

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

Certificate of Occupancy

city of forest

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

Building Address: 379 BLUEJAY AVE

FOREST GROVE OR 97116

EAGLE CAP INC

Owner:

Address

FOREST GROVE 3225 LAVINA DR OR 97116

Permit Number: BLD-13-00346

Occupancy Code / Construction Type

UTILITY, MISCELLANEOUS **RESIDENTIAL, 1 AND 2 FAMILY**

UTILITY - GARAGE **₩ ₩**

Project Desc:

Single Family Dwelling New

Special Conditions affecting the approval of this certificate:

Structure contains an Automatic Fire Sprinkler system that is required to be maintained

Structure contains a double-check valve that is required to be maintained

Other required conditions applying to this site as follows:

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.





INSPECTION REQUEST

Site Address 37 Contractor ————————————————————————————————————	19 Blye Jay John 503 522-15-71	Mon 🔀 .	ed Inspection Date 1 · ZS · 13 Tues Wed Thurs Fri PM other Jumber 3 · 00346
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED CORRECTIONS:	NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER CORRECTIONS	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
Date: [[-25]	[] Inspe	ctor:	



CITY OF FOREST GROVE **1924 Council Street** Forest Grove, OR 97116

503-992-3229

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

Permit No.: BLD-13-00346

Permit Type: Single Family Dwelling New

Site Address: 379 BLUEJAY AVE

FOREST GROVE OR 97116

OccCode Construction Type R-3

SqFt 2613

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495

EAGLE CAP INC Owner: Address:

3225 LAVINA DR

Phone: Fax:

FOREST GROVE OR 97116

Contractor: EAGLE CREST APARTMENTS & EAGLE C

Address: 4300 PACIFIC AVE Phone: (503) 357-2490

Fax:

1-20

SUPPLEMENTAL INFORMATION:

Business Lic#: ccb 62811

FOREST GROVE OR 97116 Contact:

JOHN CROSLEY

Phone: (503) 357-2490

Description:

SUPPLEMENTAL INFORMATION:			
# OF STORIES	2	REQRD SETBACK SIDE2	8
# TREES	1	REQRD SETBACK FRONT	20
# SQ FT 1ST FLOOR	1550	REQRD SETBACK REAR	48.66
# SQ FT 2ND FLOOR	1063	SETBACK - FRONT	24
# SQ FT GAR/CARPORT	495		
#SQ FT LOT	7249		
BLDG HEIGHT	32		
BUILDING VALUATION	296510.94		
# SQ FT HTD (SD TAX)	2613		
BLDG PLAN REVIEW?	Υ		
WATER CONN TYPE	Drop In		
WATER METER SIZE	3/4" METER		
REQRD SETBACK SIDE1	8		
FEES:			
ILLU.	100000000000000000000000000000000000000		
Residential Site Review	308.00	Building Plan Review Fee	1,254,11
Residential Site Review		Building Plan Review Fee Street Tree Deposit	1,254.11 340.00
	231.53	Street Tree Deposit	340.00
Residential Site Review State Surcharge Water Connection Fees	231.53 275.00	Street Tree Deposit Water SDC Fee	340.00 4,368.52
Residential Site Review State Surcharge Water Connection Fees Building Permit Fee	231.53 275.00 1,929.40	Street Tree Deposit Water SDC Fee EXCAVATION FEE IN ROW	340.00 4,368.52 29.00
Residential Site Review State Surcharge Water Connection Fees Building Permit Fee Surface Water Quantity	231.53 275.00 1,929.40 275.00	Street Tree Deposit Water SDC Fee EXCAVATION FEE IN ROW Sanitary SDC Fee	340.00 4,368.52 29.00 4,665.00
Residential Site Review State Surcharge Water Connection Fees Building Permit Fee Surface Water Quantity Erosion Control Inspection-New	231.53 275.00 1,929.40 275.00 250.00	Street Tree Deposit Water SDC Fee EXCAVATION FEE IN ROW Sanitary SDC Fee Park System Dev Fee	340.00 4,368.52 29.00 4,665.00 3,000.00
Residential Site Review State Surcharge Water Connection Fees Building Permit Fee Surface Water Quantity Erosion Control Inspection-New Transportation Dev Tax	231.53 275.00 1,929.40 275.00 250.00 6,665.00	Street Tree Deposit Water SDC Fee EXCAVATION FEE IN ROW Sanitary SDC Fee Park System Dev Fee L&P Service Extension	340.00 4,368.52 29.00 4,665.00 3,000.00 195.00
Residential Site Review State Surcharge Water Connection Fees Building Permit Fee Surface Water Quantity Erosion Control Inspection-New	231.53 275.00 1,929.40 275.00 250.00	Street Tree Deposit Water SDC Fee EXCAVATION FEE IN ROW Sanitary SDC Fee Park System Dev Fee	340.00 4,368.52 29.00 4,665.00 3,000.00
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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:	Sheline	Date: _	4/18/	13	Issued by:
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CONDITIONS

Permit No.: BLD-13-00346

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.)

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.

COMPLY WITH CURRENT CLEAN WATER SERVICES RULES AND REGULATIONS.

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

INSTALL EROSION CONTROL AS REQUIRED PER CLEAN WATER SERVICES STANDARD SPECIFICATIONS. WHEN THE EROSION CONTROL MEASURES ARE IN PLACE, PLEASE CALL 503-992-3206 FOR ON-SITE INSPECTIONS OR 503-992-3228 FOR OFF-SITE (PUBLIC RIGHT-OF-WAY) INSPECTIONS.

ALL HAUL-OFF OF ONSITE EXCAVATED MATERIALS SHALL BE DELIVERED TO AN APPROVED DESTINATION. IF THE DESTINATION IS OUTSIDE OF THE CITY OF FOREST GROVE, THE APPLICANT SHALL SUBMIT A COPY OF THE APPROVED PERMIT FROM THE GOVERNING LAND USE AUTHORITY OF THAT DESTINATION SITE.

GENERAL CONTRACTOR: SEE RED LINED ELECTRICAL SITE PLAN AND ATTACHMENTS FROM THE LIGHT & POWER DEPARTMENT; FOR IMPORTANT INFORMATION AND COMMENTS REGARDING ELECTRIC SERVICE INSTALLATION. PASS ALL NEEDED INFORMATION ON TO ELECTRICAL, EXCAVATION & OTHER CONTRACTORS.

MAXIMUM DRIVEWAY WIDTH AT THE STREET RIGHT-OF-WAY SHALL BE 24-FEET IN ALL RESIDENTIAL ZONES.

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

INSTALL CONCRETE SIDEWALK AND DRIVE APPROACH PER CITY STANDARD SPECIFICATIONS.

^{*} BUILDER TO VERIFY UTILITIES*



CITY OF FOREST GROVE **1924 Council Street** Forest Grove, OR 97116

503-992-3229

Permit No.: PLM-13-00348

Permit Type: Plumbing Permit Residential New

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

Site Address:	379 BLUEJAY AVE FOREST GROVE OR 97116		OccCode Construction Type	SqFt
Owner: Address:	EAGLE CAP INC 3225 LAVINA DR FOREST GROVE OR 97116		Phone: Fax:	
Contractor: Address:	MALMEDAL ENTERPRISES PO BOX 207 BANKS OR 97106		Phone: (503) 324-0759 Fax: Business Lic#: ccb 102535	
Contact:	KRIS MALMEDAL		Phone: (503) 324-0759	
Description:				
# BATHS	AL INFORMATION:	3		- 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12
<i>" 5</i> / (1110		3		
FEES: Plumbing Permit	· Fee	386.25	Plumbing State Surcharge	46.35
i idinoing r cirili	. 1 00	300.20	Fidinising State Surcharge	40.55
				TOTAL FEES: 432.60



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

Permit No.: MEC-13-00347

For Inspections Call the 24 Hour Inspection Line Permit Type: Mechanical Permit Residential New Building (503-992-3206) Engineering (503-992-3228) Site Address: 379 BLUEJAY AVE OccCode Construction Type SqFt FOREST GROVE OR 97116 Owner: **EAGLE CAP INC** Phone: Address: 3225 LAVINA DR Fax: FOREST GROVE OR 97116 Contractor: REMINGTON HEATING & A/C Phone: (503) 522-7415 Address: 5763 NE ORENCO GARDENS DR Fax: HILLSBORO OR 97124 Business Lic#: CCB 183292 Contact: MICHAEL REMINGTON Phone: (503) 522-7415 **Description:** SUPPLEMENTAL INFORMATION: MECH PLAN REVIEW? Y # FLUE/VENT - APPLIANCE/CHI 3 # AIR CONDITIONING 1 # FIREPLACE - GAS 1 # DRYER EXHAUST/VENT 1 # SINGLE DUCT EXHAUST/BAT 5 # FUEL PIPING/ OUTLETS 4 # RANGE HOOD/OTHER KITCH 1 # FURNACE 1 # DUCT WORK 2 **# WATER HEATER** 1 FEES: Mechanical Plan Review Equip 35.83 Mechanical Permit Fee/equip. 143.30 Mechanical State Surcharge Equ 17.20

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.

ate:	41	(B)	<u>^ ^ </u>	Issued by:	
					_

TOTAL FEES: 196.33

Building Permit Application

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:

TYPE	OF WORK
🔀 New construction	☐ Demolition
Addition/alteration/replacement	Other:
CATEGORY (OF CONSTRUCTION
1- and 2-family dwelling	☐ Commercial/industrial
Accessory building	☐ Multi-family
☐ Master builder	Other:
JOB SITE INFORM	MATION AND LOCATION
Job site address: LOT 2 146LSC	her 379 Rivern
City/State/ZIP: FG FOR 3	9711h
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: 1401 Cc hose C.	Lot no.: 7
Subdivision: HOLSCher far Tax map/parcel no.:	Lot no.: 2
	TION OF WORK
	MAISSON NEW MEMBER 그림 그렇게 1 ^
New house	2
Name: Eagle Car Address: 3225 Lav City/State/ZIP: F. G- DR 9	TENANT
City/State/ZIP: F. G- DR 9	7116
Phone: () 5221571	Fax: (50) 357-2496
□ PAPPLICANT	CONTACT PERSON
Business name:	
Contact name: Saha	
Address:	
City/State/ZIP:	
Phone: ()	Fax::()
E-mail:	
CONTRA	ACTOR
D	AND THE RESERVE OF THE PARTY OF
zwyce cu	
City/State/ZIP: Fibrory	7
Phone: (\$93) \$22 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Fax: ()
CCB lic.: 62811	144. ()
Authorized signature:	2
Print name: John Cro	25 i ey Date: 4 1 172
Tohn Cro	15 rey Date: 4 6 13

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation

Number. of bedrooms:

Number of bathrooms: 21

Total number of floors:

New dwelling area: 2613 square feet

Garage/carport area: 9 5 square feet

Covered porch area: square feet

Deck area: square feet

Other structure area:

square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation

Existing building area:

square feet

New building area:

square feet

Number of stories:

Type of construction:

Occupancy groups: Existing:

New:

NOTICE

All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application

Amount received

Date received:

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

after it has been accented as complete # \$25,821.19

BUILDING

Plumbing Permit Application

city of forest grove

Choslec

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: PLW-12-00348

TYPE OF	WORK	FEE* SCI	HEDIII E		
New construction		For special information use checklist.			
	Demolition	Description Description	Oty. Ea.	Total	
Addition/alteration/replacement	Other:	New 1- 2-family dwellings (includes			
CATEGORY OF CO	DNSTRUCTION	SFR (1) bath	239.50		
1- and 2-family dwelling	☐ Commercial/industrial	SFR (2) bath 2/2	316.75		
Accessory building	☐ Multi-family	SFR (3) bath	386.25		
☐ Master builder	Other:	Each additional bath/kitchen	41.72		
JOB SITE INFORMATIO		Fire sprinkler (sq. ft.)	By sq ft		
Job site address:		Site utilities			
3 6	9 Bluejay	Catch basin or area drain	13.90		
	(7)(6)	Drywell, leach line, or trench drain	13.90		
Suite/bldg./apt. no.:	Project name:	Footing drain (each 100 ft.:)	46.35		
Cross street/directions to job site:		Manufactured home utilities		ļ	
		Manholes	13.90	ļ	
		Rain drain connector	j 13.90		
		Sanitary sewer (each 100 ft.:)	46.35		
C. L. C. L. C.	T.	Storm sewer (each 100 ft.:)	46.35		
Subdivision: Hocs Cherfur	Lot no.: >	Water service (each 100 ft.:)	f 46.35		
Tax map/parcel no.:	•	Fixture or item	T 1 12.00 I		
DESCRIPTION OF WORK		Absorption valve	13.90		
Plumb hew house		Backflow preventer Backwater valve	13.90	· · · · · · · · · · · · · · · · · · ·	
	<i>∞</i> 7005€	Clothes washer	13.90		
		Dishwasher	13.90		
		Drinking fountain	13.90		
		Ejectors/sump	13.90		
PROPERTY OWNER	☐ TENANT	Expansion tank	13.90		
Name: Easle Car	The.	Fixture/sewer cap	13.90		
Address: 3225 Lavina)	Floor drain/floor sink/hub	13.90		
City/State/ZIP: F.G. OP2 9	7116	Garbage disposal	13.90		
Phone: (503) 5221571	Fax: ()	Hose bib	13.90		
□ APPLICANT	CONTACT PERSON	Ice maker	13.90		
	CONTACT PERSON	Interceptor/grease trap	13.90		
Business name:		Medical gas (value: \$)	By value		
Contact name:		Primer	13.90		
Address:		Roof drain (commercial)	13.90		
City/State/ZIP:		Sink/basin/lavatory	13.90		
Phone: ()	Fax: : ()	Tub/shower/shower pan	13.90		
E-mail:		Urinal	13.90		
		Water closet	13.90		
CONTRACTO)R	Water heater	13.90		
Business name: Malmad	alpin	Other:	13.90		
Address: BX 267		Other:			
City/State/ZIP: Banks OR	97106		Subtotal		
Phone: (50B 324 0759	Fax: ()	Plan review (nimum permit fee	\$ 27.30	
CCB lic.:	PB Lic. no.:	State surcharge (1	% of permit fee)		
	-roman water	J	AL PERMIT FEE		
Authorized signature:	_1	This permit application expires if a		ed within	

Date: U

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)

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:

		Λ	
	TYPE OF	WORK	
New construction	☐ Addition/a	lteration/replac	ement
☐ Demolition	Other:		
	CATEGORY OF	CONSTRUCTION	ON
1- and 2-family dwelli	_	al/industrial	Accessory building
Multi-family	☐ Master bui	lder	Other:
JOB	SITE INFORMATI	ION AND LO	CATION
Job site address:		9	Bhuejay
City/State/ZIP:	F, 6-	•	. /
Suite/bldg./apt. no.:		Project name:	
Cross street/directions to jol	site:		
Subdivision: House	la Cara falar	Lot no.: 2	
Tax map/parcel no.:	MCD TUV	M	
FF	DESCRIPTION	OF WORK	1 y

PROPERTY :	OWNED		T TENIANIT
			☐ TENANT
- Laga	e Cap I		
	s Lavin		
City/State/ZIP: F. G.			
Phone: (503) 5 Z Z		Fax: ()	
APPLICA	NT	c	ONTACT PERSON
Business name:			1
- admitos mante.			
Contact name:		MARKANIA WAA	
Contact name:			
Contact name: Address:		Fax::()	
Contact name: Address: City/State/ZIP:		Fax::()	
Contact name: Address: City/State/ZIP: Phone: ()	CONTRAC		
Contact name: Address: City/State/ZIP: Phone: ()			Q
Contact name: Address: City/State/ZIP: Phone: () E-mail: Business name: Reha	ington t	tor teatin	
Contact name: Address: City/State/ZIP: Phone: () E-mail: Business name: Remail: Address: 9 2 3 M	ington t	TOR) p (
Contact name: Address: City/State/ZIP: Phone: () E-mail: Business name: Rehard Address: Q Z 3 M City/State/ZIP: A, L C	ington l uw view s. DR	tor teatin wpoint 9712	
Contact name: Address: City/State/ZIP: Phone: () E-mail: Business name: Remail: Address: Q Z 3 M City/State/ZIP: 1, L C Phone: (503 5 2 2	ington t	tor teatin wpoint 9712	
Contact name: Address: City/State/ZIP: Phone: () E-mail: Business name: Remail: Address: Q Z 3 M City/State/ZIP: H, L L Phone: (So3 S Z Z CCB lic.: (83 2 q	ington l uw view s. DR	tor teatin wpoint 9712	
Contact name: Address: City/State/ZIP: Phone: () E-mail: Business name: Remail: Address: Q Z 3 M City/State/ZIP: 1, L C Phone: (503 5 2 2	ington l uw view s. DR	tor teatin wpoint 9712	

COMMERCIAL FEE* S	CHEDU	LE - USE C	HECKLIST
Mechanical permit fees* are	based or	n the value of	the work
performed. Indicate the valu	ie (round	ed to the near	est dollar) of
mechanical materials, equip		or, overhead,	and profit.
	lue: \$		
RESIDENTIAL EQU	IPMENT	SYSTEM	S FEES*
For special in	formation	use checklis	t.
Description	Qty.	Ea.	Total
Heating/cooling			.,
Furnace add-on air conditioning	1/		125 g
	+/1	11.90	52
Gas heat pump	+	8.95	13170
Duct work	\perp	15.85	171 -
Hydronic hot water system Residential boiler (radiator	 		ļ
or hydronic)		11.00	
Unit heaters (fuel-type, not	 	11.90	
electric), in-wall, in-duct,	1		
suspended, etc.		11.90	
Flue/vent for any of above		6.00	600
Other:	1	8,95	
Other fuel appliances		<u> </u>	
Water heater	l i	8.95	V 92
Gas fireplace	·	8.95	0/95
Flue vent for water heater	 	0.53	1200
or gas fireplace	3	6.00	12
Log lighter (gas)		8.95	1
Wood/pellet stove		8.95	
Wood fireplace/insert		8.95	
Chimney/liner/flue/vent	 	6.00	
Other:		8.95	
Environmental exhaust and	vantilat	-4	J
Range hood/other kitchen	ventuat	1011	1 2 95
equipment	1	8.95	18
Clothes dryer exhaust	1	8.95	0 12
Single-duct exhaust		1	-3
(bathrooms, toilet	T .		300
compartments, utility rooms)	9	6.00	30
Attic/crawl space fans	***	6.00	
Other:		8.95	
Fuel piping			
\$4.00 for first four outlets; \$1.05	for each ad	ditional	400
Furnace, etc.	r	By Outlet #	
Gas heat pump		By Outlet #	
Wall/suspended/unit heater		By Outlet #	*******
Water heater	ſ	By Outlet #	
Fireplace	<u> </u>		
Range	<u> </u>	By Outlet #	
Barbecue		By Outlet #	<u> </u>
Clothes dryer (gas)		By Outlet #	
Other:		By Outlet #	
MECHANICA	L PERM		
· · · · · · · · · · · · · · · · · · ·		Subtotal	
		permit fee	27.30
Plan review	(% of	permit fee)	
State surcharge	(12% of	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)

TRI-COUNTY SERVICE CENTER

Clackemas

One- and Two-Family Dwelling Building Permit Application Checklist

Jurisdiction:

Clackamas Yultnomah	Address:		3 -	1	1	13	2	Q	7	Q1
Vashington	Phone:	***	****		2	_			-	- (· · ·
Vashington	Fax:	5	03	5	Em.	Com	15	7	State of the last	No. of Lot

de OF	FICE USE	ONLY
Reference no).:	
Associated p	ermits:	
☐ Electrical	☐ Plumbing	☐ Mechanical
Other:		

	THE FOLLOWING ITEMS ARE REQUIRED FOR PLAN REVIEW	Yes	No	N/A
	Land use actions completed. See jurisdiction criteria for concurrent reviews.			
1	Zoning. Flood plain, solar balance points, seismic soils designation, historic district, etc.	+	┼	
3	3 Verification of approved plat/lot.	+-	ļ	-
4	Fire districtapproval required.	1		├──
5	Septic system permit or authorization for remodel. Existing system capacity	+	 	1
1	Sewer permit.	+-	<u> </u>	1
7	Water district approval.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ļ	ļ
8	Soils report. Must carry original applicable stamp and signature on file or with application.	+	ļ	<u> </u>
9	Erosion control plan permit required. Include drainage-way protection, silt fence design and location of	1		
	catch-basin protection, etc.			
10	building codes. Lateral design details and connections must be incorporated into the plans or on a separate full-size sheet attached to the plans with cross references between plan location and details. Plan review cannot be completed if copyright violations exist.			
11] 		
	there is more than a 4-ft, elevation differential, plan must show contour lines at 2-ft, intervals); location of exception of	~		
	driveway; footprint of structure (including decks); location of wells/septic systems; utility locations; direction indicator; lot			
12	area; building coverage area; percentage of coverage; impervious area; existing structures on site; and surface drainage. Foundation plan. Show dimensions, anchor bolts, any hold-downs and reinforcing pads, connection details, vent			
	size and location.	0		
13	Floor plans. Show all dimensions, room identification, window size, location of smoke detectors, water heater,			
l	furnace, ventilation rans, plumbing fixtures, balconies and decks 30 inches above grade etc	M 1		
14	Cross section(s) and details. Show all framing-member sizes and spacing such as floor hearts, headers, joints out floor	 		
	wall construction, roof construction. More than one cross section may be required to clearly portray construction. Show		-	
	details of all wall and roof sheathing, roofing, roof slope, ceiling height, siding material, footings and foundation, stoire			
15	fireplace construction, thermal insulation, etc.			
13	Elevation views. Provide elevations for new construction; minimum of two elevations for additions and remodels. Exterior elevations must reflect the actual grade if the change in grade is greater than four foot at building envelope.			
	Full-size sheet addendums showing foundation elevations with cross references are acceptable.	V		
16	Wall bracing (prescriptive path) and/or lateral analysis plans. Must indicate details and locations; for			
	non-prescriptive path analysis provide specifications and calculations to engineering standards	✓	1	
17	Floor/roof framing. Provide plans for all floors/roof assemblies, indicating member sizing, spacing, and hearing			
	locations. Show attic ventilation.	V		
18	Basement and retaining walls. Provide cross sections and details showing placement of rebar. For engineered	<		
10	systems, see item 22, "Engineer's calculations."	~		
17	Beam calculations. Provide two sets of calculations using current code design values for all beams and multiple joists over 10 feet long and/or any beam/joist carrying a non-uniform load.	-		
20	Manufactured floor/roof truss design details.			
	Energy Code compliance. Identify the prescriptive path or provide calculations. A gas-piping schematic is required			
	for four or more appliances.	1		
22	Engineer's calculations. When required or provided, (i.e., shear wall, roof truss) shall be stamped by an engineer or		\dashv	
	architect licensed in Oregon and shall be shown to be applicable to the project under review.	1		İ
	JURISDICTIONAL SPECIFICS			
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24				
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28			4	

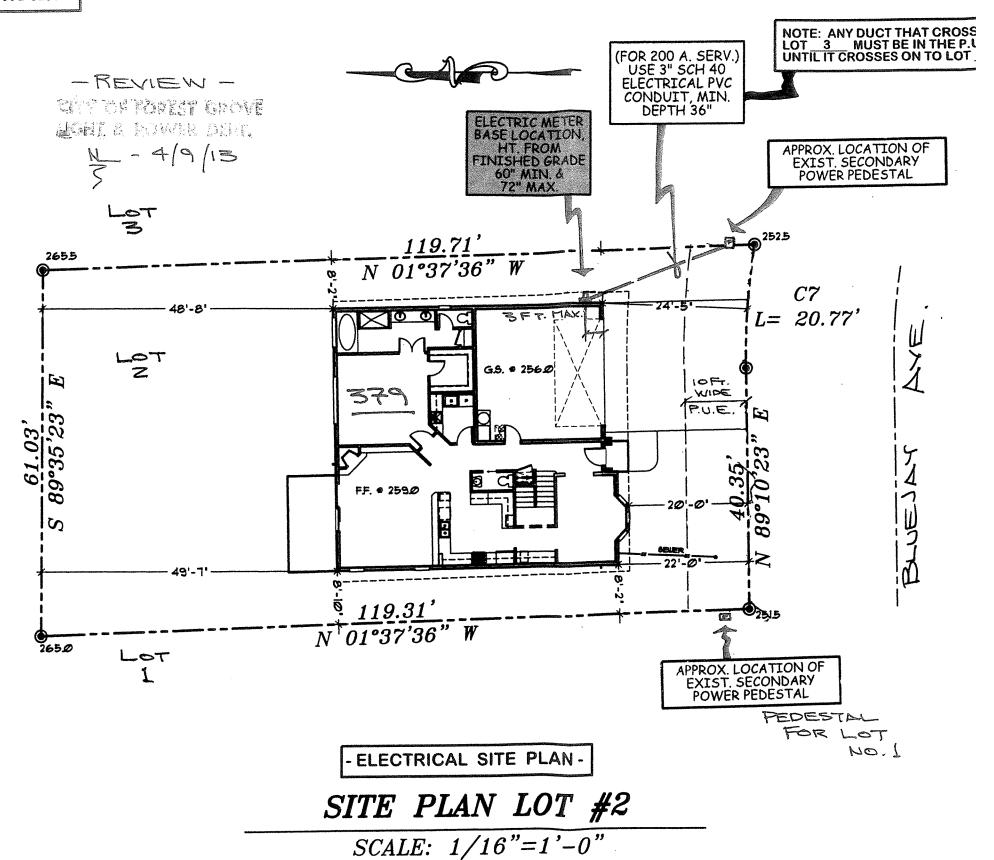
City of Forest Grove - Light and Power Review Single Family Residential

370 D
379 BLUEJAY AVENUE Permit# BLD-13-00 &
1. Builder to locate meter base on EAST wall of CARACE 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
moter base to the bedestal (or bole) located at.
SOUTHEAST CORNER OF LOT, SEE ATTACHED
THE 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
iee. In addition, line extension fees are charged if the cost to connect to the Liville Cost
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
s \$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

379 BLUEJAY AVENUE

"This design complies with ORS 92.044(7) in that to be within 1 ft. of a survey monument location stiplat. No design modification nor final field locatio would cause any utility infrastructure to be placed





INSPECTION REQUEST



Site Address 379 OLUE JAY Contractor John Phone Number 503/522/1871	Scheduled Inspection Date 5-7-/3 Mon Tues Wed Thurs Fri AM PM other Permit Number 13 00346
BUILDING Frosion Control Footing / Pier Foundation Wall Underfloor (P & B) Founderfloor (P & B) Water Line Water Line Rain/Crawl Drains Shear Storm Drainage Sanitary Sewer Insulation Approach/Sidewalk Other Planning 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 Comments: MANUFACTURED HOME
APPROVED NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER ☐ REINSPECTION FEE IS CORRECTIONS REQUIRED BEFORE NEXT INSPECTION \$
Thomas	
Date: 5-7-19 Ins	spector: David Tos



INSPECTION REQUEST



Site Address 379	Blue Tay	Schedul	ed Inspection Date 5-15-13
Contractor John			Tues Wed Thurs Fri
Phone Number 503	e-27 1571		PM O other early
Phone Number	<u> </u>	Alvi &	lumber 11M-13-00348
		Permit N	lumber
BUILDING	PLUMBING	MECHANICAL	MANUFACTURED HOME
Erosion Control Footing / Pier	<pre> Underfloor (P & B) Top Out (Rough)</pre>	Gas Piping Underfloor (P & B)	M/H Set-Up M/H Mechanical
Foundation Wall	Water Line	Rough Mechanical	M/H Water/Sewer
Underfloor (P & B)	Rain/Crawl Drains	HVAC (Final)	M/H Electrical Feeder
Shear	_X Storm Drainage	Other	M/H Final
Framing Insulation	_X Sanitary Sewer Backflow Device		Other
Approach/Sidewalk	Water Heater	Comments:	i
Other	Other		
Planning Final	Final		
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CORRECTIONS:	The state of the s		
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	March March 18 18 18 18 18 18 18 18 18 18 18 18 18	op of	
	0.74")	Former 6' bear @ Lot	- Jeva-
Date:	Inspe	ctor:	1
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INSPECTION REQUEST



Oile Address	379 Bluejaung Au John		duled Inspection Date 5-16-13
Contractor —	PLM-13 - 503 -522	2	☐ Tues ☐ Wed ☐ Thurs ☑ Fri ☐
Phone Number	200 16	, , , , ,	PMO other EAM
		Perm	it Number <u>PCM 13-00348</u>
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 Year Rain/Crawl Drains Year Storm Drainage Performance Sanitary Sewer Backflow Device Water Heater Other Final	MECHANICAL Gas Piping	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED	□ NOT APPROVED (REINSPECTION REQUIRED)		REQUIRED BEFORE NEXT
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100	<u>u</u> w/		
Date: 5-16-	13 In	spector: David	osa



INSPECTION REQUEST



Site Address 37 Contractor ————————————————————————————————————	John 503-522-1571	Mon □ AM ○	uled Inspection Date <u>5-23-13</u> Tues ☐ Wed ☐ Thurs ☒ Fri ☐ PM ○ other Number <u>BUD-13-06346</u>
BUIL DING 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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED	NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER CORRECTIONS	☐ REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
ground com ground com y) install p beans 5) Provide a	out ground cover ble le unobstructed French ver under Tralet/rem osts under or hange riminum 3" of beauting per stem 12 of Missing posts when	crawl space dr our where block vs where beams and where beam	aby Trulet (Place Du Trulet)
Date: 5-23	17 Inspe	ctor: Davigte	sch



INSPECTION REQUEST



Site Address	379 Blue per Ave	Scheduled Inspection Date 5-23-13
Contractor	John H	Mon ☐ Tues ☐ Wed ☐ Thurs 译Fri ☐
Phone Number	503-522-1571	AM ○ PM ○ other
		Permit Number MEC-13-00347
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 Comments: MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED	NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER ☐ REINSPECTION FEE IS CORRECTIONS REQUIRED BEFORE NEXT INSPECTION \$
CORRECTIONS:		
Date: 5-23-1	} Ins	pector: Davin Tos ch





INSPECTION REQUEST

Contractor	79 Bluegay Ave John		led Inspection Date <u>5-23-(3</u> Tues □ Wed □ Thurs 🄀 Fri □
Phone Number	503-522-1571	AM 〇	PM O other
		Permit N	Number PLM -13-06348
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED	NOT APPROVED (REINSPECTION REQUIRED)	APPROVED AFTER CORRECTIONS	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
Date: 5-23-13	b Insp	ector: Dav cu (5>c/



INSPECTION REQUEST



Site Address 379 Contractor John	BLUEJBY		uled Inspection Date <u>\$-25-75</u> Tues ★ Wed □ Thurs □ Fri □
Phone Number	03/522/1571	AM 〇	PM
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
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Date: 5-28-L	3 Inspe	ector:	

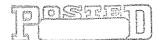


INSPECTION REQUEST

Site Address Contractor Phone Number	79 Blue Jay 504 M 503 522 1572	Mon □ AM ○	Iled Inspection Date 5 25 73 Tues Wed Thurs Fri PM other Number 80 346
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED CORRECTIONS:	NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER CORRECTIONS	☐ REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
Date: 5-20	lnspec	etor:	



INSPECTION REQUEST



7	70 Ph . T.		7.2.
Site Address	19 Blue Say	Schedu	led Inspection Date 7-72-73
Contractor	Ighu (Mon 🗌	Tues Wed Thurs Fri
Phone Number	503 522 1751	AM O	PM O other
		Permit I	Number \$10-13-0034C
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Approach/Sidewalk	Water Heater	Comments:	
Other	Other		
Planning Final	Final		
APPROVED CORRECTIONS:	NOT APPROVED (REINSPECTION REQUIRED) COUS 1	approved after corrections	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$ WE. HO SC
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	75 95000	Jilly Jacon	
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(4 pg 35)		
(3) Install 2, 5	strak Der S	how panel where
Straps are	e called out	or poside e	ence approval of
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	not allo	wed Behing	1 tab
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INSPECTION REQUEST



Wed Thurs Fri other Other PLM 13-003 48 UFACTURED HOME /H Set-Up /H Mechanical
UFACTURED HOME /H Set-Up
UFACTURED HOME /H Set-Up
/H Mechanical /H Water/Sewer /H Electrical Feeder /H Final ther
REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
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INSPECTION REQUEST



Site Address 379 Contractor 70 Phone Number 5			eduled Inspection Date 7-/5-/3 Tues Wed Thurs Fri
Phone Number ———	00/300/10/		○ PM ○ other <i></i> nit Number <i>M&C +3 -6034</i> 7
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
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Date: 7-15-	Inspe	ector:	h



INSPECTION REQUEST



Site Address 3 7 Contractor 7			led Inspection Date <u>7-/5-/3</u> Tues □ Wed □ Thurs □ Fri □
ک _ Phone Number	/	AM O	PM O other
	1 1	Permit I	Number <u>660-13-00346</u>
Erosien Control Footing / Pier Foundation Wall Underfloor (P & B) Shear / fr 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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
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INSPECTION REQUEST



Site Address 379 BLVESBY BURBUE Contractor John			Suled Inspection Date $279-13$ Tues \square Wed \square Thurs \square Fri
Phone Number	03/522/1571		PM X other
			t Number 660-13-09346
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
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Date: 7 -/9	-(3) Insp	ector:	4

city of forest grove

COMMUNITY DEVELOPMENT DEPARTMENT Building / Engineering / Code Enforcement

INSPECTION REQUEST

5	-a R/ -		
Site Address	79 Blue Jan	Sched	uled Inspection Date 7/7/3
Contractor	ha	Mon [☐ Tues │ Wed ☐ Thurs ☐ Fri ☐
Phone Number	SUS 572 15	OMA	PM other
	_	Permit	Number 414-13-0034
BUILDING Erosion Control Footing / Pier Foundation Wall Underfloor (P & B) Shear Framing Insulation Approach/Sidewalk Other Planning	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
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Dato: 7-1-	7 - /7 Inspe	actor:	



INSPECTION REQUEST

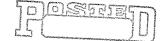
Site Address 37 Contractor Phone Number	9 Blaesay 503 522-15	Mon □ Ż/ AM ○	Iled Inspection Date 7-/7-7 Tues Wed Thurs Fri PM other SIO-/3-034C
EUIL DING Erosion Control Footing / Pier Foundation Wall Underfloor (P & B) Shear Framing Insulation Approach/Sidewalk Other Planning Final	PLUMBING Underfloor (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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
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Date:	-/3 Inspec	otor:	



INSPECTION REQUEST

Site Address 3 Contractor ————————————————————————————————————	29 BLUEJAY AVB JOHN 503/522/1571	Mon □ Tu AM ○ P	d Inspection Date <u>7-76-63</u> les ☑ Wed ☐ Thurs ☐ Fri ☐
BUILDING Erosion Control Footing / Pier Foundation Wall Underfloor (P & B) Shear Framing Insulation Approach/Sidewalk Other	PLUMBING Underfloor (P & B) Top Out (Rough) Water Line Rain/Crawl Drains Storm Drainage Sanitary Sewer Backflow Device Water Heater Other	Permit Nu MECHANICAL Gas Piping Underfloor (P & B) Rough Mechanical HVAC (Final) Other Comments:	mber DLD -13-00346 MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
Planning Final APPROVED CORRECTIONS:	Final NOT APPROVED (REINSPECTION REQUIRED) Couplete Just	PAPPROVED AFTER CORRECTIONS Las place Mailing Statisty Behind Ba	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
Date:	6-13 Inspe	ector:	





INSPECTION REQUEST

Site Address	379 Blueyer Ave	Sc	heduled Inspection Date 7-24-13
Contractor	John	Mc	on ☐ Tues ☐ Wed 🖾 Thurs ☐ Fri 🗌
Phone Number	503-522-1571	AN	1 ⊗ PM ○ other ———
	,	Pe	rmit Number <u>PUN-13-00348</u>
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 & E Rough Mechanic HVAC (Final) Other Comments:	•
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Date: 7-24-1	3 Inspec	otor: Dave	yTosch





INSPECTION REQUEST

Site Address	379 Blue yay Av	Scheduled Inspection Date 7-24-13
Contractor	John	Mon ☐ Tues ☐ Wed ☑ Thurs ☐ Fri ☐
Phone Number	503-522-1571	AM X PM O other
	,	Permit Number MEC-13-00347
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 Comments: MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
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per manu	tacturer's requir	e reports
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Data: 7.71-	172	Days Jacob





INSPECTION REQUEST

Site Address 3	79 Blue jay Av	Schedu	lled Inspection Date 7-26-13
Contractor	John	Mon 🗌	Tues 🗌 Wed 🗌 Thurs 🗌 Fri 🗌
Phone Number	503-522-1571	AM O	PM & other
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) Re 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
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Date: 7-26-	13 Inspec	ctor: Davy	Tosch



INSPECTION REQUEST

503-992-3206

Site Address 379 Contractor Phone Number 503	BULEJAY AVE LMS CONCRE - 648 -9816	Mon AM	led Inspection Date $9 18 13$ Tues \Box Wed \blacksquare Thurs \Box Fri \Box PM \bigcirc other \Box Number $BUD \cdot 13 \cdot 0034U$
BUILDING Erosion Control Footing / Pier Foundation Wall Underfloor (P & B) Shear Framing Insulation	PLUMBING Underfloor (P & B) Top Out (Rough) Water Line Rain/Crawl Drains Storm Drainage Sanitary Sewer Backflow Device	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
Approach/Sidewalk Other Planning Final	Water Heater Other Final	Comments:	S OK
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CORRECTIONS:			
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			ENTERED

Inspector:



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

Permit No.: PLM-13-01279

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

Permit Type: Plumbing Over the Counter SqFt OccCode Construction Type Site Address: 379 BLUEJAY AVE FOREST GROVE OR 97116 Phone: EAGLE CAP INC Owner: Fax: 3225 LAVINA DR Address: FOREST GROVE OR 97116 Phone: (503) 680-5888 Contractor: EDGE LANDSCAPE AND MAINTENANCE I Fax: Address: 378 BLUE JAY AVE Business Lic#: LCB 8680 FOREST GROVE OR 97116 Phone: (503) 680-5888 DANIEL EVERSON Contact: **Description:** SUPPLEMENTAL INFORMATION: # BACK FLOW PREVENTER 1 FEES: 3.28 27.30 Plumbing State Surcharge Plumbing Permit Fee 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:

Issued by:

Plumbing Permit Application

PLM-13001275

city of fórest grove

City of Forest Grove

Phone: 503-992-3229

Fax: 503-992-3202 1924 Council Street/P.O. Box 326, Forest Grove, Oregon 97116 Inspection Request Line: 503-992-3206

Permit Number:

TYPE OF	F WORK
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	Other: Back Flow
CATEGORY OF	
1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	Other:
JOB SITE INFORMAT	TON AND LOCATION
Job site address: 379 Blue	\ \ \ \
City/Ctoto/7ID:	sove 02 97116
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Blue Jag & Robin	1 700
2101-10	
1 3 10 1 103 4 04	Hopinword.
Subdivision:	Lot no.:
Tax map/parcel no.:	Lot no
DESCRIPTION	I OE WORK
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installation o	+ back+low
greventer.	
Names C \	☐ TENANT
111 20-00	<u>oc.</u>
City of the last o	
10.62, 01.00	
VINCENTAL VINCEN	Fax: ()
APPLICANT	☐ CONTACT PERSON
Business name: Edge Landsco	pe & Mains Inc.
Contact name: Dan Ever	Sun
Address: P.O. Box 205	
City/State/ZIP: Forest Cura	,
Phone: (503) 680, 5868	Fax::(\$03,3\$9.787\
E-mail: Dan @ exgelm.	'om
O CONTRAC	TOR
Business name: Edge Land:	scape Inc.
Address: SARLE AS	ABUS
City/State/ZIP:	
Phone: ()	Fax: ()
Phone: () CCB lic.: OLCB # 8 6 8 0	Fax: () PB Lic. no.:

FEE* SC			
For special informa			
Description	Qty.		Total
New 1- 2-family dwellings (includes	100 ft.		
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	١	13.90	13.9
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	13.90
Mi	nimum n	ermit fee	\$ 27.30
Plan review (% of permit fee)			
State surcharge (1)			
		MIT FEE	30.58

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)

Date: 9 30



INSPECTION REQUEST

503-992-3206



Site Address 379 Blue jay Ave Contractor Dan Phone Number	Scheduled Inspection Date 9-30-13 Mon Tues Wed Thurs Fri AM PM other Permit Number PLM-13 · 0/279
BUILDING Erosion Control Footing / Pier Foundation Wall Underfloor (P & B) Foundation Wall Underfloor (P & B) Shear Framing Insulation Approach/Sidewalk Other Planning Final Final 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
APPROVED NOT APPROVED (REINSPECTION REQUIRED) CORRECTIONS: Le part Re CETV	☐ APPROVED AFTER ☐ REINSPECTION FEE IS CORRECTIONS REQUIRED BEFORE NEXT INSPECTION \$
Date: 9-30-13 Inspec	ctor:





INSPECTION REQUEST

Site Address 3,79	1Blue Jay	Scheduled	d Inspection Date//-ZS-13
Contractor Jo	hn in		ues 🗌 Wed 🗌 Thurs 🗌 Fri 🗌
Phone Number50	3.522-1571	AM 🥱 F	PM Cother
		Permit Nu	PM O_ other mber PLM-13 · 00348
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED CORRECTIONS:	NOT APPROVED (REINSPECTION REQUIRED)	APPROVED AFTER CORRECTIONS	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
Date: -25-	-13 Inspe	ector:	





INSPECTION REQUEST

Site Address 379	Blue Jay	Schedu	led Inspection Date 11-25-13
Contractor	lohn	Mon ☆	Tues Wed Thurs Fri
Phone Number	503.522.1571	AM 🎢	PM O other
		Permit N	Number MEC-13-00347
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED CORRECTIONS:	NOT APPROVED (REINSPECTION REQUIRED) 3 RECHANS Comp	APPROVED AFTER CORRECTIONS	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
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Date: (1-75-1	ح Inspe	ctor: AUX	





INSPECTION REQUEST

Site Address 37 Contractor ——— Phone Number ——	9 Blue Jay John 503-522-1571	Scheduled Inspection Date //-22-/3 Mon □ Tues □ Wed □ Thurs □ Fri ☒ AM ○ PM ○ other Permit Number MEC/3-00347
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:
CORRECTIONS: 2	NOT APPROVED (REINSPECTION REQUIRED) Xhaust Range Hood	APPROVED AFTER CORRECTIONS REQUIRED BEFORE NEXT INSPECTION \$
Date: 11-22-13	3 Inspe	etor:





INSPECTION REQUEST

Site Address Contractor Phone Number	379 Blue J John 503 522-1571	Mon [uled Inspection Date <u>11-22-13</u> Tues Wed Thurs Fri Number
BUILDING Erosion Control Footing / Pier Foundation Wall Underfloor (P & B) Shear Framing Insulation	PLUMBING Underfloor (P & B) Top Out (Rough) Water Line Rain/Crawl Drains Storm Drainage Sanitary Sewer Backflow Device	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
Approach/Sidewalk Other Planning Final	Water Heater Other Final	Comments:	
☐ APPROVED CORRECTIONS:	Complete chosion	APPROVED AFTER CORRECTIONS MEASURES U TO RETENTION	REQUIRED BEFORE NEXT INSPECTION \$ M BACK YARD
(2)		•	@ PROPERTY
<u></u>	LINE NEAR FENCE REMOVE COVER BEDROOM	on Smb Det	in FRNT upstares
		<u> </u>	
Date: 11-22-	13 Inspe	ector:	





INSPECTION REQUEST

Site Address 37 Contractor ————————————————————————————————————	9 Blue Jay John 503-522-1571	Mon □ Tu AM ○ P	Inspection Date 11-22-13 es Wed Thurs Fri 4 M other mber PLM 13 03 48
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
CORRECTIONS: IN	NOT APPROVED (REINSPECTION REQUIRED) SHALL CAP ON CLEAN ASK Shwall-EAD	APPROVED AFTER CORRECTIONS V OUT LEAKS	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
Date: 11-22-13) Inspe	ector: AW	

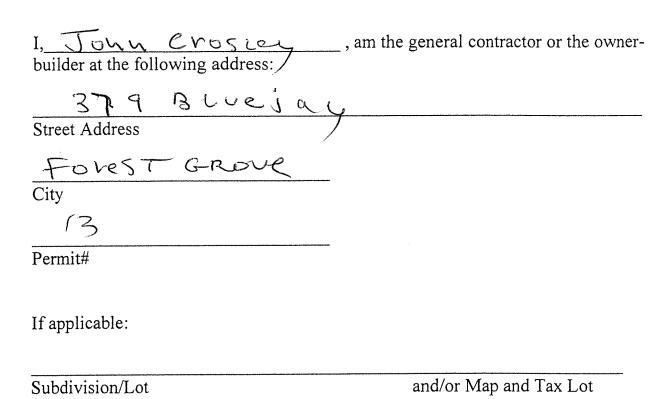


INSPECTION REQUEST

Site Address 379	BLUELAY ALENSA	Schedu	lled Inspection Date 12/03/13
Contractor			Tues Wed Thurs Fri
			Number <u>BLO - 13 - 00346</u>
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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED	☐ NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER CORRECTIONS	☐ REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
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Date: 12/03/13	Inspe	ctor:	. •



Moisture Content Acknowledgement Form



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

____ Date

503-992-3200

FAX 503-992-3207



INSPECTION REQUEST

	9 BLUEJAY Aven		ed Inspection Date 11/25/13
		i di	Tues ☐ Wed ☐ Thurs ☐ Fri ☐
Phone Number			PM O other
		Permit N	umber <u>RCD-13-00346</u>
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 · Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
APPROVED	NOT APPROVED (REINSPECTION REQUIRED)	☐ APPROVED AFTER CORRECTIONS	☐ REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
CORRECTIONS:			
REPLACE NO	DORESS DOGETS THAT	CONTRAST W/BACK	GROUND.
	ü		
Date: 1/25/13	Insp	ector: 12	



Date:

COMMUNITY DEVELOPMENT DEPARTMENT Building / Engineering / Code Enforcement



INSPECTION REQUEST

Contractor	10HN,		duled Inspection Date \overline{Z} $\overline{-3}$ \overline{C} \overline{C} \overline{C} Tues $\overline{\square}$ Wed $\overline{\square}$ Thurs $\overline{\square}$ Fri $\overline{\square}$
Phone Number	503/522/1571	AM 🤇	
			nit Number 13-00346
Evil DING 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 Comments:	MANUFACTURED HOME M/H Set-Up M/H Mechanical M/H Water/Sewer M/H Electrical Feeder M/H Final Other
Al-		~	
APPROVED	NOT APPROVED (REINSPECTION REQUIRED)	APPROVED AFTER CORRECTIONS	R REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$
APPROVED CORRECTIONS:	(REINSPECTION REQUIRED)	7	REQUIRED BEFORE NEXT INSPECTION \$
2	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
2	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
2	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
2	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
2	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
72	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
72	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
2	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$
72	(REINSPECTION REQUIRED)	CORRECTIONS	REQUIRED BEFORE NEXT INSPECTION \$

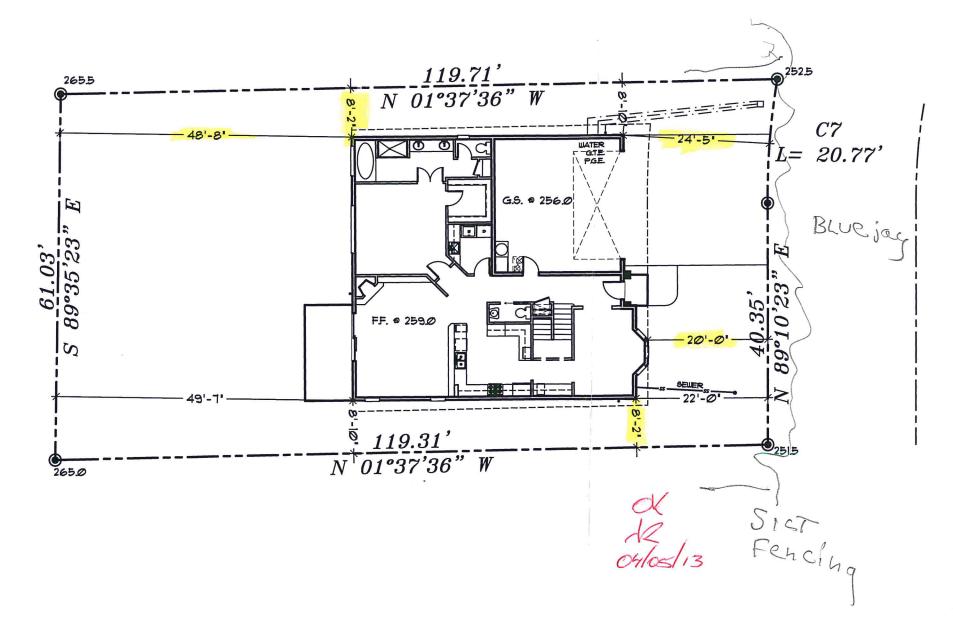




INSPECTION REQUEST

Site Address	379 BLUETRY	Schedul	ed Inspection Date 7-30-/3
Contractor	DM	Mon 🗌	Tues Wed Thurs Fri
Phone Number	503/522/157/	AM O	PM O other
		Permit N	Jumber MEC-13-00397
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	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
CORRECTIONS:	NOT APPROVED (REINSPECTION REQUIRED) Alvady approx	approved after corrections ucd and tage	REINSPECTION FEE IS REQUIRED BEFORE NEXT INSPECTION \$ 7-15-13
Date: 7-30-1	3 Insp	ector: Daxcy T	òsQ





SITE PLAN LOT #2

SCALE: 1/16"=1'-0"



341 N.W. 9TH AVE. PORTLAND, OREGON 97209

(503) 885.8377 P (503) 579.4132 F www.markstewart.com



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Since 1982

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EAGLE CAP CONSTRUCTION

PLAN * LOT #2

FEBRUARY 2013

SITE