

BUILDING DEPT.

1816 22ND AVE.

1 OF 1

OREGON MICRO-IMAGING, INC

CITY OF FOREST GROVE
 BUILDING DEPARTMENT
Microfilm Record

Address/Location: 1816 22nd Avenue	
Map/Tax Lot:	
Subdivision:	
Bldg. Permit No(s):	
Dates From:	To: 12-31-87
FILE CONTENTS Please check mark those items which are in the file. * CONTENTS TO BE MICROFILMED IN ORDER LISTED	<input type="checkbox"/> Certif./Occupancy
	<input checked="" type="checkbox"/> Inspection Request card/sheet
	Building Permit How many? _____
	<i>Other Permits</i> Plumbing Mechanical Sewer
	Security Agreements
	Site plan drawings Blueprint drawings
	Correspondence/Memos
	Other
Notes:	
Date Microfilmed: 9-93	



CITY OF FOREST GROVE
 1924 Council Street
 PO Box 326
 Forest Grove, OR 97116
 503-992-3229

Permit No.: **BLD-15-00238**

For Inspections Call the 24 Hour Inspection Line
 Building (503-992-3206) Engineering (503-992-3228)


Permit Type: **Demolition**

Site Address:	1816 22ND AVE FOREST GROVE OR 97116	OccCode	Construction Type	SqFt
Owner:	ZIMMERMAN KURT	Phone:		
Address:	2130 A ST FOREST GROVE OR 97116	Fax:		
Contractor:		Phone:		
Address:		Fax:		
		Business Lic#:		
Contact:		Phone:		
Description:				

SUPPLEMENTAL INFORMATION:	
# SQ FEET	462

FEES:	
Demolition Fee	100.00
TOTAL FEES: 100.00	

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

Applicant Signature:  Date: 02/18/15 Issued by: _____



CITY OF FOREST GROVE
 1924 Council Street
 PO Box 326
 Forest Grove, OR 97116
 503-992-3229

Permit No.: **PLM-15-00172**

For Inspections Call the 24 Hour Inspection Line
 Building (503-992-3206) Engineering (503-992-3228)

Permit Type: **Plumbing Over the Counter**

Site Address:	1816 22ND AVE FOREST GROVE OR 97116	OccCode	Construction Type	SqFt
Owner:	NEEF MICHAEL TUTTLE &	Phone:		
Address:	750 MARYLHURST DR WEST LINN OR 97068-1861	Fax:		
Contractor:	CITY OF FOREST GROVE PUBLIC WORKS	Phone:	(503) 992-3258	
Address:	2551 23RD AVE SUITE A FOREST GROVE OR 97116	Fax:		
Contact:		Business Lic#:	no ccb #	
Description:		Phone:	(503) 992-3258	

SUPPLEMENTAL INFORMATION:	
# LF SANITARY SEWER	1

FEES:	
Plumbing Permit Fee	46.35
Plumbing State Surcharge	5.56
TOTAL FEES: 51.91	

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

Applicant Signature: R. Vodka Date: 2/16/15 Issued by: CB

Building Permit Application

**city of
forest
grove**

City of Forest Grove

Phone: 503-992-3229

Fax: 503-992-3202

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

Inspection Request Line: 503-992-3206

Permit Number: **BLD-15-00238**

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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 checked="" 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: <u>1816 22nd Ave</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>A st. N to 22nd Ave, turn left, 4th house on left or B st N to 22nd Ave turn right 2nd house on right</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Partial Demolition of Garage removing to adjust lot line removing 462 sq ft. from West end of Garage.</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Kurt Zimmerman</u>	
Address: <u>2130 A St</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Phone: (971) <u>344 1971</u>	Fax: ()
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: <u>Kurt Zimmerman</u>	
Address: <u>same as above</u>	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB lic.:	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	<u>462</u> square feet <u>removal</u>
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	
Amount received	
Date received:	

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

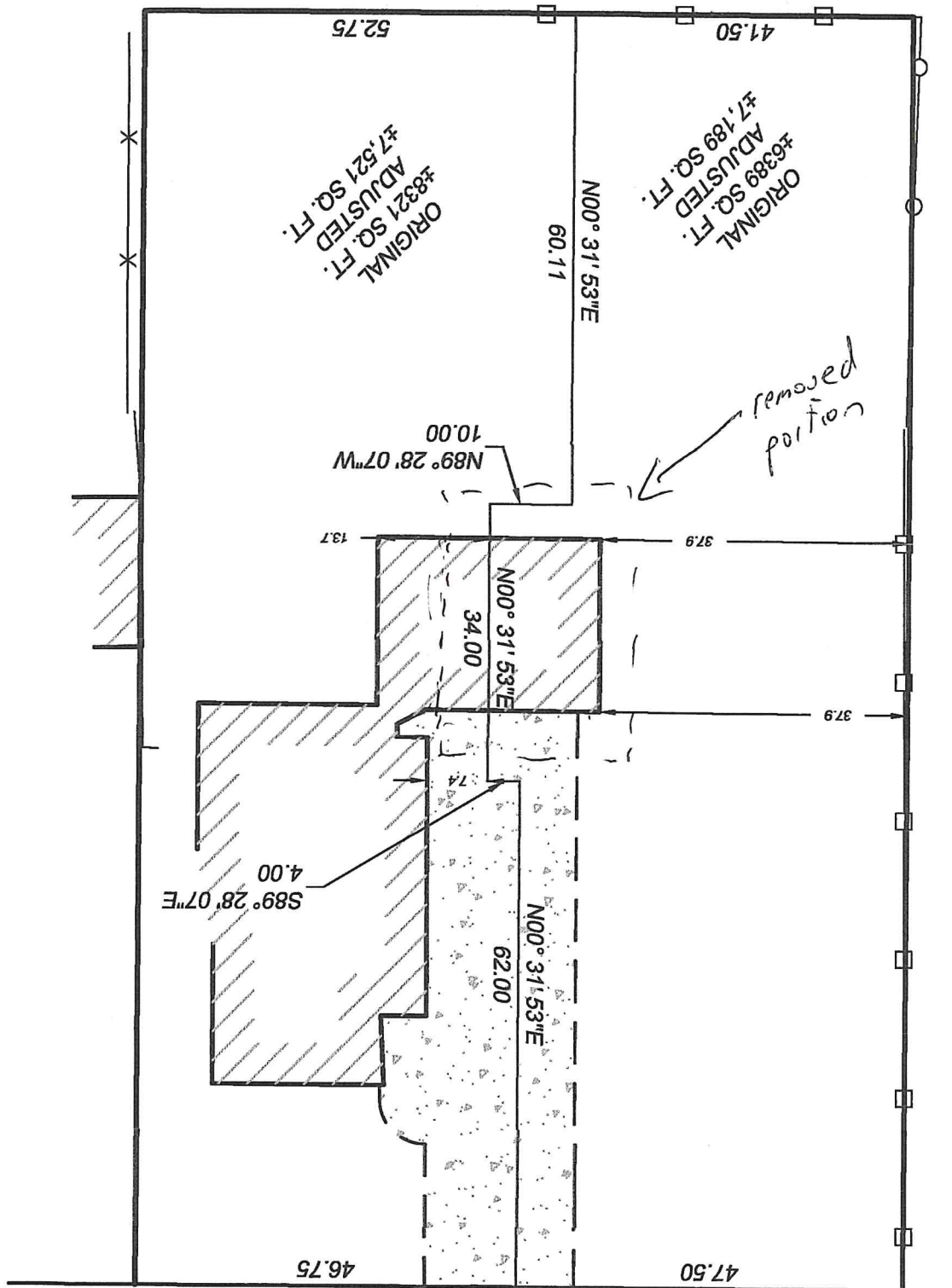
* Fee methodology set by Tri-County Building Industry Service Board

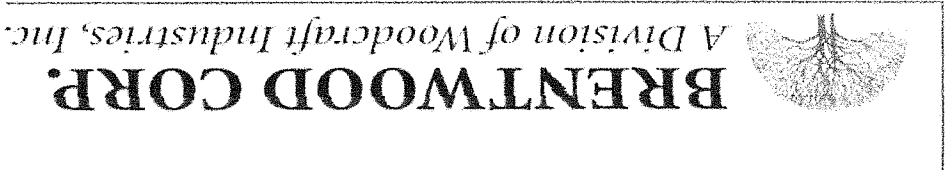
Authorized signature:



Print name: Kurt Zimmerman

Date: 02/18/2019





P.O. Box 265, 453 Industrial Way, Molalla, OR 97038 USA phone: 503.829.7366 fax 503.759.7269
 email: info@brentwoodcorp.com website: www.brentwoodcorp.com
 toll free phone: 800.331.6013 toll free fax: 888.440.0016

Customer Account Set-Up

- New Customer**
Sections 1, 2 & 5 Required
Sections 3, 4 & 6 may be Required
- Existing Customer**
Address Change
Sections 1 & 5 Required
- Name/Owner/Entity Change**
Circle One of the Above
Sections 1, 2 & 5 Required
Sections 3, 4 & 6 may be Required
- Request Terms Change**
Sections 1, 2 & 5 Required
Sections 3, 4 & 6 may be Required

SECTION 1 - GENERAL INFORMATION

Business Name: _____	Year Began: _____
Billing Address: _____	FEIN: _____
Telephone: Main _____	Entity Type: <input type="checkbox"/> Corp <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Prop
Fax: Main _____	County: _____
Email: Main _____	Principal Information: _____
Telephone: Main _____	A/P Contact: _____
Fax: Main _____	Act's Pay: _____
Email: _____	Act's Pay: _____
Address: _____	Act's Pay: _____
Ship To Address: _____	Title: _____
dba: _____	Name: _____

Sales Tax Exempt? Yes No. If Yes, attach exemption certificate.

SECTION 2 - TERMS REQUESTED

<input type="checkbox"/> COD Verifiable Trade References Required, Complete Sections 3 and 4 Pymt via Cash / Check / Money Order	<input type="checkbox"/> Credit Terms Verifiable Trade References Required, Complete Sections 3 and 4 Pymt via Cash / Check / Money Order is Eligible for Discount - 1%10 th , Net20 th Pymt via Credit Card Accepted - No Discount Allowed	<input type="checkbox"/> Pay by Credit Card Verifiable Trade References Required, Complete Sections 3 and 4 Pymt Charged Upon Shipment via Single Credit Card Held on File Must Complete CC Authorization Form
PLEASE NOTE: Credit amounts extended are determined in part based on customer request. Your desired credit limit should reflect the average expected purchases over a 45-day period. Brentwood combines your outstanding invoices along with your orders in progress to determine credit needed.		

→ ← **Credit Amount Requested ~ Required for all Accounts**

Financial Statements and Guarantees may be required at Brentwood's sole discretion.

SECTION 3 - BANK REFERENCE

Name of Bank: _____	Account Number: _____
Bank Address: _____	Representative: _____
Telephone: _____	Fax: _____



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: **PLM-15-00172**

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" 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: 1816 22nd Avenue	
City/State/ZIP: Forest Grove, OR 97116	
Suite/bldg./apt. no.:	Project name: 23 rd I & I Phase 2
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1N331CC12000	
DESCRIPTION OF WORK	
Sanitary Sewer Lateral Replacement	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Michael Tuttle Neef	
Address: 750 Marylhurst Drive	
City/State/ZIP: West Linn, OR 97068	
Phone: ()	Fax: ()
APPLICANT	CONTACT PERSON
Business name: City of Forest Grove Public Works	
Contact name: Rick Vanderkin	
Address: 2551-A 23 rd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (503)992-3258	Fax: : (503)992-3119
E-mail: rvanderkin@forestgrove-or.gov	
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
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
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.)		By sq ft	
Site utilities			
Catch basin or area drain		13.90	
Drywell, leach line, or trench drain		13.90	
Footing drain (each 100 ft.: ____)		46.35	
Manufactured home utilities			
Manholes		13.90	
Rain drain connector		13.90	
Sanitary sewer (each 100 ft.: ____)	1	46.35	\$46.35
Storm sewer (each 100 ft.: ____)		46.35	
Water service (each 100 ft.: ____)		46.35	
Fixture or item			
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: \$ ____)		By 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:			
Subtotal			\$46.35
Minimum permit fee			\$ 27.30
Plan review (____% of permit fee)			
State surcharge (12% of permit fee)			\$5.56
TOTAL PERMIT FEE			\$51.91

Authorized signature:

Print name: Rick Vanderkin

Date: 01/06/15

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)



CITY OF FOREST GROVE
 1924 Council Street
 PO Box 326
 Forest Grove, OR 97116
 503-992-3229

Permit No.: PLM-15-00145

For Inspections Call the 24 Hour Inspection Line
 Building (503-992-3206) Engineering (503-992-3228)

Permit Type: **Plumbing Over the Counter**

Site Address:	1816 22ND AVE FOREST GROVE OR 97116	OccCode	Construction Type	SqFt
Owner:	NEEF MICHAEL TUTTLE &	Phone:		
Address:	750 MARYLHURST DR WEST LINN OR 97068-1861	Fax:		
Contractor:	CITY OF FOREST GROVE PUBLIC WORKS	Phone:	(503) 992-3258	
Address:	2551 23RD AVE SUITE A FOREST GROVE OR 97116	Fax:		
Contact:		Business Lic#:	no ccb #	
Description:		Phone:	(503) 992-3258	

SUPPLEMENTAL INFORMATION:	
# LF SANITARY SEWER	1

FEES:			
Plumbing Permit Fee	46.35	Plumbing State Surcharge	5.56
			TOTAL FEES: 51.91

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

Applicant Signature: R. V. L. K. Date: 2/16/15 Issued by: CB

A



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1816 22ND AVE
Contractor KURT
Phone Number 971 344 1971

Scheduled Inspection Date 3.13.15
Mon Tues Wed Thurs Fri
AM PM other _____
Permit Number PLD-15-00238

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

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

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

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

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

Comments:

- Demo -

- APPROVED NOT APPROVED (REINSPECTION REQUIRED) APPROVED AFTER CORRECTIONS REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$ _____

CORRECTIONS: _____

GARAGE REMOVED w/ REMAINING WALL EXCEEDS 5' SET BACK AS PROPOSED

Date: 3.13.15

Inspector: AWL



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1816 22ND
Contractor ZEB
Phone Number 503-891-7074

Scheduled Inspection Date 5-8-15
Mon Tues Wed Thurs Fri
AM PM other _____
Permit Number PM-15-00172

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

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

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

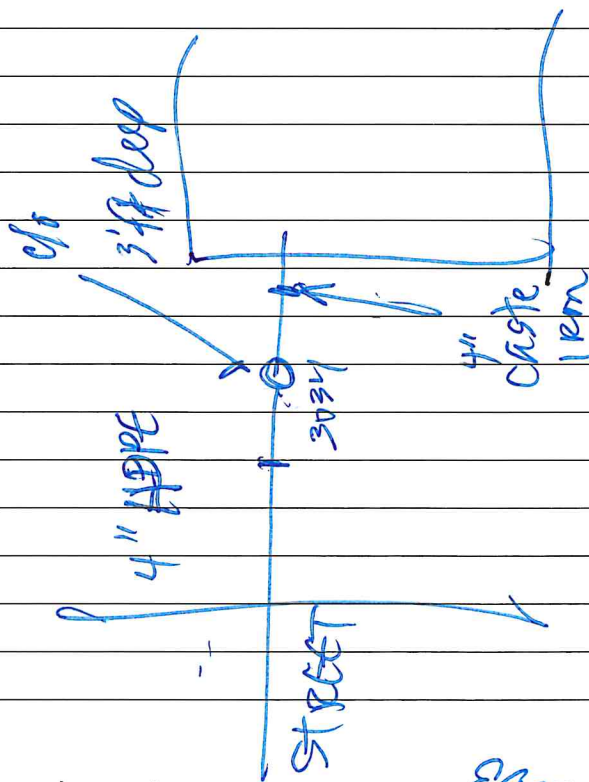
- Gas Piping
- Underfloor (P & B)
- Rough Mechanical
- HVAC (Final)
- Other

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

Comments:

- APPROVED
- NOT APPROVED (REINSPECTION REQUIRED)
- APPROVED AFTER CORRECTIONS
- REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$ _____

CORRECTIONS:



Date: 5-8-15

Inspector:

Edm



A place where businesses and families thrive.

Building Permit

CITY OF FOREST GROVE
1924 Council St
Forest Grove, OR 97116
503-992-3229
Fax: 503-992-3202

www.forestgrove-or.gov

311-BLD-15-01055

cd@forestgrove-or.gov

Permit Issued: August 20, 2015

Job Name: bsfad

TYPE OF WORK

Type of Work: Addition

Category of Construction: Single Family Dwelling

Submitted Value: \$27,081.25

Description of Work: Construction of new 25'x25' garage and removal of remaining shed and patio cover. - IVR NUMBER = 311100005611 ~ IVR PHONE = 1-888-299-2821

JOB SITE INFORMATION

Property Address:

1816 22Nd Ave, Forest Grove,
OR 97116

Parcel:

1N331CC12000 - Primary
1N331CC12100 - Primary

Owner: ZIMMERMAN KURT

Address: 2130 A ST
FOREST GROVE OR 97116

Owner: ZIMMERMAN KURT

Address: 2130 A ST
FOREST GROVE OR 97116

Owner: ZIMMERMAN KURT

Address: 2130 A ST
FOREST GROVE OR 97116

LICENSED PROFESSIONAL INFORMATION

Work performance not designated

Property Owner Affidavit Has Not Been Filed

INSPECTIONS

The list of inspections below represents the minimum inspections recommended for this project at the time of permit printing. Additional inspections may be required through the life of the project.

1065 Sidewalk	1110 Footing	1130 Foundation Wall/Rebar
1150 Slab/Flatwork	1170 Post & Beam	1260 Framing
1380 Fireplace	1460 Insulation	1520 Interior Shearwall
1540 Gypsum Board/Lath/Drywall	1550 Firewall	1630 Roof Sheathing
1996 Final Inspection - Planning	1999 Final Building	6030 Erosion Control

Schedule Inspections online at www.buildingpermits.oregon.gov or by calling: 1-888-299-2821

When calling for an inspection, use **IVR Number: 311100005611**

OR search "ePermitting" at the Apple App Store to download the **Oregon ePermitting Inspection App** for iOS.

Permits expire if work is not started within 180 Days of issuance or if work is suspended for 180 Days or longer depending on the issuing agencies policy.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

ATTENTION: Oregon law requires you to follow rules adopted by the Oregon Utility Notification Center. 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 center. (Note: the telephone number for the Oregon Utility Notification Center is (503) 232-1987).

All persons or entities performing work under this permit are required to be licensed unless exempted by ORS 701.010.

Address: 1816 22Nd Ave, Forest Grove, OR 97116
Parcel: 1N331CC12100

PERMIT FEES

<u>Fee Description</u>	<u>Quantity</u>	<u>Amount</u>
Erosion Control Fee - Additions	1 Ea	\$105.00
blplrv - Building Plan Review Fee	1	\$252.75
resite - Res.Site Review Adds/Accessry	1	\$74.30
Structural building permit fee		\$388.85
State of Oregon Surcharge - Bldg (12% of applicable fees)		\$46.66
Total Fees:		\$867.56

PLAN REVIEW COMMENTS / CONDITIONS

Reviewer: James Reitz **Date:** August 04, 2015

Planning Review: See attached conditions

Reviewer: Nick Lafollett **Date:** August 10, 2015

Infrastructure Review: See attached conditions

Reviewer: Sheila Lardy **Date:** August 05, 2015

Site Review: See attached conditions



City of Forest Grove

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

Permit Number:

Building Permit Application

Phone: 503-992-3229

Fax: 503-992-3202

Inspection Request Line: 503-992-3206

BLD-15-01055

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input checked="" 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 checked="" 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: <u>1816 22nd Ave</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>2nd house on the south side of 22nd Ave when heading East from the intersection of 22nd & B St.</u>	
Subdivision: <u>Walker</u>	Lot no.:
Tax map/parcel no.: <u>1N231CC12000</u>	
DESCRIPTION OF WORK	
<u>Construction of new 25'x25' garage. Removal of remaining shed & patio cover</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Kurt & H Christine Zimmerman</u>	
Address: <u>2130 A St</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Phone: (971) <u>344-1971</u>	Fax: ()
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: <u>Kurt Zimmerman</u>	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB lic.:	

Authorized signature:

Print name: Kurt Zimmerman

Date: 7/28/15

REQUIRED DATA: 1- AND 2-FAMILY DWELLING
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.
Valuation
Number. of bedrooms:
Number of bathrooms:
Total number of floors:
New dwelling area: square feet
Garage/carport area: <u>625</u> square feet
Covered porch area: square feet
Deck area: square feet
Other structure area: square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.
Valuation
Existing building area: square feet
New building area: square feet
Number of stories:
Type of construction:
Occupancy groups:
Existing:
New:
NOTICE
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:
BUILDING PERMIT FEES*
<i>Please refer to fee schedule</i>
Fees due upon application
Amount received
Date received:

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

* Fee Inc

#540.51

BUILDING

Building Permit Application

**city of
forest
grove**

City of Forest Grove

Phone: 503-992-3229 Fax: 503-992-3202

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

Inspection Request Line: 503-992-3206

Permit Number:

BLD-15-01055

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input checked="" 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 checked="" 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: <u>1816 22nd Ave</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>2nd house on the south side of 22nd Ave when heading East from the intersection of 22nd & B St.</u>	
Subdivision: <u>Walker</u>	Lot no.:
Tax map/parcel no.: <u>1N331CC12000</u>	
DESCRIPTION OF WORK	
<u>Construction of new 25'x25' garage, Removal of remaining shed & patio cover</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Kurt & H Christine Zimmerman</u>	
Address: <u>2130 A St</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Phone: (971) <u>344-1971</u>	Fax: ()
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: <u>Kurt Zimmerman</u>	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB lic.:	

Authorized signature:



Print name: Kurt Zimmerman

Date: 7/28/15

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation:	
Number of bedrooms:	<u>4</u> AUG 4 2015
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	<u>625</u> square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
BUILDING PERMIT FEES*	
<i>Please refer to fee schedule</i>	
Fees due upon application	
Amount received	
Date received:	

This permit application expires if a permit is not obtained within 180 days

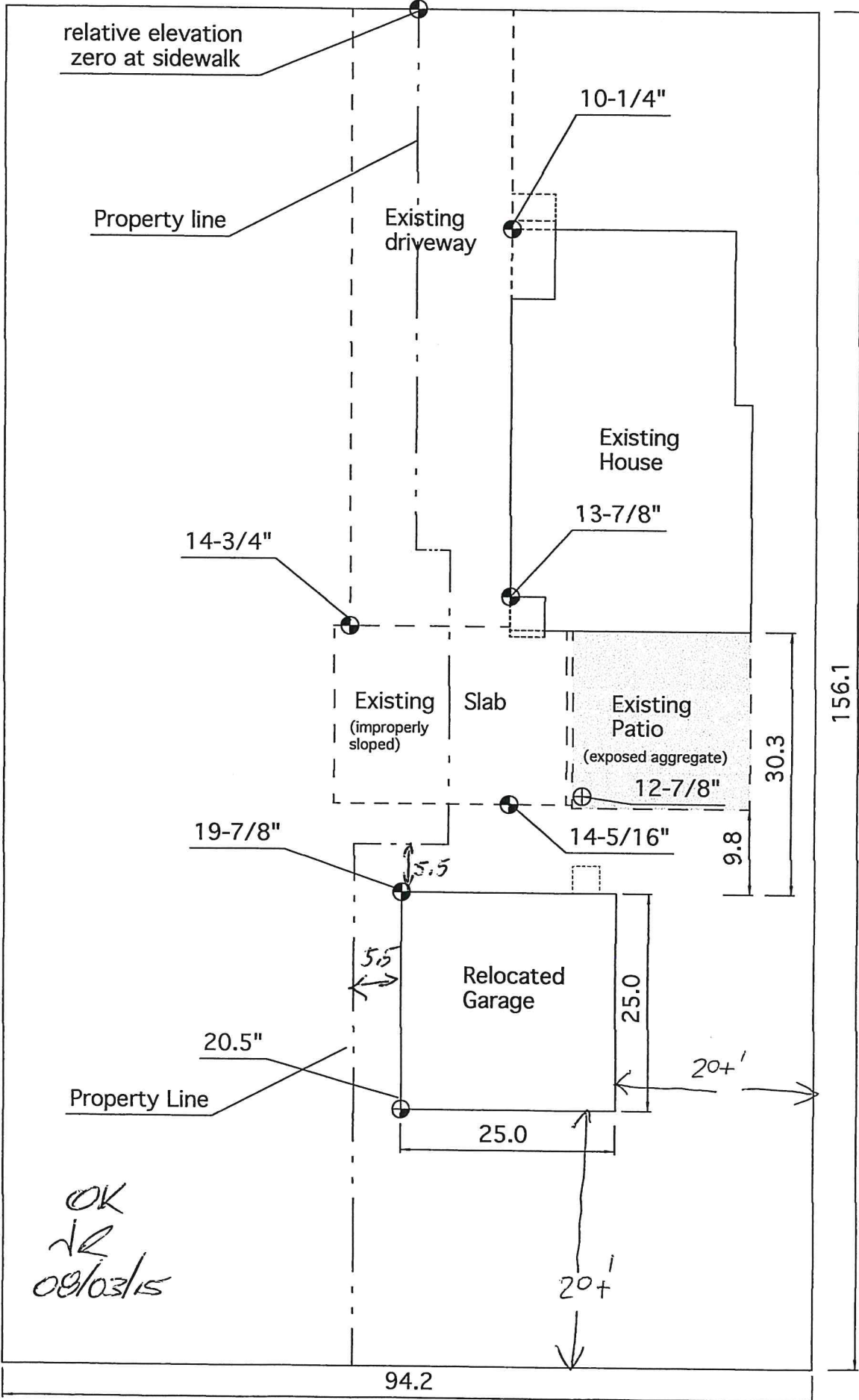
OK

Dgn 8-4-15

ENGINEERING

ERED
AD

Proposed, 1st Flr



OK
✓
09/03/15

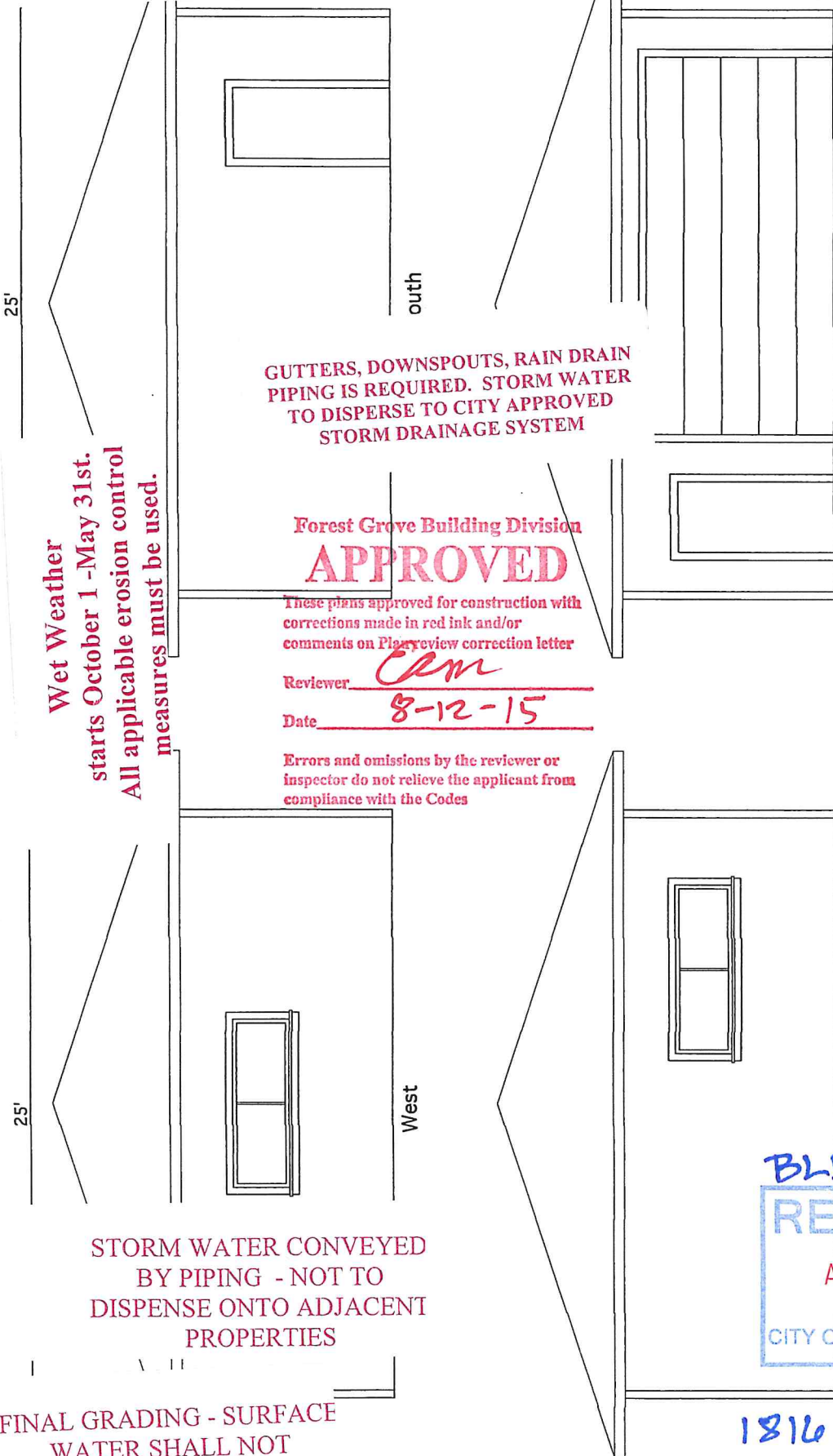
ALL WORK & MATERIALS PER
2014 ED.
OREGON RESIDENTAL
SPECIALTY CODE

ELECTRICAL PERMITS / INSPECTIONS
THROUGH WASHINGTON COUNTY
BUILDING DEPARTMENT 503-846-3470

**NOTE: MOISTURE CONTENT FORMS TO
BE COMPLETED & RETURNED
W/FRAMING INSPECTION BEFORE
INSULATION**

ALL WOOD WITH LESS THAN 6 INCHES
CLEARANCE FROM GROUND TO BE
RATED FOR GROUND CONTACT AS PER
R 319.1.1 THROUGH 7

**EROSION CONTROL IS REQUIRED
AT ALL TIMES;**
Please call 503-992-3206 to schedule
inspection prior to foundation
inspection.



For Sidewalk & approach
inspections contact City Engineer's
Office at 503-992-3228.

CITY COPY

BLD-15-01055
RECEIVED
AUG 03 2015
CITY OF FOREST GROVE

1816 22nd Ave

ALL WOOD WITH LESS THAN 6 INCHES
CLEARANCE FROM GROUND TO BE
RATED FOR GROUND CONTACT AS PER
R 319.1, 1 THROUGH 7

25'

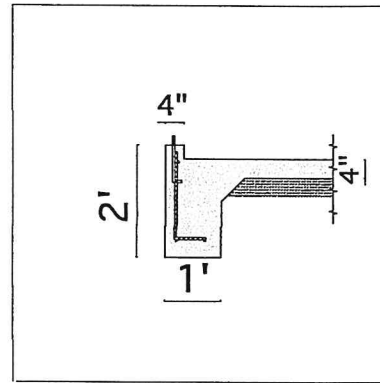
2'-10 1/2"

4'

Foundation & Floor Plan

32" door

**GARAGES
27-30**



84-3/4" x 28-1/4" window openings

**CONCRETE WORK
31-38**

36" door

Portal Framed
per R602.10.3.4

Portal Framed
per R602.10.3.4

3'-4 1/4"

2'

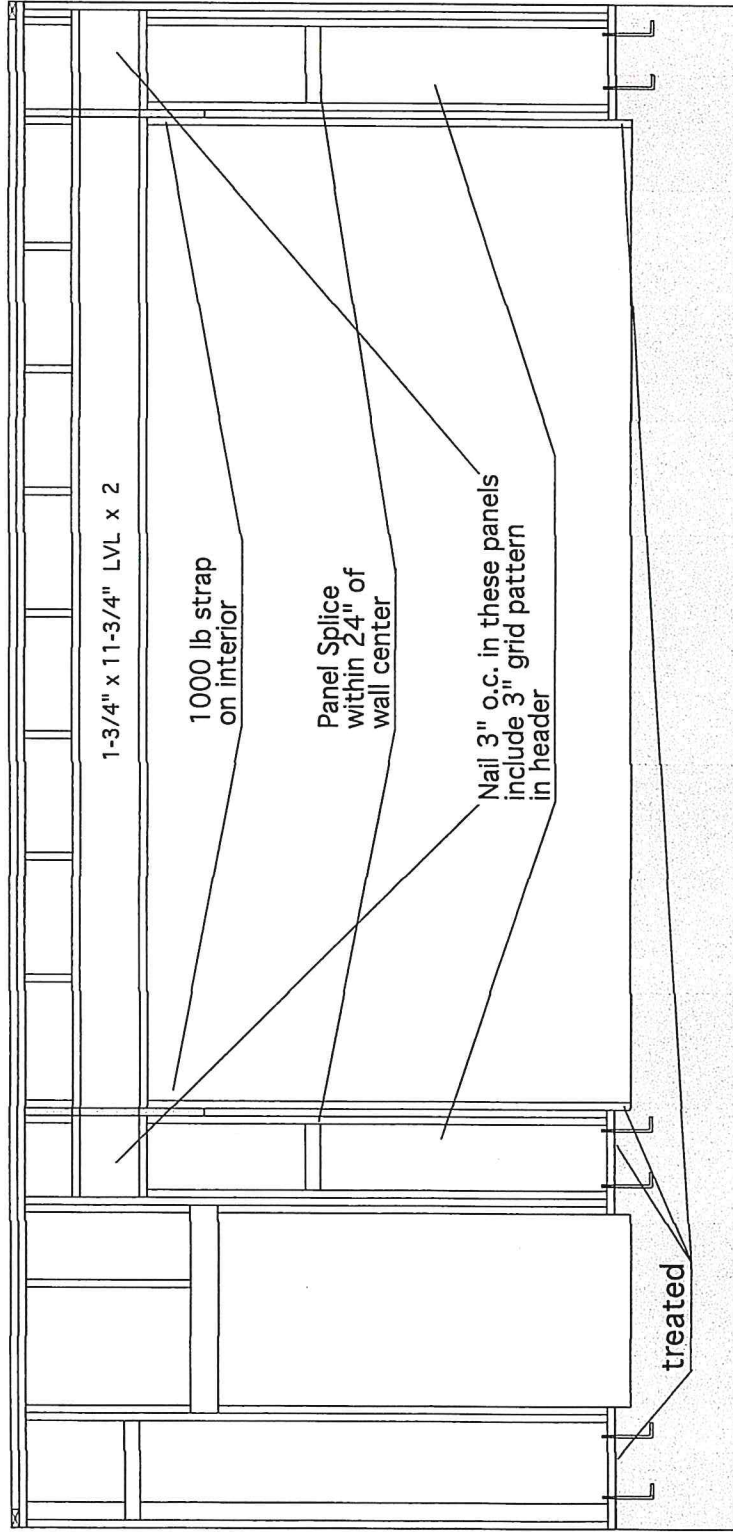
1'-8 1/2"

1'-10 1/2"

25'

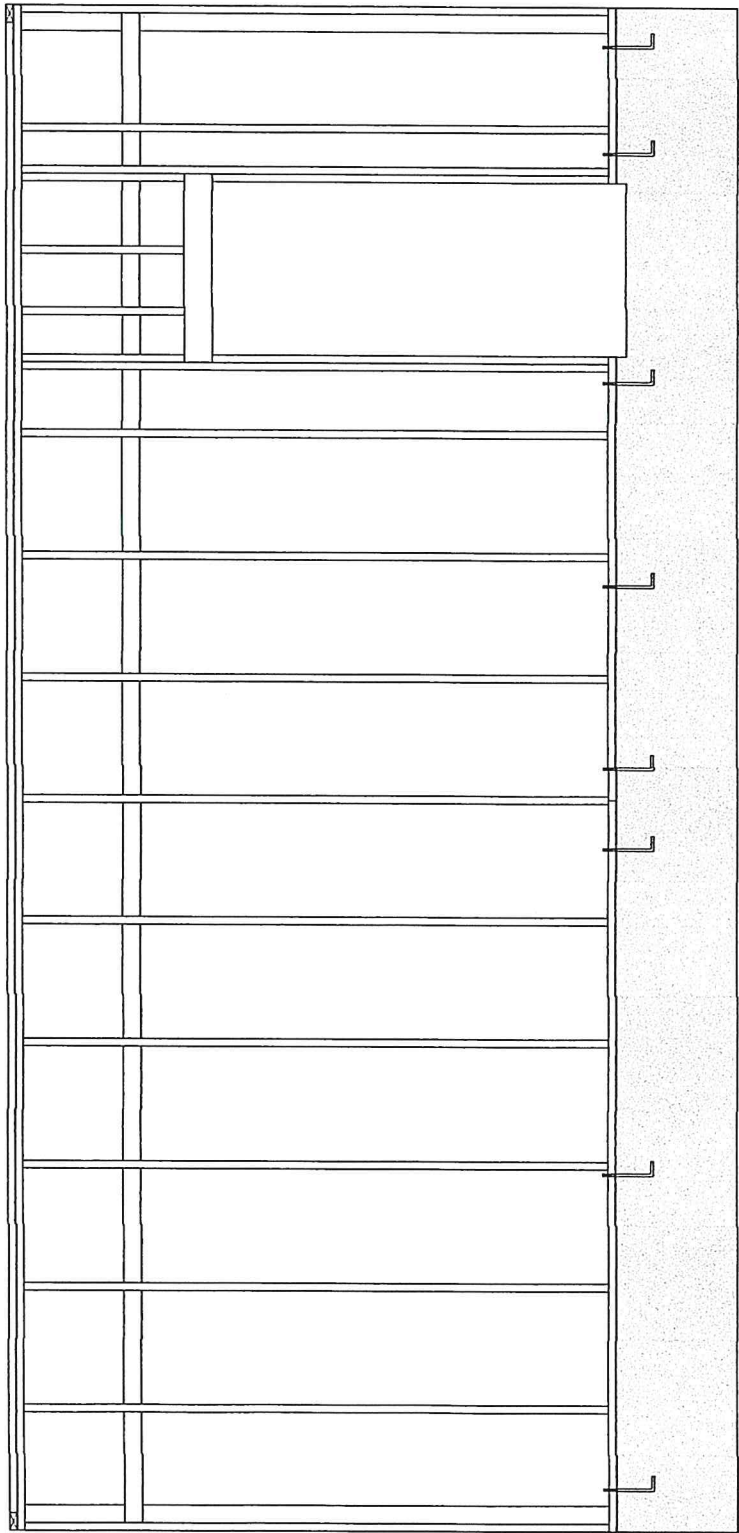
North/Front

North Wall



10'

South Wall

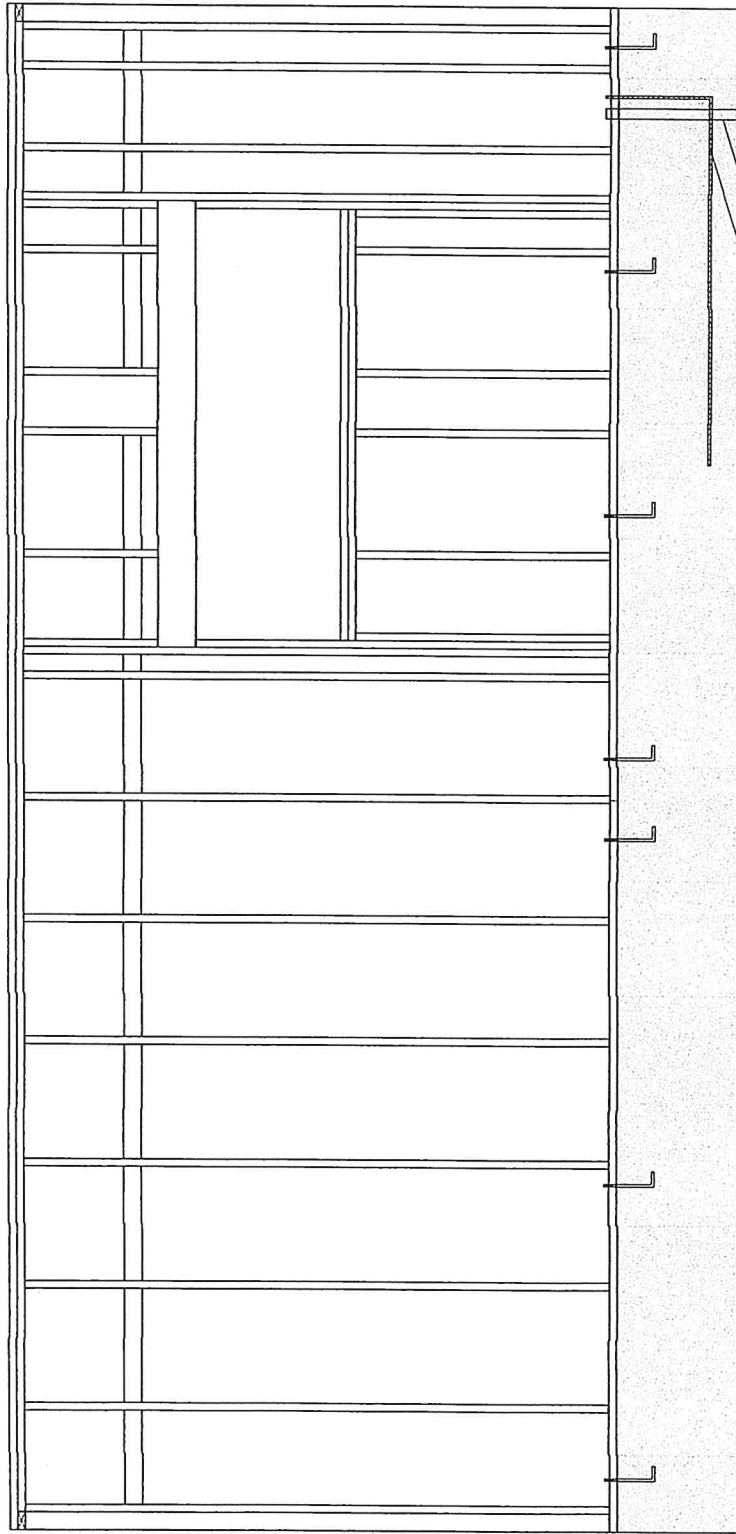


2'-10 1/2"

2'-10"

25'

East Wall



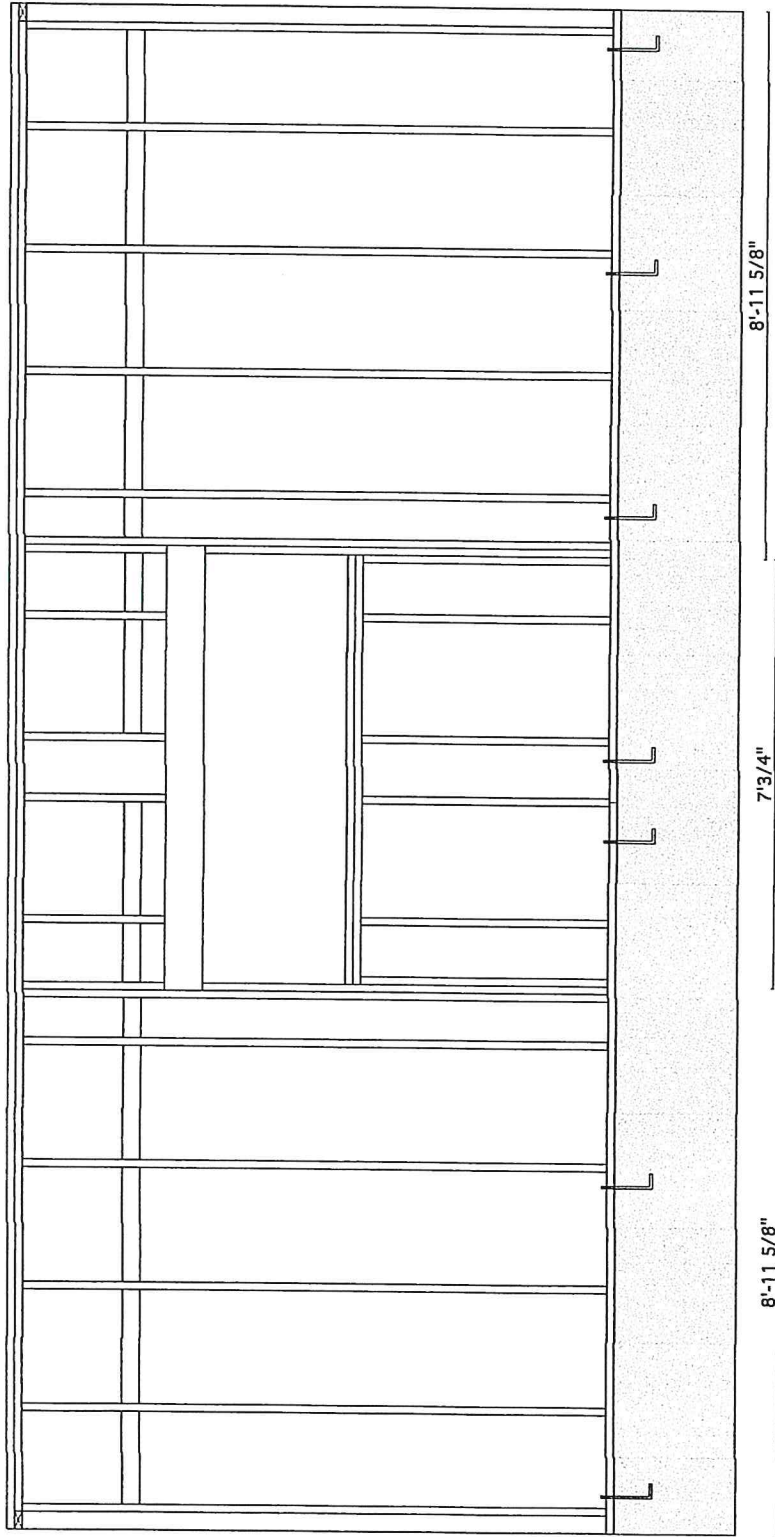
14'-7 3/8"

7'-3/4"

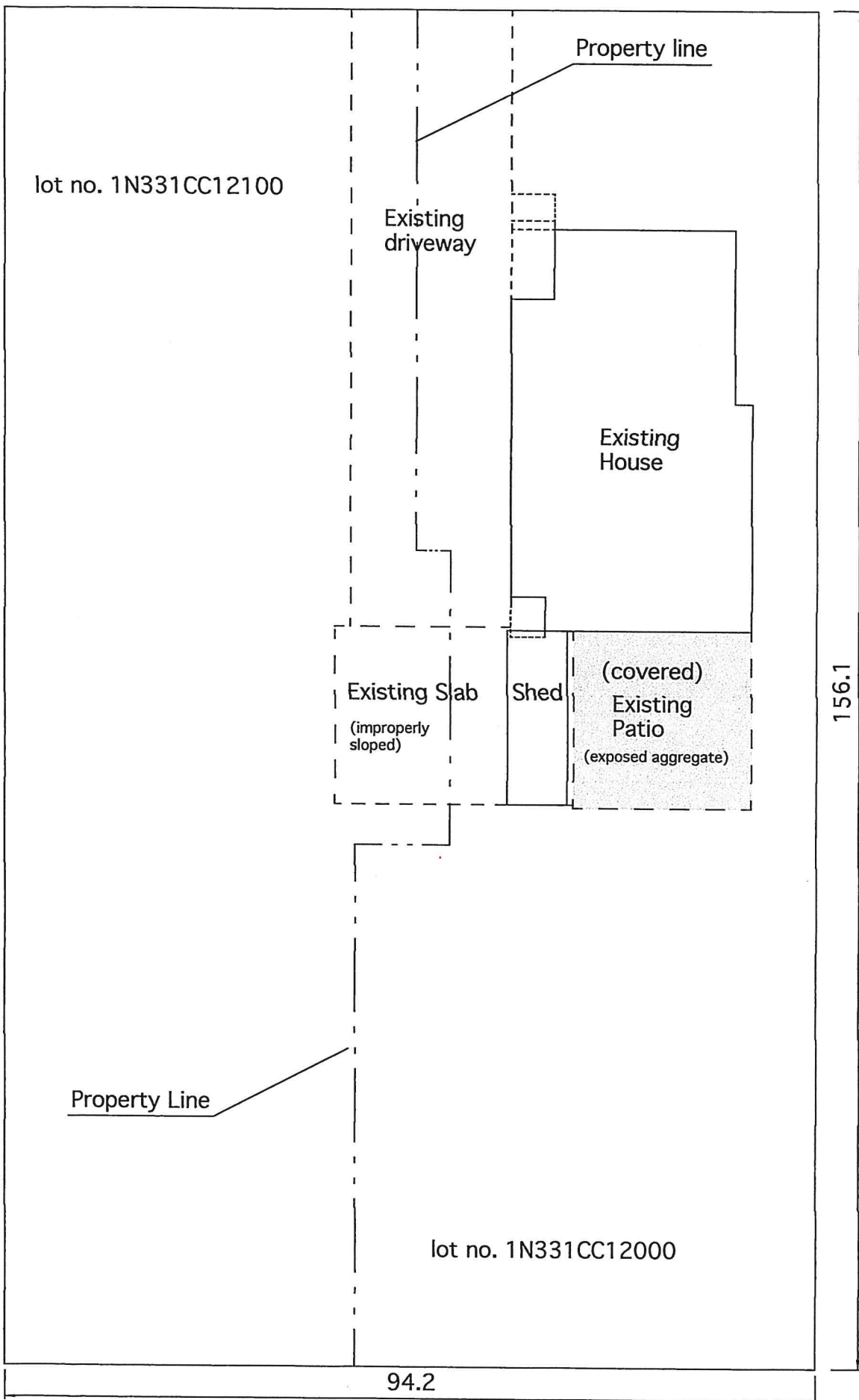
3'-3 7/8"

tied-in rebar for ground
1-1/2" conduit for subpanel

West Wall



Current Lot Plan



lot no. 1N331CC12100

Existing driveway

Property line

Existing House

Existing Slab
(improperly sloped)

Shed

(covered)
Existing
Patio
(exposed aggregate)

156.1

Property Line

lot no. 1N331CC12000

94.2

Alpine, an ITW Company

8351 Rovana Circle Sacramento, CA 95828 (916) 387-0116
Page 1 of 1 Document ID:1VIN7175Z1231105211

Truss Fabricator: **Truss Components of Oregon**
Job Identification: **0715252--PARR FOREST GROVE -Zimmerman 25 xx 25 -- VERIFY FOREST GROVE, OR**
Model Code: **IRC**
Truss Criteria: **IRC2012/TPI-2007(STD)**
Engineering Software: **Alpine proprietary truss analysis software. Version 15.01.**
Truss Design Loads: **Roof - 42 PSF @ 1.15 Duration**
Floor - N/A
Wind - 120 MPH (ASCE 7-10-Closed)



Renewal Date 6/30/2017
Garold W. Heal

Notes:

1. Determination as to the suitability of these truss components for the structure is the responsibility of the building designer/engineer of record, as defined in ANSI/TPI 1.
2. As shown on attached drawings; the drawing number is preceded by: CAUSR7175

Details: -

Submitted by GWH 10:38:31 07-31-2015 Reviewer: BFR

§ §

#	Ref	Description	Drawing#	Date
1	79566--SDG		15212052	07/31/15
2	79567--SD1		15212053	07/31/15
3	79568--SD2		15212054	07/31/15
4	79570--EJG		15212055	07/31/15
5	79571--EJ1		15212056	07/31/15
6	79572--EJ2		15212057	07/31/15
7	79573--A		15212058	07/31/15
8	79574--SJ1		15212059	07/31/15
9	79575--SJ2		15212060	07/31/15
10	79576--SJ3		15212061	07/31/15

(0715252--PARR FOREST GROVE -Zimmerman 25 xx 25 -- VERIFY FOREST GROVE, OR - SJ2)

Top chord 2x4 DF-L #2(g)
Bot chord 2x4 DF-L #2(g)

Connectors in green lumber (g) designed using NDS/TP1 reduction factors.

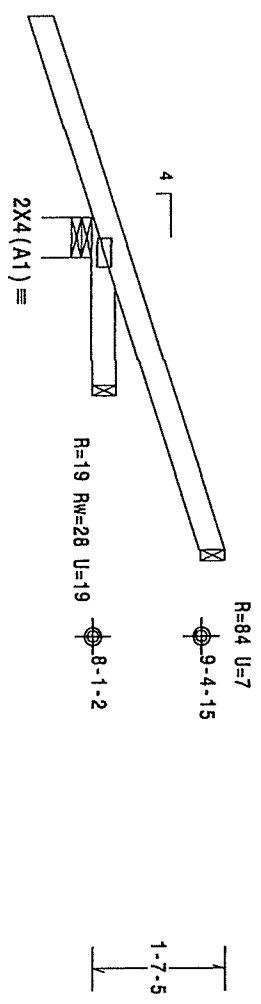
Bottom chord checked for 10.00 psf non-concurrent bottom chord live load applied per IRC-12 section 301.5.

THIS DRG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

120 mph wind, 15.00 ft mean hgt ASCE 7-10, CLOSED bldg, Located anywhere in roof, RISK CAT II, EXP B, wind TC DL=6.0 psf, wind BC DL=4.2 psf.

Wind loads and reactions based on MWFRS with additional G&C member design.

Deflection meets L/360 live and L/240 total load. Creep increase factor for dead load is 2.00.



2-4-0
1-11-4
2-0-7
3-10-3 Over 3 Supports
R=84 U=7
R=19 RW=28 U=19
R=34
1-7-5

PLT TYP. Wave

Design Crit: IRC2012/TP1-2007(STD)
FT/RT=2% (0%)/4(0)

15.01 REGISTERED PROFESSIONAL ENGINEER

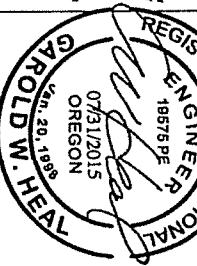
OR/-/1/-/-/R/-

Scale = .5"/Ft.

Truss Components of Oregon (503)357-4118
8225 N 4th Ave, Corvallis, OR 97331



****WARNING** READ AND FOLLOW ALL NOTES ON THIS DRAWING!**
****IMPORTANT** FURNISH TRUSS DRAWING TO ALL CONTRACTORS INCLUDING THE INSTALLERS.**
Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow the latest edition of BCSI (Building Components Institute) information. BCSI is the industry standard for truss design and construction. All trusses shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint of web shall have bracing installed per BCSI section 602.07 or 610.08 and otherwise per BCSI section 602.07 for standard plate positions and on all other trusses per BCSI section 602.07 for standard plate positions. All bracing shall be installed in accordance with ANSI/TP1, or for handling, shipping, installation & bracing of trusses.
As a part of this drawing or any other drawing, the professional engineer or architect is responsible for the design, fabrication, erection, and bracing of the truss. The professional engineer or architect is responsible for the design, fabrication, erection, and bracing of the truss. The professional engineer or architect is responsible for the design, fabrication, erection, and bracing of the truss.
Alpine, a division of Truss Components Group Inc. shall not be responsible for any deviation from this drawing, any failure to build the truss in accordance with ANSI/TP1, or for handling, shipping, installation & bracing of trusses.
A seal on this drawing or any other drawing, including the signature of the professional engineer or architect, is required for the design, fabrication, erection, and bracing of the truss. The professional engineer or architect is responsible for the design, fabrication, erection, and bracing of the truss.
For more information see this job's general notes page and those web sites:
ALPINE: www.alpine.com; TPI: www.truss.org; WFLA: www.enr.com; ICC: www.iccsafe.org



TC LL	25.0 PSF	REF	R7175-79575
TC DL	10.0 PSF	DATE	07/31/15
BC DL	7.0 PSF	DRW	CAUSR7175 15212060
BC LL	0.0 PSF	CA-ENG	BFR/GWH
TOT.LD.	42.0 PSF	SECN-	332471
DUR.FAC.	1.15	FROM	BB
SPACING	24.0"	JREF-	1VIN7175212

8351 Romina Circle
Sacramento, CA 95828

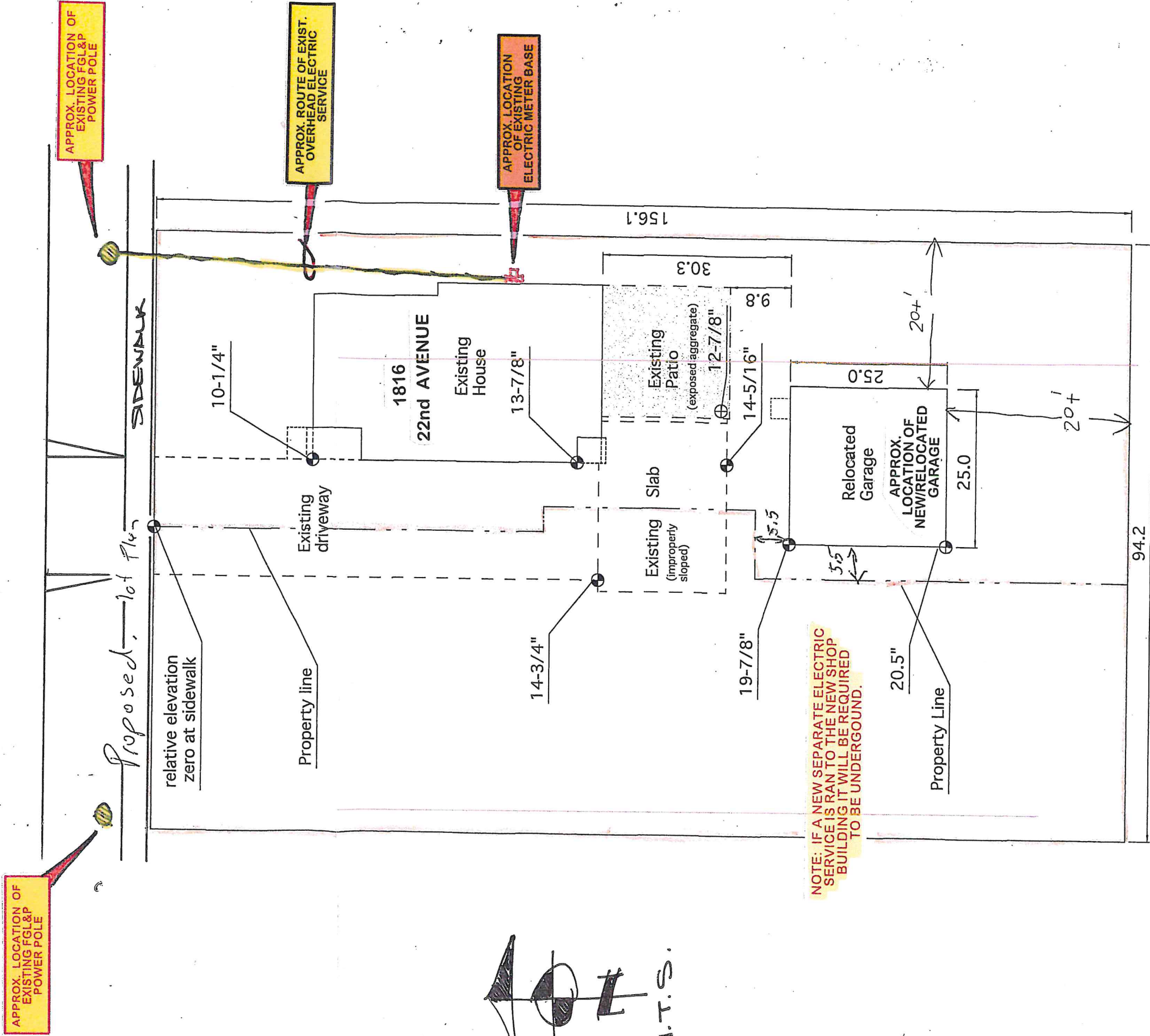
1816 22nd AVENUE

- ELECTRICAL SITE PLAN -

CITY OF FOREST GROVE
LIGHT & POWER DEPT.
1818 "B" STREET
P.O. BOX 326
FOREST GROVE, OR 97116
- REVIEW -
NL - 8/07/15

NOTE: CONTACT THE CITY OF FOREST GROVE LIGHT & POWER DEPARTMENT FOR COSTS AND REQUIREMENTS. IF THE EXISTING ELECTRIC SERVICE/METER BASE FOR THE EXISTING HOUSE IS TO BE UPGRADED/REPLACED, OR IF A NEW SEPARATE ELECTRIC SERVICE/METER BASE IS REQUIRED/DESIRED FOR THE NEW STRUCTURE. CALL (503) 992-3250...

22nd AVENUE



APPROX. LOCATION OF EXISTING FGL&P POWER POLE

APPROX. LOCATION OF EXISTING FGL&P POWER POLE

APPROX. ROUTE OF EXIST. OVERHEAD ELECTRIC SERVICE

APPROX. LOCATION OF EXISTING ELECTRIC METER BASE

NOTE: IF A NEW SEPARATE ELECTRIC SERVICE IS RAN TO THE NEW SHOP BUILDING IT WILL BE REQUIRED TO BE UNDERGROUND.

