

BUILDING DEPT.

1904 22ND AVE.

1 OF 1

OREGON MICRO-IMAGING, INC

CITY OF FOREST GROVE  
 BUILDING DEPARTMENT  
*Microfilm Record*

Address/Location: 1904 22nd Avenue	
Map/Tax Lot:	
Subdivision:	
Bldg. Permit No(s):	
Dates From:	To: 12-31-87
<b>FILE CONTENTS</b>  Please check mark those items which are in the file.  <b>* CONTENTS TO BE MICROFILMED          IN ORDER LISTED</b>	<input type="checkbox"/> Certif./Occupancy
	<input checked="" type="checkbox"/> Inspection Request card/sheet
	Building Permit How many? _____
	Other Permits Plumbing Mechanical Sewer
	Security Agreements
	Site plan drawings Blueprint drawings
	Correspondence/Memos
Other	
Notes:	
Date Microfilmed: 9-93	





# City of Forest Grove

For Inspection  
Call the 24 Hour Inspection Line  
(503-992-3206)

## PLUMBING PERMIT

PERMIT NO.: PLM07-00230  
APPLIED: 7/10/2007  
ISSUED: 7/10/2007  
EXPIRES: 1/10/2008

SITE ADDRESS: 1904 22ND AVE  
ASSESSOR'S PARCEL NO.: 1N331CC-09100  
TYPE OF WORK: Repair  
TYPE OF USE: Single Family Residential  
PROJECT DESCRIPTION: REPLACE SEWER LATERAL.

OWNER/APPLICANT	CONTRACTOR
SCHMITZ-THURSAM, TREVOR 2125 A ST FOREST GROVE OR 97116	

Plumbing Fixtures		Fees			
Fixture Type	Quantity	Type	By	Date	Amount
Sanitary sewer service	1	PRMT	MLP	7/10/2007	\$46.35
		SUCH	MLP	7/10/2007	\$3.71
		MISC	MLP	7/10/2007	\$1,000.00
Total:					\$1,050.06

NOTES:

I hereby acknowledge that I have read this permit and state that the above information is correct, and agree to comply with all ordinances and state and federal laws regulating activities covered by this permit.

Issued by

Applicant or Owner's Signature

CONDITIONS OF APPROVAL :

1)

PHM07-00230

Plumbing Permit Application



City of Forest Grove

Phone: 503-992-3229

Fax: 503-992-3202

1924 Council Street/P.O. Box 326, Forest Grove, Oregon 97116

Inspection Request Line: 503-992-3206

Permit Number:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 1904 22nd	
City/State/ZIP: Forest Grove, OR 97116	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Internal replacement	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: TREVOR SCHMITZ-THURSAM	
Address: 2125 A STREET	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: (503) 544-8219	Fax: ( )
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: TREVOR SCHMITZ-THURSAM	
Address:	
City/State/ZIP:	
Phone: (503) 544-8219	Fax: ( )
E-mail: patg.trevor@unicon.net	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ( )	Fax: ( )
CCB lic.:	PB Lic. no.:

FEE* SCHEDULE			
For special information use checklist.			
Description	Qty.	Ea.	Total
<b>New 1- 2-family dwellings (includes 100 ft. for each utility connection)</b>			
SFR (1) bath		239.50	
SFR (2) bath		316.75	
SFR (3) bath		386.25	
Each additional bath/kitchen		41.72	
Fire sprinkler (____ sq. ft.)		46.35	
<b>Site utilities</b>			
Catch basin or area drain		13.90	
Drywell, leach line, or trench drain		13.90	
Footing drain (no. linear ft.: ____)		46.35	
Manufactured home utilities			
Manholes		13.90	
Rain drain connector		13.90	
Sanitary sewer (no. linear ft.: 30)		46.35	
Storm sewer (no. linear ft.: ____)		46.35	
Water service (no. linear ft.: ____)		46.35	
<b>Fixture or item</b>			
Absorption valve		13.90	
Backflow preventer		13.90	
Backwater valve		13.90	
Clothes washer		13.90	
Dishwasher		13.90	
Drinking fountain		13.90	
Ejectors/sump		13.90	
Expansion tank		13.90	
Fixture/sewer cap		13.90	
Floor drain/floor sink/hub		13.90	
Garbage disposal		13.90	
Hose bib		13.90	
Ice maker		13.90	
Interceptor/grease trap		13.90	
Medical gas (value: \$ ____)			
Primer		13.90	
Roof drain (commercial)		13.90	
Sink/basin/lavatory		13.90	
Tub/shower/shower pan		13.90	
Urinal		13.90	
Water closet		13.90	
Water heater		13.90	
Other:		13.90	
Other:			
<b>Subtotal</b>			
Minimum permit fee			\$ 27.30
Plan review ( ____ % of permit fee)			
State surcharge (8% of permit fee)			
<b>TOTAL PERMIT FEE</b>			

Authorized signature:

Print name: TREVOR SCHMITZ-THURSAM Date: 7/10/07

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

\* Fee methodology set by Tri-County Building Industry Service Board 440-4616T (10/02/COM/WEB)



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1904 22ND
Contractor TREVOR
Phone Number 544-8219

Scheduled Inspection Date 7-19-07
Mon [ ] Tues [ ] Wed [ ] Thurs [ ] Fri [x]
AM [ ] PM [x] other EARLY
Permit Number PLM07-00230

BUILDING

- Footing / Pier
Foundation Wall
Underfloor (P & B)
Shear
Framing
Insulation
Approach/Sidewalk
Other
Planning
Final

PLUMBING

- Underfloor (P & B)
Top Out (Rough)
Water Line
Rain/Crawl Drains
Storm Drainage
Sanitary Sewer
Backflow Device
Water Heater
Other
Final

MECHANICAL

- Gas Piping
Underfloor (P & B)
Rough Mechanical
HVAC (Final)
Other

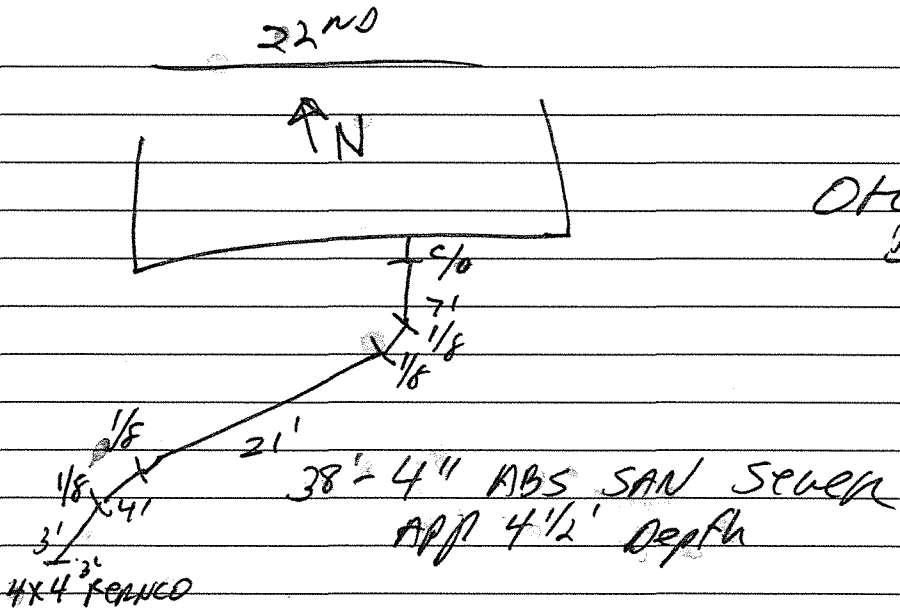
MANUFACTURED HOME

- M/H Set-Up
M/H Mechanical
M/H Water/Sewer
M/H Electrical Feeder
M/H Final
Other

Comments:

[x] APPROVED
[ ] NOT APPROVED (REINSPECTION REQUIRED)
[ ] APPROVED AFTER CORRECTIONS
[ ] REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$

CORRECTIONS:



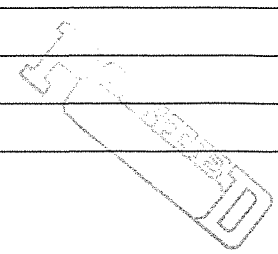
OK TO BACKFILL

Date:

07/19/2007

Inspector:

[Signature]





COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST
359-3229

Site Address 1909 22ND AVE
Contractor
Phone Number

Scheduled Inspection Date 9/19/98
AM X PM O other
Permit Number 98-0188

- BUILDING: Footing / Pier, Foundation Wall, Post & Beam, Framing, Shear Wall Nailing, Insulation, Drywall, Approach Sidewalk, Other, Final
PLUMBING: Underground, Underfloor (P & B), Top Out (Rough In), Water Line, Rain/Crawl Drains, Storm Drainage, Sanitary Sewer, Backflow, Other, Final
MECHANICAL & OTHER: Gas Piping, Gas vent, HVAC, Woodstove, Manufactured Home Setup, Other FINA
Comments

APPROVED NOT APPROVED APPROVED AFTER STOP WORK
(REINSPECTION REQUIRED) CORRECTIONS (NO REINSPECTION REQUIRED)

CORRECTIONS: 90 GAS PRESSURE TEST approved
Tag # 212150
(1) gas furnace Replacing existing oil furnace
Sunset 8000
(1) Provide combustion air

Date: 9-10-98 Inspector: Mike Smith

# MECHANICAL PERMIT

CITY OF FOREST GROVE  
 1924 COUNCIL STREET  
 FOREST GROVE, OR 97116-2311  
 (503) 359-3229

PERMIT NO.: **MEC98-0188**  
 APPLIED: **09/02/98**  
 ISSUED: **09/02/98**  
 EXPIRES: **03/01/99**

SITE ADDRESS: **1904 22ND AVE**  
 ASSESSOR'S PARCEL NO.: **1N331CC09100**

PROJECT DESCRIPTION: **convert to gas**

<p><b>OWNER</b>                  FOLEY, KEN                  1904 22nd Ave                  FOREST GROVE OR 971161618</p>	<p><b>CONTRACTOR</b>                  SUNSET FUEL CO                   P.O. BOX 42287                  PORTLAND OR 97242                  234-0611                  2452                      EXPIRES:10/19/00</p>
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TYPE OF WORK...:TEN	BOILERS/COMPRESSORS-	RELOC/REPAIR...: 0
TYPE OF USE...:RES	0-3 HP.....: 0	CLOTHES DRYERS: 0
TYPE OF CONST:?	3-15 HP.....: 0	GAS WTR HEATERS: 0
FUEL TYPES-----	15-30 HP.....: 0	STOVE, APPLI...: 0
:/GAS/ / /:	30-50 HP.....: 0	FIRE LOG/LITE...: 0
FURN < 100K BTU: 1	50+ HP.....: 0	WOODSTOVES.....: 0
FURN >=100K BTU: 0	AIR HANDLING UNITS--	FIREPLACE.....: 0
FURN - FLOOR...: 0	<= 10000 cfm.: 0	GAS OUTLETS....: 1
UNIT HEATERS...: 0	> 10000 cfm.: 0	HEAT PUMP.....: 0
EXIST OCCUP...:?	EVAP. COOLERS...: 0	VENT FANS.....: 0
PROPOSED OCCUP.:?	HOODS.....: 0	VENT SYSTEMS...: 0
BUILDING AREA: 0:	DOMES. INCIN...:0	VENT W/O APPLI.: 0
	COMML. INCIN...:0	WTR HTR VENT...: 0

<p><b>FEEES</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Code</th> <th style="text-align: left;">Amount----</th> <th style="text-align: left;">By-</th> <th style="text-align: left;">Date----</th> <th style="text-align: left;">Receipt</th> </tr> </thead> <tbody> <tr> <td>PRMT</td> <td>\$ 14.50</td> <td>ALL</td> <td>09/02/98</td> <td>62082</td> </tr> <tr> <td>SURC</td> <td>\$ 0.73</td> <td>ALL</td> <td>09/02/98</td> <td>62082</td> </tr> <tr> <td colspan="5" style="padding-top: 20px;"><b>TOTAL \$ 15.23</b></td> </tr> </tbody> </table>	Code	Amount----	By-	Date----	Receipt	PRMT	\$ 14.50	ALL	09/02/98	62082	SURC	\$ 0.73	ALL	09/02/98	62082	<b>TOTAL \$ 15.23</b>					<p><b>NOTES</b></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
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SURC	\$ 0.73	ALL	09/02/98	62082																	
<b>TOTAL \$ 15.23</b>																					

This permit becomes null and void if work or construction is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I have read this permit and agree to comply with all City ordinances and State laws. I certify that I am properly registered and licensed as required by the City of Forest Grove and State of Oregon, or that I am the legal owner of the above property.

Issued by \_\_\_\_\_ *Mary Lane*  
Applicant or Owner's Signature

**24 Hour Notice Required For All Inspections 503-359-3229**

