

BUILDING DEPT.

1721 22ND AVE.

1 OF 1

OREGON MICRO-IMAGING, INC

CITY OF FOREST GROVE
 BUILDING DEPARTMENT
Microfilm Record

Address/Location: 1721 22nd Avenue	
Map/Tax Lot:	
Subdivision:	
Bldg. Permit No(s): 409 1321 864 807	
Dates From: 6/29/70	To: 12/31/84
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 type="checkbox"/> Inspection Request card/sheet
	<input checked="" type="checkbox"/> Building Permit 4 How many? <u>4</u>
	<input type="checkbox"/> <i>Other Permits</i> Plumbing Mechanical Sewer
	<input type="checkbox"/> Security Agreements
	<input checked="" type="checkbox"/> Site plan drawings Blueprint drawings
	<input type="checkbox"/> Correspondence/Memos
	<input type="checkbox"/> Other
Notes:	
Date Microfilmed: 9/73	

CITY OF FOREST GROVE

COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING & CODE ENFORCEMENT DIVISION

PERMIT - APPLICATION BUILDING

VALIDATION

Date 6-29-76 6418 By Highway 3
This is a Building Permit When Properly Filled Out,
Signed and Validated.

Map Book _____ Page _____ Parcel _____

OWNER <u>WERNER QUIES</u>		BUILDING ADDRESS <u>1721 22ND AVE</u>	
MAIL ADDRESS <u>1721 22ND AVE</u>		NEAREST CROSS ST _____	
CITY <u>F.G.</u>	TEL NO _____	LOT _____	TRACT _____
CONTRACTOR <u>PRACTICAL BLDGS</u>		LOT SIZE _____	BLDG. AREA _____
ADDRESS _____		NO. BLDG. NOW ON LOT _____	
CITY _____	TEL NO _____	GROUP <u>I</u>	TYPE <u>IV</u>
STATE LICENSE NO <u>000013457</u>	BUSINESS LICENSE NO _____	FIRE ZONE _____	
ARCHITECT OR ENGINEER _____		SPECIAL CONDITIONS _____	
REG NO _____		PLANNING DIV APPR. _____	
ADDRESS _____		DATE _____	
CITY _____	TEL NO _____	APPROVALS _____	
DESCRIPTION OF WORK			
NEW	ADD	ALTER	REPAIR
DEMOLISH	MOVE		
SIZE	SQ FT	NO OF ROOMS	NO OF STORIES
WALL COVERING		EXTERIOR	INTERIOR
ROOF COVERING			
USE OF STRUCTURE			
ESTIMATED COST <u>650⁰⁰</u>			
WORKMEN'S COMP INS 110		EXP DATE _____	
I ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT 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, STATE OF OREGON, OR THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY.			
LENDER _____			
BRANCH DESIGNATION _____			
ADDRESS _____			
SIGNATURE OF PERMITTEE <u>Werner Quies</u>			
PLAN CHECK RECEIPT NO _____	PLAN CHECK FEE _____	ADDITIONAL FEE _____	HOUSE NUMBER CORRECT & POSTED <u>6-30-76 RHT</u>
DATE PAID _____	PERMIT FEE <u>6.00</u>	STATE SUR CHARGE <u>1.18</u>	FINAL APPROVAL _____
VALUATION _____	TOTAL FEE <u>6.18</u>	ISSUING OFFICER <u>Tom Woodcock</u>	PERMIT NO <u>409</u>

CITY OF FOREST GROVE

COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING & CODE ENFORCEMENT DIVISION

**PERMIT - APPLICATION
BUILDING**

NOTICE - VALIDATION

Date July 29, 77 by BP

This is a Building Permit When Properly Filled Out,
Signed and Validated.

Map Book _____ Page _____ Parcel _____

OWNER <u>Werner Quies</u>		BUILDING ADDRESS <u>1721 22nd Ave</u>	
MAIL ADDRESS <u>1721 22nd Ave</u>		NEAREST CROSS ST _____	
CITY <u>Forest Grove</u> TEL NO <u>357-5902</u>		LOT _____ TRACT _____	
CONTRACTOR <u>himself</u>		LOT SIZE _____ BLDG. AREA _____ NO BLDG. NOW ON LOT _____	
ADDRESS _____		GROUP _____ TYPE _____ FIRE ZONE _____	
CITY _____ TEL NO _____		SPECIAL CONDITIONS <u>CAR PORT</u>	
STATE LICENSE NO _____ BUSINESS LICENSE NO _____		PLANNING DIV APPR. _____ DATE _____	
ARCHITECT OR ENGINEER _____ REG NO _____		APPROVALS	
ADDRESS _____		FOUNDATION, LOCATION FORMS, MATERIALS <u>8-9-77</u> <u>BP</u>	
CITY _____ TEL NO _____		JOIST & GIRDERS _____	
DESCRIPTION OF WORK			
NEW	ADD.	ALTER	REPAIR
SIZE	SQ FT.	NO OF ROOMS	NO OF STORIES
WALL COVERING		INTERIOR	
ROOF COVERING		LATH EXTERIOR	
USE OF STRUCTURE <u>CAR PORT</u>		ENCLOSURE _____	
ESTIMATED COST _____		DRIVEWAY _____	
WORKMEN'S COMP INS NO _____ EXP DATE _____		GRADING & DRAINAGE _____	
I ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT 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, STATE OF OREGON, OR THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY.			
LENDER _____			
BRANCH DESIGNATION _____			
ADDRESS _____			
SIGNATURE OF PERMITTEE _____			
PLAN CHECK RECEIPT NO. _____	PLAN CHECK FEE _____	ADDITIONAL FEE _____	PERMIT FEE <u>20.00</u>
DATE PAID _____	STATE SUR CHARGE <u>.80</u>	TOTAL FEE <u>20.80</u>	FINAL APPROVAL <u>9-6-77</u> <u>BP</u>
VALUATION <u>2,000.00</u>	ISSUING OFFICER <u>Barbara Lines</u>		DATE <u>7/29/77</u> PERMIT NO <u>807</u>

CITY OF FOREST GROVE

COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING & CODE ENFORCEMENT DIVISION

**PERMIT - APPLICATION
BUILDING**

VALIDATION

10139

Date *Sept 27, 77* By *BP*

This is a Building Permit When Properly Filled Out,
Signed and Validated.

Map Book _____ Page _____ Parcel _____

OWNER <i>WERNER QUICS</i>		BUILDING ADDRESS <i>1721 22ND ST.</i>	
MAIL ADDRESS <i>1721 22ND</i>		NEAREST CROSS ST	
CITY <i>F.G.</i>	TEL. NO	LOT	TRACT
CONTRACTOR <i>SUNRISE CONCO.</i>		LOT SIZE	BLDG. AREA
ADDRESS		NO. BLDG. NOW ON LOT	
CITY	TEL. NO.	GROUP	TYPE
STATE LICENSE NO	BUSINESS LICENSE NO	FIRE ZONE	
ARCHITECT OR ENGINEER	REG NO	SPECIAL CONDITIONS	
ADDRESS		PLANNING DIV APPR.	
CITY	TEL NO	DATE	
DESCRIPTION OF WORK			
NEW	ADD.	ALTER	REPAIR
DEMOLISH	MOVE		
SIZE	SQ. FT.	NO. OF ROOMS	NO. OF STORIES
WALL COVERING		EXTERIOR	INTERIOR
ROOF COVERING <i>NEW DRIVE</i>			
USE OF STRUCTURE <i>APPROACH</i>			
ESTIMATED COST <i>(CONC)</i>			
WORKMEN'S COMP INS NO	EXP DATE		
I ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT 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, STATE OF OREGON, OR THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY.			
LENDER _____			
BRANCH DESIGNATION _____			
ADDRESS _____			
SIGNATURE OF PERMITTEE <i>David J. Vogt</i>			
PLAN CHECK RECEIPT NO.	PLAN CHECK PRE ADDITIONAL FEE \$	FINAL APPROVAL	
DATE PAID	PERMIT FEE \$ <i>500</i>	DATE <i>9-27-77</i>	PERMIT NO <i>864</i>
VALUATION <i>300⁰⁰</i>	STATE SUR CHARGE \$ <i>20</i>	ISSUING OFFICER <i>[Signature]</i>	
	TOTAL FEE \$ <i>5.20</i>		

CITY OF FOREST GROVE

COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING & CODE ENFORCEMENT DIVISION

**PERMIT -- APPLICATION
BUILDING**

VALIDATION

50247 Date *4/30/79* By *Bj Huis*

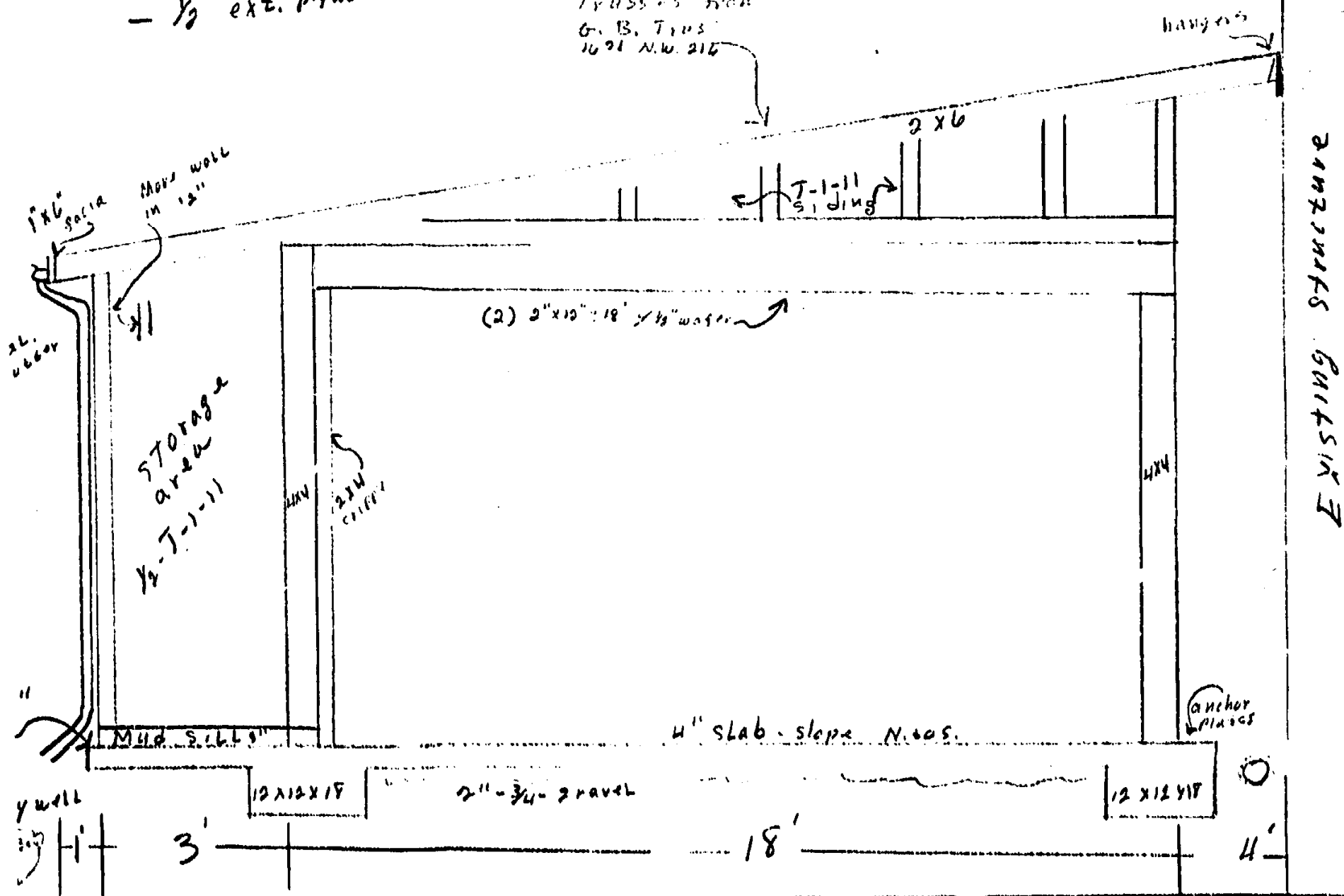
This is a Building Permit When Properly Filled Out,
Signed and Validated.

Map Book _____ Page _____ Parcel _____

OWNER <i>Werner Quisen</i>		BUILDING ADDRESS <i>1721 - 22nd Ave</i>	
MAIL ADDRESS <i>1721 22nd Ave</i>		NEAREST CROSS ST	
CITY <i>F.G.</i>	TEL. NO.	LOT <i>1N436DD</i>	TRACT
CONTRACTOR <i>Green Gables</i>		LOT SIZE	BLDG. AREA NO. BLDG. NOW ON LOT
ADDRESS <i>2227 Cedar St</i>		GROUP	TYPE F. RE ZONE
CITY <i>F.G.</i>	TEL. NO. <i>357-0518</i>	SPECIAL CONDITIONS <i>remodel</i>	
STATE LICENSE NO.	BUSINESS LICENSE NO.	PLANNING DIV APPR.	
ARCHITECT OR ENGINEER	REG. NO.	DATE	
ADDRESS		APPROVALS	
CITY	TEL. NO.	DATE	INSPECTOR'S SIGNATURE
DESCRIPTION OF WORK			
NEW	ADD.	ALTER <input checked="" type="checkbox"/>	REPAIR
DEMOLISH	MOVE		
SIZE	SQ. FT.	NO. OF ROOMS	NO. OF STORIES
WALL COVERING		EXTERIOR	INTERIOR
ROOF COVERING			
USE OF STRUCTURE <i>single family Remodel</i>			
ESTIMATED COST <i>\$7500</i>			
WORKMEN'S COMP. INS. NO.		EXP. DATE	
I ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT 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, STATE OF OREGON, OR THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY.			
LENDER			
BRANCH DESIGNATION			
ADDRESS			
SIGNATURE OF PERMITTEE <i>K. Schwagedal</i>			
PLAN CHECK RECEIPT NO.	PLAN CHECK FEE	ADDITIONAL FEE	\$ <i>22.00</i>
DATE PAID <i>4-6-79</i>	PERMIT FEE	STATE SUR CHARGE	\$ <i>44.00</i>
VALUATION <i>\$7,500</i>	TOTAL FEE		\$ <i>45.76</i>
HOUSE NUMBER CORRECT & POSTED		FINAL APPROVAL	
		DATE <i>4/30/79</i>	PERMIT NO. <i>1321</i>
		ISSUING OFFICER <i>Barbara Huis</i>	

- Rolled roofing
- 2/12 pitch
- 1/2" ext. plywood

Trusses from
G. B. Truss
1691 N.W. 215



EXISTING STRUCTURE

hangars

2x6

T-1-11 siding

(2) 2"x10"x18' 1/2" w/ 1/2" sheath

4x4

4" slab - slope N. & S.

Anchor plates

Mud Sills

12x12x18

2" - 3/4" gravel

12x12x18

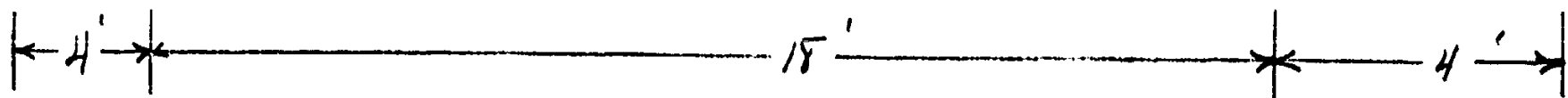
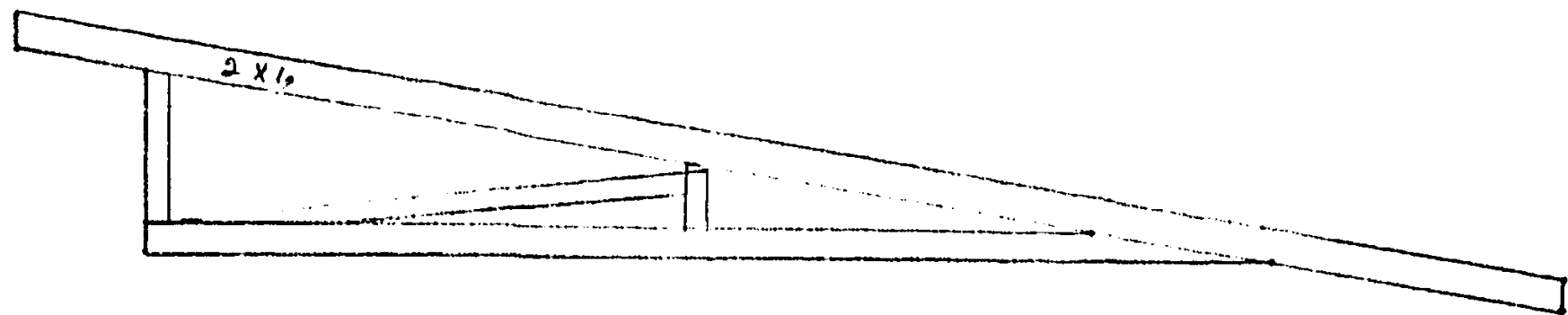
3'

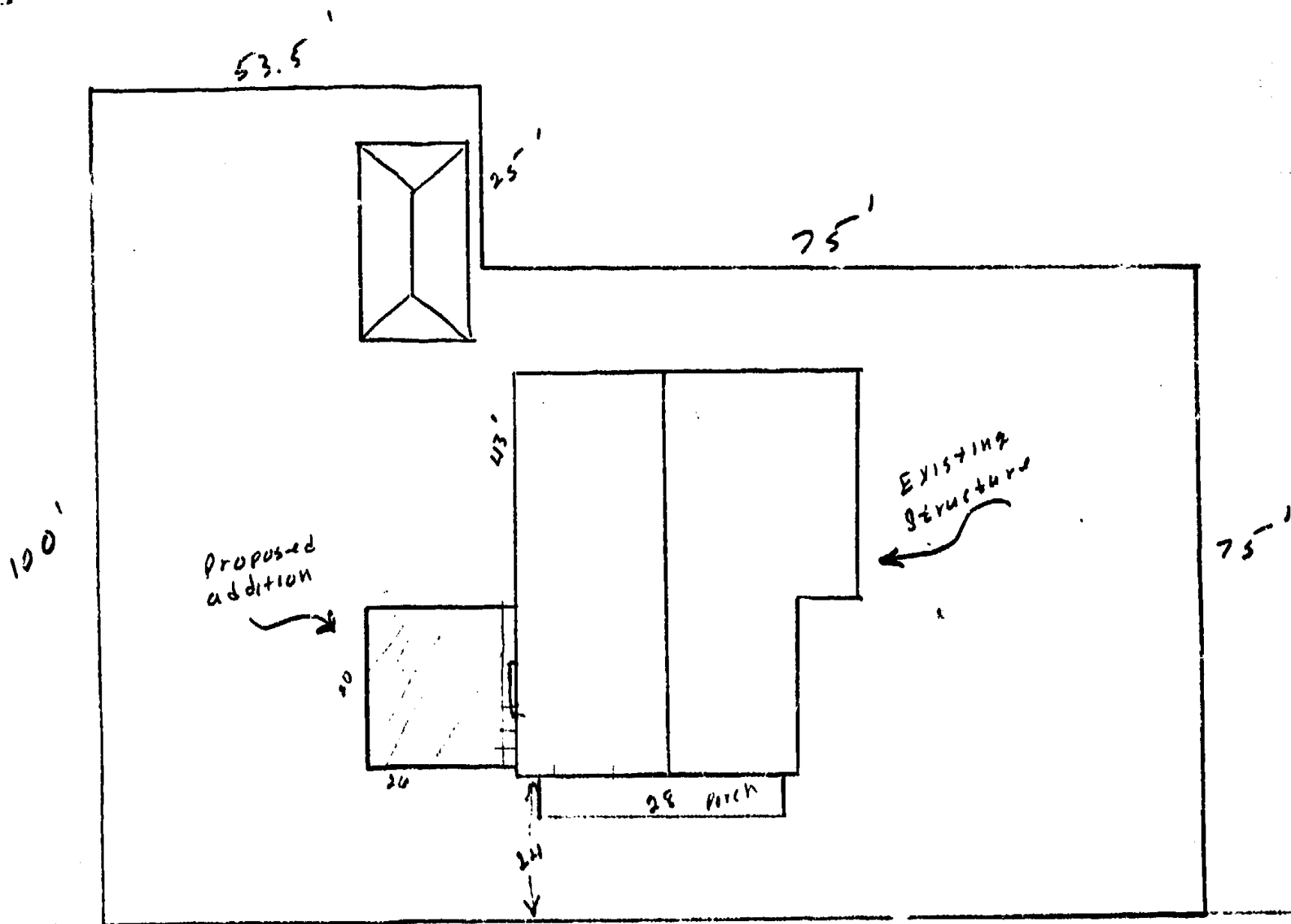
18'

4'

well

1'





100'

53.5'

25'

75'

Proposed addition

20

43'

EXISTING STRUCTURE

75'

20

28' porch

24

53.5'

1791

75'

22ND AVE

47116

City of Forest Grove

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

MECHANICAL PERMIT

PERMIT NO.: MEC08-00012
ISSUED: 2/29/2008
APPLIED: 2/4/2008
EXPIRES: 8/29/2008

SITE ADDRESS: 1721 22ND AVE
ASSESSOR'S PARCEL NO.: 1N436DD-01500
TYPE OF WORK: ALT
TYPE OF USE: SFD
PROJECT DESCRIPTION: GARAGE ADDITION

<p><u>OWNER/APPLICANT</u></p> <p>FOX, KIM 1718 23RD AVE FOREST GROVE OR 97116</p>	<p><u>CONTRACTOR</u></p>
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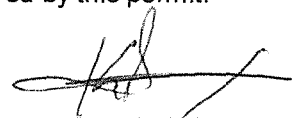
Equipment	
Type of Equipment	Quantity
Air Conditioner	1.00
Clothes Dryers	1.00
Exhaust Hoods	1.00
Fireplace	1.00
Gas Outlets	4.00
Furnaces Under 100,000	1.00
Ventilation Fans	2.00
Water Heater Vent	1.00

Fees			
Type	By	Date	Amount
PRMT	ASW	2/29/2008	\$87.60
SUCH	ASW	2/29/2008	\$10.51
Total:			\$98.11

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

24 Hour Notice Required For All Inspections

CONDITIONS OF APPROVAL:



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22ND AVENUE
Contractor HEM
Phone Number 971/242/9904

Scheduled Inspection Date 10/15/10
Mon [] Tues [] Wed [] Thurs [] Fri [x]
AM [] PM [] other []
Permit Number R1105-00013

BUILDING

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

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: will add mech sheet

Date: 10-15-10

Inspector: [Signature]

City of Forest Grove

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

BUILDING PERMIT

PERMIT NO.: BLD08-00013
APPLIED: 2/4/2008
ISSUED: 3/25/2008
EXPIRES: 9/25/2008

SITE ADDRESS: 1721 22ND AVE
ASSESSOR'S PARCEL NO.: 1N436DD-01500
PROJECT DESCRIPTION: REMODEL SFR

OWNER/APPLICANT	CONTRACTOR
FOX, KIM 1721 22ND AVE FOREST GROVE OR 97116	OLD RECREATION LLC 1718 23RD AVE FOREST GROVE OR 97116 178318

TYPE OF WORK: REM	AREA	VALUE: \$19,947.00
TYPE OF USE: SF		REQUIRED SETBACKS:
CENSUS CATEGORY:	LOT: 0 sf	FRONT: 0.00 ft
ZONING:	1ST FLR: 0 sf	SIDE 1: 0 ft
Occupancy Groups	2ND FLR: 0 sf	SIDE 2: 0 ft
1: R3 2:	BASEMENT: 0 sf	REAR: 0 ft
3: 4:	GAR/CARPORT: 0 sf	REQUIRED PARKING
Construction Types	OTHER: 0 sf	TOTAL: 0
1: VB 2:	NUMBER OF UNITS: 0	HANDICAPPED: 0
3: 4:	STORIES: 2	COMPACT: 0
	BUILDING HEIGHT: 0 ft	IMPRV SURF: 0 sf

FEES			
Type	By	Date	Amount
PRMT	LVW	3/25/2008	\$296.60
SUCH	LVW	3/25/2008	\$35.59
PLAN	LVW	2/4/2008	\$192.79
SITE	MLP	2/29/2008	\$37.21
SITE	MLP	3/25/2008	\$19.29
Total:			\$581.48

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:

- PIPE ALL ROOF WATER THROUGH 3" MINIMUM DIAMETER PIPE PER UNIFORM PLUMBING CODE AND THROUGH CURB WEEP HOLES TO STREET PER CITY STANDARD SPECIFICATIONS.

City of Forest Grove

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

BUILDING PERMIT

PERMIT NO.: BLD08-00013
APPLIED: 2/4/2008
ISSUED: 3/25/2008
EXPIRES: 9/25/2008

- 2 THE STREET ADDRESS SHALL BE DISPLAYED IN A PROMINENT POSITION NEAR THE ENTRANCE TO THE BUILDING. NUMBERS SHALL BE AT LEAST 4 INCHES HIGH, OF A CONTRASTING COLOR AND VISIBLE FROM THE STREET. MUNICIPAL CODE SECTION 9.215
- 3 Signed Special Inspection agreement required upon permit issuance.

24 Hour Notice Required For All Inspections



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22nd AVENUE
Contractor SAMUEL
Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [X] PM [] other []
Permit Number BLO08-00014

BUILDING

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

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:

[] APPROVED

[X] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

Not Ready for Final
Framing prior to Final
Elect prior to Framing

Date: 8-30-10

Inspector:

[Signature]

City of Forest Grove

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

BUILDING PERMIT

PERMIT NO.: BLD08-00014
APPLIED: 2/4/2008
ISSUED: 2/29/2008
EXPIRES: 8/29/2008

SITE ADDRESS: 1721 22ND AVE

ASSESSOR'S PARCEL NO.: 1N436DD-01500

PROJECT DESCRIPTION: GARAGE ADDITION

OWNER/APPLICANT	CONTRACTOR
FOX, KIM 1718 23RD AVE FOREST GROVE OR 97116	OLD RECREATION LLC 1718 23RD AVE FOREST GROVE OR 97116 178318

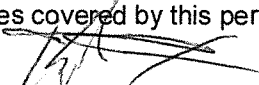
TYPE OF WORK: ADD TYPE OF USE: OTH CENSUS CATEGORY: ZONING: Occupancy Groups <hr/> 1: R3 2: 3: 4: Construction Types <hr/> 1: VB 2: 3: 4:	AREA <hr/> LOT: 0sf 1ST FLR: 322sf 2ND FLR: 936sf BASEMENT: 0sf GAR/CARPORT: 676sf OTHER: 0sf NUMBER OF UNITS: 0 STORIES: 2 BUILDING HEIGHT: 0 ft	VALUE: \$88,340.70 REQUIRED SETBACKS: <hr/> FRONT: 24.00 ft SIDE 1: 0 ft SIDE 2: 6 ft REAR: 15 ft REQUIRED PARKING <hr/> TOTAL: 4 HANDICAPPED: 0 COMPACT: 0 IMPRV SURF: 0 sf
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FEES			
Type	By	Date	Amount
SITE	LVW	2/29/2008	\$56.50
EXCA	LVW	2/29/2008	\$25.00
PRMT	LVW	2/29/2008	\$843.90
SUCH	LVW	2/29/2008	\$101.27
MISC	LVW	2/29/2008	\$930.00
(additional fees not shown here)			Total: \$11,891.41

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 **INSTALL CONSTRUCTION ACCESS - 8" MINIMUM DEPTH BASE ROCK PAD, 20' MINIMUM LENGTH AND W DO NOT TRACK MUD ONTO STREETS**

City of Forest Grove

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

BUILDING PERMIT

PERMIT NO.: BLD08-00014
APPLIED: 2/4/2008
ISSUED: 2/29/2008
EXPIRES: 8/29/2008

- 2 **INSTALL EROSION CONTROL FENCING AS REQUIRED PER CLEAN WATER SERVICES STANDARD SPECIFICATIONS.
PLEASE CALL 503-992-3228 WHEN THE EROSION CONTROL MEASURES ARE IN PLACE FOR AN INSPEC**
- 3 **PIPE ALL ROOF WATER THROUGH 3" MINIMUM DIAMETER PIPE PER UNIFORM PLUMBING CODE AND THROUGH CURB WEEP HOLES TO STREET PER CITY STANDARD SPECIFICATIONS.**
- 4 **INSTALL CONCRETE SIDEWALK AND DRIVE APPROACH PER CITY STANDARD SPECIFICATIONS.**
- 5 **Sidewalk adjacent to entire site shall be repaired or replaced to City standards and specifications.**
- 6 **ONE STREET TREE TO BE PLANTED IN PARKWAY. INSTALLATION TO BE COMPLETED BY THE CITY.**
- 7 **-FOR BOTH PROJECTS MIN METER SIZE 1" METER & 1 1/4" SUPPLY
-MIN SEWER CONNECTION 4"**
- 8 **New garage to be fed from existing electric meter**

24 Hour Notice Required For All Inspections



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED stamp

Site Address 1721 22ND AVENUE
Contractor SAMUEL
Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [X] PM [] other []
Permit Number PLM08-00014

BUILDING

- Erosion Control
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 S.F.O. REINSTATE

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:



APPROVED



NOT APPROVED

(REINSPECTION REQUIRED)



APPROVED AFTER CORRECTIONS



REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$

CORRECTIONS:

Date:

8-30-10

Inspector:

Handwritten signature

City of Forest Grove

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

PLUMBING PERMIT

PERMIT NO.: **PLM08-00014**
APPLIED: **2/4/2008**
ISSUED: **3/25/2008**
EXPIRES: **9/25/2008**

SITE ADDRESS: **1721 22ND AVE**
ASSESSOR'S PARCEL NO.: **1N436DD-01500**
TYPE OF WORK: **Alteration**
TYPE OF USE: **Single Family Residential**
PROJECT DESCRIPTION: **REMODEL SFR**


<u>OWNER/APPLICANT</u>	<u>CONTRACTOR</u>
FOX, KIM 1721 22ND AVE FOREST GROVE OR 97116	

Plumbing Fixtures		Fees			
Fixture Type	Quantity	Type	By	Date	Amount
Tubs/shower/shower pan	4	PRMT	ASW	3/25/2008	\$305.80
Clothes washers	2	SUCH	ASW	3/25/2008	\$36.70
Dishwashers	2				
Hose bibb	2				
Basins/lavatory	7				
Water closet (toilet)	4				
(additional fixtures not shown here)					
Total:					\$342.50

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 :

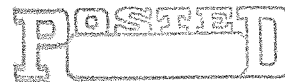
1)



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206



Site Address 1721 ave
Contractor Samuel
Phone Number 971-242-9904

Scheduled Inspection Date 10-18-10
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number MEC 08-00013

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:

[x] APPROVED

[] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

Date: 10-18-10

Inspector:

[Handwritten signature]

City of Forest Grove

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

MECHANICAL PERMIT

PERMIT NO.: MEC08-00013
ISSUED: 3/25/2008
APPLIED: 2/4/2008
EXPIRES: 9/25/2008

SITE ADDRESS: 1721 22ND AVE
ASSESSOR'S PARCEL NO.: 1N436DD-01500
TYPE OF WORK: ALT
TYPE OF USE: SFD
PROJECT DESCRIPTION: REMODEL SFR

<p><u>OWNER/APPLICANT</u></p> <p>FOX, KIM 1721 22ND AVE FOREST GROVE OR 97116</p>	<p><u>CONTRACTOR</u></p>
---	--------------------------

Equipment	
Type of Equipment	Quantity
Air Conditioner	1.00
Clothes Dryers	2.00
Exhaust Hoods	2.00
Fireplace	1.00
Gas Outlets	4.00
Furnaces Under 100,000	1.00
Ventilation Fans	5.00
Water Heater Vent	1.00

Fees			
Type	By	Date	Amount
PRMT	ASW	3/25/2008	\$123.50
SUCH	ASW	3/25/2008	\$14.82
Total:			\$138.32

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

24 Hour Notice Required For All Inspections

CONDITIONS OF APPROVAL:



October 16, 2013

Kim Fox
1718 23rd Ave
Forest Grove, OR 97116

RE: Permit Number: MEC-10-00811
 PLM-10-00810
 Issued: August 26, 2010
 Site Address: 1721 22nd Avenue

Dear Property Owners,

This letter is to inform you that the City of Forest Grove's records indicate the above referenced permits have not been inspected for final approval. **There is no fee for these inspections.** It is in your best interest to have these final inspections completed and documented as proof that the permitted work was completed per the State of Oregon Mechanical and Plumbing Specialty Code. This official record will remain on file with the City of Forest Grove.

Enclosed are copies of the original permits and instructions on how to request the final inspections. The inspections will take place between the hours of 9:00AM and 3:00PM and you may request an AM or PM appointment.

If the work is complete please call our inspection request line at (503)992-3206.

Please contact me if you have any questions.

Sincerely,

Marcia Phillips
Permit Coordinator
(503) 992-3227



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

22 Ave

Site Address 1721 23rd Avenue

Contractor SAMUEL

Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10

Mon [X] Tues [] Wed [] Thurs [] Fri []

AM [X] PM [] other []

Permit Number BL008-00013

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

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

- 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

[X] Final SFD REMODEL

[] APPROVED

[X] NOT APPROVED (REINSPECTION REQUIRED)

[] APPROVED AFTER CORRECTIONS

[] REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$

CORRECTIONS:

- 1 Install Handrail at Stairs going to Basement
2 see mech

Date:

8-30-10

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave

Contractor

Phone Number

Scheduled Inspection Date 8-20-08

Mon [] Tues [] Wed [x] Thurs [] Fri []

AM [] PM [] other

Permit Number BLDO 8-00013

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

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

[x] NOT APPROVED (REINSPECTION REQUIRED)

[] APPROVED AFTER CORRECTIONS

[] REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$

CORRECTIONS:

No Consultation requested by Samuel

Date:

8-20-08

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave

Scheduled Inspection Date 7-8-08

Contractor

Mon [] Tues [x] Wed [] Thurs [] Fri []

Phone Number

AM [x] PM [] other

Permit Number BL008-00013

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

- 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:

horse

[] APPROVED

[x] NOT APPROVED (REINSPECTION REQUIRED)

[] APPROVED AFTER CORRECTIONS

[] REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$

CORRECTIONS: 1 Complete full Beasian in Kitchen Window Headers below quad 2x10s

* 2 Complete Electrical Cover.

3 Baffle max 10' Horizontal & Vertical full out walls in Basement.

4 Beam L6 Engineer calls 6 3/4 x 9 installed & provide Engineering for the change in Beam.

5 EGRESS @ Basement window wells MAX 42"

6 Provide ventilation through RAFTERS & SIDE to side ACROSS Ridge to RAFTERS

Date: 7-8-08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVENUE
Contractor KIM FOX
Phone Number SAMUEL 971 242 9904

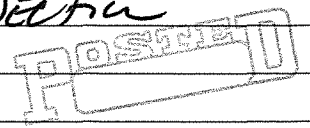
Scheduled Inspection Date 10/07/08
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [] PM [] other
Permit Number BLD08-00013

Grid of inspection categories: BUILDING, PLUMBING, MECHANICAL, MANUFACTURED HOME. Includes checkboxes for 'APPROVED', 'NOT APPROVED (REINSPECTION REQUIRED)', 'APPROVED AFTER CORRECTIONS', and 'REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$'.

CORRECTIONS: TO APPLY SHEAR AS PER ENG, REG INTERIOR application of ply - this can be done AFTER Framing + Mechanical + Elect approval

Complete Framing Corrections

Next inspection MAY Reg Reinspection FEE if NO corrections are made



Date: 10-07-08 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number Samuel 971-242-9904

Scheduled Inspection Date 4-2-08
Mon [] Tues [] Wed [x] Thurs [] Fri []
AM [x] PM [] other []
Permit Number BU08-00013

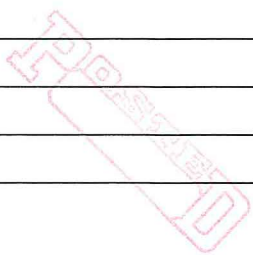
- BUILDING: Footing / Pier, Foundation Wall, Underfloor (P & B), Shear, Framing, Insulation, Approach/Sidewalk, [x] Other Porch, Planning [x] exterior, Final
PLUMBING: Underfloor (P & B), Top Out (Rough), Water Line, Rain/Crawl Drains, Storm Drainage, Sanitary Sewer, Backflow Device, Water Heater, Other, Final
MECHANICAL: Gas Piping, Underfloor (P & B), Rough Mechanical, HVAC (Final), Other, Comments:
MANUFACTURED HOME: M/H Set-Up, M/H Mechanical, M/H Water/Sewer, M/H Electrical Feeder, M/H Final, Other

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

CORRECTIONS: USE P/T SHEETING FOR DECK SURFACE

Date: 4.2.08

Inspector: [Signature]





COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

House

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number 971-242-9904 Samuel

Scheduled Inspection Date 12/9/08
Mon Tues Wed Thurs Fri
AM PM other _____
Permit Number BLDO-00013

BUILDING

- Erosion Control
- Footing / Pier
- Foundation Wall
- Underfloor (P & B)
- Shear
- Framing re
- 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:

APPROVED

NOT APPROVED
(REINSPECTION REQUIRED)

APPROVED AFTER
CORRECTIONS

REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS:

mech not corrected

POSTED

Date:

12-9-08

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

House

Site Address 1721 22nd Ave
Contractor Kim
Phone Number

Scheduled Inspection Date 11/26/08
Mon [] Tues [] Wed [X] Thurs [] Fri []
AM [] PM [X] other
Permit Number BL008-00013

BUILDING

- Erosion Control
Footing / Pier
Foundation Wall
Underfloor (P & B)
Shear
[X] 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:

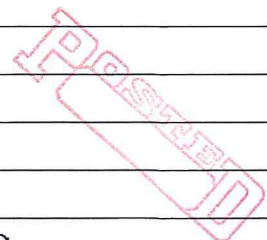
[] APPROVED

[X] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS: corrections completed for framing.
see mech 1 mechanical corrections to be checked @
Insulation.
OK to Insulate.
Sheer walls to be applied to Int of Building
so that sheer will be inspected after
Insulation and BEFORE SHEETROCK



Date: 11-26-08

Inspector:

AWA



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22nd ave
Contractor Summit
Phone Number 971-242-9904

Scheduled Inspection Date 10-18-10
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number B008-00014

BUILDING

- Erosion Control
Footing / Pier
Foundation Wall
Underfloor (P & B)
Shear
[X] 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 Insulate

Date: 10-18-10

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address: 1721 22nd Ave
Contractor: Samuel
Phone Number: 971-242-9904

Scheduled Inspection Date: 11-9-10
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [x] PM [] other []
Permit Number: B1008-0014
Tide mark

BUILDING

- Erosion Control
Footing / Pier
Foundation Wall
Underfloor (P & B)
Shear
Framing
[X] 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:

[] APPROVED

[] NOT APPROVED
(REINSPECTION REQUIRED)

[x] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

Seal wire and pipe penetrations at
floor and ceiling

Date: 11-9-10

Inspector:

[Signature]



[Handwritten signature]

**COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement**

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Samuel
Phone Number 971-242-9904
701-8314 Kim

Scheduled Inspection Date 8-20-08
Mon Tues Wed Thurs Fri
AM PM other _____
Permit Number BLD08-00014

BUILDING

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

Slab

APPROVED

NOT APPROVED
(REINSPECTION REQUIRED)

APPROVED AFTER
CORRECTIONS

REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS: Please Request Specific Inspection

Water Barrier Required in living space area of slab

Slab Insulation to be installed min 24" on exterior walls

POSTED

Date:

8-20-08

Inspector:

[Handwritten signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVENUE

Contractor KIM FOX

Phone Number 503/764/8314

Scheduled Inspection Date 03/07/08

Mon [] Tues [] Wed [] Thurs [] Fri [X]

AM [X] PM [] other MID-MORNING

Permit Number BCD 08-00014

- BUILDING
[X] Footing / Pier RE
[] 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

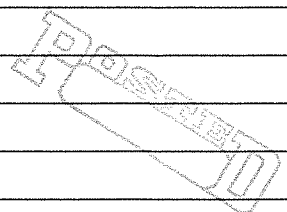
- MECHANICAL
[] Gas Piping
[] Underfloor (P & B)
[] Rough Mechanical
[] HVAC (Final)
[] Other

- MANUFACTURED HOME
[] M/H Set-Up
[] M/H Mechanical
[] M/H Water/Sewer
[] M/H Electrical Feeder
[] M/H Final
[] Other

Comments:

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

CORRECTIONS: Relocate ITD in SW2 to REAR END of shear PANEL



Date: 3.07.08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Mike
Phone Number 503-476-7945

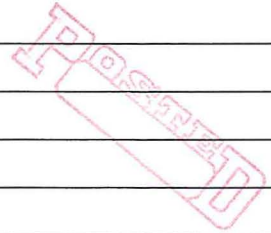
Scheduled Inspection Date 3-5-08
Mon [] Tues [] Wed [x] Thurs [] Fri []
AM [x] PM [] other []
Permit Number BLD08-00014

- BUILDING: Footing / Pier [x], Foundation Wall [x], 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:

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

CORRECTIONS: 1 provide compaction report on 6' deep utility trench next to foundation
2 Erosion control inspection prior to foundation inspection
3 planning approved plot plan to be on site at time of inspection



Date: 3-5-08 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address: 1721 22nd AV
Contractor: Kim
Phone Number: 701-8314

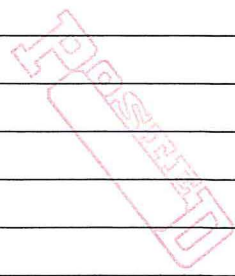
Scheduled Inspection Date: 8-28-08
Mon [] Tues [] Wed [] Thurs [x] Fri []
AM [x] PM [] other []
Permit Number: Bld 05-00014

- 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:



Date: 8/27/08
Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number 503-701-8314

Scheduled Inspection Date 9-9-08
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number BL008-00014

BUILDING

- Erosion Control
[x] Footing / Pier slab
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

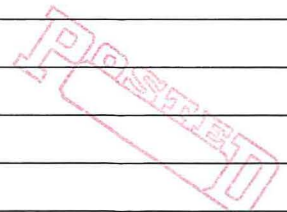
- M/H Set-Up
M/H Mechanical
M/H Water/Sewer
M/H Electrical Feeder
M/H Final
Other

Comments:

Garage

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

CORRECTIONS: Collections Completed



Date: 9-9-08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address: 1721 22nd Ave
Contractor: Kim
Phone Number: 701-8314

Scheduled Inspection Date: 8-28-08
Mon [] Tues [] Wed [] Thurs [] Fri [x]
AM [x] PM [] other []
Permit Number: BUD0800014

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

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

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

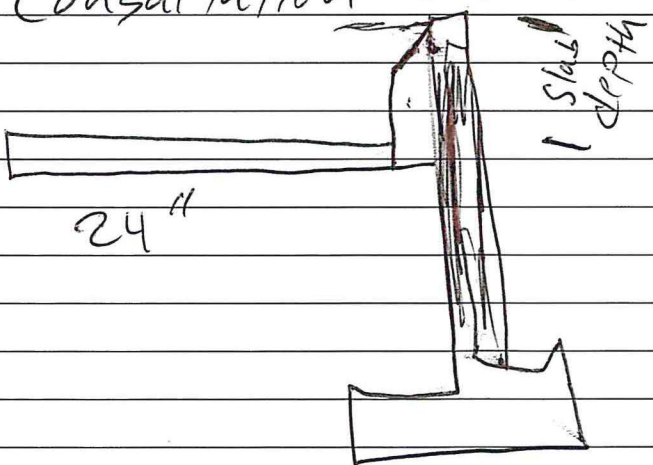
- Gas Piping
Underfloor (P & B)
Rough Mechanical
HVAC (Final)
Other

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

Comments:

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

CORRECTIONS: Consultation on slab Edge Insulation



Date: 8-28-08 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Garage

Site Address 1721 22nd Ave

Contractor _____

Phone Number _____

Scheduled Inspection Date 11/25/08

Mon Tues Wed Thurs Fri

AM PM other _____

Permit Number BUD08-0004

BUILDING

- Erosion Control
- 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: _____

APPROVED

NOT APPROVED
(REINSPECTION REQUIRED)

APPROVED AFTER
CORRECTIONS

REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS: 1. Install H/D Nubs & complete Nailing on H/D

Ext Nailing complete OK to cover ext

POSTED

Date: 11-25-08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
 Building / Engineering / Code Enforcement
INSPECTION REQUEST
 503-992-3206

Garage

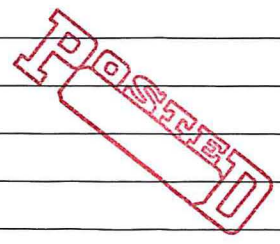
Site Address 1721 22ND AVENUE
 Contractor KUM FOX
 Phone Number 971/242/9904

Scheduled Inspection Date 12/12/08
 Mon Tues Wed Thurs Fri
 AM PM other _____
 Permit Number BLD 08-00014

- | BUILDING | PLUMBING | MECHANICAL | MANUFACTURED HOME |
|---|---|---|--|
| <input type="checkbox"/> Erosion Control | <input type="checkbox"/> Underfloor (P & B) | <input type="checkbox"/> Gas Piping | <input type="checkbox"/> M/H Set-Up |
| <input type="checkbox"/> Footing / Pier | <input type="checkbox"/> Top Out (Rough) | <input type="checkbox"/> Underfloor (P & B) | <input type="checkbox"/> M/H Mechanical |
| <input type="checkbox"/> Foundation Wall | <input type="checkbox"/> Water Line | <input type="checkbox"/> Rough Mechanical | <input type="checkbox"/> M/H Water/Sewer |
| <input type="checkbox"/> Underfloor (P & B) | <input type="checkbox"/> Rain/Crawl Drains | <input type="checkbox"/> HVAC (Final) | <input type="checkbox"/> M/H Electrical Feeder |
| <input checked="" type="checkbox"/> Shear | <input type="checkbox"/> Storm Drainage | <input type="checkbox"/> Other | <input type="checkbox"/> M/H Final |
| <input type="checkbox"/> Framing | <input type="checkbox"/> Sanitary Sewer | | <input type="checkbox"/> Other |
| <input type="checkbox"/> Insulation | <input type="checkbox"/> Backflow Device | | |
| <input type="checkbox"/> Approach/Sidewalk | <input type="checkbox"/> Water Heater | | |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other | | |
| <input type="checkbox"/> Planning | <input type="checkbox"/> Final | | |
| <input type="checkbox"/> Final | | | |
- Comments: _____

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

CORRECTIONS: INTERIOR SHEAR NAILING @ HOUSE



Date: 12/12/08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22ND AVENUE
Contractor SAMUEL
Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10
Mon X Tues Wed Thurs Fri
AM X PM other
Permit Number MECC08-00013

- BUILDING: Erosion Control, 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) SFD REMOVED, Other
MANUFACTURED HOME: 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: 1) Install anti tipping device downstairs oven
2) Install Ring at hot water heater vent at sheetrock

Date: 8-30-10 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor
Phone Number

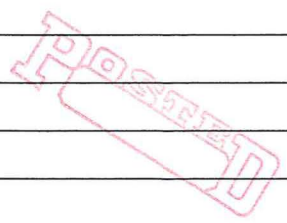
Scheduled Inspection Date 7-8-08
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [x] PM [] other
Permit Number MEC 08-0003

- 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: House

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

CORRECTIONS: 1 Fire stop @ the ducts around the ceiling line.
2 Complete installation of Fire place.
3 provide vented exhaust Fan in Bathroom basement level
4 provide Combustion Air for furnace
5 PROVIDE 1" CLEARANCE FROM COMBUSTIBLES @ "B" VENT
6 Provide VENTILATION @ upstairs Bathrooms + Main level



Date: 7-8-08 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVENUE
Contractor KEIM FOX
Phone Number SAMUEL 971 242 9904

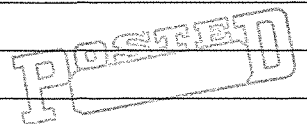
Scheduled Inspection Date 10/07/08
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number MECOS-00013

- BUILDING: Erosion Control, 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:

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

CORRECTIONS: complete v corrections remaining corrections



Date: 10-07-08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 77th av
Contractor Summit
Phone Number 971 242 9904

Scheduled Inspection Date 1-21-09
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number MC08-00013

- BUILDING: Erosion Control, 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: [x] Gas Piping, [] Underfloor (P & B), [x] 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: ROUGH MECHANICAL & GAS PIPING TEST
TAG NO # 358496

Date: 01/21/09
Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address: 1721 22nd av
Contractor: Kim
Phone Number: 971 242 9904

Scheduled Inspection Date: 12/9/08
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [] PM [x] other []
Permit Number: MECOS-00013

BUILDING

- Erosion Control
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)
[X] Rough Mechanical [ke]
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:

provide thru-bte on Instant hot water heater and fire place penetrations on exterior walls

POSTED

Date:

12-9-08

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

House

Site Address 1721 22nd Ave
Contractor Samuel
Phone Number 971-242-9904

Scheduled Inspection Date 11/26/08
Mon [] Tues [] Wed [X] Thurs [] Fri []
AM [] PM [X] other []
Permit Number MECW 8-00013

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

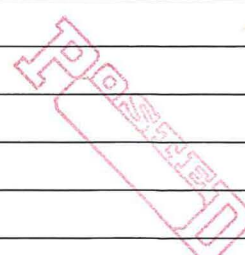
[X] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS: 1 PROVIDE 3" CLEARANCE @ AREA ABOVE FIRE place
VENT AS PER mfg SPECS and 1" @ SIDES +
Bottom

2 REMOVE EXTRA "B" VENT PIPE (Y & ACCOMPANYING
PIPE) in CRAWL FOR FURN. CONNECTION



Date: 11-26-08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED stamp

Site Address 1721 22nd ave
Contractor Kim
Phone Number 971/242/9904

Scheduled Inspection Date 10/15/10
Mon [] Tues [] Wed [] Thurs [] Fri []
AM [] PM [] other
Permit Number nec-08-20012

- BUILDING: Erosion Control, 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:

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

CORRECTIONS: require booster fan on dryer

Date: 10-15-10 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22ND AVENUE
Contractor SAMUEL
Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10
Mon [checked] Tues [] Wed [] Thurs [] Fri []
AM [checked] PM [] other []
Permit Number MEC08-00012

- BUILDING: Erosion Control, 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) [checked], Other
MANUFACTURED HOME: M/H Set-Up, M/H Mechanical, M/H Water/Sewer, M/H Electrical Feeder, M/H Final, Other

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

CORRECTIONS: 1 Insulate duct work in garage
2 no cold air returns allowed in garage

Date: 8-30-10 Inspector: [Signature]

City of Forest Grove

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

MECHANICAL PERMIT

PERMIT NO.: MEC05-00025
ISSUED: 2/9/2005
APPLIED: 2/9/2005
EXPIRES: 8/9/2005

SITE ADDRESS: 1721 22ND AVE
ASSESSOR'S PARCEL NO.: 1N436DD-01500
TYPE OF WORK: RPL
TYPE OF USE: SFD
PROJECT DESCRIPTION: REPLACE GAS FURNACE

<u>OWNER/APPLICANT</u> BELL, JAMES 1721 22ND AVE FOREST GROVE OR 97116	<u>CONTRACTOR</u> A-TEMP HEATING & COOLING 16000 SE EVELYN ST CLACKAMAS OR 97015 71878
---	--

Equipment	
Type of Equipment	Quantity
Other	1.00
Furnaces Under 100,000	1.00

Fees			
Type	By	Date	Amount
PRMT	LVW	2/9/2005	\$27.75
SUCH	LVW	2/9/2005	\$2.22
Total:			\$29.97

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

24 Hour Notice Required For All Inspections

CONDITIONS OF APPROVAL:

Mechanical 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: MCL05-00025

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Demolition	<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: <u>1721 22nd Ave</u>	
City/State/ZIP: <u>Forest Grove</u>	
Suite/bldg./apt. no.:	Project name: <u>Bell</u>
Cross street/directions to job site:	
Subdivision: Lot no.:	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replace gas furnace</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Mr. Bell</u>	
Address: <u>1721 22nd Ave</u>	
City/State/ZIP: <u>Forest Grove</u>	
Phone: <u>(503) 992-8117</u>	Fax: ()
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>A-Temp Heating & Cooling</u>	
Contact name: <u>Diane Hatter</u>	
Address: <u>16000 SE Evelyn St</u>	
City/State/ZIP: <u>Clack OR 97015</u>	
Phone: <u>(503) 650-9602</u>	Fax: <u>(503) 557-2990</u>
E-mail: <u>Diane@ATempHeating.com</u>	
CONTRACTOR	
Business name: <u>A-Temp Heating & Cooling</u>	
Address: <u>same as above</u>	
City/State/ZIP: <u>same as above</u>	
Phone: ()	Fax: ()
CCB lic.: <u>71878</u>	

Authorized signature: <u>Diane Hatter</u>
Print name: <u>Diane Hatter</u> Date: <u>2/9/05</u>

COMMERCIAL FEE* SCHEDULE - USE CHECKLIST			
Mechanical permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all mechanical materials, equipment, labor, overhead, and profit.			
Value: \$			
RESIDENTIAL EQUIPMENT / SYSTEMS FEES*			
<i>For special information use checklist.</i>			
Description	Qty.	Ea.	Total
Heating/cooling			
<u>Furnace add-on air conditioning</u>	<u>1</u>	11.90	<u>11.90</u>
Gas heat pump		8.95	
Duct work	<u>1</u>	15.85	<u>15.85</u>
Hydronic hot water system			
Residential boiler (radiator or hydronic)		11.90	
Unit heaters (fuel-type, not electric), in-wall, in-duct, suspended, etc.		11.90	
Flue/vent for any of above		6.00	
Other:		8.95	
Other fuel appliances			
Water heater		8.95	
Gas fireplace		8.95	
Flue vent for water heater or gas fireplace		6.00	
Log lighter (gas)		8.95	
Wood/pellet stove		8.95	
Wood fireplace/insert		8.95	
Chimney/liner/flue/vent		6.00	
Other:		8.95	
Environmental exhaust and ventilation			
Range hood/other kitchen equipment		8.95	
Clothes dryer exhaust		8.95	
Single-duct exhaust (bathrooms, toilet compartments, utility rooms)		6.00	
Attic/crawl space fans		6.00	
Other:		8.95	
Fuel piping			
\$4.00 for first four outlets; \$1.05 for each additional			
Furnace, etc.		By Outlet #	
Gas heat pump		By Outlet #	
Wall/suspended/unit heater		By Outlet #	
Water heater		By Outlet #	
Fireplace		By Outlet #	
Range		By Outlet #	
Barbecue		By Outlet #	
Clothes dryer (gas)		By Outlet #	
Other:			
MECHANICAL PERMIT FEES*			
			Subtotal <u>11.90</u>
			Minimum permit fee 27.30
			Plan review (% of permit fee)
			State surcharge (8% of permit fee) <u>2.18</u>
			TOTAL PERMIT FEE <u>29.48</u>

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
 440-4617T (11/02/COM/WEB)



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number 971-242-9904 Daniel

Scheduled Inspection Date 3/26/08
Mon [] Tues [] Wed [x] Thurs [] Fri []
AM [] PM [x] other []
Permit Number PLM08-00014

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 [x] Underground
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:

UNDER SLAB in BASEMENT

[x] APPROVED

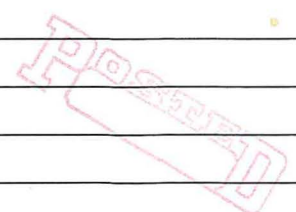
[] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

Lined area for corrections and notes.



Date: 3-26-08

Inspector:

AWL



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor
Phone Number

Scheduled Inspection Date 7-8-08
Mon [] Tues [x] Wed [] Thurs [] Fri []
AM [x] PM [] other
Permit Number PLM08-00014

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

- 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:

House

[] APPROVED

[x] NOT APPROVED
(REINSPECTION REQUIRED)

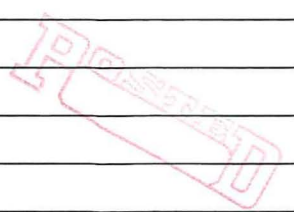
[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

- 1 Complete nail plates as needed.
2 REPAIR OVER BORED JOIST ABOVE KITCHEN
3 STRAP PLATES & NOTCHING IN KITCHEN
4 PROVIDE MIDSTORY SUPPORT @ KITCHEN
5 SUPPORT ABS DWV @ HORIZONTAL @ 48" OC MAX IN CRAWL

MAIN FLOOR



Date: 7.8.08

Inspector: AWL



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number

Scheduled Inspection Date 4-7-08
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [] PM [] other
Permit Number PUM0800014

BUILDING

PLUMBING

MECHANICAL

MANUFACTURED HOME

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

- Underfloor (P & B)
Top Out (Rough)
[X] Water Line
Rain/Crawl Drains
Storm Drainage
[X] 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

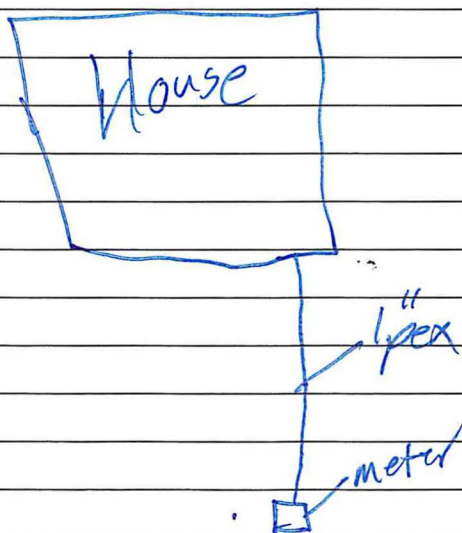
[X] NOT APPROVED (REINSPECTION REQUIRED)

[] APPROVED AFTER CORRECTIONS

[] REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$

CORRECTIONS:

39 fixture min 1 1/4" pipe size required for



POSTED

Date:

Inspector:



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address: 1721 22nd AVENUE
Contractor: SAMUELY
Phone Number: 971/242/9904

Scheduled Inspection Date: 1/27/11
Mon [] Tues [] Wed [] Thurs [x] Fri []
AM [x] PM [] other []
Permit Number: PLM0800013

BUILDING

- Erosion Control
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: SHOWN FOR 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:

Date: 1-27-11

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22nd AVENUE
Contractor SAMUEL
Phone Number 971/242/9904

Scheduled Inspection Date 1/14/11
Mon [] Tues [] Wed [] Thurs [] Fri [x]
AM [x] PM [] other
Permit Number PLM08-00093

BUILDING

- Erosion Control
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 Shower pan
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:

[] APPROVED

[x] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

Leaking

Date:

1-14-11

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED stamp

Site Address 1721 22nd AVENUE

Contractor SAMUEL

Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10

Mon [X] Tues [] Wed [] Thurs [] Fri []

AM [X] PM [] other []

Permit Number PLM08-00013

BUILDING

- Erosion Control
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:

Date: 8-30-10

Inspector:

Inspector signature



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave.
Contractor Mike
Phone Number 503-650-6355

Scheduled Inspection Date 07-14-08
Mon X Tues Wed Thurs Fri
AM X PM other
Permit Number PIN 08-00013

BUILDING

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

PLUMBING

- Underfloor (P & B)
Top Out (Rough) RE
Water Line RE
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

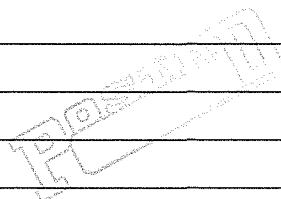
- M/H Set-Up
M/H Mechanical
M/H Water/Sewer
M/H Electrical Feeder
M/H Final
Other

Comments:

Call Before 1hr. before

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

CORRECTIONS: PREVIOUS CORRECTIONS



Date: 07/14/2008

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

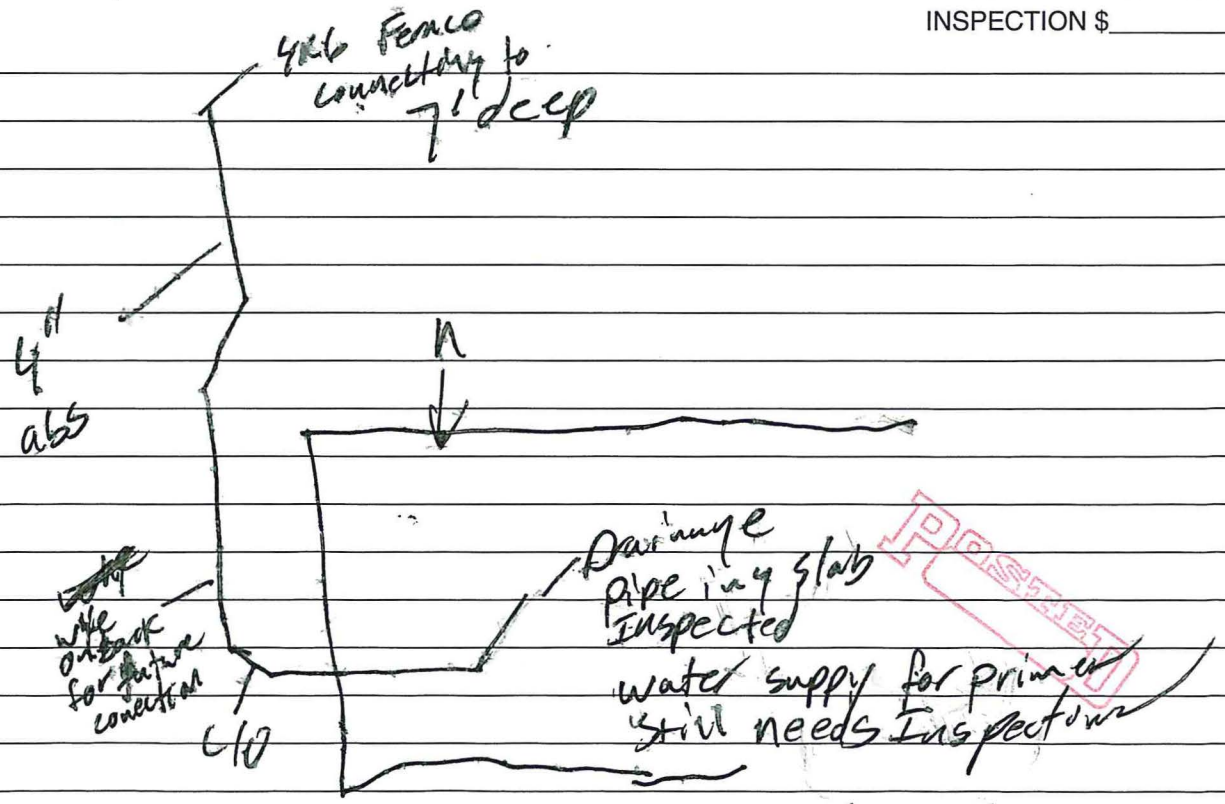
Site Address 1721 22nd Ave
Contractor Samual
Phone Number 971-242-9904
Kim 503-701-8314

Scheduled Inspection Date 3-3-08
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number PUM08-00013

- 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 Int & Ext., 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

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

CORRECTIONS:



Date: 3-3-08
Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number Samuel 971-242-9904

Scheduled Inspection Date 4-7-08
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number PUM 08-0001.3

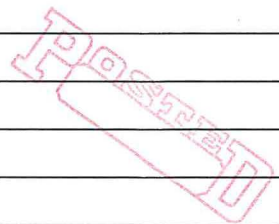
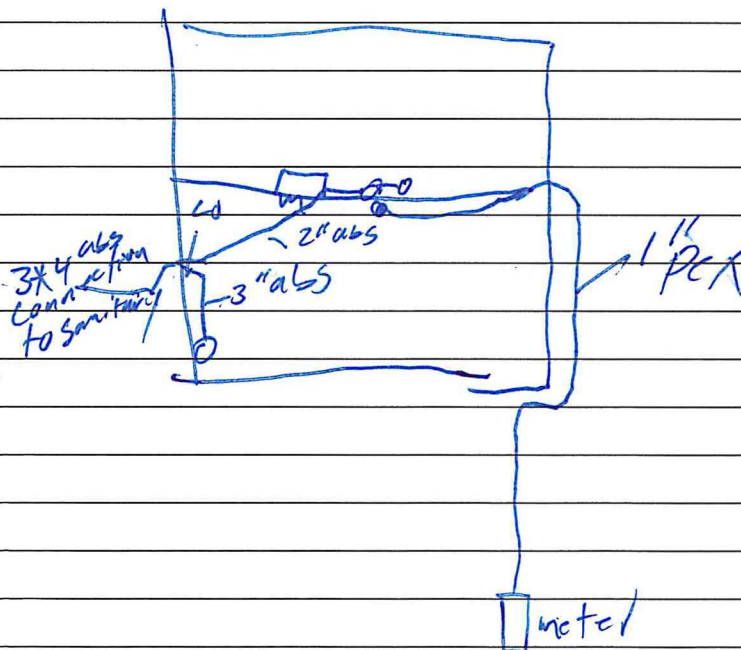
- BUILDING: Footing / Pier, Foundation Wall, Underfloor (P & B), Shear, Framing, Insulation, Approach/Sidewalk, Other, Planning, Final
PLUMBING: Underfloor (P & B), Top Out (Rough), Water Line [X], Rain/Crawl Drains, Storm Drainage, Sanitary Sewer [X], Backflow Device, Water Heater, Other, Final
MECHANICAL: 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

under slab to sewer connection

Comments:

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

CORRECTIONS:



Date:

4-7-08

Inspector:

Handwritten signature of the inspector



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVENUE
Contractor KIM FOX
Phone Number 503/701/8314

Scheduled Inspection Date 03/07/08
Mon [] Tues [] Wed [] Thurs [] Fri [x]
AM [x] PM [] other []
Permit Number PLM 08-00013

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 RE
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

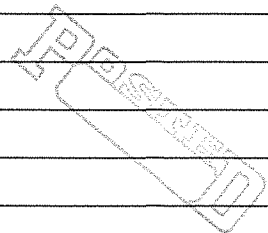
- M/H Set-Up
M/H Mechanical
M/H Water/Sewer
M/H Electrical Feeder
M/H Final
Other

Comments:

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

CORRECTIONS:

Cancelled



Date: 3-07-08

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor Kim
Phone Number

Scheduled Inspection Date 3-5-08
Mon [] Tues [] Wed [x] Thurs [] Fri []
AM [x] PM [] other early
Permit Number PUM08-00013

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 Basement
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:

[] APPROVED

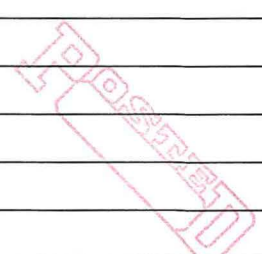
[x] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

water line not installed



Date:

3-5-08

Inspector:

[Signature]

City of Forest Grove

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

PLUMBING PERMIT

PERMIT NO.: **PLM08-00013**
APPLIED: **2/4/2008**
ISSUED: **2/29/2008**
EXPIRES: **8/29/2008**

SITE ADDRESS: **1721 22ND AVE**
ASSESSOR'S PARCEL NO.: **1N436DD-01500**
TYPE OF WORK: **Alteration**
TYPE OF USE: **Single Family Residential**
PROJECT DESCRIPTION: **GARAGE ADDITION**

<p><u>OWNER/APPLICANT</u></p> <p>FOX, KIM 1718 23RD AVE FOREST GROVE OR 97116</p>	<p><u>CONTRACTOR</u></p>
---	--------------------------

Plumbing Fixtures		Fees			
Fixture Type	Quantity	Type	By	Date	Amount
Sanitary sewer service	1	BTH1	ASW	2/29/2008	\$239.50
Storm and rain drains	1	PRMT	ASW	2/29/2008	\$139.05
Water service	1	SUCH	LVW	2/29/2008	\$45.43
Total:					\$423.98

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)

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:

PM09-00014

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: <u>1721 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>Between B & C on 22nd Ave.</u>	
Subdivision:	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: <u>Kim Fox</u>	
Address: <u>1718 23rd Ave.</u>	
City/State/ZIP: <u>Forest Grove, OR 97116</u>	
Phone: (503) <u>701-8314</u>	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: <u>Old Recreation, LLC</u>	
Address: <u>1718 23rd Ave.</u>	
City/State/ZIP: <u>Forest Grove, OR 97116</u>	
Phone: (991) <u>242-9904</u>	Fax: ()
CCB lic.: <u>17B318</u>	PB Lic. no.:

FEE* SCHEDULE			
<i>For special information use checklist.</i>			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath	1	239.50	
SFR (2) bath	1	316.75	
SFR (3) bath	1	386.25	
Each additional bath/kitchen	2	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	
Storm sewer (each 100 ft.: ___)	1	46.35	
Water service (each 100 ft.: ___)	1	46.35	
Fixture or item			
Absorption valve		13.90	
Backflow preventer	1	13.90	
Backwater valve		13.90	
Clothes washer	2	13.90	
Dishwasher	2	13.90	
Drinking fountain		13.90	
Ejectors/sump		13.90	
Expansion tank		13.90	
Fixture/sewer cap	1	13.90	
Floor drain/floor sink/hub		13.90	
Garbage disposal	2	13.90	
Hose bib		13.90	
Ice maker	2	13.90	
Interceptor/grease trap		13.90	
Medical gas (value: \$ ___)		By value	
Primer		13.90	
Roof drain (commercial)		13.90	
Sink/basin/lavatory	7	13.90	
Tub/shower/shower pan	4	13.90	
Urinal		13.90	
Water closet	4	13.90	
Water heater		13.90	
Other:		13.90	
Other:			
Subtotal			
Minimum permit fee			\$ 27.30
Plan review (___% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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)

Authorized signature:

Print name: <u>Kim R. Fox</u>	Date:
-------------------------------	-------

Mechanical 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: **MCO 9-00014**

TYPE OF WORK	
<input type="checkbox"/> New construction <input type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> Single-family dwelling <input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial/industrial <input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job site address: 1721 22nd Ave	
City/State/ZIP: Forest Grove, OR 97116	
Unit/bldg./apt. no.:	Project name:
Cross street/directions to job site: Between B:IC on 22nd Ave.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Kim Fox	
Address: 1718 23rd Ave	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (503) 701-8314	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: OLD Recreation, LLC	
Address: 1718 23rd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (971) 242-9904	Fax: ()
CCB lic.: 178318	

Authorized signature: _____

Print name: Kim H. Fox	Date: _____
-------------------------------	-------------

COMMERCIAL FEE* SCHEDULE - USE CHECKLIST			
Mechanical permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all mechanical materials, equipment, labor, overhead, and profit.			
Value: \$			
RESIDENTIAL EQUIPMENT / SYSTEMS FEES*			
<i>For special information use checklist.</i>			
Description	Qty.	Ea.	Total
Heating/cooling			
Furnace add-on air conditioning		11.90	
Gas heat pump		8.95	
Duct work	1	15.85	
Hydronic hot water system			
Residential boiler (radiator or hydronic)		11.90	
Unit heaters (fuel-type, not electric), in-wall, in-duct, suspended, etc.		11.90	
Flue/vent for any of above	1	6.00	
Other:		8.95	
Other fuel appliances			
Water heater	1	8.95	
Gas fireplace	1	8.95	
Flue vent for water heater or gas fireplace	2	6.00	
Log lighter (gas)		8.95	
Wood/pellet stove		8.95	
Wood fireplace/insert		8.95	
Chimney/liner/flue/vent		6.00	
Other:		8.95	
Environmental exhaust and ventilation			
Range hood/other kitchen equipment	2	8.95	
Clothes dryer exhaust	2	8.95	
Single-duct exhaust (bathrooms, toilet compartments, utility rooms)	6	6.00	
Attic/crawl space fans		6.00	
Other:		8.95	
Fuel piping			
\$4.00 for first four outlets; \$1.05 for each additional			
Furnace, etc.	1		By Outlet #
Gas heat pump			By Outlet #
Wall/suspended/unit heater			By Outlet #
Water heater	1		By Outlet #
Fireplace	1		By Outlet #
Range	2		By Outlet #
Barbecue			By Outlet #
Clothes dryer (gas)	2		By Outlet #
Other:			
MECHANICAL PERMIT FEES*			
Subtotal			
Minimum permit fee		27.30	
Plan review (% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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
440-4617T (11/02/COM/WEB)

Remodel

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:

BLD08-00013

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: 1721 22nd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Between B & C on 22nd Ave.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Kim Fox	
Address: 1718 23rd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (503) 701-8314	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: Old Recreation, LLC	
Address: 1718 23rd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (971) 242-9904	Fax: ()
CCB lic.: 17B31B	

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	\$ 19,947
Number of bedrooms:	6
Number of bathrooms:	4
Total number of floors:	3
New dwelling area:	square feet 210
Garage/carport area:	square feet
Covered porch area:	square feet 200
Deck area:	square feet
Other structure area:	square feet 2715
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 280
New building area:	square feet 200
Number of stories:	2
Type of construction:	
Occupancy groups:	
Existing:	FD
New:	SD
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:	

BUILDING

* Fee schedule... Industry Service Board

Authorized signature:

Print name: Kim R. Fox

Date:



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

Permit No.: **MEC-10-00811**

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

Permit Type: **Mechanical Permit Residential Alt/Add/Repair**

Site Address:	1721 22ND AVE FOREST GROVE OR 97116	OccCode	Construction Type	SqFt
Owner:	FOX, KIM R	Phone:		
Address:	1718 23RD AVE FOREST GROVE OR 97116	Fax:		
Contractor:		Phone:		
Address:		Fax:		
		Business Lic#:		
Contact:		Phone:		
Description:	Add a bathroom & dishwasher.			

SUPPLEMENTAL INFORMATION:	
# RANGE HOOD/OTHER KITCH	1
# SINGLE DUCT EXHAUST/BAT	1
MECH PLAN REVIEW?	Y

FEES:			
Mechanical Plan Review Equip	6.83	Mechanical State Surcharge Equ	3.28
Mechanical Permit Fee/equip.	27.30		
			TOTAL FEES: 37.41

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: 08/27/12 Issued by: _____

Mechanical 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:

MEC-10-00811

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Demolition	<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: <u>1721 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>B & C Street</u>	
Subdivision: <u>Naylor/Walker</u> Lot no.:	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Bath vent / stove vent	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Sam Fox & Samuel Santos</u>	
Address: <u>1721 22nd Ave.</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Phone: <u>(971) 242-9904</u>	Fax: ()
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: <u>Samuel Santos</u>	
Address: <u>same</u>	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB lic.:	

COMMERCIAL FEE* SCHEDULE - USE CHECKLIST			
Mechanical permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all mechanical materials, equipment, labor, overhead, and profit.			
Value: \$			
RESIDENTIAL EQUIPMENT / SYSTEMS FEES*			
<i>For special information use checklist.</i>			
Description	Qty.	Ea.	Total
Heating/cooling			
Furnace add-on air conditioning		11.90	
Gas heat pump		8.95	
Duct work		15.85	
Hydronic hot water system			
Residential boiler (radiator or hydronic)		11.90	
Unit heaters (fuel-type, not electric), in-wall, in-duct, suspended, etc.		11.90	
Flue/vent for any of above		6.00	
Other:		8.95	
Other fuel appliances			
Water heater		8.95	
Gas fireplace		8.95	
Flue vent for water heater or gas fireplace		6.00	
Log lighter (gas)		8.95	
Wood/pellet stove		8.95	
Wood fireplace/insert		8.95	
Chimney/liner/flue/vent		6.00	
Other:		8.95	
Environmental exhaust and ventilation			
Range hood/other kitchen equipment	1	8.95	8.95
Clothes dryer exhaust		8.95	
Single-duct exhaust (bathrooms, toilet compartments, utility rooms)	1	6.00	6-
Attic/crawl space fans		6.00	
Other:		8.95	
Fuel piping			
\$4.00 for first four outlets; \$1.05 for each additional			
Furnace, etc.		By Outlet #	
Gas heat pump		By Outlet #	
Wall/suspended/unit heater		By Outlet #	
Water heater		By Outlet #	
Fireplace		By Outlet #	
Range		By Outlet #	
Barbecue		By Outlet #	
Clothes dryer (gas)		By Outlet #	
Other:			
MECHANICAL PERMIT FEES*			
Subtotal			14.95
Minimum permit fee			27.30
Plan review (% of permit fee)			
State surcharge (12% of permit fee)			1.79
TOTAL PERMIT FEE			16.74

Authorized signature:

Print name: Sam Fox Date: 8/26/0

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
440-4617T (11/02/COM/WEB) 20: 783



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

Permit No.: **PLM-11-00743**

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

Permit Type: **Plumbing Over the Counter**

Site Address:	1721 22ND AVE FOREST GROVE OR 97116	OccCode	Construction Type	SqFt
Owner:	FOX KIM R & FOX RICHARD A &	Phone:		
Address:	1721 22ND AVE FOREST GROVE OR 97116	Fax:		
Contractor:		Phone:		
Address:		Fax:		
		Business Lic#:		
Contact:		Phone:		
Description:				

SUPPLEMENTAL INFORMATION:	
# BACK FLOW PREVENTER	1

FEES:	
Plumbing Permit Fee	27.30
Plumbing State Surcharge	3.28
TOTAL FEES: 30.58	

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: 08/18/11 Issued by: YMP



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-11-00743

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: <u>1721 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>B Street & 22nd Ave.</u>	
Subdivision: <u>Naylor Wallace</u>	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Backflow preventor for sprinkler</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Samuel Santos</u>	
Address: <u>1721 22nd Ave.</u>	
City/State/ZIP: <u>Forest Grove, OR 97116</u>	
Phone: <u>(971) 242-9904</u>	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
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.: ____)		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	<u>1</u>	13.90	<u>13.90</u>
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			
Minimum permit fee			\$ 27.30
Plan review (____ % of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

Authorized signature:

Print name: Samuel Santos Date: 08/18/11

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 / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd ave
Contractor Samual
Phone Number 971 242-9904

Scheduled Inspection Date 8-23-11
Mon Tues Wed Thurs Fri
AM PM other _____
Permit Number PM 11-00743

- | BUILDING | PLUMBING | MECHANICAL | MANUFACTURED HOME |
|---|---|---|--|
| <input type="checkbox"/> Erosion Control | <input type="checkbox"/> Underfloor (P & B) | <input type="checkbox"/> Gas Piping | <input type="checkbox"/> M/H Set-Up |
| <input type="checkbox"/> Footing / Pier | <input type="checkbox"/> Top Out (Rough) | <input type="checkbox"/> Underfloor (P & B) | <input type="checkbox"/> M/H Mechanical |
| <input type="checkbox"/> Foundation Wall | <input type="checkbox"/> Water Line | <input type="checkbox"/> Rough Mechanical | <input type="checkbox"/> M/H Water/Sewer |
| <input type="checkbox"/> Underfloor (P & B) | <input type="checkbox"/> Rain/Crawl Drains | <input type="checkbox"/> HVAC (Final) | <input type="checkbox"/> M/H Electrical Feeder |
| <input type="checkbox"/> Shear | <input type="checkbox"/> Storm Drainage | <input type="checkbox"/> Other | <input type="checkbox"/> M/H Final |
| <input type="checkbox"/> Framing | <input type="checkbox"/> Sanitary Sewer | | <input type="checkbox"/> Other |
| <input type="checkbox"/> Insulation | <input checked="" type="checkbox"/> Backflow Device <i>fe</i> | | |
| <input type="checkbox"/> Approach/Sidewalk | <input type="checkbox"/> Water Heater | Comments: _____ | |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other | _____ | |
| <input type="checkbox"/> Planning | <input type="checkbox"/> Final | _____ | |
| <input type="checkbox"/> Final | | _____ | |

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

CORRECTIONS: BACKFLOW DEVICE INSTALLATION

Date: 8/23/11 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVE.
Contractor Samuel
Phone Number (971) 242-9904

Scheduled Inspection Date 8/22
Mon [checked] Tues [] Wed [] Thurs [] Fri []
AM [] PM [] other []
Permit Number PLM-11-00743

BUILDING

- Erosion Control
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 - Sprinkler
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:

[] APPROVED

[X] NOT APPROVED
(REINSPECTION REQUIRED)

[X] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

provide

provide drains at back flow device

Febco (50)

Samuel 65697

Date:

8-22-11

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22nd Ave
Contractor
Phone Number

Scheduled Inspection Date 2/11/05
Mon [] Tues [] Wed [] Thurs [] Fri [X]
AM [X] PM [] other
Permit Number MAC 05-00025

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

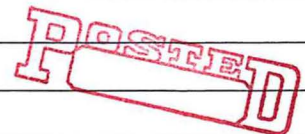
MANUFACTURED HOME

- 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 (NO REINSPECTION REQUIRED)
[] STOP WORK

CORRECTIONS:



Date: 2-11-05

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVE
Contractor
Phone Number

Scheduled Inspection Date 10.29.08

Mon [] Tues [] Wed [X] Thurs [] Fri []
AM [] PM [] other []

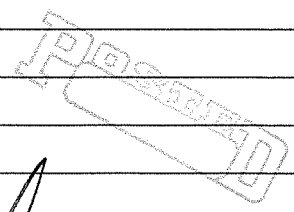
Permit Number

- BUILDING: Footing / Pier, Foundation Wall, Underfloor (P & B), Shear, Framing, Insulation, Approach/Sidewalk, Other Erosion, 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:

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

CORRECTIONS: Please COVER spoils pile + Replace OR Repair silt fence on EAST side OF lot. Oct 1 is start of RAINY SEASON - Cleanwater Services requires all DISTURBED GROUND to be COVERED w/ min. STRAW OR 6 mil Black VISQUEEN

Thank you ANDY



Date: 10.29.08

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 1721 22ND AVENUE
Contractor YIM FOX OWNER (SAMUEL)
Phone Number 503-701-8314

Scheduled Inspection Date 12/19/08

Mon [] Tues [] Wed [] Thurs [] Fri [X]

AM [] PM [X] other []

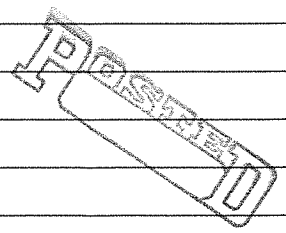
Permit Number PLM 08-00014

CHANGE PLM 08-00013
MANUFACTURED HOME

- BUILDING: Erosion Control, 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 Shower pan
MECHANICAL: Gas Piping, Underfloor (P & B), Rough Mechanical, HVAC (Final), Other
Comments: Shower pan test

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

CORRECTIONS: Shower pan test



Date: 12/19/08 Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22ND AVENUE
Contractor SAMUEL
Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10
Mon [X] Tues [] Wed [] Thurs [] Fri []
AM [X] PM [] other []
Permit Number MEC-10-00811

BUILDING

- ___ Erosion Control
___ 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:

[] APPROVED

[X] NOT APPROVED
(REINSPECTION REQUIRED)

[] APPROVED AFTER
CORRECTIONS

[] REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$

CORRECTIONS:

move duct to new bathroom area

Date:

8-30-10

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 1721 22ND AVENUE

Contractor SAMUEL

Phone Number 971-242-9904

Scheduled Inspection Date 8/30/10

Mon [X] Tues [] Wed [] Thurs [] Fri []

AM [X] PM [] other []

Permit Number PLM-10-00810

BUILDING

- Erosion Control
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:

Date: 8-30-10

Inspector: [Signature]



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

Permit No.: **PLM-10-00810**

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

Permit Type: **Plumbing Permit Residential Add/Alt/Repair**

Site Address:	1721 22ND AVE FOREST GROVE OR 97116	OccCode	R-3	Construction Type	VB	SqFt	
Owner:	FOX, KIM R	Phone:		Fax:			
Address:	1718 23RD AVE FOREST GROVE OR 97116						
Contractor:		Phone:		Fax:			
Address:		Business Lic#:					
Contact:		Phone:					
Description:	Add a bathroom & dishwasher.						

SUPPLEMENTAL INFORMATION:	
# DISHWASHER	1
# GARBAGE DISPOSAL	1
# ICE MAKER	1
# SINKS/BASINS/LAVS	1
# WATER CLOSET	1

FEES:			
Plumbing Permit Fee	69.50	Plumbing State Surcharge	8.34
			TOTAL FEES: 77.84

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: 08/22/10 Issued by: _____

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:

PHM-10-00810

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: <u>1721 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>Between B & C Street</u>	
Subdivision: <u>Naylor/walker</u> Lot no.:	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Additional Bath, in to the house</u> <u>in detached</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: <u>Kim Fox & Samuel Santos</u>	
Address: <u>1721 22nd Ave.</u>	
City/State/ZIP: <u>Forest Grove, OR 97116</u>	
Phone: (<u>971</u>) <u>242-9904</u>	Fax: ()
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business name:	
Contact name: <u>Samuel Santos</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.:	
PB Lic. no.:	

FEE* SCHEDULE			
<i>For special information use checklist.</i>			
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.: ____)		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	1	13.90	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	1	13.90	13.90
Hose bib		13.90	
Ice maker	1	13.90	13.90
Interceptor/grease trap		13.90	
Medical gas (value: \$ ____)		By value	
Primer		13.90	
Roof drain (commercial)		13.90	
Sink/basin/lavatory	1	13.90	13.90
Tub/shower/shower pan		13.90	
Urinal		13.90	
Water closet	1	13.90	13.90
Water heater		13.90	
Other:		13.90	
Other:			
Subtotal			69.50
Minimum permit fee			\$ 27.30
Plan review (____% of permit fee)			
State surcharge (12% of permit fee)			<u>8.34</u>
TOTAL PERMIT FEE			69.50

Authorized signature:

Print name: Kim Fox Date: 08/26/10

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)

\$ 77.84

Garage Addition

914.85

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: **BLDC08-000M**

TYPE OF WORK	
<input checked="" 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 checked="" type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 1721 22nd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Between B & C on 22nd Ave.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Kim Fox	
Address: 1718 23rd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (503) 701-8314	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: Old Recreation, LLC	
Address: 1718 23rd Ave.	
City/State/ZIP: Forest Grove, OR 97116	
Phone: (503) 242-9904	Fax: ()
CCB lic.: 178318	
Authorized signature:	
Print name: Kim Fox	Date:

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	\$ 122,666
Number of bedrooms:	1
Number of bathrooms:	1
Total number of floors:	2
New dwelling area:	square feet 930
Garage/carport area:	square feet 930
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:	

BUILDING

* Industry Service Board
 1,031.58 - Blaw
 1,070.53 - Plan Review Fee
 440-4613T (10/02/COM/WEB)

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:

PLUM09-00014

TYPE OF WORK	
<input checked="" 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 checked="" type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>1721 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>Between B & C on 22nd Ave.</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Garage/Apt Addition</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Kim Fox</u>	
Address: <u>1718 23rd Ave.</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Phone: (503) <u>701-8314</u>	Fax: (503)
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: <u>Old Recreation, LLC</u>	
Address: <u>1718 23rd Ave.</u>	
City/State/ZIP: <u>Forest Grove OR 97116</u>	
Phone: (991) <u>242-9904</u>	Fax: ()
CCB lic.: <u>178318</u>	PB Lic. no.:

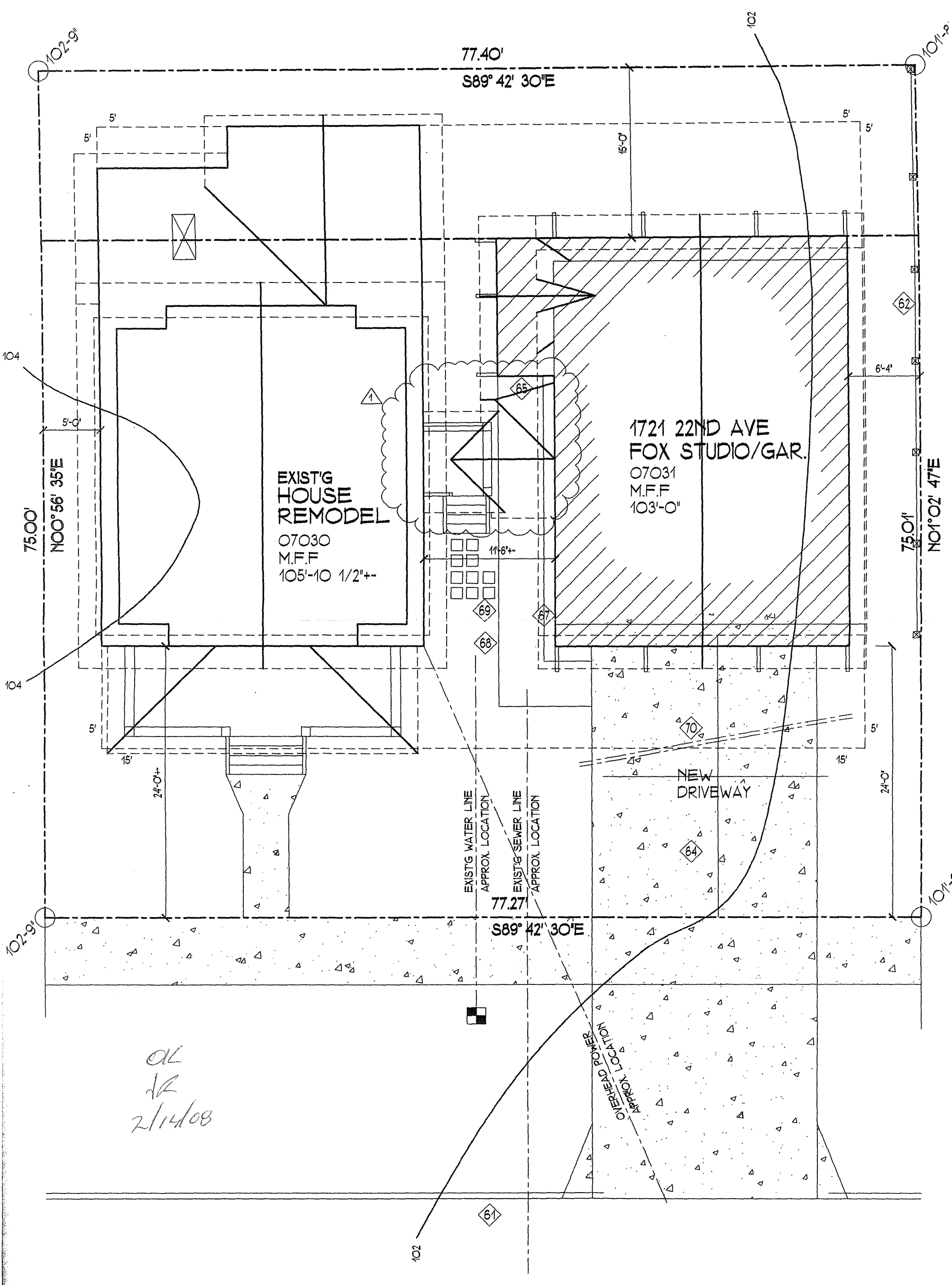
FEE* SCHEDULE			
<i>For special information use checklist.</i>			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath	1	239.50	
SFR (2) bath		316.75	
SFR (3) bath		386.25	
Each additional bath/kitchen	1	41.72	
Fire sprinkler (____ sq. ft.)		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	
Storm sewer (each 100 ft.: ____)	1	46.35	
Water service (each 100 ft.: ____)	1	46.35	
Fixture or item			
Absorption valve		13.90	
Backflow preventer		13.90	
Backwater valve		13.90	
Clothes washer	1	13.90	
Dishwasher	1	13.90	
Drinking fountain		13.90	
Ejectors/sump		13.90	
Expansion tank		13.90	
Fixture/sewer cap	1	13.90	
Floor drain/floor sink/hub		13.90	
Garbage disposal	1	13.90	
Hose bib		13.90	
Ice maker	1	13.90	
Interceptor/grease trap		13.90	
Medical gas (value: \$ ____)		By value	
Primer		13.90	
Roof drain (commercial)	1	13.90	
Sink/basin/lavatory	3	13.90	
Tub/shower/shower pan	1	13.90	
Urinal		13.90	
Water closet	1	13.90	
Water heater	1	13.90	
Other:		13.90	
Other:			
Subtotal			
Minimum permit fee			\$ 27.30
Plan review (____ % of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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)

Authorized signature:

Print name: Kim Fox Date: _____



EXIST'G
 HOUSE
 REMODEL
 07030
 M.F.F
 105'-10 1/2"+-

1721 22ND AVE
 FOX STUDIO/GAR.
 07031
 M.F.F
 103'-0"

NEW
 DRIVEWAY

EXIST'G WATER LINE
 APPROX. LOCATION
 EXIST'G SEWER LINE
 APPROX. LOCATION

OVERHEAD POWER
 APPROX. LOCATION

OL
 JL
 2/14/08

22ND STREET

Date Of Test	Test No.	Code	Test Location	Density Count	Moist. Count	Mode	Depth	Elev. Ft.	% Field Moist.	In-Place Density (lbs/cu. ft.)		% Comp.
										Wet	Dry	

Asterisked (*) percent compaction test results did not meet listed acceptance criteria.

Remarks:

TRENCH LINE WAS NOT RECOMPACTED TO MY KNOWLEDGE & OVERBURDENED W/ TRENCH EXCAVATED SOIL.

WAS UNABLE TO VERIFY ACTUAL % REQUIRED.

UPDATED GAUGE SERIAL # 03-12-08 (AS)

OLD RECREATION LLC - KIM FOX

KFOX@PRUNW.COM

TO: CITY OF FOREST GROVE COMM DEVELOPMENT - RICHARD MEAD

NW DESIGN - ROBERT SERA

RSERA@EASYSTREET.COM

GET R DONE CONCRETE

FAX/503-537-9283

FRANKS EXCAVATION LLC

FRANCISCOCAN_7@HOTMAIL.COM

NW DESIGN

Typist: AS

Test By: A. FYOCK

Reviewed By: Steven W Leach On 03/13/2008

Test results were discussed and left with NOBODY ONSITE
of _____

Code Descriptions

NC - No code (general fill areas and backfill/original ground/not fill)
SF - Structural fill (Buildings Non-Residential)
LF - Residential lot engineered fill
RF - Roadway engineered fill (Soil Only)
PS - Pavement subgrade

BC - Base course (Rock Only)
RW - Retaining wall backfill
WT - Water line trench
ST - Sanitary sewer trench
DT - Storm drain trench

ET - Electrical trench
GT - Gass line trench
CT - Cable, phone trenches

Our report pertains to the material tested only. The information contained in this report is provided subject to all terms and conditions of CTI's General Conditions in effect at the time this report is prepared. No party other than those to whom CTI has distributed this report shall be entitled to use or rely upon the information contained in this document.

Moisture - Density Relationship

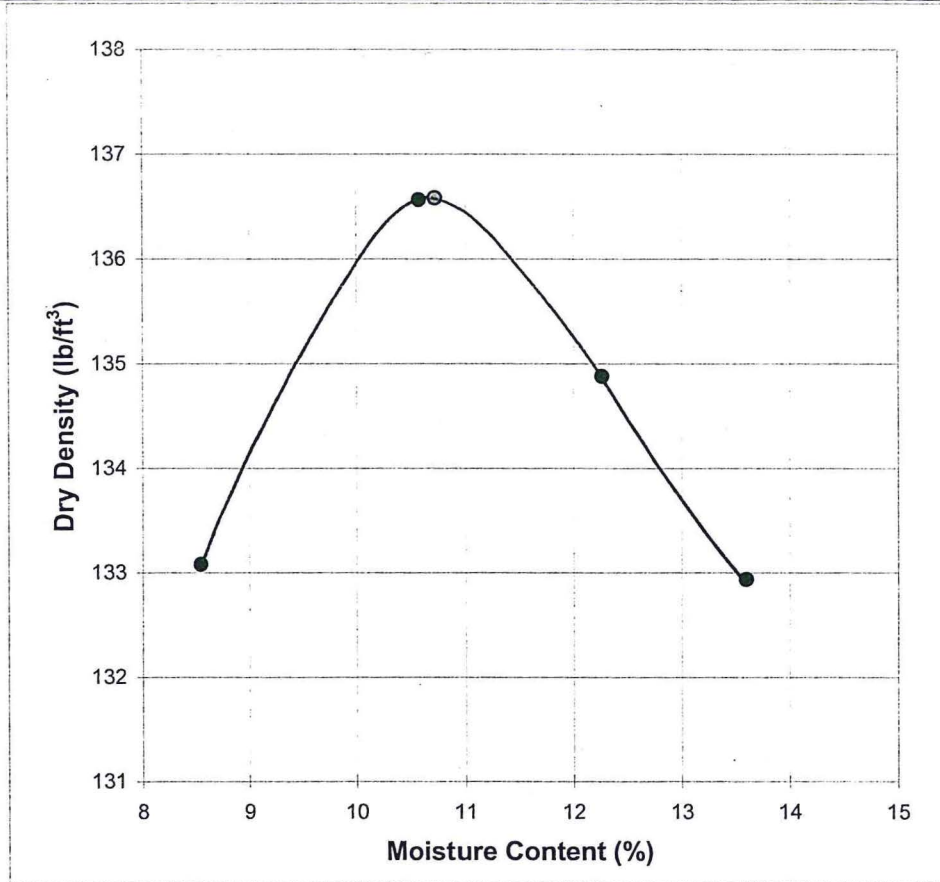
Client: Old Recreation LLC - Kim Fox
Project: Sewer Line @ 1721 22nd Avenue - Compaction Testing

Job Number:
Location:



Material Type: 3/4" - 0 Rock

Test Method:	AASHTO T-99 D, T-27, T-265	Date Sampled:	03/06/08
Sample Method:	AASHTO T-2	Date Tested:	03/10/08
Preparation Method:	Moist	Oversized Material:	Removed
Compacting Method:	Manual	Hammer Type:	Circular



Coarse specific gravity used in adjusted max density computations:		2.706
Optimum Moisture:	10.7%	Max. Dry Density: 136.6 lbs/ft³
Adjusted Opt Moisture:	9.7%	Adjusted Max Density: 140.5 lbs/ft³
Percent Passing 3/4" Sieve: 85.3%		

as
 CC:

Old Recreation LLC - Kim Fox
 City of Forest Grove Community Development - Richard Mead
 NW Design - Rober Sera
 Get R Done Concrete
 Franks Excavation LLC

kfox@prunw.com
 rsera@easystreet.com
 Fax: 503-537-9283
 franciscocan_7@hotmail.com

Reviewed By: 
 Steven W. Leach - Project Manager

Test results pertain to the specific material tested/inspected only and may not be representative of other locations or elevations. Information contained herein is not to be reproduced, except in full, without prior authorization from Carlson Testing, Inc.

**The remaining sample material will be discarded in two weeks from the date the test was completed.*

Carlson Testing, Inc.

Main Office
P.O. Box 23814
Tigard, Oregon 97281
Phone (503) 684-3460
Fax (503) 684-0954

Salem Office
4060 Hudson Ave., NE
Salem, Oregon 97301
Phone (503) 589-1252
Fax (503) 589-1309

Bend Office
P.O. Box 7918
Bend, Oregon 97708
Phone (541) 330-9155
Fax (541) 330-9163

Geotechnical Office
7185 SW Sandburg Rd Ste 110
Tigard, Oregon 97223
Phone (503) 601-8250
Fax (503) 601-8254

Report Of In-Place Density Tests

RECEIVED

MAR 17 2008

T0806725.

Job Number: **CITY OF FOREST GROVE**

Date: 03/14/2008

Permit #: BLD08-0014

Client: OLD RECREATION LLC - KIM FOX

Project: SEWER LINE @ 1721.22ND AVENUE - COMPACTION TESTING

Address: 1721 22ND AVENUE FOREST GROVE OR

Material Description: 3/4" - 0 ROCK FROM SUNSET ROCK

Maximum Dry Density: 140.5 lbs./cu. ft. Optimum Moisture: 9.7 % Required Compaction: 95 %

Standard Count for Gauge Serial # Troxler 37194

Method of Test: ASTM D2922, D3017/ AASHTO T-99

Source of Value Dated 03/06/2008 is project specific.

Standard Counts - Density: 2659

Moisture: 691

Calibration Data: 02/2008

AW 3-26-08

Date Of Test	Test No.	Code	Test Location	Density Count	Moist. Count	Mode	Depth	Elev. Ft.	% Field Moist.	In-Place Density (lbs/cu. ft.)		% Comp.
										Wet	Dry	
03-06	1	ST	FROM SW CORNER OF NEW FOUNDATION 5'N @ CNTR LINE	2132	99	DT	6"	0	5.3	138.9	131.9	93*
03-06	2	ST	FROM SW CORNER 15'N 2'W OF TEST #1	2085	96	DT	6"	0	5.9	140.6	132.8	94*

Distribute attachments.

Please see reverse side for additional information.

Date Of Test	Test No.	Code	Test Location	Density Count	Moist. Count	Mode	Depth	Elev. Ft.	% Field Moist.	In-Place Density (lbs/cu. ft.)		% Comp.
										Wet	Dry	

Asterisked (*) percent compaction test results did not meet listed acceptance criteria.

Conformance statement cannot be made because lab test results are pending. Contractor needs to understand that proceeding with cover is at their own risk.

Remarks:

PENDING PROCTOR

OLD RECREATION LLC - KIM FOX

KFOX@PRUNW.COM

TO: CITY OF FOREST GROVE COMM DEVELOPMENT - RICHARD MEAD

NW DESIGN - ROBERT SERA

RSERA@EASYSTREET.COM

GET R DONE CONCRETE

FAX/503-537-9283

FRANKS EXCAVATION LLC

FRANCISCOCAN_7@HOTMAIL.COM

NW DESIGN

Typist: AS

Test By: W. RIDER

Reviewed By: Steven W Leach On 03/13/2008

Test results were discussed and left with _____ of _____

Code Descriptions

NC - No code (general fill areas and backfill/original ground/not fill)
 SF - Structural fill (Buildings Non-Residential)
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ET - Electrical trench
 GT - Gas line trench
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Carlson Testing, Inc.
NCL of Low Compressive Strength Tests & Compaction Tests

Mar 14, 2008
T0806725.

Project Name: SEWER LINE @ 1721 22ND AVENUE - COMPACTION TESTING
 Project Address: 1721 22ND AVENUE FOREST GROVE OR
 Permit No: BLD08-0014
 P.O. No:

Project Manager: STEVEN W. LEACH

							Compliance	CTI Sign-Off	Date Corrected
Sample Type	Proctor	Date Tested	Test #	% Comp	Req	% Comp			
Soils	2	03/07/2008	ST 1A	92		95			
Location: RETEST OF #1 PERFORMED 3-6-08 2'W & 4'N OF SW CORNER OF NEW FOUNDATION @ GARAGE									
Soils	2	03/07/2008	ST 2A	87		95			
Location: RETEST OF #2 TEST PERFORMED 3-6-08 2'W & 15'N OF SW CORNER OF GARAGE FOUNDATION									
Soils	3	03/06/2008	ST 1	93		95			
Location: FROM SW CORNER OF NEW FOUNDATION 5'N @ CNTR LINE									
Soils	3	03/06/2008	ST 2	94		95			
Location: FROM SW CORNER 15'N 2'W OF TEST #1									

OLD RECREATION LLC - KIM FOX
TO: CITY OF FOREST GROVE COMM DEVELOPMENT - RICHARD MEAD

NW DESIGN

NW DESIGN - ROBERT SERA

GET R DONE CONCRETE
 FRANKS EXCAVATION LLC



A place where businesses and families thrive.

City of Forest Grove

1924 Council St
Forest Grove, OR 97116
503-992-3229
Fax: 503-992-3202

Building Permit

Residential Mechanical

Permit Number: 311-19-000417-MECH

IVR Number: 311081449425

Web Address: www.forestgrove-or.gov

Email Address: cd@forestgrove-or.gov

Permit Issued: May 30, 2019

Project: APM 1721 22nd Ave

TYPE OF WORK

Category of Construction: Single Family Dwelling

Type of Work: Alteration

Submitted Job Value: \$4,081.00

Description of Work: Push/pull gas furnace

JOB SITE INFORMATION

Worksite Address

Parcel

Owner:

FOX KIM R

1721 22ND AVE

1N436DD16400

Address:

2219 C STREET

FOREST GROVE, OR 971161613

FOREST GROVE, OR

97116631

LICENSED PROFESSIONAL INFORMATION

Business Name

License

License Number

Phone

WILLAMETTE HVAC LLC

CCB

56951

503-259-3200

PENDING INSPECTIONS

Inspection

Inspection Group

Inspection Status

2999 Final Mechanical

Mech Res

Pending

SCHEDULING INSPECTIONS

Various inspections are minimally required on each project and often dependent on the scope of work. Contact the issuing jurisdiction indicated on the permit to determine required inspections for this project.

Schedule or track inspections at www.buildingpermits.oregon.gov

Call or text the word "schedule" to 1-888-299-2821 use IVR number: 311081449425

Schedule using the Oregon ePermitting Inspection App, search "epermitting" in the app store

PERMIT FEES

Fee Description	Quantity	Fee Amount
Balance of minimum permit fees - mechanical		\$15.40
Furnace - greater than 100,000 BTU	1	\$11.90
State of Oregon Surcharge - Mech (12% of applicable fees)		\$3.28
Total Fees:		\$30.58

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 agency's 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 at (503) 232-1987.

All persons or entities performing work under this permit are required to be licensed unless exempted by ORS 701.010 (Structural/Mechanical), ORS 479.540 (Electrical), and ORS 693.010-020 (Plumbing).

Forest Grove Inspection Report

Tel: (503)992-3229

Location:

1721 22ND AVE, FOREST GROVE,
WASHINGTON, OR, 971161613, UNITED

Inspection Date:

June 11, 2019 at 10:41:03 AM

Record Type:

Residential Mechanical

Record ID:

311-19-000417-MECH

Inspection Type:

2999 Final Mechanical

Inspector:

Yvette Hamilton

Result:

Approved

Comments:**Violation Summary:**

A handwritten signature in black ink, appearing to be 'Yvette Hamilton', written over a horizontal line.

Inspector

Contractor