

BUILDING PERMIT APPLICATION

CATEGORY		JOB SITE INFORMATION	
1- and 2-family dwelling	Commercial / Industrial	Project Name:	
Accessory Structure	Multi-family	Job Site Address:	
Demolition	Other:	Map / Parcel No.:	
TYPE OF WORK		DESCRIPTION OF WORK – PLEASE BE SPECIFIC	
☐ New construction	☐ Hood Suppression		
Add / Alter / Replace	Fire Alarm		
☐ Tenant Improvement	☐ Fire Sprinkler		
Mechanical	Plumbing		
Other:			
PROPERTY OWNER INFORMATION		N	OTICE
Business Name:		TIME LIMITATION OF APPLICATION. AN APPLICATION FOR A PERMIT FOR ANY PROPOSED WORK SHALL BE DEEMED TO HAVE BEEN ABANDONED 180 DAYS AFTER THE DATE OF FILING, UNLESS SUCH APPLICATION HAS BEEN PURSUED IN GOOD FAITH OR A PERMIT HAS BEEN ISSUED; EXCEPT THAT THE BUILDING OFFICIAL IS AUTHORIZED TO GRANT ONE OR MORE EXTENSION OF TIME FOR ADDITIONAL PERIODS NOT EXCEEDING 180 DAYS EACH. THE EXTENSION SHALL BE REQUESTED IN WRITING AND JUSTIFIABLE CAUSE DEMONSTRATED	
Contact Name:			
Address:			
City/State/Zip:			
Phone:			
Email:			
APPLICANT/ PRIMARY CONTACT INFORMATION		RESIDENTIAL / CON	MMERCIAL / INDUSTRIAL
Business Name:		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.	
Contact Name:			
Address:			
City/State/Zip:		TOTAL VALUATION	
Phone:			
Email:			
CONTRACTOR INFORMATION		BUILDING DEPA	RTMENT COMMENTS
Business Name:			
Contact Name:			
Address:			
City/State/Zip:			
Phone:			
Email:			
CCB:		Received By:	Received Date:

APPLY ONLINE AT WWW.BUILDINGPERMITS.OREGON.GOV

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