2 = 1.2 in²**Data**

Beam Span	15.0 ft	Reaction 1	367 #
Beam Wt per ft	0 #	Reaction 2	767 #
Beam Weight	0 #	Maximum V	767 #
Max Moment	2017 #	Max V (Reduced)	704 #
TL Max Defl	L / 240	TL Actual Defl	L / 547

Attributes

Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	31.64	16.89
Critical	24.05	11.12
Status	OK	OK
Ratio	78%	66%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	475	95	1.6	625
Base Adjusted	1006	95	1.6	625

Adjustments

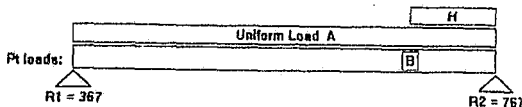
CF Size Factor	1.000
Cd Duration	1.00
Cr Repetitive	1.15
Ch Shear Stress	
Cm Wet Use	

The beam self-weight was not automatically added to the loads by BeamCheck.

Loads

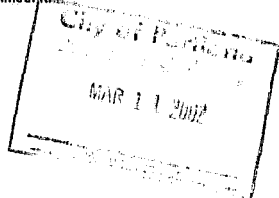
Uniform TL: 33 = A

Point TL	Distance	Per Unif TL	Start	End
B = 633	12.0	H = 33	12.0	15.0



SPAN = 15 FT

Uniform and partial uniform loads are lbs per linear ft.



6

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE
MULTI-JST OVER STAIRS

UPPER HALL

Date: 11/19/01

BeamChk 2.2

Choice

[2] 2x12 DF-L #2

BASE Fb = 875

ADJ Fb = 875

Conditions

'91 NDS

*Data*Min Bearing Area R1 = 1.2 in² R2 = 1.7 in²

Beam Span	8.5 ft	Reaction 1	763 #
Beam Wt per ft	8.2 #	Reaction 2	1056 #
Beam Weight	70 #	Maximum V	1056 #
Max Moment	2784 #'	Max V (Reduced)	1016 #
TL Max Defl	L / 240	TL Actual Defl	L / >1000

*Attributes*Actual
Critical
Status
RatioSection (in²) Shear (in²) TL Defl (in)

63.28	33.75	0.07
38.18	16.05	0.43
OK	OK	OK
60%	48%	17%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc-L (psi)
Base Values	875	95	1.6	625
Base Adjusted	875	95	1.6	625

Adjustments

CF Size Factor	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

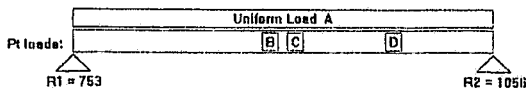
BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 34 = A

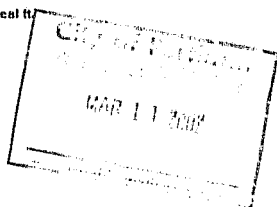
Point TL Distance

B = 350	4.0
C = 550	4.5
D = 550	8.5



SPAN = 8.5 FT

Uniform and partial uniform loads are lbs per linear ft



MITCHELL IMLAY

* Designer *

7
GROVE DEVELOPMENT, CONWAY RESIDENCE

GARAGE

Date: 11/19/01

BeamChk 2.2

RIDGE BOARD

Choles

1-3/4x11-7/8 1.8E TJ MicroIam® LVL

BASE Fb = 2600

ADJ Fb = 2994

Conditions

Min Bearing Area R1 = 3.9 in² R2 = 3.9 in²

Data

Beam Span	13.6 ft	Reaction 1	2947 #
Beam Wt per ft	5.34 #	Reaction 2	2947 #
Beam Weight	73 #	Maximum V	2947 #
Max Moment	10019 'ft	Max V (Reduced)	2618 #
TL Max Defl	L / 180	TL Actual Defl	L / 227

Attributes

Actual

Critical

Status

Ratio

Section (in²) Shear (in²) TL Defl (in)

41.13	20.78	0.72
40.15	11.52	0.91
OK	OK	OK
98%	55%	79%

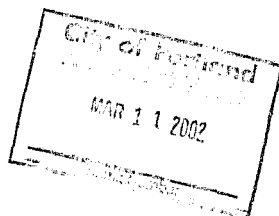
*Values**Adjustments*

	Fv (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2600	285	1.9	750
Base Adjusted	2994	328	1.9	750
CF Size Factor	1.001			
Cd Duration	1.15	1.15		
Cr Repetitive				
Ch Shear Stress				
Cm Wet Use				

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 428 = A



GROVE DEVELOPMENT, CONWAY RESIDENCE
CEILING JSTYS

GARAGE

Date: 11/19/01

SeamChk 2.2

Choice

2x8 DF-L #2 @ 24 in. oc

BASE Fb = 875

ADJ Fb = 1389

Conditions

Repetitive Use, '91 NDS

Min Bearing Area R1 = 0.6 in² R2 = 0.5 in²

Data

Beam Span	12.5 ft	Reaction 1	360 #
Beam Wt per ft	0 #	Reaction 2	285 #
Beam Weight	0 #	Maximum V	360 #
Max Moment	1082 #'	Max V (Reduced)	324 #
TL Max Defl	L / 180	TL Actual Defl	L / 385

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	13.14	10.88	0.39
Critical	9.35	4.45	0.83
Status	OK	OK	OK
Ratio	71%	41%	47%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	875	95	1.6	625
Base Adjusted	1389	109	1.6	625

Adjustments

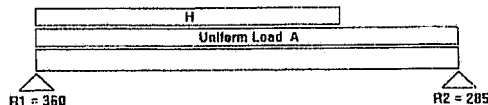
CF Size Factor	1.200	
Cd Duration	1.15	1.15
Cr Repetitive	1.15	
Ch Shear Stress		
Cm Wet Use		

The beam self-weight was not automatically added to the loads by BeamChk.

Loads

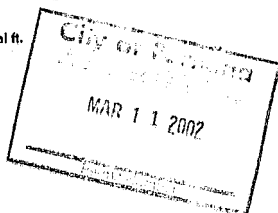
Uniform TL: 30 = A

	Per Unif TL	Start	End
H = 30		0	9.0



SPAN = 12.5 FT

Uniform and partial uniform loads are lbs per linear ft.



9

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE

GARAGE

Date: 11/19/01

BeamChk 2.2

MAIN BEAM

Choice

5-1/8x 22-1/2 GLB 24F-V4 DF/DF

BASE Fb = 2400

ADJ Fb = 2194

ConditionsMin Bearing Area R1 = 12.7 in² R2 = 12.7 in²Data

Beam Span	27.5 ft	Reaction 1	8285 #
Beam Wt per ft	28.02 #	Reaction 2	8285 #
Beam Weight	771 #	Maximum V	8285 #
Max Moment	77243 #	Max V (Reduced)	7558 #
TL Max Defl	L / 240	TL Actual Defl	L / 275

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	432.42	115.31	1.20
Critical	422.51	59.67	1.38
Status	OK	OK	OK
Ratio	98%	52%	87%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2194	190	1.8	650

Adjustments

Cv Volume	0.914	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

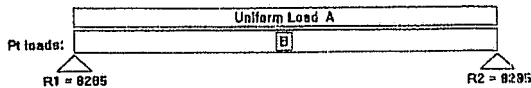
BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 360 = A

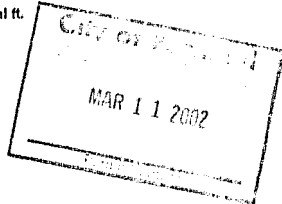
Point TL Distance

B = 5900 13.75



SPAN = 27.5 FT

Uniform and partial uniform loads are lbs per lineal ft.



10

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE

MASTER DECK

ROOF BEAM

Date: 11/19/01

BeamChk 2.2

Choice

3-1/8x12 GLB 24F-V4 DF/JDF

BASE Fb = 2400

ADJ Fb = 2760

ConditionsMin Bearing Area R1 = 2.3 in² R2 = 2.3 in²Data

Beam Span	20.0 K	Reaction 1	1471 #
Beam Wt per ft	9.11 #	Reaction 2	1471 #
Beam Weight	182 #	Maximum V	1471 #
Max Moment	10216 'ft	Max V (Reduced)	1392 #
TL Max Defl	L / 240	TL Actual Defl	L / 257

AttributesSection (in²) Shear (in²) TL Defl (in)

Actual

75.00

37.50

0.90

Critical

44.42

9.56

1.00

Status

OK

OK

OK

Ratio

58%

25%

80%

Values

Fb (psi) Fv (psi) E (psi x mil) Fc.L (psi)

Base Values 2400 190 1.8 650

Base Adjusted 2760 219 1.8 650

Adjustments

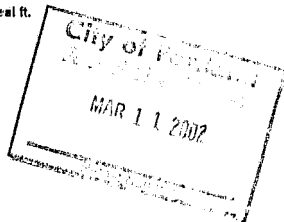
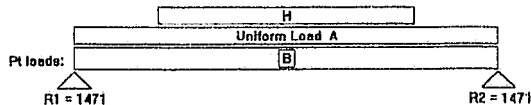
Cv Volume	1.000	
Cd Duration	1.15	1.15
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 70 = A

Point TL	Distance	Per Unit TL	Start	End
B = 1000	10.0	H = 30	4.0	16.0



MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE

ENTRY PORCH

Date: 11/19/01

BeamChk 2.2

DECK BEAM

Choice

4x12 DFL #2

BASE Fb = 875

ADJ Fb = 1107

Conditions

Wet Use, '91 NDS

Data

Min Bearing Area

R1 = 3.2 in² R2 = 3.2 in²

Beam Span

20.0 ft

Reaction 1

1346 #

Beam Wt per ft

9.57 #

Reaction 2

1346 #

Beam Weight

191 #

Maximum V

1346 #

Max Moment

6728 #

Max V (Reduced)

1220 #

TL Max Defl

L / 240

TL Actual Defl

L / 297

AttributesSection (in²)Shear (in²)

TL Defl (in)

Actual

73.93

39.30

0.81

Critical

72.94

17.26

1.00

Status

OK

OK

OK

Ratio

99%

44%

81%

Values

Base Values

875

95

1.6

625

Base Adjusted

1107

106

1.4

419

Adjustments

CF Size Factor

1.100

Cd Duration

1.15

1.15

Cr Repetitive

Ch Shear Stress

Cm Wet Use

1.00

0.97

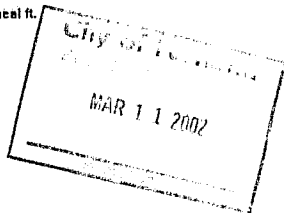
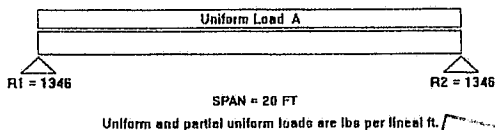
0.90

0.67

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 125 = A



12

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE KITCHEN / NOOK

FLUSH CL'G BM

Date: 1/03/02

BeamChk 2.2

Choice

4x8 DF-L #2

BASE Fb = 875

ADJ Fb = 1138

Conditions

'91 NDS

Min Bearing Area R1= 1.2 in² R2= 1.2 in²Deflt

Beam Span	7.17 ft	Reaction 1	739 #
Beam Wt per ft	6.17 #	Reaction 2	739 #
Beam Weight	44 #	Maximum V	739 #
Max Moment	1323 #	Max V (Reduced)	614 #
TL Max Defl	L / 180	TL Actual Defl	L / >1000

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	30.66	26.38	0.07
Critical	13.96	9.70	0.48
Status	OK	OK	OK
Ratio	46%	38%	14%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc _⊥ (psi)
Base Values	875	95	1.6	625
Base Adjusted	1138	95	1.6	625

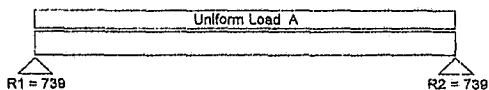
Adjustments

CF Size Factor	1.300	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

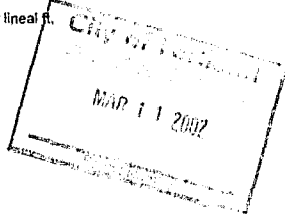
Loads

Uniform TL: 205 = A



SPAN = 7.166 FT

Uniform and partial uniform loads are lbs per lineal ft.



GROVE DEVELOPMENT, CONWAY RESIDENCE MASTER SUITE
FLUSH CL'G BM

Date: 1/03/02

BeamChk 2.2

Choice

(3) 2x 12 DF-L #2

BASE Fb = 875

ADJ Fb = 875

Conditions

91 NDS

Min Bearing Area R1= 1.5 in² R2= 3.1 in²Data

Beam Span	15.0 ft	Reaction 1	926 #
Beam Wt per ft	12.3 #	Reaction 2	1918 #
Beam Weight	185 #	Maximum V	1918 #
Max Moment	5522 #	Max V (Reduced)	1844 #
TL Max Defl	L / 240	TL Actual Defl	L / 613

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	94.92	50.63	0.29
Critical	75.72	29.11	0.75
Status	OK	OK	OK
Ratio	80%	58%	39%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc L (psi)
Base Values	875	95	1.6	625
Base Adjusted	875	95	1.6	625

Adjustments

CF Size Factor	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

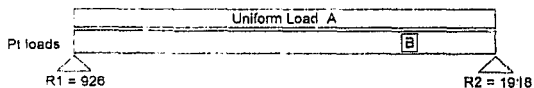
BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 67 = A

Point TL Distance

B = 1654 12.0

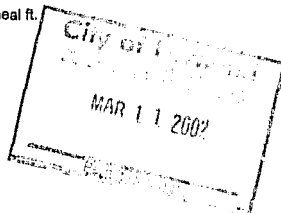


R1 = 926

R2 = 1918

SPAN = 15 FT

Uniform and partial uniform loads are lbs per lineal ft.



GROVE DEVELOPMENT, CONWAY RESIDENCE NOOK
FL. BM UNDER BATH-2 TUB

Date: 1/03/02

BeamChek 2.2

Choice

2x 12 DF-L #2

BASE Fb = 875

ADJ Fb = 875

Conditions

'91 NDS

Min Bearing Area R1= 2.3 in² R2= 2.3 in²Data

Beam Span	3.0 ft	Reaction 1	1431 #
Beam Wt per ft	4.1 #	Reaction 2	1431 #
Beam Weight	12 #	Maximum V	1431 #
Max Moment	1073 #	Max V (Reduced)	537 #
TL Max Defl	L / 240	TL Actual Defl	L / >1000

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	31.64	16.88	0.01
Critical	14.72	8.47	0.15
Status	OK	OK	OK
Ratio	47%	50%	4%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	875	95	1.6	625
Base Adjusted	875	95	1.6	825

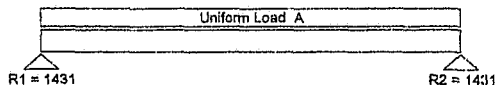
Adjustments

CF Size Factor	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

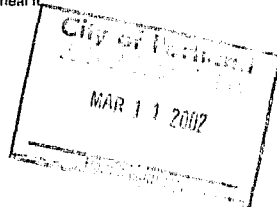
BeamChek has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 950 = A



Uniform and partial uniform loads are lbs per lineal ft.



GROVE DEVELOPMENT, CONWAY RESIDENCE KITCHEN

FLOOR JSTS UNDER BATH-2

Date: 1/03/02

BeamChk 2.2

Choice

2x 12 DF-L #2 @ 16 in. oc

BASE Fb = 875

ADJ Fb = 1006

Conditions

Repetitive Use, '91 NDS

Min Bearing Area R1= 1.2 in² R2= 0.9 in²Data

Beam Span	15.0 ft	Reaction 1	787 #
Beam Wt per ft	0 #	Reaction 2	587 #
Beam Weight	0 #	Maximum V	787 #
Max Moment	2403 #'	Max V (Reduced)	704 #
TL Max Defl	L / 240	TL Actual Defl	L / 474

Attributes

	Section (in ⁴)	Shear (in ³)	TL Defl (in)
Actual	31.64	16.88	0.38
Critical	28.72	11.12	0.75
Status	OK	OK	OK
Ratio	91%	66%	51%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc L (psi)
Base Values	875	95	1.6	625
Base Adjusted	1006	95	1.6	625

Adjustments

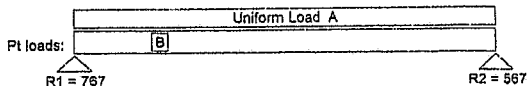
CF Size Factor	1.000	
Cd Duration	1.00	1.00
Cr Repetitive	1.15	
Ch Shear Stress		
Cm Wet Use		

The beam self-weight was not automatically added to the loads by BeamChk.

Loads

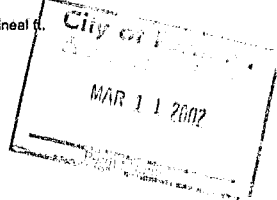
Uniform TL: 67 = A

Point TL	Distance
B = 333	3.0



SPAN = 15 FT

Uniform and partial uniform loads are lbs per linear ft.



16

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE NOCK / FAMILY

FLUSH BM

Date: 1/03/02

BeamChk 2.2

Choice

3-1/8x 10-1/2 GLB 24F-V4 DF/DF

BASE Fb = 2400

ADJ Fb = 2400

ConditionsMin Bearing Area R1= 3.0 in² R2= 2.2 in²Data

Beam Span	14.0 ft	Reaction 1	1970 #
Beam Wt per ft	7.97 #	Reaction 2	1480 #
Beam Weight	112 #	Maximum V	1970 #
Max Moment	9687 #	Max V (Reduced)	1905 #
TL Max Defl	L / 240	TL Actual Defl	L / 264

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	57.42	32.81	0.64
Critical	48.44	15.04	0.70
Status	OK	OK	OK
Ratio	84%	46%	91%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2400	190	1.8	650

Adjustments

Cv Volume	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

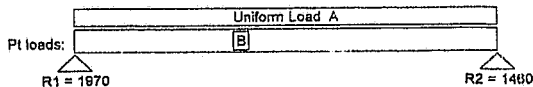
Loads

Uniform TL: 67 = A

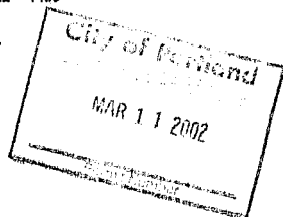
Point TL Distance

B = 2381

5.5



Uniform and partial uniform loads are lbs per lineal ft.



17

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE NOOK / FAMILY

FLUSH BM

Date: 1/03/02

BeamChk 2.2

Choice

5-1/8x 15 GLB 24F-V4 DF/DF

BASE Fb = 2400

ADJ Fb = 2321

ConditionsData

Min Bearing Area	R1= 6.9 In ²	R2= 4.5 In ²	
Beam Span	23.5 ft	Reaction 1	4482 #
Beam Wt per ft	18.68 #	Reaction 2	2897 #
Beam V Weight	439 #	Maximum V	4482 #
Max Moment	23733 #	Max V (Reduced)	4284 #
TL Max Defl	L / 240	TL Actual Defl	L / 258

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	182.19	76.88	1.09
Critical	122.72	33.82	1.17
Status	OK	OK	OK
Ratio	64%	44%	93%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2321	190	1.8	650

Adjustments

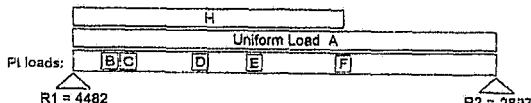
Cv Volume	0.987	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

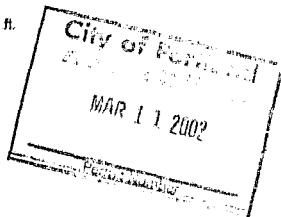
Loads

Uniform TL: 20 = A

Point TL	Distance	Per Unit TL	Start	End
B = 1200	2.0	H = 120	0	15.0
C = 150	3.0			
D = 1000	7.0			
E = 150	10.0			
F = 2170	15.0			



Uniform and partial uniform loads are lbs per lineal ft.



GROVE DEVELOPMENT, CONWAY RESIDENCE KITCHEN / BACK HALL / PANTRY

HEADER

Date: 1/03/02

BeamChk 2.2

Choice

4x 10 DF-L #2

BASE Fb = 875

ADJ Fb = 1050

Conditions

'91 NDS

Min Bearing Area R1= 4.0 in² R2= 9.5 in²Data

Beam Span	5.0 ft	Reaction 1	2512 #
Beam Wt per ft	7.87 #	Reaction 2	5952 #
Beam Weight	39 #	Maximum V	5952 #
Max Moment	3790 #	Max V (Reduced)	1870 #
TL Max Defl	L / 240	TL Actual Defl	L / >1000

Attributes

Actual
Critical
Status
Ratio

Section (in ³)	Shear (in ²)	TL Defl (in)
49.91	32.38	0.06
43.31	29.53	0.25
OK	OK	OK
87%	91%	22%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc _{II} (psi)
Base Values	875	95	1.6	625
Base Adjusted	1050	95	1.6	625

Adjustments

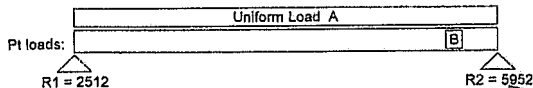
CF Size Factor	1.200	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 825 = A

Point TL	Distance
B = 4300	4.5

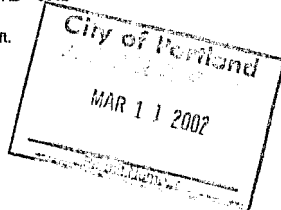


R1 = 2512

SPAN = 5 FT

R2 = 5952

Uniform and partial uniform loads are lbs per lineal ft.



MITCHELL INLAY

" Designer "

19
 GROVE DEVELOPMENT, CONWAY RESIDENCE FAMILY
 FL BM UNDER BR-2, BATH-2

Date: 1/03/02

BeamChk 2.2

Choice

5-1/8x 10-1/2 GLB 24F-V4 DF/DF

BASE Fb = 2400

ADJ Fb = 2400

Conditions

Min Bearing Area

R1 = 4.9 in² R2 = 3.9 in²Data

Beam Span	16.0 ft	Reaction 1	3190 #
Beam Wt per ft	13.08 #	Reaction 2	2514 #
Beam Weight	209 #	Maximum V	3190 #
Max Moment	13359 #	Max V (Reduced)	3047 #
TL Max Defl	L / 240	TL Actual Defl	L / 248

Attributes

Section (in ²)	Shear (in ²)	TL Defl (in)
----------------------------	--------------------------	--------------

Actual	94.17	53.81	0.78
Critical	66.80	24.06	0.80
Status	OK	OK	OK
Ratio	71%	45%	97%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc L (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2400	190	1.8	650

Adjustments

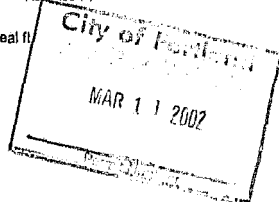
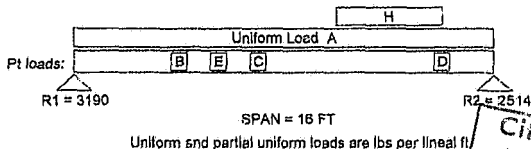
Cv Volume	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 150 = A

Point TL	Distance	Par Unif TL	Start	End
B = 1200	4.0	H = 50	10.0	14.0
C = 500	7.0			
D = 245	14.0			
E = 950	5.5			



GROVE DEVELOPMENT, CONWAY RESIDENCE FAMILY

FL BM UNDER BR-2 DOOR

Date: 1/03/02

BeamChk 2.2

Choice

3-1/8x 10-1/2 GLB 24F-V4 DF/DF

BASE Fb = 2400

ADJ Fb = 2400

ConditionsMin Bearing Area R1 = 3.3 in² R2 = 1.8 in²Data

Beam Span	16.0 ft	Reaction 1	2325 #
Beam Wt per ft	7.87 #	Reaction 2	1175 #
Beam Weight	128 #	Maximum V	2325 #
Max Moment	8763 #	Max V (Reduced)	2259 #
TL Max Defl	L / 240	TL Actual Defl	L / 244

Attributes

	Section (in ⁴)	Shear (in ²)	TL Defl (in)
Actual	57.42	32.8*	0.79
Critical	43.82	17.84	0.80
Status	OK	OK	OK
Ratio	78%	54%	99%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2400	190	1.8	850
Base Adjusted	2400	190	1.8	850

Adjustments

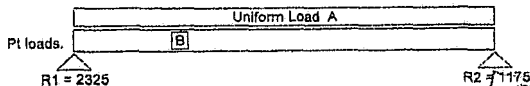
Cv Volume	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 67 = A

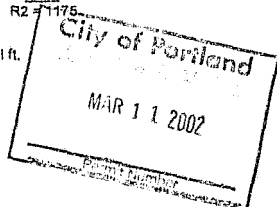
Point TL	Distance
B = 2300	4.0



R1 = 2325

SPAN = 16 FT

Uniform and partial uniform loads are lbs per lineal ft.



21

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE FAMILY
FLUSH BM ABOVE

Date: 1/03/02

BeamChk 2.2

Choice

6-1/8x 15 GLB 24F-V4 DF/DF

BASE Fb = 2400 ADJ Fb = 2400

ConditionsMin Bearing Area R1= 10.4 in² R2= 12.8 in²Data

Beam Span	15.5 ft	Reaction 1	8784 #
Beam Wt per ft	16.88 #	Reaction 2	8339 #
Beam Weight	290 #	Maximum V	8339 #
Max Moment	31442 #	Max V (Reduced)	8166 #
TL Max Defl	L / 240	TL Actual Defl	L / 329

Attributes

	Section (in ²)	Shear (in ³)	TL Defl (in)
Actual	192.19	76.88	0.57
Critical	157.21	64.47	0.77
Status	OK	OK	OK
Ratio	82%	84%	73%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	FcL (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2400	190	1.8	650

Adjustments

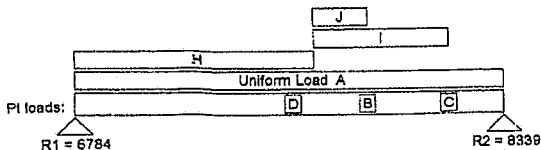
Cv Volume	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

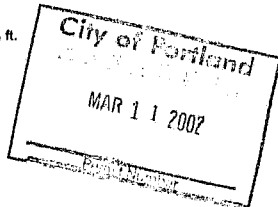
Loads

Uniform TL: 120 = A

Point TL	Distance	Par Unif TL	Start	End
B = 1175	10.5	H = 570	0	6.5
C = 2514	13.5	I = 670	8.5	13.5
D = 840	7.75	J = 125	8.5	10.5



Uniform and partial uniform loads are lbs per lineal ft.



22

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE

DINING / FOYER

HEADER

Date: 11/19/01

BeamChk 2.2

Choice

3-1/8x15 GLB 24F-V4 DF/DF or 5 1/2 x 13 1/2

BASE Fb = 2490

ADJ Fb = 2400

ConditionsMin Bearing Area R1 = 9.1 in² R2 = 11.2 in²Data

Beam Span	12.0 ft	Reaction 1	5888 #
Beam Wt per ft	11.39 #	Reaction 2	7289 #
Beam Weight	137 #	Maximum V	7289 #
Max Moment	20108 #'	Max V (Reduced)	5262 #
TL Max Defl	L / 240	TL Actual Defl	L / 424

Attributes

Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	117.19	46.88
Critical	100.54	41.54
Status	OK	OK
Ratio	86%	89%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc.L (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2400	190	1.8	650

Adjustments

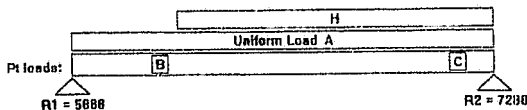
Cv Volume	1.000	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

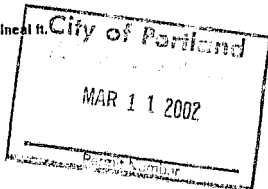
Loads

Uniform TL: 490 = A

Point TL	Distance	Par Unif TL	Start	End
B = 1000	2.5	H = 600	3.0	12.0
C = 760	11.0			



Uniform and partial uniform loads are lbs per linear ft.



23

MITCHELL IMLAY
* Designer *GROVE DEVELOPMENT, CONWAY RESIDENCE GARAGE
9' DOOR HEADER

Date: 1/03/02

BeamChk 2.2

Choice

4x 12 DF-L #2

BASE Fb = 875

ADJ Fb = 963

Conditions

'91 NDS

Date

Min Bearing Area

R1= 3.0 in² R2= 3.0 in²

Beam Span	9.25 ft	Reaction 1	1894 #
Beam Wt per ft	9.57 #	Reaction 2	1894 #
Beam Weight	89 #	Maximum V	1894 #
Max Moment	4380 #'	Max V (Reduced)	1510 #
TL Max Defl	L / 240	TL Actual Defl	L / >1000

Attributes

Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	73.83	39.38
Critical	54.61	23.85
Status	OK	OK
Ratio	74%	61%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	Fc _L (psi)
Base Values	875	95	1.6	625
Base Adjusted	963	95	1.6	625

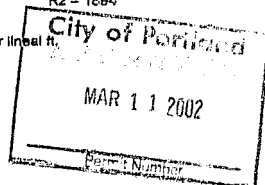
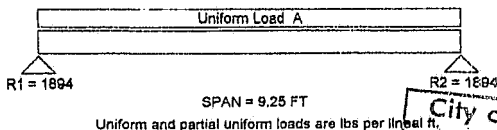
Adjustments

CF Size Factor	1.100	
Cd Duration	1.00	1.00
Cr Repetitive		
Ch Shear Stress		
Cm Wet Use		

BeamChk has automatically added the beam self-weight into the calculations.

Loads

Uniform TL: 400 = A



24

MITCHELL IMLAY

* Designer *

GROVE DEVELOPMENT, CONWAY RESIDENCE LIVING / FOYER
 OPENING HEADER

Date: 1/03/02

BeamChk 2.2

Choice

5-1/8x 13-1/2 GLB 24F-V4 DF/DF

BASE Fb = 2400

ADJ Fb = 2400

ConditionsMin Bearing Area R1= 13.4 in² R2= 15.4 in²Data

Beam Span	14.0 ft	Reaction 1	8700 #
Beam Wt per ft	16.81 #	Reaction 2	10036 #
Beam Weight	235 #	Maximum V	10036 #
Max Moment	31101 #	Max V (Reduced)	8867 #
TL Max Defl	L / 240	TL Actual Defl	L / 281

Attributes

	Section (in ²)	Shear (in ²)	TL Defl (in)
Actual	155.67	69.19	0.60
Critical	155.50	68.42	0.70
Status	OK	OK	OK
Ratio	100%	98%	85%

Values

	Fb (psi)	Fv (psi)	E (psi x mil)	FcL (psi)
Base Values	2400	190	1.8	650
Base Adjusted	2400	190	1.8	650

Adjustments

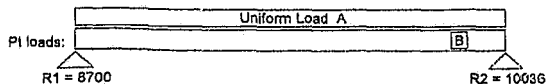
Cv Volume	1.000
Cd Duration	1.00
Cr Repetitive	1.00
Ch Shear Stress	
Cm Wet Use	

BeamChk has automatically added the beam self-weight into the calculations.

Loads

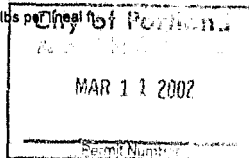
Uniform TL: 1200 = A

Point TL	Distance
B = 1700	12.5



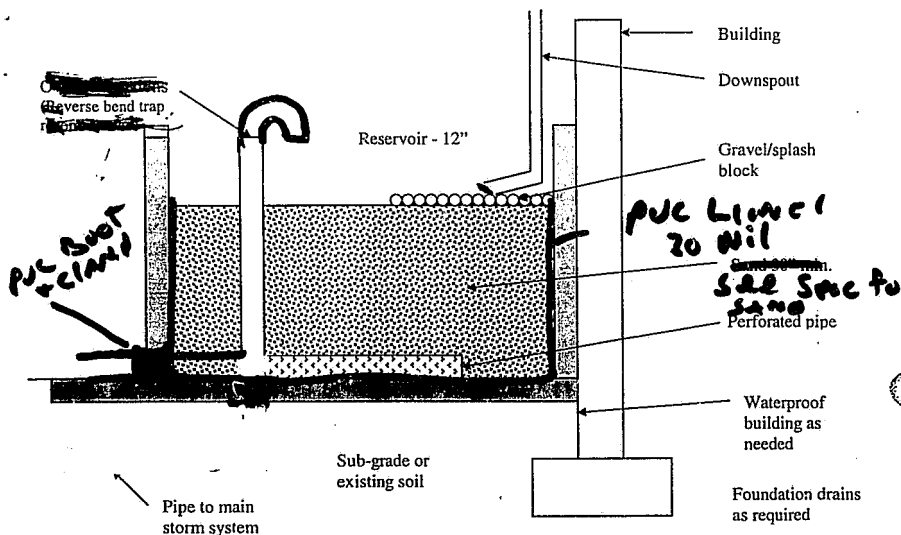
SPAN = 14 FT

Uniform and partial uniform loads are lbs per foot



Simplified Approach Design Criteria

Sand Filter



Section Not to Scale

Description

There are two filter options. One is designed with an impervious bottom or is placed on an impervious surface. It can be used for NRCS soil types C and D. Some infiltration can be allowed if geotechnical issues are addressed by a qualified professional. The other option, for soils A and B, allows filtered water to infiltrate the ground. For both options, pollutant reduction is achieved as the water filters through the sand; flow control is obtained by storing the water in a reservoir above the sand. Filters may be constructed in-ground or above grade.

General specifications (Acceptable soils types A, B, C, or D, with limitations)

There are numerous design variations allowed for these filters. Filters shall drain within 2-3 hour after a storm event. Sand shall have a minimum infiltration rate of 5"/hr. The structural elements of the planters shall be stone, concrete, brick, wood, or other durable material. Treated wood shall not leach out any toxic chemicals. Where conditions allow (acceptable soil type and land use), the filter may be constructed without an impervious bottom.

Operations and Maintenance Agreement

For the Stormwater Treatment/CD Sand Filter

1. Grove Development Inc.(Contractor)

S.W. Cameron St.S

~~1000 N. Multnomah Street~~

Portland, Multnomah County, Oregon

LUR - 01-00410 MP Parcel 23

2. The stormwater (I.E.) Raindrains will be piped directly to a Sand Filter (type CD, with impervious bottom), and treated water will then be piped to the storm drain system in the street.

General specifications for the Sand Filter:

The walls of the Sand Filter reservoir will consist of a minimum 6" concrete x 42" high. The walls will sit upon a 4" concrete slab, and the entire Sand Filter will be set into the existing grade with the upper side approx. 1" above finish grade and the downhill side to be approx. 1" above finish grade.

The sand used shall have a minimum infiltration rate of 5" per Hr.

An overflow device shall be incorporated into the outflow pipe so any overflow is directed onto the overflow pipe distribution area.

3. Maintenance of Sand Filter and Rain Drain lines

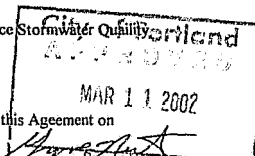
a)	Remove any vegetation from top surface of sand	Once per Year
b)	Clean out any trash (i.e. Leaves etc.)	Twice per Year
c)	Test overflow pipe for proper drainage	Once per Year
d)	Remove any sedimentation @ inflow pipe	Once per Year
e)	Check after storm event	As needed

4. The property owner will be liable to maintain or replace Stormwater Quality Facility @ their own expense.

IN WITNESS WHEREOF, the party hereto executed this Agreement on

12/28/01, 2001.

BY



SUBSCRIBED AND SWORN TO before me this ____ day of ____, 2001

NOTARY PUBLIC OF OREGON

My commission expires: _____

Simplified Approach for Stormwater Management Facilities

The city has produced this form to assist with a quick and simple approach to manage stormwater quality and flow control on projects. Application of these facilities using the specified sizing factor is required for use of this form. These facilities, when designed according to the required criteria, are considered to cover both quality and flow. Alternative design and sizing will not be considered under this simple approach.

INSTRUCTIONS

1. Enter square footage of non-mitigated impervious area (total impervious site area or, from the Mitigation Form, Box C) in Box 1 at the bottom of column 1.

2. Select the desired management measure(s). In Column 1, enter the amount of impervious area that will be managed by the facility(ies).

3. Add all facility impervious areas in column 1 and enter in Box 2. Note Box 1 and Box 2 areas must be equal.

4. Multiply the unmitigated sf in column 1 by the sizing factor in column 2 for each facility.

5. Use the required facility surface area sf in column 3 to design the facility(ies).

6. Go to the "Simplified Approach Design Requirements" for facility descriptions and other requirements.

	Column 1	Column 2	Column 3
Landscape Swale	_____ sf	x 0.05 =	_____ sf
Vegetative Filter	_____ sf	x 0.065 =	_____ sf
Stormwater Planter	_____ sf	x 0.045 =	_____ sf
Landscape Infiltration	_____ sf	x 0.04 =	_____ sf
Sand Filter	<u>3225</u> sf	x 0.045 =	<u>146" = 10</u> sf
*East Side Soakage Trench	_____ sf	x 0.05 =	_____ sf
*West Side Soakage Trench	_____ sf	x 0.075 =	_____ sf

Total Areas

_____ Box 2

Total non-mitigated impervious area

Total impervious area on the site, or the amount of non-mitigated impervious area in Box C, Form MIT

_____ Box 1

City of Portland
APPROVED

MAR 11 2002

Permit Number

* Soakage Trenches are sized for stormwater disposal and water quality, and therefore cannot be reduced in size with mitigation.
Revised September 1, 2000

Form MIT

Revised September 1, 2000

Impervious Surface Mitigation Measures

Instructions

1. Enter square footage of all impervious site elements in Box A.

2. Enter square footage of each proposed mitigation measure in the appropriate box under Column 1.

3. Add the surface areas (square footage) of all the mitigation measures in Column 1. Enter the total in Box B.

4. Subtract the amount in Box B from amount in Box A and enter in Box C.

5. If the Amount in Box C is under 500 square-feet, there are no further requirements for water quality or flow management. Submit this filled-out form with the permit application, and show all mitigation measures used on the building plan. **Stop Here.**

6. If the Amount in Box C is over 500 square-feet, Form SIM can be used to manage stormwater from the remaining impervious surfaces, or Chapters 5.0 and 6.0 of the Stormwater Manual can be used to engineer a stormwater management facility.

Enter site impervious area (sf) into Box A

Box A

Column 1

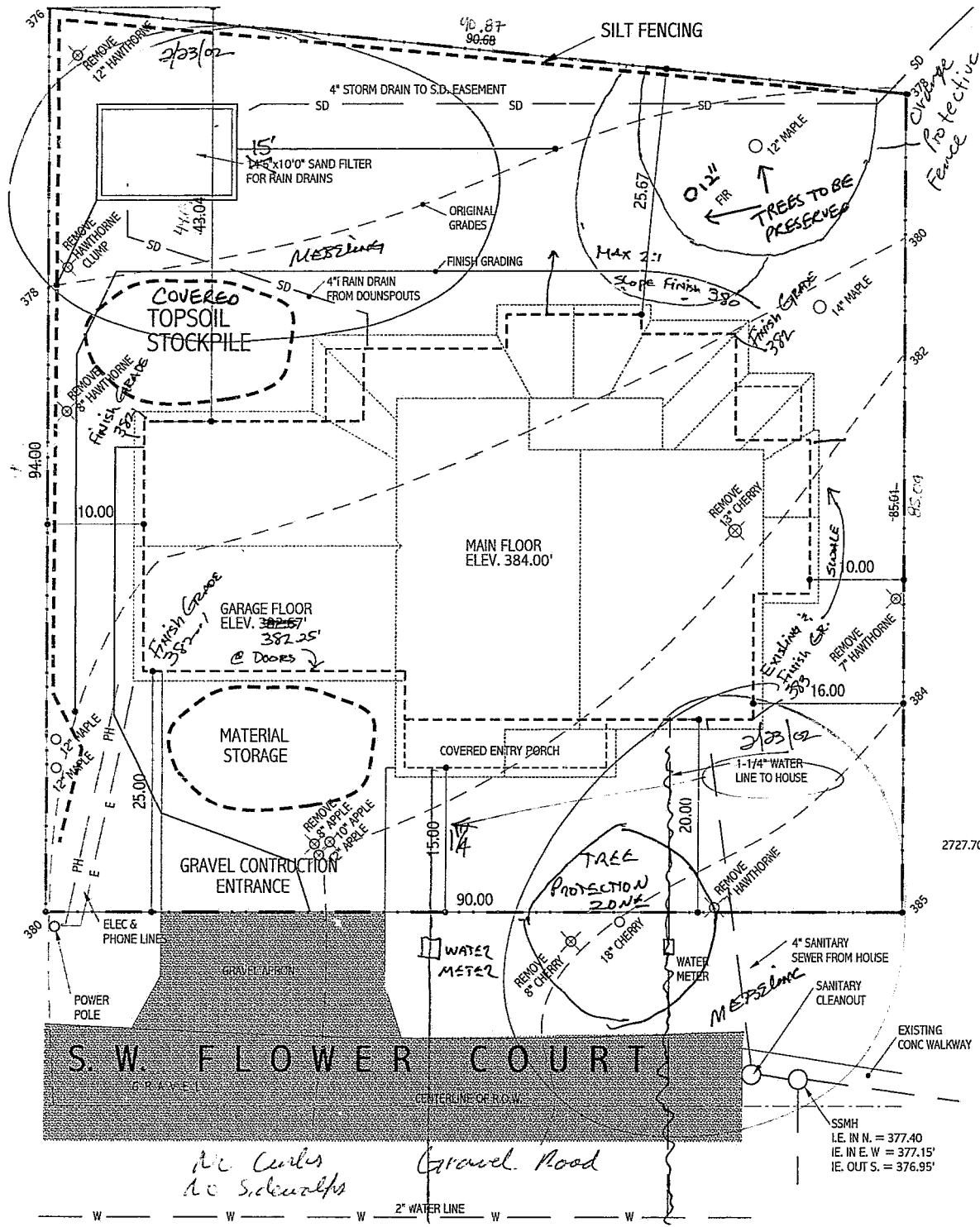
Proposed Mitigation Measure	Surface Area	Unit
Eco-roof	<input type="text"/>	sf
Roof Garden	<input type="text"/>	sf
Landscape Planter	<input type="text"/>	sf
Stormwater Planter (planter sf x 20 = surface area sf ²)	<input type="text"/>	sf
Porous Pavement	<input type="text"/>	sf
New Evergreen Trees (200 sf per tree)	<input type="text"/>	sf
New Deciduous Trees (100 sf per tree)	<input type="text"/>	sf
Existing Evergreen Trees ¹ (One-half area of total tree canopy left in place)	<input type="text"/>	sf
Existing Deciduous Trees ¹ (One-half area of total tree canopy left in place)	<input type="text"/>	sf

Mitigated Impervious Area Box B sf

Unmitigated Impervious Area Box C sf

¹These planters manage runoff from an impervious area 20 times the size of the surface area of the planter.

²Half credit is given unless tree will cover impervious surfaces. To get full credit, tree must be outside of environmental zones.



EROSION CONTROL SITE PLAN



SCALE: 1" = 10'-0"
LOT 623
S.W. FLOWER COURT
CITY OF PORTLAND
MULTNOMAH COUNTY
OREGON

Access via unimproved gravel road.
No work in the Public Right-of-way.
BTED/ssm

City of Portland
Office of Planning
and Development Review
Planning and Zoning
Review
By SP/AL Date 01/10/02
Approved for
Building Permit Purposes

01-176348 RS

