4345 SW BEAVERTON HILLSDALE HWY. CO-01-174866

# CO.01.174866



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CONTRACTOR

Code Edition (Year)

Number of Storles

#### CITY OF

## PORTLAND, OREGON

OFFICE OF PLANNING AND DEVELOPMENT REVIEW 1900 SW 4th Ave. Suite 5000

Portland, OR 97201



COMMERCIAL BUILDING PERMIT Site Address: 4345 SW BEAVERTON HILLSDALE HWY

01-174866-000-00-CO Issued: 1/25/02

COFFEE CARTEL

PROJECT INFORMATION Occ. Group Const. Type Business **New Construction** В V-N

Project Description: PLACE A MANUFACTURED 8'X 16' BUILDING ON SITE, PAVE CIRCULAR DRIVEWAY, PARKING

& LANDSCAPING FOR COFFEE SHOP with 2 parking stalls.

APPLICANT **CRAIG MONTOYA** 

OWNER ED'S MUFFLERS UNLIMITED INC

2

CG

To Bid

Phone (503) 892-5828

Yes

Phone Phone

**Project Details** 

1997

Proposed # of new parking spaces Zoning - Property (1)

**Project Details** 

Ground Disturbance?

Number of parking spaces added Water District

City of Portland

BEFORE YOU DIG ATTENTION: Oregon law requires you to follow rules adopted by the Oreifon Utility Not 1/1 although (noter. Those rules are set forth in OAR 952-001-0010 through)

OAR 952-001-0090, You may obtain copies of the rules by calling the conter, (Note: the tot.), and number for the Oregon Utility Notification Center is 1-809-332-234/.

CITY CONTACT

PROCESS MANAGEMENT

Phone: 503-823-7357

E-Mail:

Building/Trade Inspections - Call Before 6:00 AM:

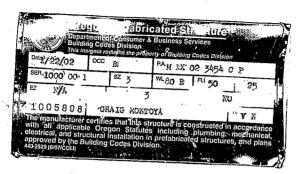
Fax: (503) 823-4172 (503) 823-7000

INSPECTION REQUEST **PHONE NUMBERS** 

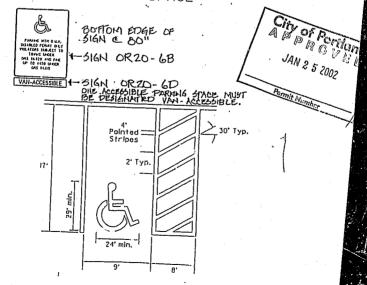
TDD: (503) 823-6868

**IVR Inspection Request** 

Number: 2138786



MINIMUM STANDARD SINGLE-DISABLED PERSON 'ARKING SPACE



PAVEMENT STENCIL WHITE
BILDE BACKGROUND AND
BLUE PAINTED CURB OPTIONAL

# FOUNDATION DESIGN COFFEE CARTEL

Beaverton-Hillsdale Hwy Portland, Oregon

Craig Montoya / Owner

City of Parliand APPROVED JAN 2 5 2002

Portolt Mumb

# **DESIGN LOADS:**

Roof Load = 40 psf TL (25 psf SL) Floor Load = 50 psf (40 psf LL) Wind 80 mph Exposure B Seismic Zone 3



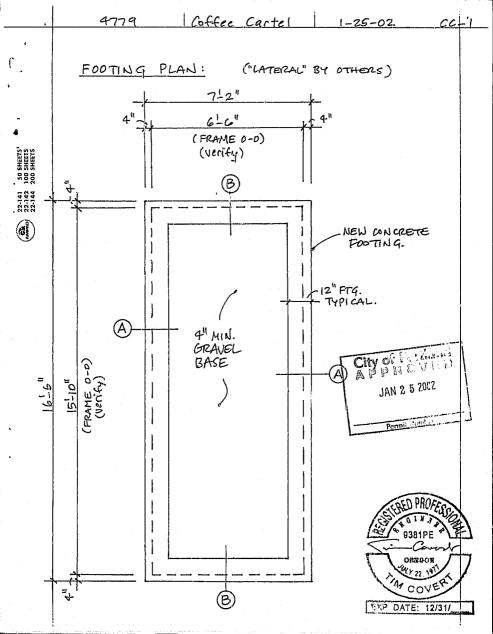
Job No. 4779

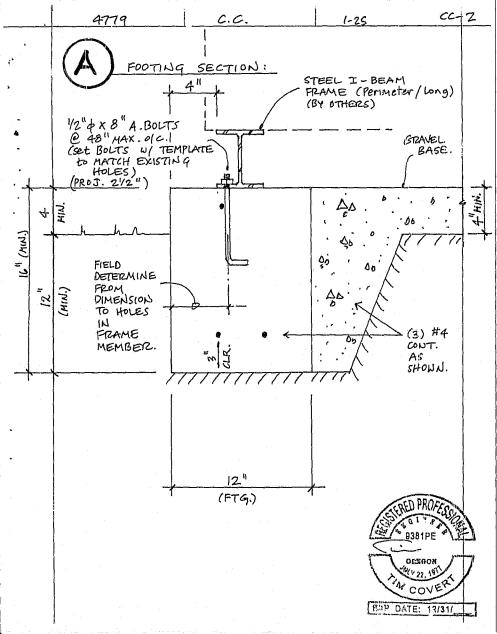
# TIM COVERT P.E. STRUCTURAL ENGINEER

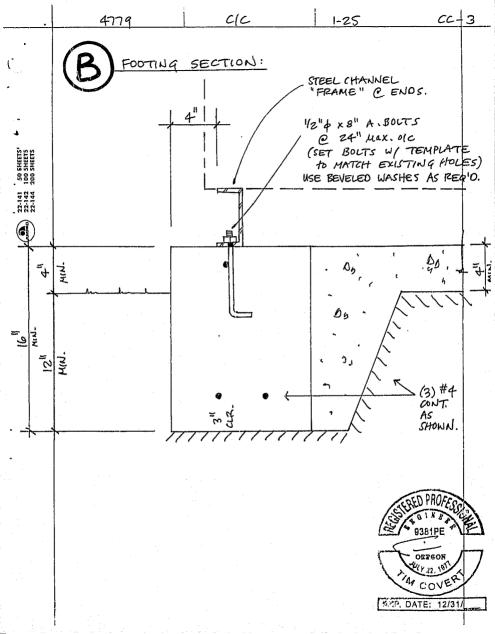
312 NW 10<sup>th</sup> Avenue No.200 Portland, Oregon 97209

Phone:228-0426

Fax:228-6639







4779 C.C. 1-25 CC-5

CHECK TRANSVERSE OVER-TURNING:

Mor = (898)(11') = 9874#1

MR (available) = (200 PLF)(7.172/2) + (200)(7.26)(6.67)

MR (AVAILABLE) = ( 200 PCF )(7.17 /2

7

672.WT.

(Total

= 5136 + 9675 = 14,811 #1 GB

FS = 1.5

F3' = 1.5

W= 200 PLF

CHECK- SIMPLE-SPAN "LONG" FTG.

 $\overline{M} = (2)(.20)(40)(12^{11}/12) = 16^{11}$ 

Mmx = 11.29 Kl

LMAX = 1 8 (11,29) = 71.25 77 14.52

(2)#4 CONT. 3" CLR. BOT.



WT. WALLS = 
$$(6PSF)(8)(2)(7+16) = 2208^{\#}$$
  
WT. FLOOR =  $(12PSF)(7)(16) = 1344^{\#}$   
 $\Sigma UT. = \underline{5982}^{\#}$ 

V Base = 
$$\frac{(2.5)(5892)}{(1.4)(5.5)} = \frac{689}{7}$$

22-141 22-142 22-144

$$V \text{ Basc} = \frac{(2.5 \times .36 \times 1)(5892)}{(1.4)(5.5)} = \frac{689}{600}$$
 $V \text{ Basc} = \frac{(2.5 \times .36 \times 1)(5892)}{(1.4)(5.5)} = \frac{689}{600}$ 
 $V \text{ Basc} = \frac{(2.5 \times .36 \times 1)(5892)}{(1.4)(5.5)} = \frac{689}{600}$ 



#### COFFEE CARTEL: FOUNDATION NOTES

1. Materials: Concrete 2500 psi at 28 days Slump (ftg) 3" to 5" Portland Cement C-150 5-1/2 sacks per cubic yard Aggregates per C-33 3/4" maximum aggregate size Water per C-94 Concrete Temperature 50-90 F Air Entraised 5-7%

Note: The concrete supplier shall assume full responsibility For the mix design and the overall performance of the Concrete.

> Rebar ASTM A615 Grade 40 Lap splice 40 diameters minimum.

> > Provide #4 x 24 24 corner bars at all corners and intersections.

Steel ASTM A307 (Bolts)

2. All footings to be founded on firm, original subgrade.





# City of Portland

# Systems Development Charge Information Form

# FOR USE WITH COMMERCIAL PROJECTS

| To be | completed | for the  | following | project | types: |
|-------|-----------|----------|-----------|---------|--------|
| 100   | combieted | IOI LITE | TOHOWHILL | DIOIGGE | typca. |

- -all new construction
- -change of use or occupancy
- -building additions that change the number of units shown on pages 4 & 5
- -tenant improvements that change the number of units shown on pages 4 & 5
- -additional dwelling units

| -any additional impervious surfaces over 500 square feet  |
|---|
| CUSTOMER INFORMATION:   |
| Name: CRAIG MONTO/A   |
| Address: 6164 GW CAPITOL HWY PORTLAND OR, 97201   |
| (street number and name) (city, state, zip code)  |
| Phone (include area code): 503 892 5828 Fax (include area code):  |
| E-mail address: <u>CHA MONTO (A &amp; A &amp; L - COM</u>   |
| PROJECT IDENTIFICATION:   |
| Please describe the scope of the project. If applicable, include detail on the existing use(s) of the structure. If a building has been demolished, provide the demolition permit number and note the prior uses(s) of the building in column (4) on pages 4 and 5. (Attach additional sheets as needed.)  15 * 19 * REMAKRABLE (OFFEE HUT, THE LOT IS EMOTY. WE WILL ADD |
| ASPHALT AND LAFFSCAPE.  |
| Please check correct county:   Multnomah (Inside Portland)   Clackamas  Multnomah (outside Portland)   Washington   |
| Shaded area to be completed by staff: 0' 1748 66 (C)  |
| Building Permit # % section map  Address  |
| If you have any questions, call: PDOT Hotline, (503) 823-7002 - Transportation  |

BES hotline, (503) 823-7761 - Bureau of Environmental Services

# <u>Instructions</u> for completing the table below and on the following page Column 3 — Enter the size (number of units) of your proposed development.

Column 4 - If the project site has existing buildings or structures, enter the size (number of units) of the existing or most recent use.

| (1)   | (2)<br>Unit of | (3) Units In<br>Proposed | (4)<br>Units In Existing |
|---|----------------|--------------------------|--------------------------|
| Building Use Type                             | Measure        | Development              | or Most Recent Use       |
| Residential                                   |                |                          |                          |
| Single Family (1 to 3 Units/Building)         | dwelling       |                          |                          |
| Multiple Family (4 or more Units/Building)    | dwelling       |                          |                          |
| Retirement Community                          | dwelling       |                          |                          |
| Rowhouse                                      | dwelling       |                          |                          |
| Commercial - Services                         |                |                          |                          |
| Number of employees and all other that apply: | employees      |                          |                          |
| Drive-in Bank                                 | sq ft/GFA      |                          | -                        |
| Walk-in Bank                                  | sq ft/GFA      |                          |                          |
| Day Care Total number                         | student        |                          |                          |
| Day Care Number in diapers                    | student        |                          |                          |
| Library                                       | sq ft/GFA      |                          |                          |
| Post Office                                   | sq ft/GFA      |                          |                          |
| Hotel/Motel                                   | room           |                          |                          |
| Service Station. Vehicle Fueling Po           | sition (VFP)   |                          |                          |
| Service Station/Minimart                      | VFP            |                          |                          |
| Service Station/Minimart/Car Wash             | VFP            |                          |                          |
| Movie Theater                                 | screen         |                          |                          |
| Car Wash                                      | site           |                          |                          |
| Health Club/Racquet Club                      | sq ft/GFA      | · · ·                    |                          |
| Marina  | berth          |                          |                          |
| Laundromat                                    | washer         |                          |                          |
| American to the set of                        |                |                          |                          |
| Commercial Institutional Elementary School    | student        |                          |                          |
| High School                                   | student        |                          |                          |
| University/College                            | student        |                          |                          |
| Church  | sq ft/GFA      |                          |                          |
| Hospital                                      | Sq fl/GFA &    | &                        |                          |
| nospital                                      | bed            | Č.                       | &                        |
| Nursing Home                                  | bed            | <del></del>              |                          |
| Congregate Care/Assisted Living               | dwelling       |                          |                          |
|   |                |                          |                          |
| Commercial - Restaurant                       |                |                          |                          |
| Number of seats and one of the following:     | seats          |                          |                          |
| Restaurant                                    | sq ft/GFA      |                          |                          |
| Quick Service Restaurant                      | sq ft/GFA      | 140 59 FT                |                          |

#### DEFINITIONS

(from Institute of Transportation Engineers Trip Generation Manual)

Gross Floor Area (GFA)

"The gross floor area of a building is the sum (in square feet) of the area at each floor level, including cellars, basements, mezzanines, penthouses, corridors, lobbies, stores, and offices, that are included within the principal outside faces of exterior walls, not including architectural setbacks or projections. Included are all stories or areas that have floor surfaces with clear standing head room (6 feet, 6 inches, minimum) regardless of their use. Where a ground level area, or part thereof, within the principal outside faces of the exterior walls is left unenclosed, the gross floor area of the unenclosed portion is said to be considered as a part of the overall square footage of the building. All unroofed areas and unenclosed roofed-over spaces, except as defined above, are to be excluded from the area calculations.

For purposes of the trip generation calculation, the gross floor area of any parking garages within the building shall not be included within the gross floor area of the entire

building."

Gross Leasable Area (GLA)

"Gross leasable area is the total floor area designed for tenant occupancy and exclusive use, including any basements, mezzanines, or upper floors, expressed in square feet and measured from the center line of joint partitions and from outside wall faces. For purposes of the trip generation calculation, the floor area of any parking garages within the building shall not be included within the GLA of the entire building. Gross leasable area is the area for which tenants pay rent; it is the area that produces income."

#### OPTIONAL ALTERNATE RATE AND FEE CALCULATION

TRANSPORTATION

If you want us to use trip generation rates other than those used in the City's Transportation SDC Ordinance and Rate Study, you need to submit data certified by a professional traffic engineer. Use "Request for Alternate Trip Generation Rate and SDC Calculation" Form TSDC-3 to submit such data, and attach it to this application. Institutional development (i.e., educational and medical campuses) may elect to base SDC on annual changes in trip generation. Use "Election by Institutional Development of Special Trip Generation Rate and SDC Calculation" Form TSDC-4 to make this election.

**PARKS** 

If you want us to use an alternate number of persons per Dwelling Unit than those used in the City's Parks SDC Methodology Study, you need to submit documentation, analyzed and certified by a suitable and competent professional. Alternative SDC rate calculations must be based on analysis of occupancy of classes of structures, not on the intended occupancy of a particular New Development. Use "Request for Alternative occupancy and SDC Calculation" (Form PSDC-6) to submit such data, and attach it to this application.

### OPTIONAL CREDIT FOR PROVIDING QUALIFIED PUBLIC IMPROVEMENTS

#### TRANSPORTATION

If you want to reduce the amount of your Transportation SDC, you may make improvements to specific transportation facilities in the City of Portland. Use "Request for Credit for Qualified Public Improvement" Form TSDC-5 to submit such data, and attach it to this application.

#### **PARKS**

If you want to reduce the amount of your Parks SDC, you may donate property or improvements to certain qualified park facilities in the City of Portland. Use "Request for Parks SDC Credit for Qualified Public Improvement" (Form PSDC-7) to submit a request, and attach it to this application.

### PAYMENT TIMING AND METHOD OF SDC FEES

If upon review of this information it is determined an SDC is due, a "Notification of SDC Fees" will be sent to you. At that time you will need to tell its when and how you will pay the SDC:

## Options you may select for the timing of your payment:

- a. At the time the building permit is issued
- b. Deferred 180 days after the building pennit is issued (Transportation and Parks only)
- Multi-year installment payments after the building permit is issued ("Bancroft Installment Payment")

Options "b" and "c" both place a lien on the property until the assessment is paid in full. Options "b" and "c" both require a non-refundable processing fee. If you select options "b" or "c", we will send you an "Installment Payment Election" Form to be completed by the property owner of record and returned to us.

# Options you may select for the method of your payment:

- a. Check, cash or money order
- Transfer Certificate you must complete and attach a separate form for each fee (Transportation and Parks only)
  - "Request for Credit for Qualified Public Improvement", TSDC-5, for Transportation.
  - "Request for Parks SDC Credit for Qualified Public Improvement", for Parks.



Print name:

# **Building Permit Application**

# City of Portland

1900 SW 4th, Ste 5000, PO Box 8120, Portland, OR 97201 Phone; (503) 823-7363, Fax: (503) 823-3018

Phone: (503) 823-7363, Fax: (503) 823-3018 TDD: (503) 823-6868, Website: www.opdr.ci.portland.or.us

| 1             | OFFICE USE ONLY |  |
|---------------|-----------------|--|
| ate received: | Permit no.:     |  |
| y:            |                 |  |

01-174866:00

| . TYPE OF F  | PERMIT   |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  | Multi-family   |  |  |  |  |  |
| JOB SITE INFO  | ORMATION   |  |  |  |  |  |
| Job address: 4339 5W BEAVERTON -HILLS DALE   |  |  |  |  |  |  |
| Lot: Block: Subdivision:   | Tax map/tax lot/account no.:53: hei 17 IS IE   |  |  |  |  |  |
| Project name: (OFFEE CARTEL ALSO   |  |  |  |  |  |  |
| Description and location of work on premises/special conditions: DEIVE UP COFFEE 44+ MAP 3525  |  |  |  |  |  |  |
| The state of the s |  |  |  |  |  |  |
| OWNER /  | FOR SPECIAL INFORMATION, USE CHECKLIST   |  |  |  |  |  |
| Name: (RAIG MONTOTA  | (Floodplain, septic capacity, solar, etc.)   |  |  |  |  |  |
| Mailing address: 6164 5W CHPITOL HWY   | 1 & 2 family dwelling:   |  |  |  |  |  |
| City: FORTIANIT State: OR ZIP: 97201   | Valuation of work\$  |  |  |  |  |  |
| Phone: 847 5828 Fax: E-mail: CHAMONTOTA E  | No. of bedrooms/balhs  |  |  |  |  |  |
| Owner's representative: HEIF, SPEING   | Total number of floors   |  |  |  |  |  |
| Phone: 89 Z 52 22   Fax:   E-mail:   | New dwelling area (sq. ft.)  |  |  |  |  |  |
| APPLICANT .  | Garage/carport area (sq. ft.)  |  |  |  |  |  |
| Name: CRAIG MONTOYA  | Covered porch area (sq. ft.)   |  |  |  |  |  |
| Mailing address:   | Deck area (sq. ft.)  |  |  |  |  |  |
| City: State: ZIP:  | Other structure area (sq. ft.)   |  |  |  |  |  |
| Phone: Fax: E-mail:  | Commercial/industrial/multi-family:  |  |  |  |  |  |
| CONTRACTOR   | Valuation of work  |  |  |  |  |  |
| Business name: TAYLOR AS PHALT & CON.  | Existing bldg. area (sq. ft.)  |  |  |  |  |  |
| Address:   | New bldg. area (sq. ft.)   |  |  |  |  |  |
| City: State: ZIP:  | Type of construction   |  |  |  |  |  |
| Phone: 503 939 52 Fax: E-mail:   | Occupancy group(s): Existing:  |  |  |  |  |  |
| CCB no.:   | New:   |  |  |  |  |  |
| City/metro lic. no.:   | Notice: All contractors and subcontractors are required to be  |  |  |  |  |  |
| ARCHITECT/DESIGNER   | licensed with the Oregon Construction Contractors Board under  |  |  |  |  |  |
| Name: TERRY FO KG  | provisions of ORS 701 and may be required to be licensed in the  |  |  |  |  |  |
| Address:   | jurisdiction where work is being performed. If the applicant is exempt from licensing, the following reason applies: |  |  |  |  |  |
| City: State; Z1P:  | exemple from needsing, the following reason applies.   |  |  |  |  |  |
| Contact person: Plan no.:  | <del></del>  |  |  |  |  |  |
| Phone: Fax: E-mail:  |  |  |  |  |  |  |
| ENGINEER   | OFFICE DE ONLY   |  |  |  |  |  |
| Gune: Contact person:  | Fees due upon application\$  |  |  |  |  |  |
| Address: City: State: ZIP:   | Date received:   |  |  |  |  |  |
| City: State: ZIP: Phone: Fax: B-mail:  | Amount received\$  |  |  |  |  |  |
|  | Please refer to fee schedule.  |  |  |  |  |  |
| I hereby certify I have read and examined this application and the attached checklist. All provisions of laws and ordinances governing this work will be complied with, whether specified herein or not.   |  |  |  |  |  |  |
| Authorized signature; Date:  |  |  |  |  |  |  |

