

B

Type



Plans

BUD09- 3901

Permit Number

26

Street Number

Oxford Ct

Street Name

WIN

Community Code

058-262-026

APN

**COUNTY OF SONOMA - PERMIT AND RESOURCE MANAGEMENT DEPARTMENT**  
 2550 Ventura Avenue, Santa Rosa, CA 95403 (707) 565-1900 FAX (707) 565-1103

Please Print Your Name: \_\_\_\_\_ Date Applied: \_\_\_\_\_

**INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT**

**SITE LOCATION INFORMATION - PRINT CLEARLY**

Site Address: 26 OXFORD CT. City: WINDSOR/LARKFIELD ZIP: \_\_\_\_\_  
 Cross-Street: \_\_\_\_\_ Project Phone #: 707-544-0569 Project Fax #: \_\_\_\_\_  
 Directions: \_\_\_\_\_ Email address: \_\_\_\_\_ Unit #: \_\_\_\_\_ Lot #: \_\_\_\_\_  
 Describe Project: ROOF FRAMING REPAIR Living Area \_\_\_\_\_ Contract Price: \$3,000  
 Garage \_\_\_\_\_ Decks \_\_\_\_\_

**OWNER NAME AND ADDRESS** Name: PAUL & MARY FINN  
 Mailing Address: 26 OXFORD CT. City: WINDSOR/LARKFIELD State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Day Ph: (544-0569) Fax: ( ) N/A

**APPLICANT NAME AND ADDRESS** Name: COMET CONST. INC. / CARL PORTSCHELLER  
 Mailing Address: 3011 MANNING CT. City: SANTA ROSA State: CA ZIP: 95403  
 Day Ph: (578-4506) Fax: (578-7411)

**CONTRACTOR INFORMATION** Company Name: COMET CONST. INC.  
 Address: 3011 MANNING CT. City: SANTA ROSA State: CA ZIP: 95403  
 Day Ph: (578-4506) Fax: (578-7411)

**OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)** Name: ROGINA-PESTELL  
 Address: 160 WIKIUP DR. City: SANTA ROSA State: CA ZIP: 95403  
 Day Ph: (575-8614) Fax: (575-7169)

**WORKER'S COMPENSATION DECLARATION**  
 I hereby affirm under penalty of perjury one of the following declarations:  
 I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.  
 I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:  
 Carrier: STATE COMPENSATION  
 Policy No.: 641100608 10/1/09  
 (This section need not be completed if the permit is for one hundred dollars (\$100) or less.)  
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.  
 Exp. Date: 10/1/09 Applicant: Carl E. Portscheller

**WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION. DAMAGES AS PROVIDED FOR IN SECTION 3708 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.**

**OWNER-BUILDER DECLARATION**  
 I hereby affirm under penalty of perjury that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):  
 I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044 Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).  
 I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.).  
 I am exempt under Sec. \_\_\_\_\_, B & P.C. for this reason \_\_\_\_\_  
 By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following website: <http://www.leginfo.ca.gov/calaw.html>.

Date: \_\_\_\_\_ Signature of Property Owner or Authorized Agent: \_\_\_\_\_

**LICENSED CONTRACTOR'S DECLARATION**  
 I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.  
 Lic. Class: B Lic. No.: 414519  
 Exp. Date: \_\_\_\_\_ Contractor: Carl E. Portscheller

**ASBESTOS DECLARATION**  
 Written asbestos notification pursuant to Part 61 of Title 40 of the Code of Federal Regulations is required when asbestos exists in buildings, or portions thereof, undergoing demolition. I hereby declare that demolition authorized by this permit is from construction that  does  does not contain asbestos, or that  no demolition is authorized by this permit.  
 I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State laws relating to building construction. I hereby authorize representatives of the County of Sonoma to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be deemed revoked.  
 Signature: Carl E. Portscheller 95403  
 ADDRESS: 3011 MANNING CT. SANTA ROSA CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Contractor  Owner  Other Licensed Professional

**CONSTRUCTION LENDING DECLARATION**  
 I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued. (Sec. 3097, Civ. C.).  
 Lenders Name: N/A  
 Lenders Address: \_\_\_\_\_

**FOR DEPARTMENT USE**

Zoning \_\_\_\_\_ File No. \_\_\_\_\_ Acres \_\_\_\_\_  
 Existing Use/Structures \_\_\_\_\_  
 Proposed Use/Structures \_\_\_\_\_  
 Zoning Min. Yard Requirements: Front \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_ Back \_\_\_\_\_  
 NOTE: Fire Safe Standards require all parcels greater than 1 Acre to have a min. 30' setback unless mitigated.  Mitigation Required  Address subject to change  
 Approval for Permit Issuance: \_\_\_\_\_ Approval for Occupancy: \_\_\_\_\_  
 By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditions: \_\_\_\_\_  
 Sewer Connection:  Available  Fees Paid  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Road Encroachment:  Fees Paid  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Septic System Permit/Clearance # \_\_\_\_\_  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Flood Zone:  Yes  No 100 Year Flood Elevation: \_\_\_\_\_  
 Site Review \_\_\_\_\_  
 Drainage Review: \_\_\_\_\_  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Fire: \_\_\_\_\_  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Code Enforcement Violation  Yes  No Violation # \_\_\_\_\_  
 This permit is limited to \_\_\_\_\_ days.

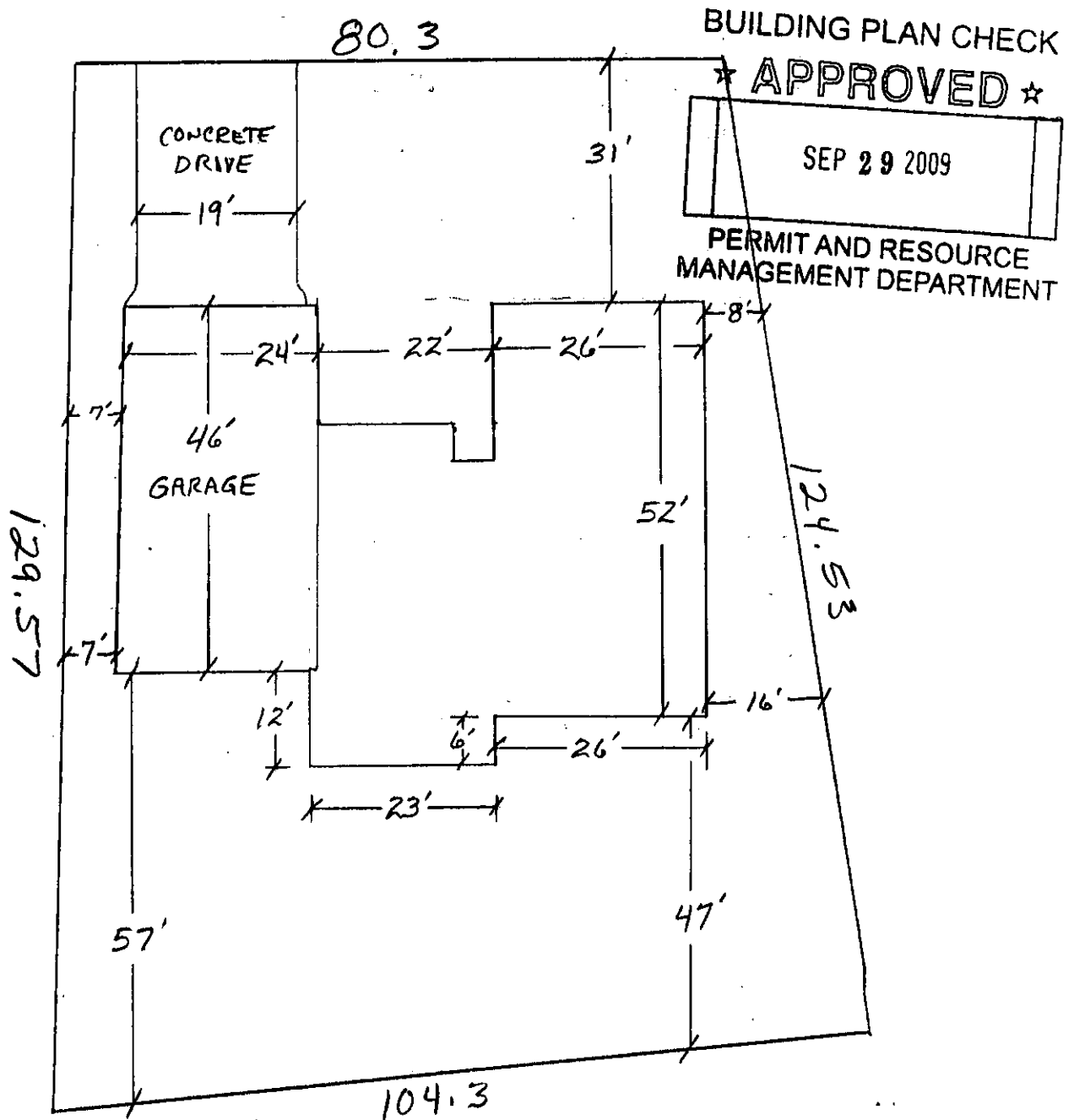
Work Authorized: Replace calif-frame  
mass. Replace one post

Plans Approved  No Plans Subject to Field Inspection  Post FIRM  Alquist Priolo Report Available  
 Pre FIRM  Geotechnical report Available  
 Permit Check Cleared By: Carl Smith Date: 9-29-09 Type of Construction: VB Occupancy: R2 No. of Stories: \_\_\_\_\_ No. of Bedrooms: \_\_\_\_\_  
 Permit Cleared for Issuance By: CB Date: 9-29-09 Auto. Fire Sprinklers Req'd: \_\_\_\_\_ No. of Units: \_\_\_\_\_ Certificate of Occupancy: \_\_\_\_\_  
 Machine Space for Permit Fee  
**PAYMENT REC'D**  
 \$ 295.10  
711  
**SEP 29 2009**  
 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT  
 COUNTY OF SONOMA

JOB ADDRESS: 26 Oxford Ct Windsor  
 PERMIT NUMBER: B1809-3901  
 INSPECTION AREA: 11

THIS PERMIT SHALL EXPIRE IN THREE(3) YEARS FROM DATE FEES ARE PAID UNLESS OTHERWISE NOTED BY CODE ENFORCEMENT

26 OXFORD CT., LARKFIELD



FINN RESIDENCE  
26 OXFORD CT.  
SANTA ROSA, CA  
APN# 058-262-026

*Carl S. Pitschke*  
DRAWN: CARL PITSCHKE  
SCALE: 1" = 20'  
DATE: SEPT. 29, 2009  
CONTACT: 707-578-4506

# STRUCTURAL CALCULATIONS

For  
*California Framing & Gable End Rehabilitation*

*26 Oxford Court  
Santa Rosa, CA*

BUILDING PLAN CHECK  
★ APPROVED ★

SEP 29 2009

PERMIT AND RESOURCE  
MANAGEMENT DEPARTMENT

*Prepared for:  
Paul & Mary Finn*

*Contents:  
Pages 1-2*



9-28-09

*Scope of Service:*

*Rogina Pestell Structural Engineers are providing Engineering Services for the replacement of the California framing at three locations on an existing roof and for the replacement of two gable end support post foundations. All other aspects of the reroofing work is by others.*

*Project #09023  
September 28, 2009*

**ROGINA PESTELL**  
*structural engineers*

CA FRMG REHAB  
26 OXFORD CT



ROGINA PESTELL

structural engineers

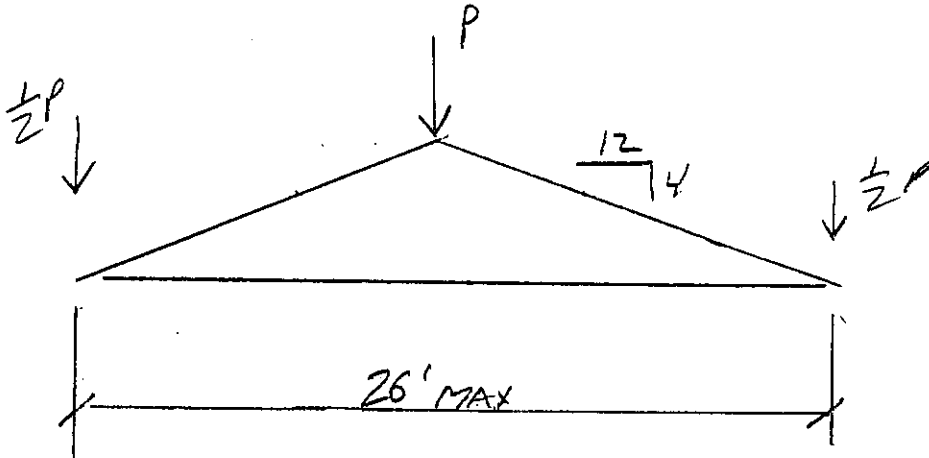
707 575-8614

CA FRAMING

0923

DAL  
9-28-09

1



$$P = \left(\frac{14}{20}\right) (2') \left(\frac{26'}{2}\right) = 364 \# D$$

$$520 \# L$$

CONVECTION:

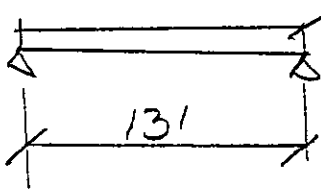
$$T = \left(\frac{182}{260}\right) \left(\frac{12}{4}\right) = 546 \# D$$

$$780 \# L > 1326 \#$$

$$\frac{5''}{8} N' = \frac{600(360)(1.25)}{600 \sin^2 18.4 + 360 \cos^2 18.4} = 764 \#$$

{ USE 2-5/8"  $\phi$  MB'S GF 1408# }

RAFTER:



$$W = \left(\frac{14}{20}\right) 2' = 28 \# D$$

$$40 \# L$$

{ USE 2x8 @ 24" o.c }

GABLE ROOF EXTENSION REHAB  
26 OKFORD CT



ROGINA PESTELL

structural engineers

707 575-8614

GABLE END FOOTINGS

09023

DDN  
9-24-09

2

$$P_{FTG} = \left( \overset{\text{STUCCO + FLNG}}{14 + 12} \right) \left( \frac{6+2'}{2} \right) \left( \frac{31.5}{2} \right) = \frac{2040 \# D}{1575 \# L} > 3623 \#$$

$$AREA = \frac{3623}{1000} = 3.62 \text{ SQ FT } \left\{ \text{USE 2' SQ MIN FTG} \right\}$$

AN EXISTING GABLE END EXTENDS -6' FROM THE EXTERIOR WALL TO CREATE A COVERED PATIO. THE TWO EXISTING POST THAT SUPPORT THE EXTENSION HAVE SETTLED AND WILL BE REHAB'D WITH TWO NEW, DEEPER FOOTINGS