CITY OF WEST LINN [1] **Inspection line 722-5509**

PLUMBING PERMIT **CALL BY 7AM**

PERMIT # :04-036 Date :
Project location :1673 10TH ST Type :PLG
Owner :RONALD POWELL By :JN
Installer :ADCOA Phone # :285-1534

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A. One & two family Plumbing fee schedule:(includes water,sanitary,& storm)

1 Bath Residence	$ 205.00		0.00
2 Bath Residence	$ 271.25		0.00
3 Bath Residence	$ 331.25		0.00
1/2 Bath or 1/2 Kitchen	$ 35.63		0.00
Manufactured Home Connection	$ 50.00		0.00
Sq Ft of House with Fire Sprinkler System			0.00
Number of plumbing fixtures	x $ 9.50		0.00
Water Service per 100' or fraction	x $ 40.00		0.00
Exterior or Interior Re:pipe			
Bldg. Sewer per 100' or fraction	x $ 40.00		0.00
Storm Sewer per 100' or fraction	x $ 40.00		0.00
$ 3665 Med-Gas			44.50
B. Minimum Fee	$ 50.00		50.00
C. Irrigation System/ Backflow Preventer	$ 18.75		0.00

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D. Fees

Subtotal of all fees	$	50.00
State Surcharge 8%	$	4.00
Plan Review	$	32.50
Total fees	$	86.50

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Applicants must hold an Oregon Registration to conduct a plumbing business or must be the homeowner/operator not hiring outside help.PLEASE INDICATE BELOW. I certify that all work will be done in accordance with the State of Oregon Plumbing Specialty Code and related Statutes. HOMEOWNERS: I certify that I am the owner of the property described, where I plan to install the plumbing.

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Plumbing Contractor License #:

State Construction Contractors License #:106788

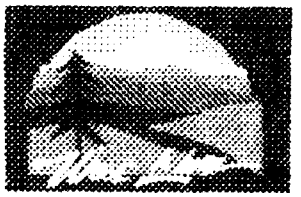
City/Metro Business License #: 3859

Authorized Signature:_____ Date:_____

Contractor: 001MGI

CITY OF WEST LINN

INSPECTION REQUEST LINE: 503-722-5509
OFFICE: 503-656-4211



Permit#: 04-036 Inspection Request Date: March 12, 2004 AM

Address: 1673 10TH STREET

Builder or Owner:

Date Request Received: 285-1534

Type of Inspection: MED-GAS

APPROVED APPROVED W/CORRECTIONS NOT APPROVED

COMMENTS:

INSPECTED BY: Jim Clark DATE: 3-12-04

22500 SALAMO RD. BOX 900 * WEST LINN OR 97068 * wlbuilding@ci.west-linn.or.us