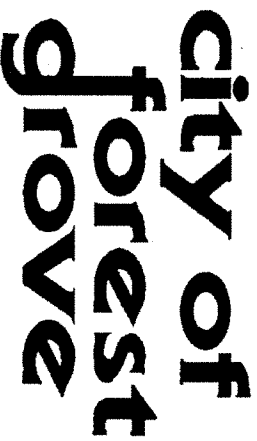




1924 Council Street
PO Box 326
Forest Grove, OR 97116
503-992-3229

Certificate of Occupancy



The permit was issued and the structure was inspected based on the applicable edition of the Oregon Specialty Codes. Plumbing and Mechanical contractor and license information for this project are available at the City of Forest Grove Building Department.

Building Address: 441 BLUEJAY AVE
FOREST GROVE OR 97116

Permit Number: BLD-10-00097

Owner: EAGLE CAP INC
Address: 3225 LAVINA DR
FOREST GROVE OR 97116

Occupancy Code / Construction Type:
RESIDENTIAL, 1 AND 2 FAMILY VB
UTILITY, MISCELLANEOUS VB
UTILITY - GARAGE VB

Project Desc: Single Family Dwelling New

Special Conditions affecting the approval of this certificate:

N/A Structure contains an Automatic Fire Sprinkler system that is required to be maintained.
N/A Structure contains a double-check valve that is required to be maintained.
N/A Other required conditions applying to this site as follows:

Date: May 13, 2010

Mike Mullaney
Building Official, City of Forest Grove

This structure has been inspected and complies with the applicable codes, regulations and laws that were in effect at the time the permit was issued. All final inspections have been completed and this dwelling is approved for occupancy.



SITE PLAN

SCALE: 1" = 20'

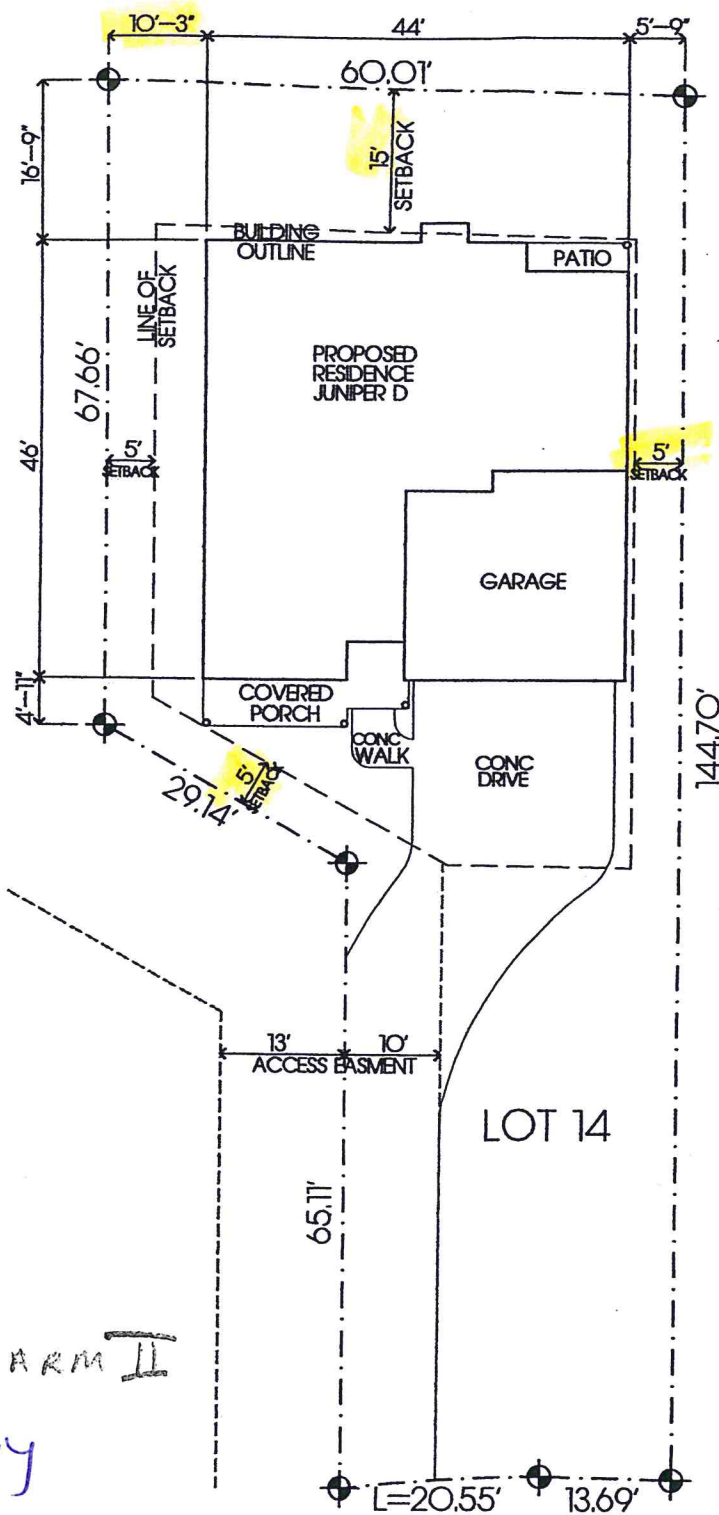


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SUNTEL
DESIGN



THIS DOCUMENT IS NOT
TO BE USED FOR ANY
OTHER PURPOSES

PLANNING - SITE PLAN
DESIGN - PLOT PLAN
CONSTRUCTION - PLOT PLAN
DATE: 10/10/10
BY: [Signature]
SUNTEL
A NORTHWEST DESIGN



LOT 14
Holscher Farm II
441 Bluejay

SUNTEL HOME DESIGN, INC. IS NOT
LIABLE FOR THE ACCURACY OF THE
TOPOGRAPHY INFORMATION. IT IS
THE SOLE RESPONSIBILITY OF THE
BUILDER TO VERIFY ALL SITE
CONDITIONS, INCLUDING ANY FILL
PLACED ON THE SITE, AND INFORM
OWNERS OF ANY POTENTIAL FIELD
MODIFICATIONS.

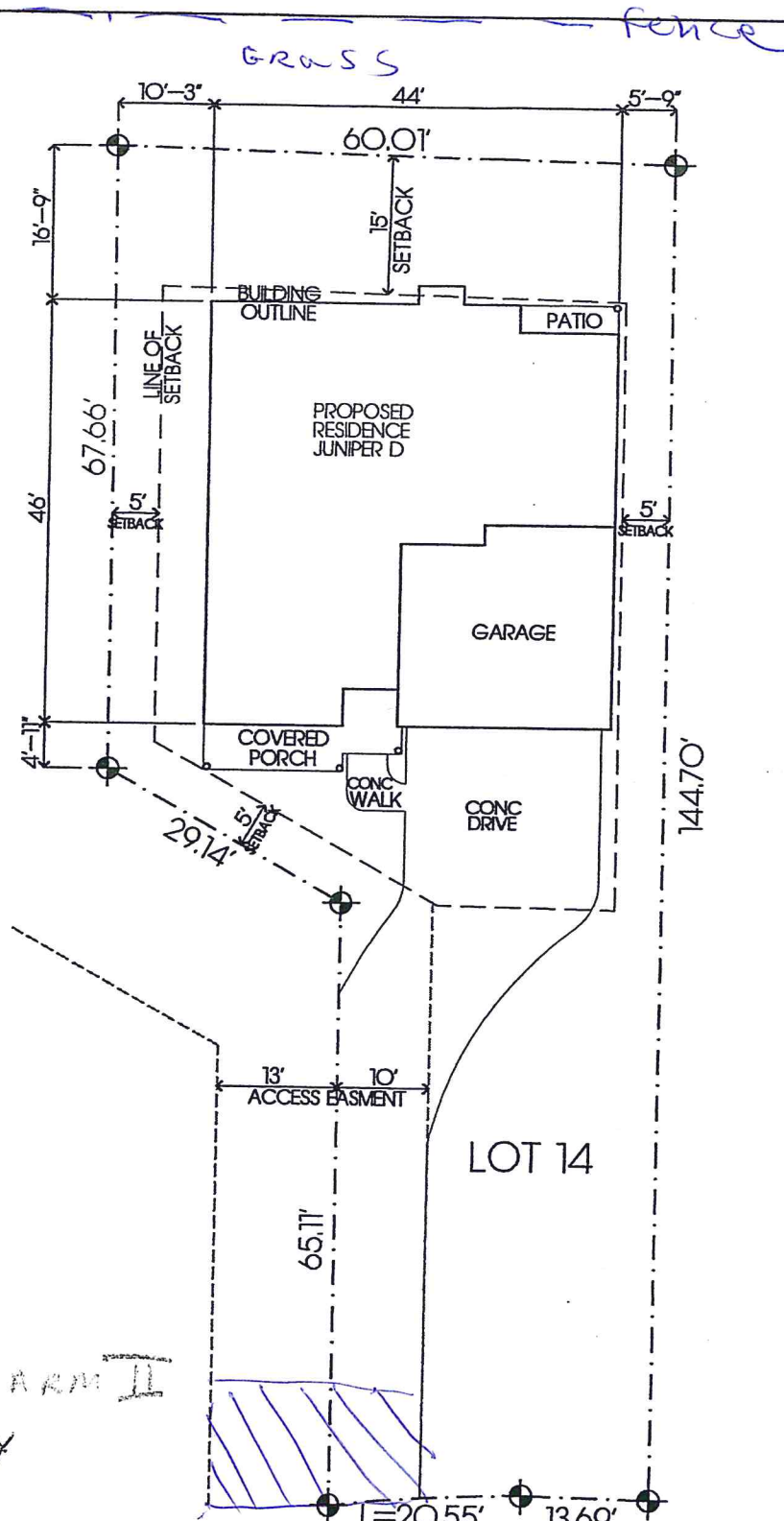
BLUEJAY AVENUE

LEGAL DESCRIPTION
LOT 14 HOLSCHER FARMS
FOREST GROVE, OR

OK
01/28/10

EROSION Control

Grade DOWN →



SILT FENCE 16



SITE PLAN

SCALE: 1" = 20'

LOT 14
HOLSCHER FARM II
441 BLUEJAY

BLUEJAY AVENUE

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OWNERS OF ANY POTENTIAL FIELD
MODIFICATIONS.

18' x 20'
6" Deep Rock
Approach Pad

LEGAL DESCRIPTION
LOT 14 HOLSCHER FARMS
FOREST GROVE, OR



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SUNTEL
DESIGN

THIS DOCUMENT IS NOT
TO BE USED FOR ANY OTHER
PROJECT WITHOUT THE WRITTEN
CONSENT OF SUNTEL DESIGN, INC.

PLANNED: JENSEN
DESIGN: JENSEN
PLOT PLAN
DATE: 1/14/96
DRAWN: JENSEN
BY: JENSEN
A NORTHWEST DESIGN

City of Forest Grove - Light and Power Review

Single Family Residential

441 BLUEJAY

Permit# BLD 10-00016

(LOCATION)

1. Builder to locate meter base on SOUTH wall of GARAGE within 3 feet of the front corner of the structure, or as follows: _____

2. For underground service up to 200 amps, builder to provide and install 3" Sch. 40 PVC conduit (at a minimum depth of 36" with a maximum of three (3) 90 degree bends) from the meter base to the pedestal (or pole) located at:

SOUTHWEST CORNER OF LOT, SEE
ATTACHED RED-LINED SITE PLAN...

Light & Power Department to inspect conduit installation prior to backfilling.

Contact L&P Dept. for specifications.

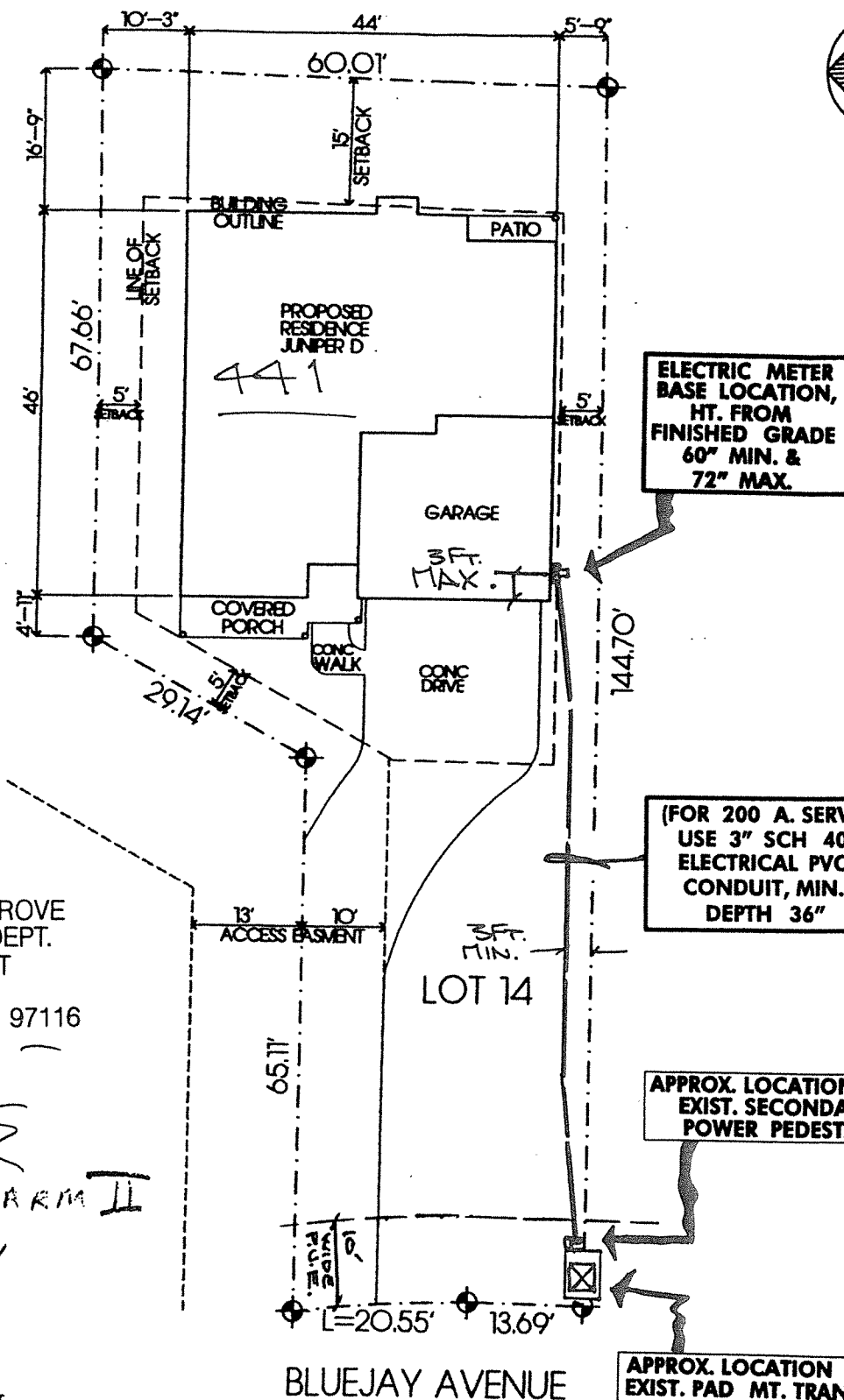
3. Utility-provided temporary construction service, including permit, is available for a \$225.00 fee. In addition, line extension fees are charged if the cost to connect to the Utility System exceeds a pre-set allowance. Contact the City Light & Power Department at (503)992-3250.

Comments: The City of Forest Grove Light & Power Dept. can provide and install the duct run for U.G. power service for an additional cost. Contact the Light & Power Dept. for information.

NOTE: If service is to be over 200 amps, 4" Sch. 40 PVC duct must be installed. If service is to be 400 amps or more, contact Light & Power Dept.

Additional comments: The standard cost of a service line extension for a single-family residence is \$195. Unusual circumstances may require additional charges.

NOTE: USE CITY OF FOREST GROVE LIGHT AND POWER DEPARTMENT SPECIFICATIONS NOT PGE. IF SPECIFICATIONS ARE NOT CLEAR CALL (503) 992-3250



CITY OF FOREST GROVE
LIGHT & POWER DEPT.
1818 B. STREET
P.O. BOX 326
FOREST GROVE, OR 97116

- REVIEW -

2/3/10 - NL

LOT 14

HOLZMEINER ARM II

441 BLUEJAY

SUNTEL HOME DESIGN, INC. IS NOT
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CONDITIONS, INCLUDING ANY FILL
PLACED ON THE SITE, AND INFORM
OWNERS OF ANY POTENTIAL FIELD
MODIFICATIONS.

LEGAL DESCRIPTION
LOT 14 HÖLSCHER FARMS
FOREST GROVE, OR

THIS BOOK IS PROPERTY OF
THE
LAW OFFICE OF C. E. WOOD

CLERK: JACOB D.
RECEIVED: PLAT PLAT
CO.
DATE: 199
BY: P

A NORTH WEST DESIGN



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 441 BLUE JAY
Contractor JOHN
Phone Number 503/357/2490

Scheduled Inspection Date 2/01/10
Mon ☒ Tues ☐ Wed ☐ Thurs ☐ Fri ☐
AM ☐ PM ☐ other _____
Permit Number PLM10-00019

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:

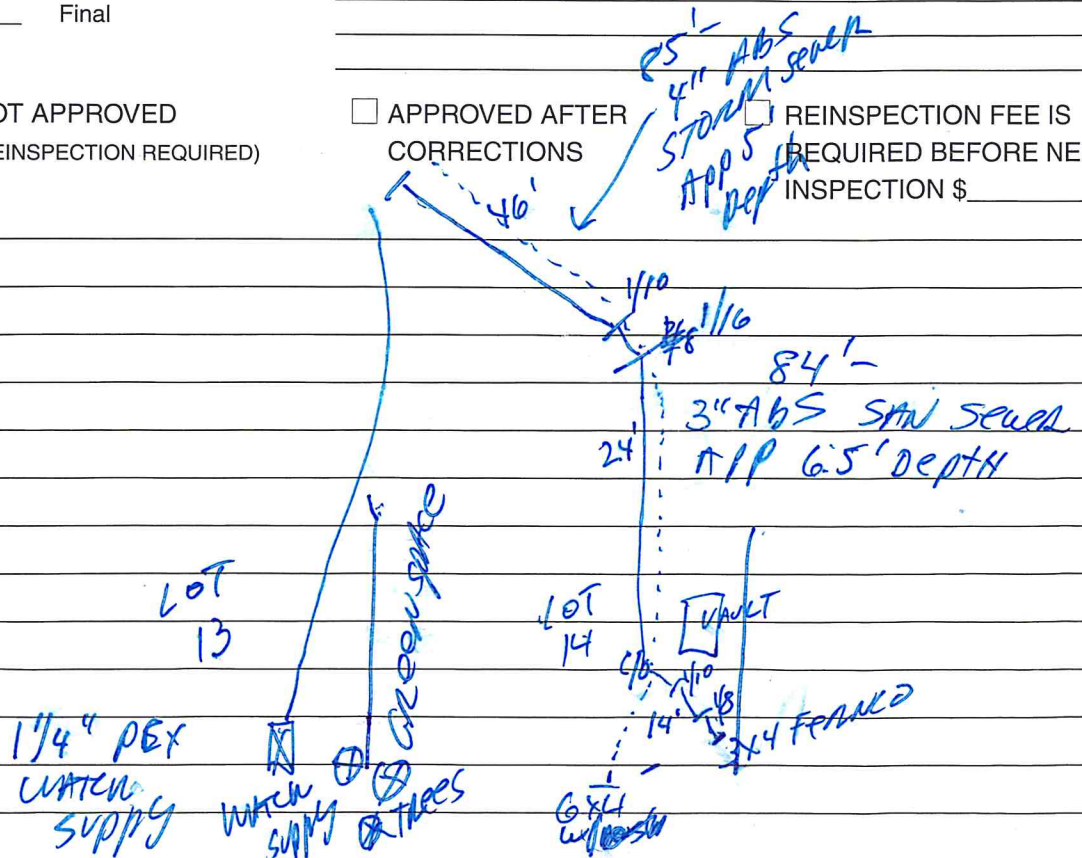
☒ APPROVED

☐ NOT APPROVED
(REINSPECTION REQUIRED)

☐ APPROVED AFTER
CORRECTIONS

☐ REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS:



Date: 02/01/2010

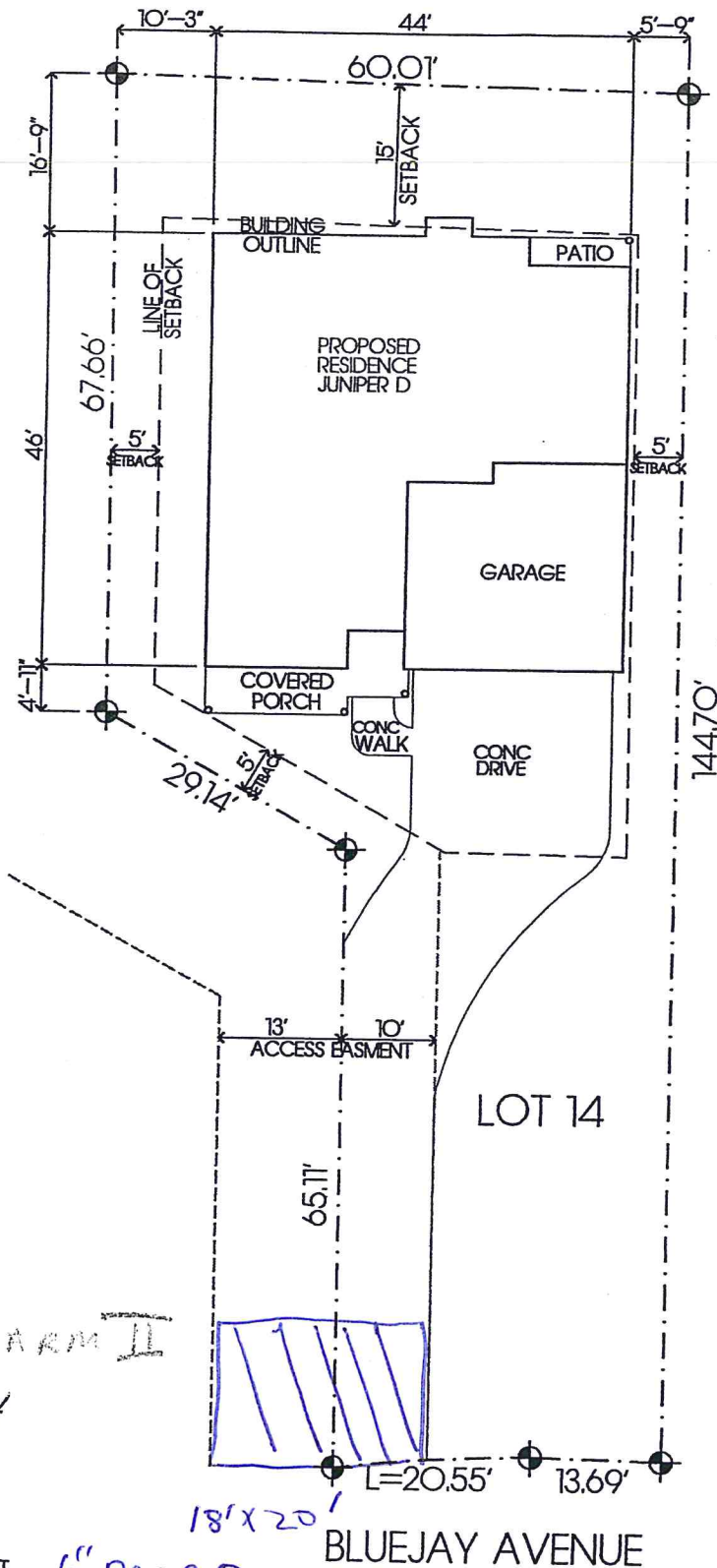
Inspector: [Signature]

Erosion Control

Grade Down →

Grass

fence



LOT 14
HOLSCHER FARM II
441 BLUEJAY

18'x20'
6" Deep Rock
Approach pad

BLUEJAY AVENUE

SUNTEL HOME DESIGN, INC. IS NOT
LIABLE FOR THE ACCURACY OF THE
TOPOGRAPHY INFORMATION. IT IS
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PLACED ON THE SITE, AND INFORM
OWNERS OF ANY POTENTIAL FIELD
MODIFICATIONS.

LEGAL DESCRIPTION
LOT 14 HOLSCHER FARMS
FOREST GROVE, OR



SILT FENCE, 16'



SITE PLAN

SCALE: 1" = 20'



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SUNTEL
HOME DESIGN



THOMAS BOOKER PERRY ROAD
SUITE 200
LAKE OSWEGO, OR 97035
PLAN NO. JUNIPER D
SHEET NO. 1
DATE 1/98
BY
A NORTHWEST DESIGN



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJOY AVENUE
Contractor JOHN
Phone Number 503/522/1571

Scheduled Inspection Date 4/22/10
Mon ☐ Tues ☐ Wed ☐ Thurs ☒ Fri ☐
AM ☐ PM ☐ other _____
Permit Number BLD 10-00076
00097

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 DECK TOO CLOSE TO PROPERTY LINE
- ② POST ADDRESS - DIGITS TO CONTRAST W/ BACKGROUND
+ BE VISIBLE FROM THE STREET
- ③ REMOVE ALL CONSTRUCTION DEBRIS INC. SCRAP CONCRETE
- ④ FINISH GRADING

Date: 04/22/10

Inspector: JK



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 441 Blue Jay
Contractor _____
Phone Number _____

Scheduled Inspection Date 5-12-10
Mon ☐ Tues ☐ Wed ☒ Thurs ☐ Fri ☐
AM ☐ PM ☐ other _____
Permit Number BLD-10-00097

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:

Today please

☐ APPROVED

☐ NOT APPROVED
(REINSPECTION REQUIRED)

☒ APPROVED AFTER
CORRECTIONS

☐ REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS:

① FINISH GRADING, PARTICULARLY BY DECK

② REMOVE ALL CONSTRUCTION DEBRIS

③ REMOVE SCRAP CONCRETE & GRAVEL BY SIDE WALK & DRIVEWAY -
BACKFILL W/ EARTH

Date: 05/12/10

Inspector: LB



COMMUNITY DEVELOPMENT DEPARTMENT
Building and Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 441 Bluejay Ave
Contractor Rinnas 503.849.8078
Phone Number _____

Scheduled Inspection Date 4/8/10
Mon ☐ Tues ☐ Wed ☐ Thurs ☒ Fri ☐
AM ☒ PM ☐ other _____
Permit Number BLD 10-00016

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:

Forms OK
Compaction OK

☐ APPROVED

☐ NOT APPROVED
(REINSPECTION REQUIRED)

☒ APPROVED AFTER
CORRECTIONS

☐ REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS: IRON TIES HAVE TO BE ON PLACE



Date: 4/8/10

Inspector: JOE CORTES

City of Forest Grove

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

BUILDING PERMIT

PERMIT NO.: BLD10-00016
APPLIED: 1/28/2010
ISSUED: 2/10/2010
EXPIRES: 8/10/2010

SITE ADDRESS: 441 BLUEJAY AVE

ASSESSOR'S PARCEL NO.: 1N435AA-11100

PROJECT DESCRIPTION: NEW SFR / LOT 14 / HOLSCHER FARMS /
PLAN 83199D / BEDS 3, BATHS 2, FLOORS 1

OWNER/APPLICANT	CONTRACTOR
	EAGLE CAP INC 3225 LAVINA FOREST GROVE OR 97116 62811

TYPE OF WORK: **NEW**
TYPE OF USE: **SF**
CENSUS CATEGORY:
ZONING:

Occupancy Groups

1: **R3** 2:
3: 4:

Construction Types

1: **VB** 2:
3: 4:

AREA

LOT: **0sf**
1ST FLR: **1,518sf**
2ND FLR: **0sf**
BASEMENT: **0sf**
GAR/CARPORT: **506sf**
OTHER: **66sf**

NUMBER OF UNITS: **1**
STORIES: **1**
BUILDING HEIGHT: **0 ft**

VALUE: **\$177,238.82**

REQUIRED SETBACKS:

FRONT: **30.00 ft**
SIDE 1: **5 ft**
SIDE 2: **10 ft**
REAR: **15 ft**

REQUIRED PARKING

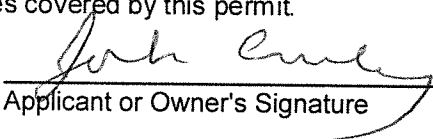
TOTAL: **4**
HANDICAPPED: **0**
COMPACT: **0**
IMPRV SURF: **0 sf**

FEES			
Type	By	Date	Amount
PRMT	MLP	2/10/2010	\$1,316.55
SUCH	MLP	2/10/2010	\$157.99
PLAN	MLP	1/28/2010	\$855.76
SDTX	MLP	2/10/2010	\$1,518.00
SITE	MLP	1/28/2010	\$270.00
(additional fees not shown here)			Total: \$19,941.99

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.: BLD10-00016
APPLIED: 1/28/2010
ISSUED: 2/10/2010
EXPIRES: 8/10/2010

- 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 THE STREET ADDRESS SHALL BE DISPLAYED IN A PROMINENT POSITION NEAR THE ENTRANCE TO THE BUILDING AND AT THE STREET. NUMBERS SHALL BE AT LEAST 4 INCHES HIGH, OF A CONTRASTING COLOR AND VISIBLE FROM THE STREET. MUNICIPAL CODE SECTION 9.215
- 6 "MAXIMUM DRIVEWAY WIDTH AT THE STREET RIGHT-OF-WAY SHALL BE 24 FEET IN ALL RESIDENTIAL ZONES."
- 7 ONE STREET TREE TO BE PLANTED IN PARKWAY. INSTALLATION TO BE COMPLETED BY THE CITY. (THE STREET TREE DEPOSIT WILL BE REFUNDED FOR ANY TREE NOT INSTALLED. IF ADDITIONAL TREES ARE INSTALLED, THE APPLICANT WILL BE BILLED FOR THE DIFFERENCE.)
- 8 *BUILDER TO VERIFY SITE UTILITIES*
BUILDER TO COMPLY WITH CURRENT CWS RULES AND REGULATIONS.

24 Hour Notice Required For All Inspections

City of Forest Grove

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

MECHANICAL PERMIT

PERMIT NO.: MEC10-00018
ISSUED: 2/10/2010
APPLIED: 1/28/2010
EXPIRES: 8/10/2010

SITE ADDRESS: 441 BLUEJAY AVE
ASSESSOR'S PARCEL NO.: 1N435AA-11100
TYPE OF WORK: NEW
TYPE OF USE: SFD
PROJECT DESCRIPTION: NEW SFR / LOT 14 / HOLSCHER FARMS / PLAN 83199D /
BEDS 3, BATHS 2, FLOORS 1

OWNER/APPLICANT

EAGLE CAP INC
3225 LAVINA
FOREST GROVE OR 97116

CONTRACTOR

EAGLE CAP INC
3225 LAVINA
FOREST GROVE OR 97116
62811

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	3.00
Water Heater Vent	1.00

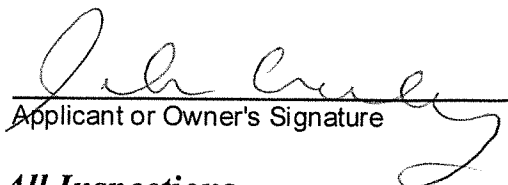
Fees

Type	By	Date	Amount
PRMT	RMM	2/10/2010	\$115.45
SUCH	RMM	2/10/2010	\$13.85
PLAN	RMM	2/10/2010	\$28.86
Total:			\$158.16

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:

City of Forest Grove

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

PLUMBING PERMIT

PERMIT NO.: **PLM10-00019**
APPLIED: **1/28/2010**
ISSUED: **2/10/2010**
EXPIRES: **8/10/2010**

SITE ADDRESS: **441 BLUEJAY AVE**
ASSESSOR'S PARCEL NO.: **1N435AA-11100**
TYPE OF WORK: **New**
TYPE OF USE: **Single Family Residential**
PROJECT DESCRIPTION: **NEW SFR / LOT 14 / HOLSCHER FARMS /
PLAN 83199D / BEDS 3, BATHS 2, FLOORS 1**

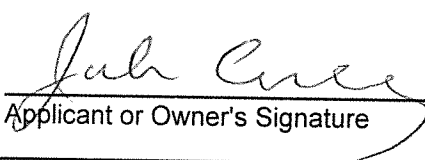
<u>OWNER/APPLICANT</u>	<u>CONTRACTOR</u>
EAGLE CAP INC 3225 LAVINA FOREST GROVE OR 97116	EAGLE CAP INC 3225 LAVINA FOREST GROVE OR 97116 62811

Plumbing Fixtures		Fees			
Fixture Type	Quantity	Type	By	Date	Amount
		BTH1	RMM	2/10/2010	\$316.75
		SUCH	RMM	2/10/2010	\$38.01
Total:					\$354.76

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

POSTED

Site Address 441 BLUEJAY AVENUE
Contractor JEA
Phone Number 503/781/0576

Scheduled Inspection Date 02-16-10
Mon ☐ Tues ☒ Wed ☐ Thurs ☐ Fri ☐
AM ☒ PM ☐ other _____
Permit Number B1010-00016

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: _____

Date:

2-16-10

Inspector:



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJAY AVENUE
Contractor JOHN
Phone Number 503/524/1571

Scheduled Inspection Date 02/18/10
Mon ☐ Tues ☐ Wed ☐ Thurs ☒ Fri ☐
AM ☐ PM ☒ other _____
Permit Number PLM10-00019

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 FTG DRAIN
- ☐ 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:

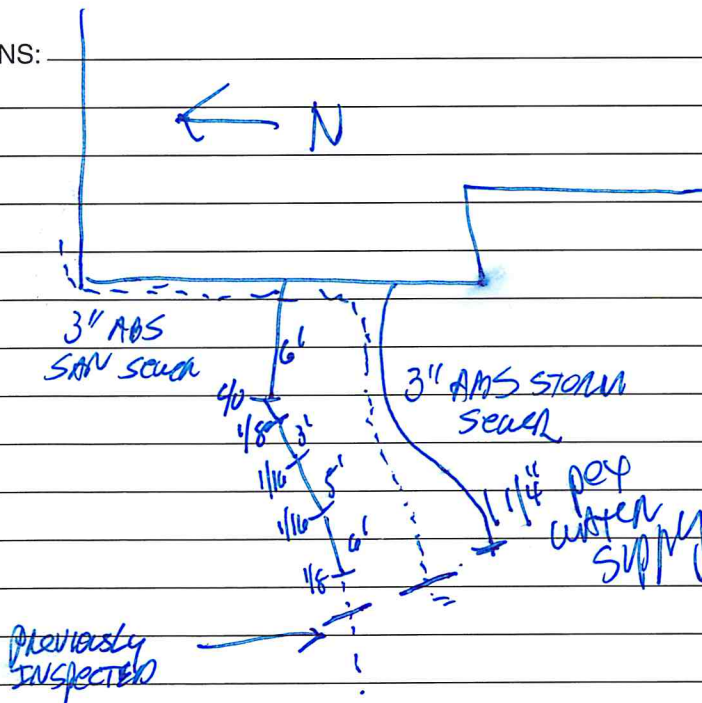
☒ APPROVED

☐ NOT APPROVED
(REINSPECTION REQUIRED)

☐ APPROVED AFTER
CORRECTIONS

☐ REINSPECTION FEE IS
REQUIRED BEFORE NEXT
INSPECTION \$ _____

CORRECTIONS:



Date: 02/18/10

Inspector: [Signature]

POSTED



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJAY AVENUE
Contractor TOTEN
Phone Number 503/522/1571

Scheduled Inspection Date 02/22/10

Mon ☒ Tues ☐ Wed ☐ Thurs ☐ Fri ☐

AM ☐ PM ☐ other ☐

Permit Number PERM10-00018

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: UF MECHANICAL DUCTWORK

GAS PIPE SUPPORT - OTC (NOT UNDER TEST)

Inspector: [Signature]

02/22/2010



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJAY AVENUE
Contractor JOHN
Phone Number 503/522/1571

Scheduled Inspection Date 02/22/10
Mon ☒ Tues ☐ Wed ☐ Thurs ☐ Fri ☐
AM ☐ PM ☐ other _____
Permit Number DM10-00019

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: UF PLUMBING PIPING CONFIGURATION

Date: 02/22/2010

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUE JAY
Contractor JOHN
Phone Number 503/522/1571

Scheduled Inspection Date 02/22/10
Mon ☒ Tues ☐ Wed ☐ Thurs ☐ Fri ☐
AM ☐ PM ☐ other _____
Permit Number BLD10-00016

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 STRAIGHTEN VAPOR BARRIER
② REMOVE loose wood/decks

OK TO Deck w/ ABOVE

Date:

2/22/2010

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJAY AVENUE
Contractor JAH
Phone Number 503/522/1576

Scheduled Inspection Date 03/09/10
Mon ☐ Tues ☒ Wed ☐ Thurs ☐ Fri ☐
AM ☐ PM ☐ other _____
Permit Number BLD10-00016

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: EXTERIOR SHEAR WALL NAILING

Date: 03/09/10

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJAY AVENUE
Contractor JOHN
Phone Number 503/522/1571

Scheduled Inspection Date 03/09/10
Mon ☐ Tues ☒ Wed ☐ Thurs ☐ Fri ☐
AM ☐ PM ☐ other _____
Permit Number PCM10-00019

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:

TOP OUT PLUMBING

Date:

03/09/10

Inspector:

[Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

POSTED

INSPECTION REQUEST

503-992-3206

Site Address 441 BLUEJAY AVENUE
Contractor JAHN
Phone Number 503/522/1571

Scheduled Inspection Date 03/09/10

Mon ☐ Tues ☒ Wed ☐ Thurs ☐ Fri ☐

AM ☐ PM ☐ other _____

Permit Number MEC 10-00018 (T)

MEC-10-00112 (E)

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: GAS TAG # 726852

① NO FIREPLACE @ THIS TIME

MECHANICAL ROUGH & GAS PIPING TEST

Date: 03/09/10

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 441 BLUEJAY AVENUE
Contractor JOHN
Phone Number 503/522/1571

Scheduled Inspection Date 03/11/10

Mon ☐ Tues ☐ Wed ☐ Thurs ☒ Fri ☐

AM ☐ PM ☐ other _____

Permit Number BLD10-00016

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: FRAMING APPROVED

① NOTE: WINDOWS/GLAZING NOT
INSTALLED @ THIS TIME
UNABLE TO VERIFY COMPLIANCE
W/ ENERGY CODE.

② BE SURE TO HAVE MOISTURE CONTENT
FORM COMPLETED PRIOR TO INSULATION
INSPECTION. HAVE ON SITE OR DROP-OFF
A COPY.

Thanks,

Date: 3/11/2010

Inspector: 2h Muef



Moisture Content Acknowledgement Form

I, John Crosley, am the general contractor or the owner-builder at the following address:

441 Bluejay
Street Address

Forest Grove
City

10 - 000016
Permit#

If applicable:

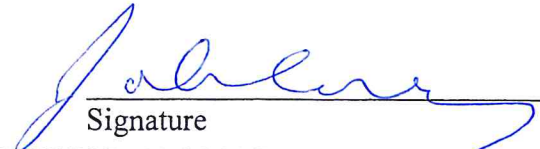
14
Subdivision/Lot and/or Map and Tax Lot

To conform with the 2008 Oregon Residential Specialty Code (ORSC), Section R318.2, I am notifying the building official that I am aware of the moisture content requirement of ORSC Section R318.2 and have taken steps to meet this code requirement. [Section R318.2 is provided for reference.]

Section R318.2 Moisture content. Prior to issuance of the insulation/vapor barrier approval required by R109.1.5.2 of this code:

(A) All moisture-sensitive wood framing members used in construction shall have a moisture content of not more than 19 percent of the weight of dry wood framing members.

(B) The general contractor or the owner who was issued the structural permit shall notify the building official on a division approved form that the contractor or the owner who was issued the structural permit is aware of and has taken steps to meet the requirement in paragraph (A).


Signature

3/15/2010
Date



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 441 Blue Jay
Contractor John
Phone Number 503 522 1571

Scheduled Inspection Date 3-22-10
Mon ☒ Tues ☐ Wed ☐ Thurs ☐ Fri ☐
AM ☒ PM ☐ other _____
Permit Number Bldg-00097

BUILDING

☐ Erosion Control
☐ Footing / Pier
☐ Foundation Wall
☐ Underfloor (P & B)
☒ Shear IBP
☐ 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: _____

Date: 3-22-10

Inspector: [Signature]



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

Site Address 441 Blue Jay
Contractor John
Phone Number 503 522-1571

Scheduled Inspection Date 4-21-10

Mon ☐ Tues ☐ Wed ☒ Thurs ☐ Fri ☐

AM ☐ PM ☐ other _____

Permit Number MCC-10-0088

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:

Install anti-tipping device on stove

Date: 4-21-10

Inspector: [Signature]

Inspector:



COMMUNITY DEVELOPMENT DEPARTMENT
Building / Engineering / Code Enforcement

INSPECTION REQUEST

503-992-3206

POSTED

Site Address 441 BLUEJAY AVENUE
Contractor JOHN
Phone Number 503/522/1571

Scheduled Inspection Date 4/22/10
Mon ☐ Tues ☐ Wed ☐ Thurs ☒ Fri ☐
AM ☐ PM ☐ other _____
Permit Number BLD 10-00076
00097

BUILDING	PLUMBING	MECHANICAL	MANUFACTURED HOME
<input checked="" 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 type="checkbox"/> Backflow Device		
<input type="checkbox"/> Approach/Sidewalk	<input type="checkbox"/> Water Heater		
<input type="checkbox"/> Other	<input type="checkbox"/> Other		
<input checked="" type="checkbox"/> Planning	<input type="checkbox"/> Final		
<input checked="" type="checkbox"/> Final			

Comments: _____

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

CORRECTIONS: ① complete backfill and grading
② provide house #'s
③ complete deck at rear of house
④ max 8" step at master bed
⑤ provide handle on crawl space
⑥ provide Insulation cert

Date: 4-22-10

Inspector: [Signature]



City of Forest Grove

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

Permit Number:

Building Permit Application

Phone: 503-992-3229

Fax: 503-992-3202

Inspection Request Line: 503-992-3206

BHD 10 - 00016

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 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: 441 BLUEJAY	
City/State/ZIP: FIG, OR 97116	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Holscher Farm II Lot no.: 14	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Build single family house	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Eagle Cap Inc	
Address: 3225 Lavina	
City/State/ZIP: FIG. OR 97116	
Phone: (503) 357 2490	Fax: (503) 357 2490
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: Eagle Cap Inc	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB lic.:	

Authorized signature:

Print name:

John Crosley

Date: **1/28/2010**

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

Valuation

Number of bedrooms: **3**

Number of bathrooms: **2**

Total number of floors: **1**

New dwelling area: **1518** square feet

Garage/carport area: **506** square feet

Covered porch area: **644** 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:

if

BUILDING

* F
In



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:

PLM10 - 00019

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 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: 441 BLUEJAY	
City/State/ZIP: F.G. OR 97116	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Holscher Farm II Lot no.: 14	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: Eagle Cap Inc	
Address: 3225 Lavina	
City/State/ZIP: Forest Grove OR 97116	
Phone: (503) 357-2490	Fax: Same
<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.:

Authorized signature:

John Crosley

Print name:

John Crosley

Date:

1/28/2010

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		13.90	
Backwater valve		13.90	
Clothes washer		13.90	
Dishwasher		13.90	
Drinking fountain		13.90	
Ejectors/sump		13.90	
Expansion tank		13.90	
Fixture/sewer cap		13.90	
Floor drain/floor sink/hub		13.90	
Garbage disposal		13.90	
Hose bib		13.90	
Ice maker		13.90	
Interceptor/grease trap		13.90	
Medical gas (value: \$ ____)		By value	
Primer		13.90	
Roof drain (commercial)		13.90	
Sink/basin/lavatory		13.90	
Tub/shower/shower pan		13.90	
Urinal		13.90	
Water closet		13.90	
Water heater		13.90	
Other:		13.90	
Other:			
Subtotal			
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)

MEC10-00018

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*			
For special information use checklist.			
Description	Qty.	Ea.	Total
Heating/cooling			
Furnace add-on air conditioning	1/1	11.90	23 ⁸⁰
Gas heat pump		8.95	
Duct work	1	15.85	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	6 ⁰⁰
Other:		8.95	
Other fuel appliances			
Water heater	1	8.95	8 ⁹⁵
Gas fireplace	1	8.95	8 ⁹⁵
Flue vent for water heater or gas fireplace	2	6.00	12 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	1	8.95	8 ⁹⁵
Single-duct exhaust (bathrooms, toilet compartments, utility rooms)	3	6.00	18 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	1	By Outlet #	
Barbecue		By Outlet #	
Clothes dryer (gas)		By Outlet #	
Other:			
MECHANICAL PERMIT FEES*			
Subtotal			115 ⁴⁰
Minimum permit fee			27.30
Plan review (% of permit fee)			28 ⁸⁰
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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