



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 INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
☐ APPLICANT	☐ 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.: _____ Plg Board Lic: __-____PB	West Linn or Metro Lic.: _____

FEE* SCHEDULE			
<i>For special information use checklist.</i>			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		672.00	
SFR (2) bath		891.00	
SFR (3) bath		1086.00	
Each additional bath/kitchen		117.00	
Fire sprinkler (_____ sq. ft.)			
Site utilities			
Catch basin, area drain or Manhole		31.00	
Drywell, leach line, or trench drain		31.00	
Footing drain (per 100' or fraction)		130.00	
Manufactured home utilities			
Rain drain connector		31.00	
Sanitary sewer (per 100' or fraction)		130.00	
Storm sewer (per 100' or fraction)		130.00	
Water service (per 100' or fraction)		130.00	
Interior Re:pipe (per100' or fraction)		118.00	
Fixture or item			
Absorption valve		31.00	
Backflow preventer(Irrigation)		31.00	
Backwater valve		31.00	
Clothes washer		31.00	
Dishwasher		31.00	
Drinking fountain		31.00	
Ejectors/sump		31.00	
Expansion tank		31.00	
Fixture/sewer cap		31.00	
Floor drain/floor sink/hub		31.00	
Garbage disposal		31.00	
Hose bib		31.00	
Ice maker		31.00	
Interceptor/grease trap		31.00	
Medical gas (value: \$ _____)			
Primer		31.00	
Roof drain (commercial)		31.00	
Sink/basin/lavatory		31.00	
Tub/shower/shower pan		31.00	
Urinal		31.00	
Water Closet		31.00	
Water heater		31.00	
Other:		31.00	
Subtotal			
Total # of Toilets in house:	Minimum permit fee	176.00	
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.			

Print name:	Date:
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Signature: _____