

BUILDING PERMIT

RESIDENTIAL / DEMOLITION

WEST LINN
22500 Salamo Rd.
West Linn, OR 97068
503-656-4211

PERMIT NUMBER: 935-12-0986

bldg@westlinnoregon.gov

IVR NUMBER: 935151413629			FIRST ISSUED DATE	E: 10/03/2012		
		TYPE	OF WORK			
SCOPE:	C	CLASS OF WORK:			0.00	
DESCRIPTION OF WORK TO BE DONE: HOUSE DEMO	LITION					
		JOB SITE I	NFORMATION			
SITE ADDRESS: 1849 13TH ST. WEST LINN. OR 97068		OWNER:				
TAXLOT PARCEL #: 21E35C 01900		ADDRESS:				
			PHONE:			
CONTRACTOR INFORMATION						
Business Name	License	Work	Address		Phone	
LAKE OSWEGO INSULATION CO	CCB 38052				503-245-6460	
FEE INFORMATION			R	REQUIRED INSPECTIONS		
	Quanity Unit	Total Fee	Inspection Type			
Demolition of a Building or Structure	6.00 Ea	60.00	7160 Sewer/Septic Cap 1820 Demolition			
	Total Fees:	\$ 60.00	1991 Final Demolition			
				1	•4	
			Schedule Inspections online at: www.buildingpermits.oregon.gov or by calling: 1-888-299-2821 or 503-722-5509			
			or by callin	g: 1-888-299-2821 or 503-72	72-5509	
ALL PROVISIONS OF LAWS AND ORDINANCES						
GRANTING OF A PERMIT DOES NOT PRESUME			OLATE OR CANCEL THE PRO	OVISIONS OF ANY OTHER	STATE OR LOCAL LAW	
REGULATING CONSTRUCTION OR THE PERFORMANC				ha liaanaad uudaaa ayannadad	h	
This permit is issued under OAR 918-460-0030. All persi ORS 701.010. Permit will expire if work is not started or	-	_		be licensed unless exempted	ру	
ONO 701.010.1 CHINE WIN EXPIRE II WORK IS NOT STAILED OF	•					
Signature:	David \	vv. Da	vies	10/03/2012		
	Bui	ilding Official		Date		