



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3/29/2018	Permit No: 18208-1342
Date Issued: 5/30/2018	By:
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15625 SW Redbird St.
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Nestmont
Cross street/directions to job site:	
Subdivision:	Lot no.: 124
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton Inc	
Address: 4380 SW Macadam Ave #100	
City/State/ZIP: Portland	
Phone: 503 2224151	Fax:
E-mail: magrismer@drhorton.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same	
Contact name: Same	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date: 2018
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	4.5	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	X	100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$445.23

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3/26/2018	Permit No: B2018.1265
Date Issued: 5/30/2018	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15942 SW Thrush Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 70
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: <i>Alan Brown</i>	
Print name: Alan Brown	Date: 2018
Authorized signature: _____	Date: _____
Print name: _____	Date: _____

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE			
Description	Qty.	Fee	Total *
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	59	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit

499.74



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 2-20-18	Permit No.: B2018-0733
Date Issued: 5/3/2018	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15964 SW Wren Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 22
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton Inc	
Address: 4380 SW Macadam #100	
City/State/ZIP: Portland 97239	
Phone: 503 222 4151	Fax:
E-mail: magrismer@drhorton.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as above	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	2	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$347.87

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3-15-18	Permit No.: B2018-1118
Date Issued: 5/30/2019	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15943 SW Wren Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 49
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	2.9	30.10	
Limited energy, residential (with above sq. ft.)		40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit **499.74**



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B2018-2367
Residential Electrical Authorization To Begin Work

05350-BEL-18-00568

Approval Code: 122536 5/31/2018 10:25 am

E-mailed To: jerryl@peakelectricgroup.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13865 SW LATIGO CIR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 180224	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CD09700	
DESCRIPTION OF WORK	
New circuit for heat pump	
APPLICANT	
Name: Jerry Larson	
Phone: 5035774311	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1109	CCB lic. no.: 206443
Business Name: PEAK ELECTRIC GROUP LLC	
Contact:	
Address: 11007 NE 109TH ST	
City/State/ZIP: VANCOUVER, WA 98662	
Phone: 3609844205	Fax:
Email: timb@peakelectricgroup.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B2018-2361

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00567

Approval Code: 07302G 5/30/2018 5:33 pm

E-mailed To: clint@frontlineelec.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9571 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114BA01601	
DESCRIPTION OF WORK	
2 new circuits for the new bathroom.	
APPLICANT	
Name: Clinton Stuerhoff	
Phone: 503-669-0144	Fax: 503-666-4845
Email:	
CONTRACTOR	
Elec lic. no.: C196	CCB lic. no.: 171294
Business Name: FRONTLINE ELECTRIC INC	
Contact:	
Address: 1150 SE LAURA DR	
City/State/ZIP: GRESHAM, OR 970809172	
Phone: 5036690144	Fax: 5036664845
Email: clintster@verizon.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicie Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B218. 2335

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00559

Approval Code: 05865G 5/30/2018 8:25 am

E-mailed To: kenny@acandeelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11940 SW LYNNFIELD LN	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: William Walker Temp Service	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110BB00600	
DESCRIPTION OF WORK	
Install 400amp Temp Service for construction on new school	
APPLICANT	
Name: Kenny Gates	
Phone: 5033632301	Fax: 5033632302
Email:	
CONTRACTOR	
Elec lic. no.: 24-1C	CCB lic. no.: 591
Business Name: A C & E SERVICE ELECTRIC CO	
Contact:	
Address: 3535 DEL WEBB AVE NE STE 100	
City/State/ZIP: SALEM, OR 97301	
Phone: 5033632301	Fax: 5033632302
Email: db@acandeelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Temp services or feeders			
Temp services 201 amps to 400 amps	1	\$127.41	\$127.41
Electrical Permit Fees			
Subtotal			\$127.41
State surcharge (12% of permit total)			\$15.29
TOTAL PERMIT FEE			\$142.70

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00561

Approval Code: 411397 5/30/2018 9:21 am

E-mailed To: desiree.wiensch@aronsonsecurity.com

B2018-2336

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 701 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Nike Gray Oaks (Cortez) Security Enhancement	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BD00200	
DESCRIPTION OF WORK	
Installation of access control systems including card readers, conversion of perimeter doors to emergency exits, temperature sensors and motion detection along with cameras and video monitoring system. PDX-14917	
APPLICANT	
Name: Desiree Wiensch	
Phone: 5036705250	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-497CLE	CCB lic. no.: 185024
Business Name: ARONSON SECURITY GROUP INC	
Contact:	
Address: 9350 SW NIBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036399988	Fax: 5036844357
Email: ERIN.BUTRICO@ARONSON SECURITY.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00560

Approval Code: 110302 5/30/2018 9:20 am

E-mailed To: peter@cepdx.com

B 2018-2337

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15455 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 125	
Project Name: C180610 - Dr Chand Data	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CA00500	
DESCRIPTION OF WORK	
Install Cat6 Data network and 24 ports cat6 patch panel	
APPLICANT	
Name: Christina Williams	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00558

Approval Code: 900332 5/30/2018 7:23 am

E-mailed To: billing@ertellselectric.com

Boag 2338

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6600 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 165	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AD01900	
DESCRIPTION OF WORK	
Power and lighting circuits for office remodel	
APPLICANT	
Name: Dylan Wentworth	
Phone: 503-841-4511	Fax: 503-359-5652
Email:	
CONTRACTOR	
Elec lic. no.: C390	CCB lic. no.: 180540
Business Name: ERTELL ELECTRIC LLC	
Contact:	
Address: PO BOX 279	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5038495690	Fax: 5033595652
Email: billing@ertellselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00557

Approval Code: 900302 5/30/2018 7:20 am

E-mailed To: billing@ertellselectric.com

B 2018-2339

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6600 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 155	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AD01900	
DESCRIPTION OF WORK	
Power and lighting circuits for office remodel	
APPLICANT	
Name: Dylan Wentworth	
Phone: 503-841-4511	Fax: 503-359-5652
Email:	
CONTRACTOR	
Elec lic. no.: C390	CCB lic. no.: 180540
Business Name: ERTELL ELECTRIC LLC	
Contact:	
Address: PO BOX 279	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5038495690	Fax: 5033595652
Email: billing@ertellselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00564

Approval Code: 610391 5/30/2018 2:19 pm

E-mailed To: peter@cepdx.com

PLAN REVIEW

- Please check all that apply:
- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
 - Fire pumps
 - Emergency systems
 - Addition of a new motor load of 100 HP or more
 - Six or more residential units in one structure
 - Health care facilities
 - Hazardous locations
 - A service or feeder rated at 600 amps or more
 - Buildings more than three stor
 - Marinas and boat yards
 - Floating buildings
 - Commercial-use agricultural buildings
 - Installation of a 150 KVA or larger seperately derived sys
 - "A", "E", or "I-2" or "I-3"
 - Recreational Vehicle Parks
 - Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 4655 SW GRIFFITH DR

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.: 165

Project Name: C180614 - New Vision CC

Cross Street/directions to job site:

Tax map/parcel no.: 1S115BD03502

DESCRIPTION OF WORK

Install Voice data cable for Comcast Service.

APPLICANT

Name: Greg Harmon

Phone: 5032559488

Fax: 5032577121

Email:

CONTRACTOR

Elec lic. no.: 26-1054CLE

CCB lic. no.: 142457

Business Name: CAPITOL DATA & COMMUNICATIONS INC

Contact:

Address: 11401 NE MARX

City/State/ZIP: PORTLAND, OR 972201041

Phone: 5032559488

Fax: 5032551966

Email: RICHARDM@CPDX.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00562

Approval Code: 056762 5/30/2018 10:25 am

E-mailed To: sydney@coxelectricoregon.com

B2018-2340

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4575 SW TUCKER AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Covenant Clock Restoration	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BC01100	
DESCRIPTION OF WORK	
one for one LED lighting upgrade	
APPLICANT	
Name: Sydney Walker	
Phone: 5039813320	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1096	CCB lic. no.: 206055
Business Name: COX ELECTRIC INC	
Contact:	
Address: 290 YOUNG STREET	
City/State/ZIP: WOODBURN, OR 97071	
Phone: 5039819920	Fax:
Email: zandi@coxelectricoregon.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Marine and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Recreational Vehicle Parks
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00563

Approval Code: 030567 5/30/2018 12:29 pm

E-mailed To: license@lrogerselectric.com

B2018-2342

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13700 NW SCIENCE PARK DR	
City/State/ZIP: BEAVERTON, OR 97229	
Suite/bldg./apt.no.:	
Project Name: Home Depot 4001	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N133CA01000	
DESCRIPTION OF WORK	
6-019, bays to left and right (electric located in back column of upright) . REMOVE all electrical including lights, conduit, junction boxes, mc cable, straps and anything else in these bays as well as the bay to the left and the bay to the right	
APPLICANT	
Name: PAUL HOWELL	
Phone: 770-772-3473	Fax: 866-592-9161
Email:	
CONTRACTOR	
Elec lic. no.: 37-727C	CCB lic. no.: 118038
Business Name: LIN R ROGERS ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 2050 MARCONI DR STE 200	
City/State/ZIP: ALPHARETTA, GA 30005	
Phone: 7707723400	Fax: 7705214960
Email: license@lrogerselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00565

Approval Code: 610354 5/30/2018 2:45 pm

E-mailed To: KEVIN.BOBSELECTRIC@GMAIL.COM

B 2018-2349

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12255 SW 1ST ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BC00700	
DESCRIPTION OF WORK	
1 ckt for HVAC roof top unit reconnect	
APPLICANT	
Name: Kevin Broselle	
Phone: 3602547200	Fax: 3602548219
Email:	
CONTRACTOR	
Elec lic. no.: 37-431C	CCB lic. no.: 53136
Business Name: B B BROSELLE INC	
Contact:	
Address: 2700 NE BURTON RD SUITE A	
City/State/ZIP: VANCOUVER, WA 98662	
Phone: 3602547200	Fax: 3602548219
Email: KEVIN.BOBSELECTRIC@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Marine and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-31-18</u>	Permit No.: <u>B2018-2351</u>
Date Issued: <u>5-31-18</u>	By: <u>TK</u>
	Payment Type: <u>visa</u>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>5495 SW Watson Ave</u>
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>New electrical service and panel, bathroom and AC circuits</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>Portland Electric LLC</u>	
Contact name: <u>Paul Grushevskiy</u>	
Address:	
City/State/ZIP:	
Phone: <u>(503) 849-8202</u>	Fax:
E-mail: <u>paul@portlandelectric.biz</u>	
CONTRACTOR	
Business name: <u>Portland Electric LLC</u>	
Address: <u>1915 E 5th Street Suite: D</u>	
City/State/ZIP: <u>Vancouver, WA 98661</u>	
Phone: <u>(503) 849-8202</u>	Fax: <u>(360) 314-4945</u>
E-mail: <u>paul@portlandelectric.biz</u>	CCB lic. no.: <u>194066</u>
Electrical lic. no.: <u>C760</u>	City or metro lic.:
Supervising electrician signature, required: <u>Alex Shalya</u>	
Print name: <u>Alex Shalya 4920S</u>	Date: <u>05/29/18</u>
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	5	4.26	21.30	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			137.13	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				16.46
TOTAL PERMIT FEE				\$153.59

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No: <u>B2018-2347</u>
Date Issued: <u>5/31/2018</u>	BEU
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>1125 178th Ave</u>
City/State/ZIP: <u>Beaverton OR 97006</u>	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replace electrical panel</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>John P. Calhoun</u>	
Address: <u>1125 NW 178th Ave</u>	
City/State/ZIP: <u>Beaverton OR 97006</u>	
Phone: <u>503-805-4631</u>	Fax:
E-mail: <u>john.calhoun1224@gmail.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>05/31/2018</u>
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Sammas owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE		<u>139</u>	<u>73</u>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Plumbing Authorization To Begin Work

05350-BPB-18-00157

Approval Code: 05074G 5/29/2018 10:55 am

E-mailed To: plumbing@apollodrain.com

B 2018-2319

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13375 SW CANYON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AB01400	
DESCRIPTION OF WORK	
REPLACE WATER SERVICE LINE FROM METER TO CAR WASH, APPROX 20 FT	
APPLICANT	
Name: kylee b	
Phone: 5032398801	Fax: 5039699568
Email:	
CONTRACTOR	
Plumb lic. no.: 26-533PB	CCB lic. no.: 49418
Business Name: APOLLO DRAIN & ROOTER SERVICE INC	
Contact:	
Address: 2208 NW BIRDSDALE	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5032398801	Fax: 5039699568
Email: darlene@apollodrain.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00556

Approval Code: 07870G 5/29/2018 2:14 pm

E-mailed To: procircuitoffice@gmail.com

B2018-2318

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13555 SW 17TH ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Stephenson	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BA00109	
DESCRIPTION OF WORK	
install grounding electrode system	
APPLICANT	
Name: Dave Nagy	
Phone: 9715638211	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 3-601C	CCB lic. no.: 161382
Business Name: PRO CIRCUIT ELECTRIC LLC	
Contact:	
Address: PO BOX 3948	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 9715638211	Fax: 5032661349
Email: procircuitdave@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00555

Approval Code: 03987G 5/29/2018 1:54 pm

E-mailed To: MARKSELECTRICLLC@ICLOUD.COM

2018-2313

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5488 SW ALGER AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Building I	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115DB91171	
DESCRIPTION OF WORK	
Remove and replace all exterior lights and outlets on building due to resheet and residing project	
APPLICANT	
Name: Andrew Marks	
Phone: 9715067015	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1238	CCB lic. no.: 212706
Business Name: MARKS ELECTRIC LLC	
Contact:	
Address: 9845 N SYRACUSE ST	
City/State/ZIP: PORTLAND, OR 97203	
Phone: 9715067015	Fax:
Email: MARKSELECTRICLLC@ICLOUD.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00554

Approval Code: 09650G 5/29/2018 11:23 am

E-mailed To: bjpelster@gmail.com

B2018-2320

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14570 SW CARLSBAD DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Service change & shed ckt	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DD09700	
DESCRIPTION OF WORK	
200a panel feed and meter main, plus new 60a ckt to shed	
APPLICANT	
Name: BENJAMIN PELSTER	
Phone: 5036809141	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1168	CCB lic. no.: 208614
Business Name: SB ELECTRIC INC	
Contact:	
Address: 58569 PEBBLE CREEK RD	
City/State/ZIP: VERNONIA, OR 97064	
Phone: 5035062290	Fax:
Email: mrelectricofhillsboro@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Marine and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$120.09
State surcharge (12% of permit total)			\$14.41
TOTAL PERMIT FEE			\$134.50

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5/29/2018</u>	Permit No.: <u>B2018-2315</u>
Date Issued: <u>5-30-18</u>	By: <u>HL</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Other:
<input type="checkbox"/> Accessory building	
JOB SITE INFORMATION AND LOCATION	
16411 Southwest Timberland Drive,	
Job no.:	Job address: Beaverton, Oregon, 97007, United States
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	
Residential rooftop solar PV 9.28kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <u>Samuel Collier</u>	
Print name: Samuel Collier	Date: 05/22/2018
Authorized signature: <u>Jeff Lee</u>	
Print name: Jeff Lee	Date: 05/22/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005

REV 10/17

129.73



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/29/2018	Permit No. B2018-2311
Date Issued: 5/29/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8015 S.W. VALLEY VIEW LT
City/State/ZIP: Beaverton	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site: Canyon LN
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Adding wiring TO kitchen / Basement	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Conduit Electric	
Contact name: Chuck Parker	
Address: 19461 SW 80TH AVE	
City/State/ZIP: Tualatin OR 97062	
Phone: 692 1428	Fax:
E-mail: cparker@conduitelective.com	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: 503 692 1428	Fax:
E-mail:	CCB lic. no.: 109669
Electrical lic. no.: 45015	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name:	Date:
Authorized signature: [Signature]	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	1	34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	8	4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle	1	91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				0.00
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete. 231.7

* Number of inspections allowed per permit.

Form E-73-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-29-18	Permit No: B2018-2307
Date Issued: 5-29-18	By: PK
Payment Type: Visa	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 200267	Job address: 12900 SW CRESCENT STREET
City/State/ZIP: BEAVERTON, OR	
Suite/bldg./apt. no.:	Project name: WESTGATE
Cross street/directions to job site: WEST BUILDING	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
LIMITED ENERGY FOR FIRE ALARM CABLING	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: PRAIRIE ELECTRIC, INC.	
Contact name: ANITA PASO	
Address: 6000 NE 88TH STREET	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: (360) 573-2750	Fax: (360) 573-9866
E-mail: anitap@prairieelectric.com	
CONTRACTOR	
Business name: PRAIRIE ELECTRIC, INC.	
Address: 6000 NE 88TH STREET	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: (360) 573-2750	Fax: (360) 573-9866
E-mail: anitap@prairieelectric.com	CCB lic. no.: 60178
Electrical lic. no.: 37-491C	City or metro lic.: 3014
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: BILL HALBERG	Date: 05/29/18
Authorized signature: _____	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: FIRE ALARM CABLING	6	91.72	550.32	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				550.32
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				66.04
TOTAL PERMIT FEE				\$616.36

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17

B2018-1978



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00490

Approval Code: 072918 5/7/2018 2:47 pm

E-mailed To: portlandpermits@cochraninc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8500 SW CREEKSIDE PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Fiserv TI	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AC00600	
DESCRIPTION OF WORK	
512355 PM328 Fiserv TI New service, generator, circuits and fire alarm Per attached plans Jake Welch is PM	
APPLICANT	
Name: Stephanie Swenson	
Phone: 9712054256	Fax: 9712054268
Email:	
CONTRACTOR	
Elec lic. no.: 37-546C	CCB lic. no.: 72942
Business Name: COCHRAN INC	
Contact:	
Address: 7550 SW TECH CENTER DRIVE #220	
City/State/ZIP: TIGARD, OR 97223	
Phone: 9712054242	Fax: 9712054268
Email: rsmith2@cochraninc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	6	\$115.83	\$694.98
Services 201 to 400 amps	9	\$137.89	\$1,241.01
Services 401 to 599 amps	3	\$229.34	\$688.02
Branch circuits			
Branch circuits with service or feeder each circuit	460	\$4.26	\$1,959.60
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$4,675.33
State surcharge (12% of permit total)			\$561.04
TOTAL PERMIT FEE			\$5,236.37

Permit Fee may change in review

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00553

Approval Code: 215220 5/25/2018 10:02 am

E-mailed To: permits@global4security.com

B2018-2291

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8705 SW HALL BLVD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Nectar market	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126BC01300	
DESCRIPTION OF WORK	
security alarm install	
APPLICANT	
Name: KIRK TIPP	
Phone: 5037520215	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-711CLE	CCB lic. no.: 69705
Business Name: GLOBAL SECURITY & COMMUNICATION INC	
Contact:	
Address: 3212 MAIN ST	
City/State/ZIP: VANCOUVER, WA 98663	
Phone: 3606931900	Fax: 0000000000
Email: permits@global4security.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov/building

OFFICE USE ONLY	
Date Received: 5/25/18	Permit No.: B20182200
Date Issued: 5/25/18	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Other:
<input type="checkbox"/> Accessory building	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 770 Pebblestone Lane,
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Tom Holt
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
PV ROOF MOUNT	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Tom Holt	
Address: 770 Pebblestone Lane,	
City/State/ZIP: Beaverton, OR 97006	
Phone: 503-894-6903	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: SolarCity Corp. dba TESLA	
Address: 6132 NE 112th Ave	
City/State/ZIP: Portland OR 97220	
Phone: 503-894-6903	Fax: 1-866-445-7459
E-mail: Melissa.Farias@SolarCity.com	CCB lic. no.: 180498
Electrical lic. no.: C562	City or metro lic.: 10324
Supervising electrician signature, required: [Signature]	
Print name: Nicholas Armstrong - 5873S	Date: 5.21.18
Authorized signature: [Signature]	
Print name: Melissa Farias	Date: 5.21.18

FEE SCHEDULE			
Number of Inspections per Item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		63.71	0.00
5.01 to 15 kva (2)	1	90.95	0.00
15.01 to 25 kva (2)		108.28	0.00
25.01 kva and over (2)		180.09	0.00
Miscellaneous fees, hourly rate		80.00	0.00
Each additional inspection (1) (OAR 918-309-0070)		63.71	0.00
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

rev 7/13

129.73



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00552

Approval Code: 052346 5/24/2018 2:57 pm

E-mailed To: suzi.flowers@christenson.com

B2018-2280

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13925 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: THE STRATFORD	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CD02100	
DESCRIPTION OF WORK	
JOB# 91204 (1) CKT UNDERGROUND FOR HOUSE WIRING, LIGHTS AND GARAGES	
APPLICANT	
Name: CHRISTENSON ELECTRIC	
Phone: 5034193300	Fax: 5034193333
Email:	
CONTRACTOR	
Elec lic. no.: 26-34C	CCB lic. no.: 458
Business Name: CHRISTENSON ELECTRIC INC	
Contact:	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR 97230	
Phone: 5034193300	Fax: 5034193333
Email: marijo.beckman@christenson.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00551

Approval Code: 011390 5/24/2018 2:50 pm

E-mailed To: ashli.elsperman@iesci.net

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5570 SW WESTERN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 80096	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CD01200	
DESCRIPTION OF WORK	
Replace 3 old HVAC units for offices with new ones	
APPLICANT	
Name: Corey Baysinger	
Phone: 5037930269	Fax: 5036709572
Email:	
CONTRACTOR	
Elec lic. no.: C448	CCB lic. no.: 182452
Business Name: IES COMMERCIAL INC	
Contact:	
Address: 16135 SW 74TH AVE	
City/State/ZIP: PORTLAND, OR 97224	
Phone: 5036481900	Fax: 5036709572
Email: cathy.herinckx@ies-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Addition of a new motor load of 100 HP or more			
<input type="checkbox"/> Six or more residential units in one structure			
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	6	\$4.26	\$25.56
Electrical Permit Fees			
Subtotal			\$106.70
State surcharge (12% of permit total)			\$12.80
TOTAL PERMIT FEE			\$119.50

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B20015-2273

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00550

Approval Code: 09177G 5/24/2018 11:53 am

E-mailed To: joey@hillsboroelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3900 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 9526 German Int. School	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CC04200	
DESCRIPTION OF WORK	
New exterior wall lights & GFI	
APPLICANT	
Name: Joey Vitacco	
Phone: 5034399666	Fax: 5036013680
Email:	
CONTRACTOR	
Elec lic. no.: 34-499C	CCB lic. no.: 134481
Business Name: HILLSBORO ELECTRIC LLC	
Contact:	
Address: 21185 NW EVERGREEN PKWY STE 110	
City/State/ZIP: HILLSBORO, OR 971247127	
Phone: 5034399666	Fax: 5036013680
Email: marlene@hillsboroelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00549

Approval Code: 05641G 5/24/2018 9:53 am

E-mailed To: crystalr@westsideelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7235 SW SORRENTO RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: J85375-BILL NABERS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DA04400	
DESCRIPTION OF WORK	
PANEL CHANGE	
APPLICANT	
Name: CRYSTAL KREGER	
Phone: 5032311548	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-135C	CCB lic. no.: 13306
Business Name: WEST SIDE ELECTRIC COMPANY INC	
Contact:	
Address: 1834 SE 8TH AVE	
City/State/ZIP: PORTLAND, OR 972143532	
Phone: 5032311548	Fax: 5037360677
Email: DICKK@WESTSIDEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Addition of a new motor load of 100 HP or more			
<input type="checkbox"/> Six or more residential units in one structure			
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services of feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00548

Approval Code: 367123 5/24/2018 6:40 am

E-mailed To: MERRILLELECTRICLLC@GMAIL.COM

B2018-2264

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4750 SW WASHINGTON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Alpine Property Management	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BC07300	
DESCRIPTION OF WORK	
Install wiring for new bathrooms in existing structure. Wire per print for addition.	
APPLICANT	
Name: Jeremy Baxter	
Phone: 5038049787	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1140	CCB lic. no.: 207278
Business Name: MERRILL ELECTRIC LLC	
Contact:	
Address: PO BOX 753	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5038049787	Fax:
Email: MERRILLELECTRICLLC@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/24/2018	Permit No.: B2018-2268
Date Issued: 5/24/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12255 SW 1st St.
City/State/ZIP: Beaverton, WA 987005	
Suite/bldg./apt. no.:	Project name: Columbia Bank - 1192 B
Cross street/directions to job site: 12255 SW 1st St., Beaverton, WA 987005	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replacing existing lighting with new LED fixtures to increase lighting level standards and reduce energy output.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Columbia Bank	
Address: 301 Church Street NE.	
City/State/ZIP: Salem, OR 97301	
Phone: (503) 587-7982	Fax:
E-mail: warrenr@columbiabank.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lumenal Lighting, LLC.	
Contact name: Nick Woltzen	
Address: 21706 66th Avenue W.	
City/State/ZIP: Mountlake Terrace, WA 98043	
Phone: 425-224-2011	Fax: 425-481-4014
E-mail: nwoltzen@lumenal.com	
CONTRACTOR	
Business name: Lumenal Lighting, LLC.	
Address: 21706 66th Avenue W.	
City/State/ZIP: Mountlake Terrace, WA 98043	
Phone: 425-481-5001	Fax: 425-481-4014
E-mail: accounting@lumenal.com	CCB lic. no.: 189817
Electrical lic. no.: C600	City or metro lic.:
Supervising electrician signature, required:	
Print name: Cathy Busser	Date:
Authorized signature: <i>Cathy Busser</i>	

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.00		4
Ea. add'l 500 sq. ft. or portion		34.00		
Limited energy, residential (with above sq. ft.)		46.00		2
Limited energy, multi-family residential (with above sq. ft.)		91.00		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.00		2
201 amps to 400 amps		137.00		2
401 amps to 600 amps		229.00		2
601 amps to 1,000 amps		299.00		2
Over 1,000 amps or volts		690.00		2
Utility reconnect		91.00		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.00		2
201 amps to 400 amps		127.00		2
401 amps to 600 amps		184.00		2
601 amps to 1,000 amps		225.00		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.00		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.00		2
Pump or irrigation circle		91.00		2
Sign or outline lighting		91.00		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.00		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				9.7368
TOTAL PERMIT FEE			90.8768	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. 132018-2251
Date Issued: 5/24/2018	
Payment Type:	

TYPE OF WORK

New construction 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 no.: #10240 Job address: 5550 SW Cherry Ave
 City/State/ZIP: Beaverton, OR 97005
 Suite/bldg./apt. no.: Project name: NDY/Kingstad
 Cross street/directions to job site:
 Subdivision: Lot no.:
 Tax map/parcel no.:

DESCRIPTION OF WORK

kitchen remodel and lighting

PROPERTY OWNER TENANT

Name:
 Address:
 City/State/ZIP:
 Phone: Fax:
 E-mail:
 Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. Date:
 Owner signature:

APPLICANT CONTACT PERSON

Business name:
 Contact name:
 Address:
 City/State/ZIP:
 Phone: Fax:
 E-mail:

CONTRACTOR

Business name: RK Electric, Inc.
 Address: 24495 NW Oak Dr
 City/State/ZIP: Hillsboro, OR 97124
 Phone: (503) 640-1344 Fax: (503) 356-0513
 E-mail: info@rkelectric.biz OCB lic. no.: 94275
 Electrical lic. no.: 34-375C City or metro lic.: 3019
 Supervising electrician signature, required: *Ron L. Kurtz*
 Print name: Ron L. Kurtz 4724-S Date: 05/23/18
 Authorized signature: *Ron L. Kurtz*
 Print name: Ron L. Kurtz Date: 05/23/18

PLAN REVIEW

Please check all that apply:

- Service or feeder 400amps or more
- Fire pump
- Emergency system
- Addition of new motor load of 100HP or more
- Six or more residential units
- Health-care facilities
- Hazardous locations
- Service or feeder over 600 amps
- Building over three stories
- Marinas and boatyards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of 150 kVA or larger separately derived system
- "A," "E," "I-2," "I-3" occupancy
- Recreational vehicle parks

FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential (single- or multi-family dwelling unit)				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	7	4.26	29.82	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees:				
SUBTOTAL			145.65	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			17.48	
TOTAL PERMIT FEE			\$163.13	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit. REV 10/17
 Form 870-1002



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/24/2018	Permit No. B2018-2258
Date Issued: 5/24/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 11470 SW 14 th St
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Alger Ave and 14 th St	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Upgrading 100 Amp Panel to 200 Amp Panel	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Matthew Miller	
Address: 11470 SW 14 th St	
City/State/ZIP: Beaverton OR 97005	
Phone: 503-381-1058	Fax:
E-mail: MillerM858@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: [Signature]	Date: 5/24/18
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Same as above	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Same as owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less				4
Ea. add'l 500 sq. ft. or portion				
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	1	4.26	4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				3
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE 134.50				

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00547

Approval Code: 695122 5/23/2018 3:19 pm

E-mailed To: kz@accesselectric.biz

B2018-2219

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7095 SW 68th Ave	
City/State/ZIP: Portland, OR 97223	
Suite/bldg./apt.no.:	
Project Name: Zimmerman	
Cross Street/directions to job site: Canby and 68th Ave.	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
200 Amp service change at, 7095 SW 68th Ave. Portland, OR. 97223	
APPLICANT	
Name: Kent Zimmerman	
Phone: 5036424333	Fax: 5036429699
Email:	
CONTRACTOR	
Elec lic. no.: C1113	CCB lic. no.: 206659
Business Name: ACCESS ELECTRICAL LLC	
Contact:	
Address: 13525 SW FARMINGTON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036424333	Fax: 5034305966
Email: volt1@comcast.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	2	\$115.83	\$231.66
Electrical Permit Fees			
Subtotal			\$231.66
State surcharge (12% of permit total)			\$27.80
TOTAL PERMIT FEE			\$259.46

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00546

Approval Code: 039698 5/23/2018 2:32 pm

E-mailed To: dorear@globalelectricusa.com

B2018-2248

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2360 SW 170TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Inch by Inch TI	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S107AA00800	
DESCRIPTION OF WORK	
Install Exit signs and bugeyes	
APPLICANT	
Name: Dustin O'Rear	
Phone: 5036806890	Fax: 5036475649
Email:	
CONTRACTOR	
Elec lic. no.: 34-655C	CCB lic. no.: 156838
Business Name: GLOBAL ELECTRIC INC	
Contact:	
Address: PO BOX 162	
City/State/ZIP: NORTH PLAINS, OR 97133	
Phone: 5036475650	Fax: 5036475649
Email: globalelectric@globalelectricusa.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00545

Approval Code: 023163 5/23/2018 11:22 am

E-mailed To: precisionnelectrical@yahoo.com

B2018-0244

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15085 SW OPAL DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 17133	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129DB04700	
DESCRIPTION OF WORK	
3-circuit kitchen remodel	
APPLICANT	
Name: Kevin Riggs	
Phone: 503-880-2754	Fax: 503-594-2873
Email:	
CONTRACTOR	
Elec lic. no.: C47	CCB lic. no.: 163318
Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC	
Contact:	
Address: 14842 SE REGNER TERRACE	
City/State/ZIP: BORING, OR 97009	
Phone: 5038802754	Fax: 5036581615
Email: PRECISIONNELECTRICAL@YAHOO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-23-18</u>	Permit No.: <u>B2018-2242</u>
Date Issued: <u>5-23-18</u>	By: <u>JK</u>
	Payment Type: <u>MIC</u>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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 no.: <u>S2997</u>	Job address: <u>10175 SW WINTER LANE</u>
City/State/ZIP: <u>BEAVERTON, OR 97008</u>	
Suite/bldg./apt. no.:	Project name: <u>ALI RES</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Reattached wiring throughout house.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>JRA INC dba Frahler Electric Co</u>	
Contact name: <u>Justin Kau</u>	
Address: <u>11860 SW Greenburg Rd</u>	
City/State/ZIP: <u>Tigard, OR 97223</u>	
Phone: <u>(503) 639-4627</u>	Fax: <u>(503) 639-4673</u>
E-mail: <u>justin@frahlerelectric.com</u>	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: <u>197172</u>
Electrical lic. no.: <u>C861</u>	City or metro lic.:
Supervising electrician signature, required: <u>Adam C Etherington</u>	<u>51105</u>
Print name: <u>Adam Etherington</u>	Date: <u>05/23/18</u>
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea, add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	<u>1</u>	81.14	243.42	2
Each add'l branch circuit	<u>2</u>	4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			243.42	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				29.21
TOTAL PERMIT FEE			\$100.42	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00544

Approval Code: 06522S 5/23/2018 9:25 am

E-mailed To: mikeselectric@mikeselectric.biz

B2018-2241

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11850 SW REID CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Karen Dillon	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BD04900	
DESCRIPTION OF WORK	
Panel change, surge protector, garage light	
APPLICANT	
Name: Darryl Mollenhauer	
Phone: 5036496991	Fax: 5036411902
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
TOTAL PERMIT FEE			\$139.27

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: B2018-2210
Date Issued: 5/23/2018	<i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 18128 NW Stonehedge Ct
City/State/ZIP: Beaverton, Or 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Panel upgrade, AC circuit	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: American Electric Service	
Address: PO Box 1057	
City/State/ZIP: Sherwood, Or 97140	
Phone: (503) 537-2121	Fax: (503) 554-8506
E-mail: david@aesoregon.com	CCB lic. no.: 101587
Electrical lic. no.: 36-59C	City or metro lic.:
Supervising electrician signature, required:	
Print name: David Haupt	Date: 05/22/18
Authorized signature:	
Print name: Same	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less	1	91.72	91.72	2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	2	4.26	4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				95.98
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				11.52
TOTAL PERMIT FEE				\$107.50

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17

139.27



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-23-18	Permit No.: B2018-2235
Date Issued: 5-23-18	By: <i>ML</i>
Payment Type: <i>Visa</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <i>8625 SW Cascade Sq. Ave</i>
City/State/ZIP:	
Suite/bldg./apt. no.: <i>602</i>	Project name: <i>Suite 602 T.I.</i>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<i>Branch circuits for T.I.</i>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <i>R.C. Costello Electrical Contracting</i>	
Address: <i>P.O. Box 336</i>	
City/State/ZIP: <i>Aurora OR 97002</i>	
Phone: <i>503-504-6758</i>	Fax:
E-mail: <i>rc.costello@dec@aol.com</i>	CCB lic. no.: <i>87402</i>
Electrical lic. no.: <i>3-344C</i>	City or metro lic.: <i>4170</i>
Supervising electrician signature, required: <i>Roger C. Costello</i>	
Print name: <i>Roger C. Costello</i>	Date: <i>5/23/18</i>
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14
Each add'l branch circuit	1	4.26	4.26
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			85.40 0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.25 0.00
TOTAL PERMIT FEE			95.65 0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-23-18</u>	Permit No.: <u>B2018-2236</u>
Date Issued: <u>5-23-18</u>	By: <u>AK</u>
	Payment Type: <u>Visa</u>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>9665 SW Allen</u>
City/State/ZIP:	
Suite/bldg./apt. no.: <u>117</u>	Project name: <u>CB Ram</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>H.V.A.C. circuit, BFI recep.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>R.C. Costello Electrical Contracting</u>	
Address: <u>P.O. Box 336</u>	
City/State/ZIP: <u>Aurora OR 97002</u>	
Phone: <u>503-504-6758</u>	Fax:
E-mail: <u>rc.costello@dec@aol.com</u>	CCB lic. no.: <u>87402</u>
Electrical lic. no.: <u>3-344C</u>	City or metro lic.: <u>4170</u>
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: <u>Roger Costello</u>	Date: <u>5/23/18</u>
Authorized signature:	Date:
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	1	4.26	4.26	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			<u>85.400.00</u>	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			<u>10.25</u>	0.00
TOTAL PERMIT FEE			<u>95.65</u>	0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00543

Approval Code: 241668 5/22/2018 4:32 pm

E-mailed To: office@youngelectricco.com

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 14389 SW Rancher Lane

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: MacRae

Cross Street/directions to job site:

Tax map/parcel no.: 1S116AA08700

DESCRIPTION OF WORK

For Address: 14389 SW Rancher Lane, Beaverton 97008

Install car charger circuit

APPLICANT

Name: Jonathan Garfield

Phone: 9718885081

Fax: 5036460960

Email:

CONTRACTOR

Elec lic. no.: C353

CCB lic. no.: 178887

Business Name: YOUNG ELECTRIC LLC

Contact:

Address: 9999 SW WILSHIRE ST STE 221

City/State/ZIP: PORTLAND, OR 97225

Phone: 9718885081

Fax: 5036460960

Email: office@youngelectricco.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder rated at 600 amps or more
- Buildings more than three stories
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger separately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>4/30/2018</u>	Permit No.: <u>182018-1827</u>
Date Issued: <u>5-23-18</u>	By: <u>JHK</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 170588	Job address: 13955 SW Millikan Way
City/State/ZIP: Beaverton, Oregon 97005	
Suite/bldg./apt. no.:	Project name: Phase 3 Cafeteria/Fitness
Cross street/directions to job site: Shannon	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Power and lighting for new cafeteria and fitness room	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Capitol Electric Co., Inc.	
Address: 11401 NE Marx	
City/State/ZIP: Portland, Oregon 97220	
Phone: (503) 255-9488	Fax: (503) 255-1966
E-mail: Darrell@cepdx.com	CCB lic. no.: 48748
Electrical lic. no.: 3132-S	City or metro lic.: 24-496C
Supervising electrician signature, required: <u>Darrell McNeel</u>	
Print name: Darrell McNeel	Date: <u>4-27-18</u>
Authorized signature: <u>Darrell McNeel</u>	
Print name: Darrell McNeel	Date: <u>4-27-18</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input checked="" type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	3	115.83	347.49	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps	1	229.34	229.34	2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	114	4.26	485.64	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: Fire Alarm & Security	2	91.72	183.44	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			1,245.91	
Plan review (25% of permit fee)			311.48	
State surcharge (12% of permit fee)			149.51	
TOTAL PERMIT FEE			\$1,706.90	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. 132018-2195
Date Issued:	5/22/2018
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 25886	Job address: 8940 SW Hall Blvd
City/State/ZIP: Beaverton, OR 97223	
Suite/bldg./apt. no.:	Project name: Dutch Bros
Cross street/directions to job site: SW Fairview Place and SW Hall Blvd	
Subdivision:	Lot no.: 0800
Tax map/parcel no.: 1S126BC00800	

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
	<input type="checkbox"/> Recreational vehicle parks

DESCRIPTION OF WORK	
Replacing 7 internally illuminated signs with 6 internally illuminated signs	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Dutch-Bros	
Address: 8940 SW Hall Blvd	
City/State/ZIP: Beaverton, OR 97223	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:

FEE SCHEDULE			
Description	Qty.	Fee	Total *
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		168.52	4
Ea. add'l 500 sq. ft. or portion		30.10	
Limited energy, residential (with above sq. ft.)		40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders Installation, alteration, and/or relocation			
200 amps or less		100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders Installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits -- new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting	6	79.41	476.46
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			476.46
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			57.17
TOTAL PERMIT FEE			\$533.63

<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: ES&A Sign & Awning	Nick Johnson
Contact name: Carolyn Goodman	
Address: 89975 Prairie Rd	
City/State/ZIP: Eugene, OR 97402	
Phone: (541) 868-2381	Fax:
E-mail: CGoodman@esasigns.com	
CONTRACTOR	
Business name: ES&A Sign & Awning	
Address: 89975 Prairie Rd	
City/State/ZIP: Eugene, OR 97402	
Phone: (541) 868-2381	Fax: (541) 485-5813
E-mail: CGoodman@esasigns.com	CCB lic. no.: 163470
Electrical lic. no.: CLS 20-543	City or metro lic.: 8461
Supervising electrician signature, required: <i>Gordy Roseboro</i>	
Print name: Gordy Roseboro	Date: 05/17/18
Authorized signature: <i>Carolyn Goodman</i>	Date: 05/17/18

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00539

Approval Code: 022354 5/22/2018 10:28 am

E-mailed To: license@lrogersselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4037 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: C	
Project Name: Petco 251	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
Altering 1 circuit for fridge	
APPLICANT	
Name: PAUL HOWELL	
Phone: 770-772-3473	Fax: 866-592-9161
Email:	
CONTRACTOR	
Elec lic. no.: 37-727C	CCB lic. no.: 118038
Business Name: LIN R ROGERS ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 2050 MARCONI DR STE 200	
City/State/ZIP: ALPHARETTA, GA 30005	
Phone: 7707723400	Fax: 7705214960
Email: license@lrogersselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Marine and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

32018-2225

Residential Electrical Authorization To Begin Work
05350-BEL-18-00541

Approval Code: 01547G 5/22/2018 12:20 pm

E-mailed To: permits@on-electric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11575 SW 14TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115DC06000	
DESCRIPTION OF WORK	
New Ac, Service outlet	
APPLICANT	
Name: On Electric	
Phone: 5032882211	Fax: 5032882231
Email:	
CONTRACTOR	
Elec lic. no.: C1078	CCB lic. no.: 205100
Business Name: ON ELECTRIC LLC	
Contact:	
Address: 9720 SW HILLMAN CT STE 815	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5032882211	Fax: 5032882231
Email: permits@on-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more			
<input type="checkbox"/> Six or more residential units in one structure			
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00542

Approval Code: 009542 5/22/2018 12:58 pm

E-mailed To: laurel@oregon-electric.com

B2018-0226

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10470 SW BARNES RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 707171 Wells Fargo Sunset ATM	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S102CB00200	
DESCRIPTION OF WORK	
Power to new ATM	
APPLICANT	
Name: Joel Elliot	
Phone: 5035722340	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-95C	CCB lic. no.: 203
Business Name: ON ELECTRIC GROUP INC	
Contact:	
Address: 1709 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: 5032349900	Fax: 5032341001
Email: webaccounting@oregon-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Plumbing Authorization To Begin Work

05350-BPB-18-00154

Approval Code: 04483D 5/22/2018 1:58 pm

E-mailed To: service@powerplumbingco.com

B2018-2227

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6600 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 155	
Project Name: 18-892	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AD01900	
DESCRIPTION OF WORK	
Tenant Improvement	
APPLICANT	
Name: Mike Warren	
Phone: 5032441900	Fax: 5032448825
Email:	
CONTRACTOR	
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378
Business Name: POWER PLUMBING CO	
Contact:	
Address: PO BOX 19418	
City/State/ZIP: PORTLAND, OR 972810418	
Phone: 0002441900	Fax: 5032448825
Email: laurad@powerplumbingco.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility		<input type="checkbox"/> Chemical drainage waste and vent systems	
<input type="checkbox"/> Vacuum drainage waste and vent system		<input type="checkbox"/> Multi-purpose Fire sprinkler system	
<input type="checkbox"/> Commercial booster pump		<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Addition of a new motor load			
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Dishwasher	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00538

Approval Code: 07658G 5/22/2018 9:07 am

E-mailed To: crystalr@westsideelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5225 SW DOVER LN	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: J85281-DAGGETT, RON	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA04401	
DESCRIPTION OF WORK	
MICRO, OVEN, LIGHTING.	
APPLICANT	
Name: CRYSTAL KREGER	
Phone: 5032311548	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-135C	CCB lic. no.: 13306
Business Name: WEST SIDE ELECTRIC COMPANY INC	
Contact:	
Address: 1834 SE 8TH AVE	
City/State/ZIP: PORTLAND, OR 972143532	
Phone: 5032311548	Fax: 5037360677
Email: DICKK@WESTSIDEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5/22/2018</u>	Permit No: <u>B2018-2215</u>
Date Issued: <u>5/22/2018</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9755 SW Barnes Road
City/State/ZIP: Portland OR 97225	
Suite/bldg./apt. no.:	Project name: Lawyer's Title
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Low Voltage Wiring / T-Stats	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: brad@americanheating.net	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: 05/22/18
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: American Heating Inc.	
Contact name: Brad Manchester	
Address: 5035 SE 24th Ave	
City/State/ZIP: Portland, OR., 97202	
Phone: (503) 239-4600	Fax: (503) 239-7038
E-mail: brad@americanheating.net	
CONTRACTOR	
Business name: American Heating Inc.	
Address: 5035 SE 24th Ave	
City/State/ZIP: Portland, OR., 97202	
Phone: (503) 239-4600	Fax: (503) 239-7038
E-mail: brad@americanheating.net	CCB lic. no.: 33135
Electrical lic. no.: 26-993-CRE	City or metro lic.: 1077
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: T Steve Young	Date: 05/22/18
Authorized signature: <u>[Signature]</u>	
Print name: Brad Manchester	Date: 05/22/18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories or more <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		152.85		4
Ea. add'l 500 sq. ft. or portion		27.30		
Limited energy, residential (with above sq. ft.)		36.46		2
Limited energy, multi-family residential (with above sq. ft.)		72.03		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		90.95		2
201 amps to 400 amps		108.28		2
401 amps to 600 amps		180.09		2
601 amps to 1,000 amps		235.53		2
Over 1,000 amps or volts		542.03		2
Utility reconnect		72.03		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		72.03		2
201 amps to 400 amps		100.06		2
401 amps to 600 amps		144.58		2
601 amps to 1,000 amps		144.58		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.34		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		63.71		2
Each add'l branch circuit		3.34		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		72.03		2
Pump or irrigation circle		72.03		2
Sign or outline lighting		72.03	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	67.95	67.95	2
Each additional inspection over allowable in any of the above				
Per inspection		63.71		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			67.95	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			8.15	
TOTAL PERMIT FEE			\$76.10	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3-15-18	Permit No.: B2018-1119
Date Issued: 5-22-18	By: HK
	Payment Type: Check

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15941 SW Thrush Ln
City/State/ZIP: BEAVERTON OR	
Suite/bldg /apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 101
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	5.9	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$499.74

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No: 32018-0198
Date Issued: 5-22-18	By: HK
	Payment Type: Check

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15956 Sw Wren Lane
City/State/ZIP:	
Suits/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 21
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton Inc	
Address: 4380 SW Macadam Ave #100	
City/State/ZIP: Portland OR	
Phone: 503 222 4151	Fax:
E-mail: magrismer@drhorton.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as above	
Contact name: Mark Grismer	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less	1	168.52		4
Ea. add'l 500 sq. ft. or portion	7	30.10		
Limited energy, residential (with above sq. ft.)	1	40.19		2
Limited energy, multi-family residential (with above sq. ft.)		79.41		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	100.28		2
201 amps to 400 amps		119.38		2
401 amps to 600 amps		198.56		2
601 amps to 1,000 amps		259.68		2
Over 1,000 amps or volts		597.59		2
Utility reconnect		79.41		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		79.41		2
201 amps to 400 amps		110.31		2
401 amps to 600 amps		159.40		2
601 amps to 1,000 amps		195.05		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.69		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		70.25		2
Each add'l branch circuit		3.69		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		79.41		2
Pump or irrigation circle		79.41		2
Sign or outline lighting		79.41		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41		2
Each additional inspection over allowable in any of the above				
Per inspection		70.25		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit **542.58**



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3/24/2018	Permit: 5208-1262
Date Issued: 5-22-18	By: <i>[Signature]</i>
	Payment Type: check

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15942 SW Wren Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg /apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 20
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: <i>Alan Brown</i>	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	5.9	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		70.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits – new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL		0.00	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		0.00	
TOTAL PERMIT FEE		\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit: **399.78**



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 3/15/2018	Permit No: B2018-952
Date Issued: 5-22-18	By: TK
Payment Type: Cheek	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15558 SW Wren Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 1
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total *
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	4	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	190.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits -- new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$425.76

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: B7018-2205
Date Issued: 5/22/2018	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1205 SW 158TH AVE.
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
RE-FEED SERVICE MAST ON ELECTRICAL SERVICE AT AN EXISTING RESIDENCE.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: WHISKEY HILL ELECTRIC, INC.	
Address: P.O. Box 206	
City/State/ZIP: HUBBARD, OR 97032	
Phone: 503-981-4640	Fax: 503-981-4643
E-mail: CUAT@WHE-INC.COM	CCB lic. no.: 162985
Electrical lic. no.: C36	City or metro lic.: 8849
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: CUAT CRIBBINS	Date: 5-14-2018
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input checked="" type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			115.83	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			13.90	
TOTAL PERMIT FEE			129.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No: B7018-2206
Date Issued: 5/22/2018	By: [Signature]
	MAY 21 2018
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1145 SW 158th AVE.
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
RE-FEED SERVICE MAST ON ELECTRICAL SERVICE AT AN EXISTING RESIDENCE.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: WHISKEY HILL ELECTRIC, INC.	
Address: P.O. Box 206	
City/State/ZIP: HUBBARD, OR 97032	
Phone: 503-981-4640	Fax: 503-981-4643
E-mail: CVAT@WHE-INC.COM	CCB lic. no.: 162985
Electrical lic. no.: C36	City or metro lic.: 8849
Supervising electrician signature, required: [Signature]	
Print name: CURT CRIBBINS	Date: 5-14-2018
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			115.83	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			13.90	
TOTAL PERMIT FEE			129.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00540

Approval Code: 05058G 5/22/2018 10:35 am

E-mailed To: jason@canyonridgeelectric.com

B2018-2207

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7475 SW CHERYL LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Conser	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CD03600	
DESCRIPTION OF WORK	
Replace panel, ground/bond	
APPLICANT	
Name: Jason Points	
Phone: 5033206871	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1152	CCB lic. no.: 207631
Business Name: CANYON RIDGE ELECTRIC INC	
Contact:	
Address: 14150 CANYON RIDGE DR	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5037222119	Fax: 5036504868
Email: jason.canyonridgeelectric@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-22-18	Permit No.: B2018-22-09
Date Issued: 5-22-18	By: MK
	Payment Type: VISA

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input checked="" type="checkbox"/> Other: Solar PV
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"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1220 Southwest Queen Lane, Beaverton, Oregon, 97008, United States
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	
Residential rooftop solar PV 5.51kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 05/18/2018
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 05/18/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate			
Each additional inspection (1) (OAR 918-309-0070)		80.00	
FEE TOTALS			Recalculate
Subtotal			0.00
-<< Check box if plan review is required			
Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$129.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 Form B70-1005 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 1-23-18	Permit No: B2015-0311
Date Issued: 5/21/2018	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<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"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: SW Bahur Loop
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Lombard Avenue
Cross street/directions to job site: SW Lombard Ave	
Subdivision: Lombard Ave	Lot no.: 7
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lombard and Bahur Properties	
Address: 11279 SW Ellison Rd	
City/State/ZIP: Tigard, OR	
Phone: 503-922-9055	Fax:
E-mail: hillecrest_homes@msn.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lombard & Bahur Properties	
Contact name: Chris Boerste	
Address:	
City/State/ZIP:	
Phone: 503-922-9055	Fax:
E-mail: hillecrest_homes@msn.com	
CONTRACTOR	
Business name: Ross Electric Inc.	
Address: 2870 SE 75th Ave. Suite 203	
City/State/ZIP: Hillsboro, Oregon 97123	
Phone: (503) 642-2800	Fax: (503) 642-5815
E-mail: rosselectric@comcast.net	CCB lic. no.: 157891
Electrical lic. no.: 34-436C	City or metro lic.: 7867
Supervising electrician signature, required:	
Print name: Stephen L Ross	Date: 1/19/2018
Authorized signature: <i>[Signature]</i>	
Print name: Steve Ross	Date: 1/19/2018

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	3	34.77		
Limited energy, residential (with above sq. ft.)	1	46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$345.37

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00537

Approval Code: 03268S 5/21/2018 3:34 pm

E-mailed To: mikeselectric@mikeselectric.biz

B2018-2188

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14625 SW BONANZA CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Christie & Aaron Crosby	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DD11600	
DESCRIPTION OF WORK	
Panel Change, GFCIs to code	
APPLICANT	
Name: DARRYL MOLLENHAUER	
Phone: 5036496991	Fax: 5036411902
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$128.61
State surcharge (12% of permit total)			\$15.43
TOTAL PERMIT FEE			\$144.04

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/21/2018	Permit No. 152018-2166
Date Issued:	BY
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Replaced A.C. OUTDOOR UNIT.	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 1804064256	Job address: 15240 SW Barcelona Ct
City/State/ZIP: Beaverton Oregon 97076	Project name: Geoff Heywood Retro.
Suite/bldg./apt. no.:	Lot no.:
Cross street/directions to job site:	
Subdivision:	Tax map/parcel no.: 15120A29011
DESCRIPTION OF WORK	
Add New heat + cool system.	
Accessories to existing electrical DISCONNECT.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Geoff Heywood	Address: 15240 SW Barcelona Ct
City/State/ZIP: Beaverton, OR 97007	Phone: 503 816 8682
E-mail: labrindog13@comcast.net	Fax:
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Performance	Contact name: Sean Williamson
Address: 12700 SW Hall Blvd Suite F	City/State/ZIP: Tigard, OR 97223
Phone: 503-568-2737	Fax:
E-mail: seanw@performinsulation.com	
CONTRACTOR	
Business name: Performance	Address: 12700 SW Hall Blvd Suite F
City/State/ZIP: Tigard, OR 97223	Phone: 503-598-8001
E-mail:	CCB lic. no.: 199448
Electrical lic. no.: LHS 350	City or metro lic.:
Supervising electrician signature, required:	Print name: Sean Williamson
Authorized signature: _____	Date: 5/14/18
Print name: Sean Williamson	Date: 5/14/18

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	51.14
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			119,820.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			9,172.00
TOTAL PERMIT FEE			119,820.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00536

Approval Code: 038967 5/21/2018 1:51 pm

E-mailed To: pcsteve20@frontier.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16942 NW HAZELGROVE CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: smith	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131DB02300	
DESCRIPTION OF WORK	
master suite remodel	
APPLICANT	
Name: steve peppmeier	
Phone: 5035370890	Fax: 5035386033
Email:	
CONTRACTOR	
Elec lic. no.: 36-114C	CCB lic. no.: 187490
Business Name: PC ELECTRIC INC	
Contact:	
Address: PO BOX 517	
City/State/ZIP: NEWBERG, OR 97132	
Phone: 5035370890	Fax: 5035386033
Email: pcsteve20@frontier.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
TOTAL PERMIT FEE			\$109.96

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00535

Approval Code: 290508 5/21/2018 11:19 am

E-mailed To: office@youngelectricco.com

B2018-2183

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6800 SW AMBER LN	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: Mundlin	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA11600	
DESCRIPTION OF WORK	
Replace cadet heaters	
APPLICANT	
Name: Matt Hawes	
Phone: 9718885081	Fax: 5036460960
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stories <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00533

Approval Code: 175081 5/21/2018 8:58 am

E-mailed To: ghsparkygary@aol.com

B20018-2179

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8510 SW MAVERICK TER	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BC08100	
DESCRIPTION OF WORK	
Bath and closet remodel	
APPLICANT	
Name: GARY HATTON	
Phone: 503-465-8145	Fax: 503-465-8517
Email:	
CONTRACTOR	
Elec lic. no.: C1010	CCB lic. no.: 202034
Business Name: GARYS ELECTRIC CO LLC	
Contact:	
Address: 1401 SW WALLULA DR	
City/State/ZIP: GRESHAM, OR 97080	
Phone: 5034658145	Fax: 5034658517
Email: ghsparkygary@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00534

Approval Code: 111200 5/21/2018 9:00 am

E-mailed To: kandice@nwsteele.com

B2018-2180

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7885 SW CIRRUS DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 170910 25C	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DD00300	
DESCRIPTION OF WORK	
Replace Panel	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Recreational Vehicle Parks	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00530

Approval Code: 28250G 5/20/2018 10:19 am

E-mailed To: genesiselectricnw@gmail.com

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 8025 SW BARNARD DR

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name: Big Al Jim Murai

Cross Street/directions to job site:

Tax map/parcel no.: 1S129BA02100

DESCRIPTION OF WORK

Kitchen remodel, new range circuit, can lights dining light, island outlets, switching and receptacles.

APPLICANT

Name: KEITH CIMINSKI

Phone: 5033038056

Fax: 5033038605

Email:

CONTRACTOR

Elec lic. no.: C692

CBB lic. no.: 192658

Business Name: GENESIS ELECTRIC NW LLC

Contact:

Address: 16379 TRAIL VIEW DR

City/State/ZIP: OREGON CITY, OR 97045

Phone: 5033038056

Fax: 5033038605

Email: GENESISELECTRICNW@GMAIL.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other

- Fire pumps
 Emergency systems
 Addition of a new motor load of 100 HP or more
 Six or more residential units in one structure
 Health care facilities

- Hazardous locations
 A service or feeder rated at 600 amps or more
 Buildings more than three stor
 Marinas and boat yards
 Floating buildings
 Commercial-use agricultural buildings
 Installation of a 150 KVA or larger separately derived sys
 "A", "E", or "I-2" or "I-3"
 Recreational Vehicle Parks
 Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00531

Approval Code: 701255 5/21/2018 5:55 am

E-mailed To: hec@hugheselectrical.com

32018-2176

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9825 SW SUNSHINE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Graphic Products	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123BA01100	
DESCRIPTION OF WORK	
HEC# 18A372 --- Repair an outlet and replace ballast in lights	
APPLICANT	
Name: David Trapp	
Phone: 5036472221	Fax: 5036477754
Email:	
CONTRACTOR	
Elec lic. no.: 34-281C	CCB lic. no.: 49850
Business Name: HUGHES ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 10490 NW JACKSON QUARRY RD	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036472221	Fax: 5036477754
Email: HEC@HUGHESELECTRICAL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00532

Approval Code: 00488G 5/21/2018 8:10 am

E-mailed To: sunlight.inc1@comcast.net

B2018-2177

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4570 SW WATSON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Big's Chicken	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AD00400	
DESCRIPTION OF WORK	
New service for future Big's Chicken tenant. Landlord (shell) work only to include new meter, 2 single phase panels, temporary outlets and HVAC re-connect	
APPLICANT	
Name: Peter Kozarez	
Phone: 9712225758	Fax: 3606949728
Email:	
CONTRACTOR	
Elec lic. no.: C230	CCB lic. no.: 172549
Business Name: SUNLIGHT ELECTRIC INC	
Contact:	
Address: 2804 NE 65TH AVE #D	
City/State/ZIP: VANCOUVER, WA 98661	
Phone: 3607723877	Fax: 3606949728
Email: sunlightinc2@comcast.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 201 to 400 amps	1	\$137.89	\$137.89
Branch circuits			
Branch circuits with service or feeder each circuit	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$154.93
State surcharge (12% of permit total)			\$18.59
TOTAL PERMIT FEE			\$173.52

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>8/21/2018</u>	Permit No. <u>52018-2169</u>
Date Issued:	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>8155 SW Canyon Road</u>
City/State/ZIP: <u>Portland OR 97225</u>	
Suite/bldg./apt. no.:	Project name: <u>AL</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Install 12-30-Amp Disconnects</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Adam Mabee</u>	
Address: <u>8155 SW Canyon Road</u>	
City/State/ZIP: <u>Portland OR 97225</u>	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>5-21-2018</u>
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Same as owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	<u>2</u>	81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE		<u>95</u>	<u>65</u>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

City of Beaverton Community Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 5/21/2018	Permit No.: B2018-2171
Date Issued: 5/21/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9880 SW Beaverton Hillsdale HWY
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: 9880
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Reconnect two RTU's	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: 05/14/18
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: same as below	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC, LLC	
Address: 3075 SW Century Blvd Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax: (503) 848-2597
E-mail: mmalstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.: 7433
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Mike Sicard	Date: 05/14/18
Authorized signature: <i>[Signature]</i>	
Print name: Michael Malstrom	Date: 05/14/18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		144.20		4
Ea. add'l 500 sq. ft. or portion		25.75		
Limited energy, residential (with above sq. ft.)		34.40		2
Limited energy, multi-family residential (with above sq. ft.)		67.95		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		85.80		2
201 amps to 400 amps		102.15		2
401 amps to 600 amps		169.90		2
601 amps to 1,000 amps		222.20		2
Over 1,000 amps or volts		511.35		2
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		67.95		2
201 amps to 400 amps		94.40		2
401 amps to 600 amps		136.40		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.15		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	60.10	60.10	2
Each add'l branch circuit	1	3.15	3.15	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		67.95		2
Utility reconnect		67.95		1
Pump or irrigation circle		67.95		2
Sign or outline lighting		67.95		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95		2
Each additional inspection over allowable in any of the above				
Per inspection		60.10		
Investigation fee				
Other:				
ELECTRICAL PERMIT FEES				
Subtotal			63.25	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			7.59	
TOTAL PERMIT FEE			70.84	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-21-18	Permit No.: 82018-2163
Date Issued: 5-21-18	By: JK
	Payment Type: Check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 240 NW Lost Springs TDR
City/State/ZIP: PORTLAND OR 97229	
Suite/bldg./apt. no.: # 2B	Project name: BRAVE COLLECTIVE
Cross street/directions to job site:	
Subdivision: TIMBERLAND TC	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
INSTALLATION OF NEW WALL SIGN	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: LIFT NW CROSS FALLS dba TIMBERLAND TC	
Address: 1300 SW 5TH AVE	
City/State/ZIP: PORTLAND OR 97201	
Phone: 704.962.1210	Fax:
E-mail: LAUREN.PENG@CBRE.COM	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SECURITY SIGNS, INC	
Contact name: CYNDI STOCKS	
Address: 2424 SE HOLGATE BLVD	
City/State/ZIP: PORTLAND, OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	
CONTRACTOR	
Business name: SECURITY SIGNS, INC	
Address: 2424 SE HOLGATE BLVD	
City/State/ZIP: PORTLAND, OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	
Electrical lic. no.: 26-560CLS	City or metro lic.: 2561
Supervising electrician signature, required: <i>MJ</i>	
Print name: MARC LINDQUIST, 383 SIG	Date: 5/21/18
Authorized signature: <i>Cyndi Stocks</i>	
Print name: CYNDI STOCKS	Date: 5/21/2018

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits – new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting	2	91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			8205.45

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 5-21-18	Permit No.: B2018-2161
Date Issued: 5-21-18	By: ML
Payment Type: Visa	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9120 SW Hall Blvd
City/State/ZIP: Beaverton, OR 97223-4485	
Suite/bldg./apt. no.: Ste D	Project name: Chipotle
Cross street/directions to job site: Oleson Rd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Z SIGN Hook ups	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Chipotle	
Address: 9120 SW Hall Blvd Ste D	
City/State/ZIP: Beaverton, OR 97223-4485	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Hannah Sign Systems	
Contact name: Dave Lanphere	
Address: 1660 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	
CONTRACTOR	
Business name: Hannah Sign Systems	
Address: 1660 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	CCB lic. no.: 203638
Electrical lic. no.: 676SIG	City or metro lic.: 11533
Supervising electrician signature, required:	
Print name: Dave Demuth	Date: 5-18-18
Authorized signature:	
Print name: Dave Lanphere	Date: 5-18-18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	2	91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$205.45

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-21-18</u>	Permit No.: <u>B2018-2158</u>
Date Issued: <u>5-21-18</u>	By: <u>JKH</u>
Payment Type: <u>Check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: <u>Temp Electrical Permit</u>	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>5357 5835 SW MAIN AV</u>
City/State/ZIP: <u>BEAVERTON</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>RT4 & MAIN</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Temp. Electricity Permit</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Ted Nomato</u>	
Address: <u>5835 SW P.O. BOX 7091</u>	
City/State/ZIP: <u>BEAVERTON</u>	
Phone: <u>503-887-6428</u>	Fax: <u>503-646-4236</u>
E-mail: <u>PNIHALL@AOL.COM</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>5/21/18</u>
<input checked="" 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:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE			<u>\$102.75</u>	\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3-15-18	Permit No.: B2018-1120
Date Issued: 5/17/2018	<i>an</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15635 SW Redbird St
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 123
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: <i>Alan Brown</i>	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	4.32	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$437.44

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00529

Approval Code: 718145 5/18/2018 3:54 pm

E-mailed To: mikeselectric@mikeselectric.biz

32018-2151

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13230 SW 31ST ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Chet Britten	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DC01000	
DESCRIPTION OF WORK	
50 amp circuit for car charger	
APPLICANT	
Name: Darryl Mollenhauer	
Phone: 5036496991	Fax: 5036411902
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Beaverton
O H E G O N

City Of Beaverton
12725 SW Milikan Way
Beaverton, OR 97076
Phone: 503-526-2542
Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00528

Approval Code: 418124 5/18/2018 12:42 pm

E-mailed To: kandice@nwsteele.com

PLAN REVIEW

- Please check all that apply:
- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
 - Fire pumps
 - Emergency systems
 - Addition of a new motor load of 100 HP or more
 - Six or more residential units in one structure
 - Health care facilities
 - Hazardous locations
 - A service or feeder rated at 600 amps or more
 - Buildings more than three stor
 - Marinas and boat yards
 - Floating buildings
 - Commercial-use agricultural buildings
 - Installation of a 150 KVA or larger separately derived sys
 - "A", "E", or "I-2" or "I-3"
 - Recreational Vehicle Parks
 - Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 7920 SW CIRRUSS DR

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name: 170910 13L

Cross Street/directions to job site:

Tax map/parcel no.: 1S127AA00700

DESCRIPTION OF WORK

Replace Panel

APPLICANT

Name: Kandice Brown

Phone: 5032681311

Fax:

Email:

CONTRACTOR

Elec lic. no.: C489

CCB lic. no.: 186140

Business Name: STEELE ELECTRIC LLC

Contact:

Address: 716 Roxe Drive

City/State/ZIP: FOREST GROVE, OR 97116

Phone: 5032681311

Fax: 5033726448

Email: dan@nwsteele.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00527

Approval Code: 418183 5/18/2018 12:38 pm

E-mailed To: kandice@nwsteele.com

B2018-2144

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7960 SW CIRBUS DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 170910 13H	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AA00700	
DESCRIPTION OF WORK	
Replace Panel	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00526

Approval Code: 418143 5/18/2018 12:34 pm

E-mailed To: kandice@nwsteele.com

B2018-2143

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8105 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 170910 11L	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AA00700	
DESCRIPTION OF WORK	
Change Panel	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00525

Approval Code: 215710 5/18/2018 9:46 am

E-mailed To: office@youngelectricco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16320 NW BLUERIDGE DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Adams	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CC00600	
DESCRIPTION OF WORK	
Electrical panel change, replace disconnect	
APPLICANT	
Name: Darin Adams	
Phone: 9718885081	Fax: 5036460960
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$120.09
State surcharge (12% of permit total)			\$14.41
TOTAL PERMIT FEE			\$134.50

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-18-18	Permit No.: B2015-2138
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: SIGN Hook UP	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4725 SW Lombard
City/State/ZIP: BEAVERTON OR 97005	Project name: GAME HOUSE
Suite/bldg./apt. no.:	Cross street/directions to job site: Lombard & 2nd
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
SIGN Hook-UP	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: CENTRAL BETHANY DELUP.	
Address: 15160 NW LADLAW RD	
City/State/ZIP: PORTLAND OR 97229	
Phone: 503 696-2800	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: BEAVERTON SIGNS	
Contact name: MIKE HOLMAN	
Address: 3899 SW HALL BLVD	
City/State/ZIP: BLMOLTON OR 97005	
Phone: 503-672-9037	Fax:
E-mail: MIKE@BEAVERTONSIGNS.COM	
CONTRACTOR	
Business name: ELECTRIC AVE SIGN	
Address: 16005 NE 12TH ST.	
City/State/ZIP: VANCOUVER WA 98684	
Phone: 360-903-5447	Fax:
E-mail:	CCB lic. no.: 193446
Electrical lic. no.: SIG-611	City or metro lic.: CLS-23
Supervising electrician signature, required: [Signature]	
Print name: MICHAEL PAGANSON	Date: 5-18-18
Authorized signature: [Signature]	
Print name: MICHAEL PAGANSON	Date: 5-18-18

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		152.85		4
Ea. add'l 500 sq. ft. or portion		27.30		
Limited energy, residential (with above sq. ft.)		36.46		2
Limited energy, multi-family residential (with above sq. ft.)		72.03		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		90.95		2
201 amps to 400 amps		108.28		2
401 amps to 600 amps		180.09		2
601 amps to 1,000 amps		235.53		2
Over 1,000 amps or volts		542.03		2
Utility reconnect		72.03		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		72.03		2
201 amps to 400 amps		100.06		2
401 amps to 600 amps		144.58		2
601 amps to 1,000 amps		144.58		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.34		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		63.71		2
Each add'l branch circuit		3.34		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		72.03		2
Pump or irrigation circle		72.03		2
Sign or outline lighting	1	72.03		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		72.03		2
Each additional inspection over allowable in any of the above				
Per inspection		63.71		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



Electrical Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-15-18	Permit No.: B2015-2139
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: SIGN HOOK UP	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12390 SW Broadway
City/State/ZIP: BEAVERTON OR 97005	Project name: Giovanni's
Suite/bldg./apt. no.:	Cross street/directions to job site: BROADWAY & HALL
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
SIGN - HOOK-UP	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: MIKE	
Address: 12390 SW BROADWAY ST.	
City/State/ZIP: BEAVERTON OR 97007	
Phone: 503 644-8767	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: BEAVERTON SIGNS	
Contact name: MIKE HOLMAN	
Address: 3899 SW HALL BLVD	
City/State/ZIP: BEAVERTON OR 97005	
Phone: 503-672-9037	Fax:
E-mail: MIKE@BEAVERTONSIGNS.COM	
CONTRACTOR	
Business name: ELECTRIC AVE SIGN	
Address: 16005 NE 12TH ST.	
City/State/ZIP: VANCOUVER WA 98684	
Phone: 360-903-5447	Fax:
E-mail:	CCB lic. no.: 193446
Electrical lic. no.: SIG-611	City or metro lic.: CLS-23
Supervising electrician signature, required: [Signature]	
Print name: MICHAEL PRIGGON	Date: 5-18-18
Authorized signature: [Signature]	
Print name: MICHAEL PRIGGON	Date: 5-18-18

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		152.85		4
Ea. add'l 500 sq. ft. or portion		27.30		
Limited energy, residential (with above sq. ft.)		36.46		2
Limited energy, multi-family residential (with above sq. ft.)		72.03		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		90.95		2
201 amps to 400 amps		108.28		2
401 amps to 600 amps		180.09		2
601 amps to 1,000 amps		235.53		2
Over 1,000 amps or volts		542.03		2
Utility reconnect		72.03		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		72.03		2
201 amps to 400 amps		100.06		2
401 amps to 600 amps		144.58		2
601 amps to 1,000 amps		144.58		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.34		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		63.71		2
Each add'l branch circuit		3.34		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		72.03		2
Pump or irrigation circle		72.03		2
Sign or outline lighting		72.03		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		72.03		2
Each additional inspection over allowable in any of the above				
Per inspection		63.71		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00515

Approval Code: 040052 5/16/2018 12:00 pm

E-mailed To: jamie.j@doublejelectricinc.com

B2015-2107

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11805 SW BRUCE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Papulski	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122BD04383	
DESCRIPTION OF WORK	
Install 5.9kw roof mount pv system	
APPLICANT	
Name: Jamie Jones	
Phone: 5414794489	Fax: 5412792241
Email:	
CONTRACTOR	
Elec lic. no.: C1333	CCB lic. no.: 218418
Business Name: DOUBLE J ELECTRIC INC	
Contact:	
Address: PO BOX 247	
City/State/ZIP: GRANTS PASS, OR 97528	
Phone: 5414794489	Fax:
Email: jamie.j@doublejelectricinc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Renewable Energy			
5.01 to 15 kva - pv	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-18-18</u>	Permit No.: <u>B2018-2135</u>
Date Issued: <u>5-18-18</u>	By: <u>TK</u>
Payment Type: <u>Check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>11835 SW Tuckerwood Ct</u>
City/State/ZIP: <u>Beaverton OR</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replace FPE Panel w/ 150 MB. Add bath, hood, Range, Micro circuits.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Iamasaki</u>	
Address: <u>11835 SW Tuckerwood Ct</u>	
City/State/ZIP: <u>Beaverton OR</u>	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>TDS Elect.</u>	
Address: <u>PO Box 1521</u>	
City/State/ZIP: <u>Clackamas OR</u>	
Phone: <u>503.710.0866</u>	Fax:
E-mail:	CCB lic. no.: <u>170193</u>
Electrical lic. no.: <u>C164</u>	City or metro lic.:
Supervising electrician signature, required: <u>Tren Schweitzer</u>	
Print name: <u>Tren Schweitzer</u>	Date: <u>5/18/18</u>
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	<u>1</u>	115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	<u>5</u>	4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE				<u>\$153.59</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00522

Approval Code: 07684G 5/17/2018 3:12 pm

E-mailed To: bsinner@fivestarelectric.org

B2018-2132

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15455 SW WILLAMETTE VALLEY CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Hot Tub Circuit	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AC09400	
DESCRIPTION OF WORK	
Upgrade existing 30A hot tub circuit to 50A	
APPLICANT	
Name: Jason Pilts	
Phone: 5033240948	Fax: 5033240973
Email:	
CONTRACTOR	
Elec lic. no.: 34-665C	CCB lic. no.: 158231
Business Name: FIVE STAR ELECTRIC INC	
Contact:	
Address: 756 SW BAILEY AVE	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5033240948	Fax: 5033240973
Email: egoodrich@fivestarelectric.org	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00523

Approval Code: 08996G 5/17/2018 4:26 pm

E-mailed To: permits@elementalenergy.net

B2018-2133

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10175 SW EGRET PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Zach Gorman Tesla	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132BB03000	
DESCRIPTION OF WORK	
New wallconnect car charger	
APPLICANT	
Name: John Grieser	
Phone: 5039675786	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1228	CCB lic. no.: 195141
Business Name: ELEMENTAL ENERGY LLC	
Contact:	
Address: 6819 SE FOSTER RD	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5039675786	Fax:
Email: JOHN@ELEMENTALENERGY.NET	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Electrical Permit Application



12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-17-18</u>	Permit No.: <u>32018-2129</u>
Date Issued: <u>5-17-18</u>	By: <u>HK</u>
	Payment Type: <u>Check</u>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>4545 SW Angel</u>
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.: <u>160</u>	Project name: <u>Milk + T Boba Tea Cafe</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Add 2 Strobes to existing Fire Alarm</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: <u>phipps@fpsnw.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: <u>05/17/18</u>
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Fire Protection Services, Inc.</u>	
Contact name: <u>David M. Phipps</u>	
Address: <u>9950 SW Arctic Drive</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Phone: <u>(503) 590-3732</u>	Fax: <u>(503) 628-6214</u>
E-mail: <u>phipps@fpsnw.com</u>	
CONTRACTOR	
Business name: <u>Fire Protection Services, Inc.</u>	
Address: <u>9950 SW Arctic Drive</u>	
City/State/ZIP: <u>Beaverton, OR. 97005</u>	
Phone: <u>(503) 590-3732</u>	Fax: <u>(503) 628-6214</u>
E-mail: <u>phipps@fpsnw.com</u>	CCB lic. no.: <u>154333</u>
Electrical lic. no.: <u>334-488CLE</u>	City or metro lic.: <u>7603</u>
Supervising electrician signature, required: _____	
Print name: <u>David M. Phipps LEA #120</u>	Date: <u>05/17/18</u>
Authorized signature: _____	
Print name: <u>David M. Phipps</u>	Date: <u>05/17/18</u>

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		160.49	0.00	4
Ea. add'l 500 sq. ft. or portion		28.67	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		95.50	0.00	2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		569.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		75.63	0.00	2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		151.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.51	0.00	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting		75.63	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: <u>Add 2 Strobes to existing Fire Alarm</u>		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			<u>102.73</u>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-16-18	Permit No.: 320182114
Date Issued: 5-17-18	By: MKR
	Payment Type: M/C

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other: RECONNECT
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 11744 SW BOONES BEND DR
City/State/ZIP: BEAVERTON / OR / 97008	Project name:
Suite/bldg./apt. no.: BUILDING #43	
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
REFERRED BY PORTLAND GENERAL ELECTRIC, ELECTRICITY HAS BEEN OFF 6+ MONTHS. NEED STICKER TO VERIFY METER IS WORKING PROPERLY	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: GHASSAN P. SAMANDER	
Address: 11744 SW BOONES BEND DR	
City/State/ZIP: BEAVERTON / OR / 97008	
Phone: (503) 268-3964	Fax:
E-mail: gsamander@msn.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>G. Samander</i>	Date: 05-16-18
<input checked="" 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:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
FEE SCHEDULE				
Description	City	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect	1	91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$102.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00521

Approval Code: 04188G 5/17/2018 10:58 am

E-mailed To: solarpdx@me.com

B2018-2125

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6642 SW MILES CT	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name: Gretchen Petersen	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S124AD00800	
DESCRIPTION OF WORK	
Ground and bond	
APPLICANT	
Name: David Thompson	
Phone: 5033192192	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C923	CCB lic. no.: 199188
Business Name: ALAMEDA ELECTRIC INC	
Contact: David Thompson	
Address: 3415 NE 44TH	
City/State/ZIP: PORTLAND, OR 97213	
Phone: 5033192192	Fax:
Email: solarpdx@me.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B2018-2120

Residential Electrical Authorization To Begin Work

05350-BEL-18-00520

Approval Code: 029951 5/17/2018 8:57 am

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11816 SW WINDMILL DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood creek apt	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
Apartment remodel new circuits for washer, dryer and micro hood. New heaters and all new devices and lighting.	
APPLICANT	
Name: chris riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	139	\$4.26	\$592.14
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$856.72
State surcharge (12% of permit total)			\$102.81
TOTAL PERMIT FEE			\$959.53

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00518

Approval Code: 016661 5/16/2018 4:44 pm

E-mailed To: bc0x@quadrantsystems.net

B2018-2118

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15900 SW REGATTA LN	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BA01500	
DESCRIPTION OF WORK	
Prewire for Surveillance system, network, and TV	
APPLICANT	
Name: Brittney Cox	
Phone: 5032345558	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-565CLE	CCB lic. no.: 96806
Business Name: QUADRANT SECURITY	
Contact:	
Address: PO BOX 14833	
City/State/ZIP: PORTLAND, OR 97293	
Phone: 5032345558	Fax:
Email: info@quadrantsystems.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00519

Approval Code: 063223 5/16/2018 8:32 pm

E-mailed To: larry@dickinsonselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10690 SW 133RD PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133AC05900	
DESCRIPTION OF WORK	
kitchen remodel	
APPLICANT	
Name: lawrence dickinson	
Phone: 503-246-3550	Fax: 503-213-6049
Email:	
CONTRACTOR	
Elec lic. no.: 26-140C	CCB lic. no.: 65534
Business Name: DICKINSONS ELECTRIC	
Contact:	
Address: 8449 SW BARBUR BLVD	
City/State/ZIP: PORTLAND, OR 97219	
Phone: 5032463550	Fax: 5032136049
Email: Larrydickinson@verizon.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/>
<input type="checkbox"/> Health care facilities		<input type="checkbox"/>	<input type="checkbox"/>
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
TOTAL PERMIT FEE			\$109.96

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00517

Approval Code: 616195 5/16/2018 2:59 pm

E-mailed To: peter@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2660 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: C180495 - Marine Cedar CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109AD02600	
DESCRIPTION OF WORK	
Install Voice data Cable for Comcast service in "Suite C"	
APPLICANT	
Name: Greg Harmon	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
		<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00516

Approval Code: 079092 5/16/2018 2:30 pm

E-mailed To: portlandpermits@cochraninc.com

B2018-2112

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15480 SW Bunting St	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: CLEAResult Trillium Woods	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
512327 PM485 Trillium Woods Install inline switch at water heaters (48 units) Address is 15480 SW Bunting St; Beaverton, OR Sean Kibbee is Electrician / Gary Eades is PM	
APPLICANT	
Name: Stephanie Swenson	
Phone: 9712054256	Fax: 9712054268
Email:	
CONTRACTOR	
Elec lic. no.: 37-546C	CCB lic. no.: 72942
Business Name: COCHRAN INC	
Contact:	
Address: 7550 SW TECH CENTER DRIVE #220	
City/State/ZIP: TIGARD, OR 97223	
Phone: 9712054242	Fax: 9712054268
Email: rsmith2@cochraninc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	47	\$4.26	\$200.22
Electrical Permit Fees			
Subtotal			\$281.36
State surcharge (12% of permit total)			\$33.76
TOTAL PERMIT FEE			\$315.12

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work
05350-BEL-18-00514

B2018-2095

Approval Code: 026191 5/15/2018 11:41 pm

E-mailed To: jimeastgateelec@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16320 NW BLUERIDGE DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CC00600	
DESCRIPTION OF WORK	
New circuit for A/C	
APPLICANT	
Name: James Campbell	
Phone: 5032528910	Fax: 5036614136
Email:	
CONTRACTOR	
Elec lic. no.: 26-340C	CCB lic. no.: 43701
Business Name: WIRED CONSTRUCTION INC	
Contact:	
Address: 1410 NE 106TH AVE #206	
City/State/ZIP: PORTLAND, OR 972203934	
Phone: 5032528910	Fax: 5036614136
Email: jimeastgateelec@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00513

Approval Code: 002919 5/15/2018 3:56 pm

E-mailed To: ashli.elsperman@iesci.net

B2018-2091

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14600 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 311480120 - Nike Merlin Tech Bar	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132DA01400	
DESCRIPTION OF WORK	
Provide branch power for tech bar at front entry	
APPLICANT	
Name: Nick Badger	
Phone: 5036481900	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C448	CCB lic. no.: 182452
Business Name: IES COMMERCIAL INC	
Contact:	
Address: 16135 SW 74TH AVE	
City/State/ZIP: PORTLAND, OR 97224	
Phone: 5036481900	Fax: 5036709572
Email: cathy.herinckx@ies-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. 52018-2083
Date Issued: 5/15/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: NEW 516V HOOK-UP	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8640 SW HALL BLVD
City/State/ZIP: BEAVERTON, OR 97008	Project name: TICKLECLIPS
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
516V HOOK-UP	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: MARY MAUE	
Address: 8748 SW HALL BLVD	
City/State/ZIP: BEAVERTON OR 97008	
Phone: 503-841-0808	Fax:
E-mail: MERIMAU6@GMAIL.COM	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: BEAVERTON SIGOS	
Contact name: MIKE HOLMAN	
Address: 3899 SW HALL BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 503-672-9037	Fax:
E-mail:	
CONTRACTOR	
Business name: ELECTRIC AVENUE SIGOS	
Address: 16005 NE 12TH ST.	
City/State/ZIP: VANCOUVER WA 98684	
Phone: 360-903-5447	Fax:
E-mail:	CCB lic. no.: 193446
Electrical lic. no.: SIG-611	City or metro lic.: CLS-23
Supervising electrician signature, required: [Signature]	
Print name: MICHAEL PRINGLETON	Date: 5-14-18
Authorized signature: [Signature]	
Print name: MICHAEL PRINGLETON	Date: 5-14-18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		152.85		4
Ea. add'l 500 sq. ft. or portion		27.30		
Limited energy, residential (with above sq. ft.)		36.46		2
Limited energy, multi-family residential (with above sq. ft.)		72.03		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		90.95		2
201 amps to 400 amps		108.28		2
401 amps to 600 amps		180.09		2
601 amps to 1,000 amps		235.53		2
Over 1,000 amps or volts		542.03		2
Utility reconnect		72.03		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		72.03		2
201 amps to 400 amps		100.06		2
401 amps to 600 amps		144.58		2
601 amps to 1,000 amps		144.58		2
Branch circuits -- new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.34		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		63.71		2
Each add'l branch circuit		3.34		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		72.03		2
Pump or irrigation circle		72.03		2
Sign or outline lighting	1	72.03		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		72.03		2
Each additional inspection over allowable in any of the above				
Per inspection		63.71		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

102-73



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00512

Approval Code: 08891B 5/15/2018 10:39 am

E-mailed To: miller97@canby.com

B 2018-2081

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7780 SW BRISTOL CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120CD02500	
DESCRIPTION OF WORK	
10 circuits	
APPLICANT	
Name: Chris Miller	
Phone: 5034073600	Fax: 5036512064
Email:	
CONTRACTOR	
Elec lic. no.: C112	CCB lic. no.: 167575
Business Name: C MILLER ELECTRIC INC	
Contact:	
Address: 26670 S HWY 170	
City/State/ZIP: CANBY, OR 97013	
Phone: 5036511616	Fax: 5036512064
Email: MILLER97@CANBY.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Recreational Vehicle Parks	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	9	\$4.26	\$38.34
Electrical Permit Fees			
Subtotal			\$119.48
State surcharge (12% of permit total)			\$14.34
TOTAL PERMIT FEE			\$133.82

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00510

Approval Code: 015127 5/15/2018 9:14 am

E-mailed To: toryn.grubbe@cve.com

B2018-2078

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2755 SW 153RD DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 41706 BC19	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108AC00300	
DESCRIPTION OF WORK	
Low voltage voice and data	
APPLICANT	
Name: Toryn Grubbe	
Phone: 5034316600	Fax: 5036241436
Email:	
CONTRACTOR	
Elec lic. no.: 37-976C	CCB lic. no.: 148222
Business Name: CACHE VALLEY ELECTRIC COMPANY	
Contact:	
Address: PO BOX 405	
City/State/ZIP: LOGAN, UT 843230405	
Phone: 4357526405	Fax: 5034316600
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
<input type="checkbox"/> Six or more residential units in one structure		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00511

Approval Code: 015223 5/15/2018 9:18 am

E-mailed To: toryn.grubbe@cve.com

B2018-2077

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3005 SW 154TH TER	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 41705 BC16	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108DB00200	
DESCRIPTION OF WORK	
Low voltage paging speakers	
APPLICANT	
Name: Toryn Grubbe	
Phone: 5034316600	Fax: 5036241436
Email:	
CONTRACTOR	
Elec lic. no.: 37-976C	CCB lic. no.: 148222
Business Name: CACHE VALLEY ELECTRIC COMPANY	
Contact:	
Address: PO BOX 405	
City/State/ZIP: LOGAN, UT 843230405	
Phone: 4357526405	Fax: 5034316600
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
		<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 3-15-18	Permit No.: B2015-1121
Date Issued: 5-15-18	By: JLR
Payment Type: Check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15645 SW Redbird St.
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 122
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized Signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less	1	168.52		4
Ea. add'l 500 sq. ft. or less	2	30.10		
Limited energy, residential (with above sq. ft.)	1	40.19		2
Limited energy, multi-family residential (with above sq. ft.)		79.41		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	100.28		2
201 amps to 400 amps		119.38		2
401 amps to 600 amps		198.56		2
601 amps to 1,000 amps		259.68		2
Over 1,000 amps or volts		597.59		2
Utility reconnect		79.41		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		79.41		2
201 amps to 400 amps		110.31		2
401 amps to 600 amps		159.40		2
601 amps to 1,000 amps		195.05		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25		2
Each add'l branch circuit		3.69		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		79.41		2
Pump or irrigation circle		79.41		2
Sign or outline lighting		79.41		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41		2
Each additional inspection over allowable in any of the above				
Per inspection		70.25		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit **449.12**



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 3/5/2018	Permit No: B2018-0948
Date Issued: 5-15-18	By: JLK
Payment Type: check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15578 SW Wren Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 3
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	6	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	1	100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL		0.00	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		0.00	
TOTAL PERMIT FEE		\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit **503.64**



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 3/5/2018	Permit No: B2018-0950
Date Issued: 5-15-18	By: HK
Payment Type: Check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15566 SW Wren Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 2
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less	1	168.52		4
Ea. add'l 500 sq. ft. or portion	2	30.10		
Limited energy, residential (with above sq. ft.)	1	40.19		2
Limited energy, multi-family residential (with above sq. ft.)		79.41		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	100.28		2
201 amps to 400 amps		119.38		2
401 amps to 600 amps		198.56		2
601 amps to 1,000 amps		259.68		2
Over 1,000 amps or volts		597.59		2
Utility reconnect		79.41		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		79.41		2
201 amps to 400 amps		110.31		2
401 amps to 600 amps		159.40		2
601 amps to 1,000 amps		195.05		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25		2
Each add'l branch circuit		3.69		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		79.41		2
Pump or irrigation circle		79.41		2
Sign or outline lighting		79.41		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41		2
Each additional inspection over allowable in any of the above				
Per inspection		70.25		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			\$310.60	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			\$37.27	
TOTAL PERMIT FEE			\$347.87	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 3/15/2018	Permit No: 32018-0955
Date Issued: 5-15-18	By: JK
Payment Type: check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15586 SW When Lane
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 4
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE #100	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: MAGRISMER@DRHORTON.COM	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: MARK GRISMER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	168.52	4
Ea. add'l 500 sq. ft. or portion	by 1	30.10	
Limited energy, residential (with above sq. ft.)	1	40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits – new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL		0.00	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		0.00	
TOTAL PERMIT FEE		\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit **425.76**



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-15-18	Permit No.: 32018-2076
Date Issued: 5-15-18	By: NR
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: J9688	Job address: 15900 SW Regatta Lane
City/State/ZIP: Beaverton OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Moving/Rewiring existing fire alarm equipment.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: First Response	
Contact name: Marsha Miller	
Address: 4907 SW Griffith Drive	
City/State/ZIP: Beaverton OR 97005	
Phone: 503-207-5344	Fax: 503-207-5301
E-mail: frs.schedu@fr-inc.com	
CONTRACTOR	
Business name: First Response	
Address: 4907 SW Griffith Drive	
City/State/ZIP: Beaverton OR 97005	
Phone: 503-207-5344	Fax:
E-mail:	CCB lic. no.: 111-713
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name: Corey Clawson LEA495.3	Date: 5/15/18
Authorized signature: _____	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: 1		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				2293
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$102.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/15/2018	Permit No: B2018-2074
Date Issued: 5/15/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master built or <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 2390SV	Job address: 4545 SW Angel Ave
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Milk T
Cross street/directions to job site: 1st & Angel	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Low voltage controls for HVAC.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner (Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.)	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Arjae Sheet Metal inc.	
Contact name: Ken Klunder	
Address: 8545 SE McLoughlin Blvd	
City/State/ZIP: Milwaukie, OR 97222	
Phone: (503) 231-7717	Fax: (503) 230-4888
E-mail: ken@arjae.com	
CONTRACTOR	
Business name: Arjae Sheet Metal inc.	
Address: 8545 SE McLoughlin Blvd	
City/State/ZIP: Milwaukie, OR 97222	
Phone: (503) 231-7717	Fax: (503) 230-4888
E-mail: ken@arjae.com	OCB lic. no.: 60835
Electrical lic. no.: 26-1208LE	City or metro lic.: 3126
Supervising electrician signature: [Signature]	Date: 05/15/18
Print name: Ken Klunder	Date: 05/15/18
Authorized signature: [Signature]	Date: 05/15/18
Print name: Ken Klunder	Date: 05/15/18

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits -- new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				91.72
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				11.01
TOTAL PERMIT FEE				\$102.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-15-18	Permit No.: B2018-2072
Date Issued: 5-15-18	By: Wth
Payment Type: check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 3905 S.W. 117th AVE # F
City/State/ZIP: BEAVERTON, OR 97005	Project name: MR. FORMAL
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
CONNECT 1 SET OF INTERNALLY ILLUMINATED SET OF CHANNEL LETTERS TO EXISTING ELECTRICAL.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: HARSH INVESTMENT PROPERTIES	
Address: 1430 S.W. BROADWAY SUITE 100	
City/State/ZIP: PORTLAND, OR 97201	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: MEYER SIGN Co. of OREGON	
Contact name: Tony McCormick	
Address: 15205 S.W. 74th AVE.	
City/State/ZIP: TIGARD, OR 97224	
Phone: 971-232-5021	Fax:
E-mail: PERMITS@MEYERSIGNCO.COM	
CONTRACTOR	
Business name: MEYER SIGN Co. of OREGON	
Address: 15205 S.W. 74th AVE.	
City/State/ZIP: TIGARD, OR 97224	
Phone: 971-232-5021	Fax:
E-mail: SAME AS ABOVE	CCB lic. no.: 64014
Electrical lic. no.: 20-190 CLS	City or metro lic.: 1899
Supervising electrician signature, required: [Signature]	
Print name: Tony Barclay	Date: 5/10/18
Authorized signature: [Signature]	
Print name: Tony McCormick	Date: 5/10/18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	1	91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$102.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. B1018-2046
Date Issued: 5/11/2018	By: [Signature]
	Payment Type: 1156

TYPE OF WORK	
<input type="checkbox"/> New construction	<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 no.:	Job address: 2855 SW WEST POINT AVE
City/State/ZIP: PORTLAND OR 97225	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Redrywall existing wall moving electrical outlets as required. Possible new circuit for electric flooring.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: PAT JESSON	
Address: 2855 SW WEST POINT AVE	
City/State/ZIP: PORTLAND OR 97225	
Phone: 503-432-8401	Fax:
E-mail: pat@KatiaDesign.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: [Signature] Date: 5/11/2018	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Same as owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total *
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	2
Each add'l branch circuit	3	4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17

105.19



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00508

Approval Code: 214155 5/14/2018 10:55 am

E-mailed To: peter@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4105 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: F	
Project Name: C180529 - Red Robin 97005 CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
Install Voice Data Cable For Comcast Service.	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00509

Approval Code: 025343 5/14/2018 1:56 pm

E-mailed To: lmceachern@dyna-oregon.com

B2018-2061

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9205 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: B	
Project Name: Quinstreet TI	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DB00700	
DESCRIPTION OF WORK	
Tenant Improvement-(4) Circuits	
APPLICANT	
Name: Dan Zigler	
Phone: 5038499063	Fax: 5032267720
Email:	
CONTRACTOR	
Elec lic. no.: 26-59C	CCB lic. no.: 66793
Business Name: DYNALECTRIC CO	
Contact:	
Address: 5805 SW HOOD AVE	
City/State/ZIP: PORTLAND, OR 97239	
Phone: 5032266771	Fax: 5032267818
Email: lmceachern@dyna-portland.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00505

Approval Code: 014133 5/14/2018 8:33 am

E-mailed To: hec@hugheselectrical.com

B2018-2065

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8285 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 145	
Project Name: Suite 145	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AA00600	
DESCRIPTION OF WORK	
HEC# 18A358 - disconnect and reconnect RTU unit	
APPLICANT	
Name: Steve Jasnoch	
Phone: 503-647-2221	Fax: 503-647-7754
Email:	
CONTRACTOR	
Elec lic. no.: 34-281C	CCB lic. no.: 49850
Business Name: HUGHES ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 10490 NW JACKSON QUARRY RD	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036472221	Fax: 5036477754
Email: HEC@HUGHESELECTRICAL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00507

Approval Code: 214122 5/14/2018 10:22 am

E-mailed To: peter@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15455 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 130	
Project Name: C180584 - Cornell Pain CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CA00500	
DESCRIPTION OF WORK	
Install voice Data Cable for Comcast service	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00506

Approval Code: 214140 5/14/2018 10:04 am

E-mailed To: service@axiselectricinc.com

B 2018-2027

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16950 SW LISA ST	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: HVAC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106AD01101	
DESCRIPTION OF WORK	
Disconnect and reconnect 12 units	
APPLICANT	
Name: alta haase	
Phone: 5419242427	Fax: 5419261809
Email:	
CONTRACTOR	
Elec lic. no.: C376	CCB lic. no.: 179368
Business Name: AXIS ELECTRIC INC	
Contact:	
Address: 1981 FESCUE ST SE STE B	
City/State/ZIP: ALBANY, OR 97322	
Phone: 5419242427	Fax: 5419261809
Email: service@axiselectricinc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	13	\$4.26	\$55.38
Electrical Permit Fees			
Subtotal			\$136.52
State surcharge (12% of permit total)			\$16.38
TOTAL PERMIT FEE			\$152.90

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/14/2018	Permit No: 52018-0562
Date Issued: 5/14/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 10388.1	Job address: 3055 SW CEDAR HILLS BOULEVARD
City/State/ZIP: BEAVERTON, OREGON	
Suite/bldg./apt. no.:	Project name: BEST BUY
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
WIRE FOR RECONFIGURATION OF STORE LAYOUT	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: STONER ELECTRIC, INC.	
Contact name: DENNIS WHITCOMB	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: (503) 462-5214	Fax: (503) 659-4968
E-mail: PERMITS@STONERGROUP.COM	
CONTRACTOR	
Business name: STONER ELECTRIC, INC.	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: (503) 462-6500	Fax: (503) 659-4968
E-mail: permits@stonergroup.com	CCB lic. no.: 44823
Electrical lic. no.: 26-122C	City or metro lic.: 4416
Supervising electrician signature, required: <i>Michael Falconer</i>	
Print name: MICHAEL FALCONER, 3496S	Date: 05/14/18
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	102	4.26	434.52	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			515.66	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			61.88	
TOTAL PERMIT FEE			\$577.54	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00504

Approval Code: 437047 5/11/2018 12:10 pm

E-mailed To: office@youngelectricco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11764 SW MURRE TER	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Hager	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133CC55581	
DESCRIPTION OF WORK	
Install circuit for car charger	
APPLICANT	
Name: Matt Hawes	
Phone: 9718885081	Fax: 5036460960
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: B7018-2053
Date Issued: 5/14/2018	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 7720 Southwest Hillcrest Place, Beaverton, Oregon, 97008, United States
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: VOSE	Lot no.: R198075
Tax map/parcel no.: 1S122CC00611	
DESCRIPTION OF WORK	
Residential rooftop solar PV 7.54kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 05/09/2018
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 05/09/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>3-28-18</u>	Permit No.: <u>B2018-1323</u>
Date Issued: <u>5-14-18</u>	By: <u>HK</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>6139 SW Murray Blvd</u>
City/State/ZIP: <u>Beaverton, OR 97008</u>	Project name: <u>Murray Dental</u>
Suite/bldg./apt. no.:	Cross street/directions to job site: <u>Murray and Hall Blvd</u>
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Tenant improvement</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Vast Electric Inc.</u>	
Address: <u>802 main street ste 100B</u>	
City/State/ZIP: <u>Oregon City, OR 97045</u>	
Phone: <u>503-793-0871</u>	Fax: <u>503-612-6603</u>
E-mail: <u>trungbrothers@gmail.com</u>	CCB lic. no.: <u>175531</u>
Electrical lic. no.: <u>C-280</u>	City or metro lic.:
Supervising electrician signature, required: <u>@muretsop</u>	
Print name: <u>Alvin Vandorstap</u>	Date: <u>03/28/18</u>
Authorized signature: <u>Trung Nguyen</u>	
Print name: <u>TRUNG NGUYEN</u>	Date: <u>03/28/18</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input checked="" type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	<u>1</u>	115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	<u>7</u>	81.14	<u>81.14</u>	2
Each add'l branch circuit	<u>39</u>	4.26	<u>127.8</u>	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			<u>208.94</u>	
Plan review (25% of permit fee)			<u>52.24</u>	
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE			<u>380.24</u>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: 152018-2036
Date Issued: 5/11/2018	By: <i>[Signature]</i>
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<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 checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master buldger	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15127 SW Ivy Glenn Ct
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
(1) feeder, (12) circuits	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: -	Fax: -
E-mail:	
CONTRACTOR	
Business name: Distinct Electric Inc.	
Address: 4742 Liberty rd S #219	
City/State/ZIP: salem, OR 97302	
Phone: (503) 910-9216	Fax: (503) 763-6880
E-mail: distinctelectric@gmail.com	CCB lic. no.: 161089
Electrical lic. no.: 24-523C	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Dustin Moul	Date: 05/11/18
Authorized signature:	Date:
Print name:	Date:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A" "E," "1-2," "1-3" occupancy		
	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit. Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services of feeders installation, alteration, and/or relocation			
200 amps or less	1	115.83	115.83
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits -- new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit			
		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit			
	1	81.14	81.14
Each add'l branch circuit	11	4.26	46.86
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			243.83
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			29.26
TOTAL PERMIT FEE			\$273.09

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00503

Approval Code: 043222 5/10/2018 7:32 pm

E-mailed To: peter@dickinsonselectric.com

B2018-2034

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6604 SW 160TH AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Cindy Owen	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120BC09200	
DESCRIPTION OF WORK	
Kitchen and laundry remodel	
APPLICANT	
Name: Peter Dickinson	
Phone: 5037406100	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1190	CCB lic. no.: 209997
Business Name: P DICKINSON ELECTRIC INC	
Contact:	
Address: 20719 SW LIDO CT	
City/State/ZIP: ALOHA, OR 97078	
Phone: 5037406100	Fax:
Email: PETER@DICKINSONSELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00502

Approval Code: 28011P 5/10/2018 4:31 pm

E-mailed To: lisap@roth-heat.com

B2018-2028

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14170 SW BARLOW CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: LeClaire/130035	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC03294	
DESCRIPTION OF WORK	
reconnect gas furnace and new circuit to air conditioner	
APPLICANT	
Name: Ryan LeClaire	
Phone: 5098443109	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C535	CCB lic. no.: 14008
Business Name: ROTH ZACHRY HEATING INC	
Contact:	
Address: PO BOX 1265	
City/State/ZIP: CANBY, OR 97013	
Phone: 5032661249	Fax: 5032663478
Email: korym@roth-heat.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

B2018-2026

05350-BEL-18-00501

Approval Code: 62560P 5/10/2018 3:34 pm

E-mailed To: lisap@roth-heat.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13500 SW HITEON CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Reed/129957	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BA01500	
DESCRIPTION OF WORK	
circuit to air conditioner	
APPLICANT	
Name: Randall Reed	
Phone: 5038039528	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C535	CCB lic. no.: 14008
Business Name: ROTH ZACHRY HEATING INC	
Contact:	
Address: PO BOX 1265	
City/State/ZIP: CANBY, OR 97013	
Phone: 5032661249	Fax: 5032663478
Email: korym@roth-heat.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Marine and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00500

Approval Code: 110185 5/10/2018 9:58 am

E-mailed To: peter@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6107 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: C180342 - UPC CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AA00103	
DESCRIPTION OF WORK	
Install Voice Data Cable for Comcast Service	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00498

Approval Code: 054750 5/9/2018 1:47 pm

E-mailed To: kevin@MyersElectric.us

B2018-2008

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10950 SW 11TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115DD00200	
DESCRIPTION OF WORK	
Install 75KVA transformer, Panel, and outlets to equipment.	
APPLICANT	
Name: Kevin Kent	
Phone: 5033070023	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C873	CCB lic. no.: 197673
Business Name: MYERS ELECTRIC & AUTOMATION INC	
Contact:	
Address: 26102 NE 230TH ST	
City/State/ZIP: BATTLE GROUND, WA 98604	
Phone: 5033070023	Fax:
Email: kevin@MyersElectric.us	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	11	\$4.26	\$46.86
Electrical Permit Fees			
Subtotal			\$162.69
State surcharge (12% of permit total)			\$19.52
TOTAL PERMIT FEE			\$182.21

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00499

Approval Code: 001062 5/9/2018 3:56 pm

E-mailed To: permits@stonergroup.com

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 2800 SW CEDAR HILLS BLVD

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: WALKER CENTER REGENCY CENTER

Cross Street/directions to job site:

Tax map/parcel no.: 1S109AD02600

DESCRIPTION OF WORK

RETROFIT EXTERIOR LIGHTING - LED UPGRADE

APPLICANT

Name: Sarabeth Dodd

Phone: 5034626500

Fax:

Email:

CONTRACTOR

Elec lic. no.: 26-122C

CCB lic. no.: 44823

Business Name: STONER ELECTRIC INC

Contact:

Address: 1904 SE OCHOCO

City/State/ZIP: MILWAUKIE, OR 97222

Phone: 5034626500

Fax: 5036594968

Email: DENNISW@STONERGROUP.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder rated at 600 amps or more
- Buildings more than three stories
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger separately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: 152018-2005
Date Issued: 5/9/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 27098	Job address: 12730 SW Canyon Rd
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: People Ready
Cross street/directions to job site: SW Canyon / SW Hall	
Subdivision:	Lot no.:
Tax map/parcel no.: 18 116AA 03300	
DESCRIPTION OF WORK	
Connect to existing electrical	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Canyon Rd LLC	
Address: 6859 S. Eastern Ave	
City/State/ZIP: Las Vegas, NV 89119	
Phone: 702-851-8155	Fax:
E-mail: marie@gsappwa.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: [Signature]	Date:
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: People Ready	
Contact name: Jessica	
Address: 12730 SW Canyon Rd	
City/State/ZIP: Beaverton, OR 97005	
Phone: 503-641-7858	Fax:
E-mail:	
CONTRACTOR	
Business name: ES+A Sign & Awning	
Address: 89975 Prairie Rd	
City/State/ZIP: Eugene OR 97005	
Phone: 541-485-5540	Fax: 541-485-5813
E-mail: marcia@blazesigns.com	OSCCB lic. no.: 163470
Electrical lic. no.: 514516	City or metro lic.: 8461
Supervising electrician signature, required: Gordy Roseboro	
Print name: Gordy Roseboro	Date: 5/8/18
Authorized signature: Marcia Blazes	
Print name: Marcia Blazes	Date: 5/8/18

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		168.52		4
Ea. add'l 500 sq. ft. or portion		30.10		
Limited energy, residential (with above sq. ft.)		40.19		2
Limited energy, multi-family residential (with above sq. ft.)		79.41		2
Services or feeders Installation, alteration, and/or relocation				
200 amps or less		100.28		2
201 amps to 400 amps		119.38		2
401 amps to 600 amps		198.56		2
601 amps to 1,000 amps		259.68		2
Over 1,000 amps or volts		597.59		2
Utility reconnect		79.41		1
Temporary services or feeders Installation, alteration, and/or relocation				
200 amps or less		79.41		2
201 amps to 400 amps		110.31		2
401 amps to 600 amps		159.40		2
601 amps to 1,000 amps		195.05		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25		2
Each add'l branch circuit		3.69		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		79.41		2
Pump or irrigation circle		79.41		2
Sign or outline lighting	1	79.41	79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41		2
Each additional inspection over allowable in any of the above				
Per inspection		70.25		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/15

marcia@blazesigns.com

32018-2003



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00497

Approval Code: 87497Z 5/9/2018 11:21 am

E-mailed To: permits@bullseye-electric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15485 SW GULL CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AB08100	
DESCRIPTION OF WORK	
Add recessed can lights, replace fixtures, install bath exhaust fan	
APPLICANT	
Name: Nori Hoover	
Phone: 3602604814	Fax: 3602564542
Email:	
CONTRACTOR	
Elec lic. no.: C413	CCB lic. no.: 182279
Business Name: BULLSEYE ELECTRIC INCORPORATED	
Contact:	
Address: 9301 NE 83RD AVE	
City/State/ZIP: VANCOUVER, WA 98662	
Phone: 3602604814	Fax: 3602564542
Email: isaac@bullseye-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00496

Approval Code: 009724 5/9/2018 8:53 am

E-mailed To: license@trogersselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9055 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Neighborhood Market 3050	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129DA06400	
DESCRIPTION OF WORK	
demo existing drop to the bakery case and rough in a duplex outlet (1 circuit w/o feeder)	
APPLICANT	
Name: PAUL HOWELL	
Phone: 770-772-3473	Fax: 866-592-9161
Email:	
CONTRACTOR	
Elec lic. no.: 37-727C	CCB lic. no.: 118038
Business Name: LIN R ROGERS ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 2050 MARCONI DR STE 200	
City/State/ZIP: ALPHARETTA, GA 30005	
Phone: 7707723400	Fax: 7705214960
Email: license@trogersselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived stor
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00495

Approval Code: 02324D 5/9/2018 7:44 am

E-mailed To: heather.giraud@lewisav.com

32018-1994

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 6325 SW SPRUCE AVE

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: SO#9971 Dotzenrod

Cross Street/directions to job site:

Tax map/parcel no.: 1S123AB02217

DESCRIPTION OF WORK

Prewire of Audio, data,coax

APPLICANT

Name: Heather Giraud

Phone: 5035381190

Fax:

Email:

CONTRACTOR

Elec lic. no.: 36-119CLE

CCB lic. no.: 177627

Business Name: LEWIS AUDIO VIDEO INC

Contact:

Address: 2112 PORTLAND RD

City/State/ZIP: NEWBERG, OR 97132

Phone: 5035381190

Fax: 5035385419

Email: DENNIS@LEWISAV.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

- Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder rated at 600 amps or more
- Buildings more than three stor
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger seperately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, residential	1	\$46.42	\$46.42
Electrical Permit Fees			
Subtotal			\$46.42
State surcharge (12% of permit total)			\$5.57
TOTAL PERMIT FEE			\$51.99

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-2-18	Permit No.: B2018-1876
Date Issued: 5-9-18	By: <i>JKR</i>
	Payment Type: <i>Visa</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input checked="" type="checkbox"/> Other: Solar PV
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"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15732 Southwest Village Circle, Beaverton, Oregon, 97007, United States
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: West Beaverton	Lot no.: R143856
Tax map/parcel no.: 1S117CD02200	
DESCRIPTION OF WORK	
Residential rooftop solar PV 6.38kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 05/01/2018
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 05/01/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$129.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 Form B70-1005 REV 10/17



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00491

Approval Code: 04933G 5/8/2018 10:16 am

E-mailed To: terryk@phoenixpdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12725 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Install power to RTU on the roof.	
APPLICANT	
Name: Terry Koch	
Phone: 503-231-8006	Fax: 503-235-4300
Email:	
CONTRACTOR	
Elec lic. no.: C89	CCB lic. no.: 162753
Business Name: PHOENIX ELECTRIC CO LLC	
Contact:	
Address: 2215 NE DAVIS	
City/State/ZIP: PORTLAND, OR 97232	
Phone: 5032318006	Fax: 5032334946
Email: johnj@phoenixpdx.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00494

Approval Code: 008308 5/8/2018 3:49 pm

E-mailed To: info@pdxelectric.com

32018-1991

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17710 NW FIELDSTONE DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131BD05600	
DESCRIPTION OF WORK	
Panel	
APPLICANT	
Name: Kelly Palmer	
Phone: 5036399708	Fax: 5032001362
Email:	
CONTRACTOR	
Elec lic. no.: C696	CCB lic. no.: 192731
Business Name: PDX ELECTRIC LLC	
Contact:	
Address: 15816 SW UPPER BOONES FERRY RD	
City/State/ZIP: LAKE OSWEGO, OR 97035	
Phone: 5036399708	Fax: 503-200-1362
Email: INFO@PDXELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Marine and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00493

Approval Code: 718063 5/8/2018 3:36 pm

E-mailed To: peter@cepdx.com

B2018-1990

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 13985 SW FARMINGTON RD

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.: 100

Project Name: C180422 - Hertz CC

Cross Street/directions to job site:

Tax map/parcel no.: 1S116BD01300

DESCRIPTION OF WORK

Install voice data cable for Comcast Service.

APPLICANT

Name: Christina Williams

Phone: 5032559488

Fax: 5032551966

Email:

CONTRACTOR

Elec lic. no.: 26-1054CLE

CCB lic. no.: 142457

Business Name: CAPITOL DATA & COMMUNICATIONS INC

Contact:

Address: 11401 NE MARX

City/State/ZIP: PORTLAND, OR 972201041

Phone: 5032559488

Fax: 5032551966

Email: RICHARDM@CPDX.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder rated at 600 amps or more
- Buildings more than three stories
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger separately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00492

Approval Code: 218053 5/8/2018 10:35 am

E-mailed To: permits@global4security.com

32018-1987

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11445 SW CANYON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Pop Sign	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110DC02600	
DESCRIPTION OF WORK	
security alarm replacement.	
APPLICANT	
Name: JIM LEGGETT	
Phone: 3602166009	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-711CLE	CCB lic. no.: 69705
Business Name: GLOBAL SECURITY & COMMUNICATION INC	
Contact:	
Address: 3212 MAIN ST	
City/State/ZIP: VANCOUVER, WA 98663	
Phone: 3606931900	Fax: 0000000000
Email: permits@global4security.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. B2019-0199
Date Issued: 5/9/2019	By: OK
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 16002 SW Wren Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 23
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton Inc	
Address: 4380 SW Macadam Ave #100	
City/State/ZIP: Portland 97239	
Phone: 503 222 4151	Fax:
E-mail: magrismer@drhorton.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as above	
Contact name: MARK Grismer	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Line Electric, Inc	
Address: 8403 SE Sherrett St	
City/State/ZIP: Portland, OR 97266	
Phone: (971) 645-3807	Fax:
E-mail: PowerLineElectric@yahoo.com	CCB lic. no.: 205976
Electrical lic. no.: C1099	City or metro lic.: 11838
Supervising electrician signature, required: Alan Brown	
Print name: Alan Brown	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less	1	168.52		4
Ea. add'l 500 sq. ft. or portion	1	30.10		
Limited energy, residential (with above sq. ft.)	1	40.19		2
Limited energy, multi-family residential (with above sq. ft.)		79.41		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	100.28		2
201 amps to 400 amps		119.38		2
401 amps to 600 amps		198.56		2
601 amps to 1,000 amps		259.68		2
Over 1,000 amps or volts		597.59		2
Utility reconnect		79.41		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		79.41		2
201 amps to 400 amps		110.31		2
401 amps to 600 amps		159.40		2
601 amps to 1,000 amps		195.05		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		3.69		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		70.25		2
Each add'l branch circuit		3.69		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		79.41		2
Pump or irrigation circle		79.41		2
Sign or outline lighting		79.41		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		79.41		2
Each additional inspection over allowable in any of the above				
Per inspection		70.25		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit **503.64**



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-8-18</u>	Permit No.: <u>B2018-1983</u>
Date Issued: <u>5-8-18</u>	By: <u>[Signature]</u>
Payment Type: <u>VISA</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>5572 SW Ericksen Ave</u>
City/State/ZIP: <u>Beaverton</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>125 Amp Panel Change - Kitchen - Bathroom main split split Remodel</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>BFP Electric LLC</u>	
Address: <u>28075 S Beaver Creek Rd</u>	
City/State/ZIP: <u>Med. no, OR 97042</u>	
Phone: <u>503-515-9792</u>	Fax: <u>503-632-3768</u>
E-mail: <u>bfp.electric@yubak.com</u>	CCB lic. no.: <u>187565</u>
Electrical lic. no.: <u>C463</u>	City or metro lic.: <u>10009</u>
Supervising electrician signature, required: <u>[Signature]</u>	<u>56995</u>
Print name: <u>Ben Bauer</u>	Date: <u>5/8/18</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>Ben Bauer</u>	Date: <u>5/8/18</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	<u>1</u>	115.83	<u>115.83</u>	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	<u>10</u>	4.26	<u>42.60</u>	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE			<u>5177.44</u>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

32018-1975



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00489

Approval Code: 02454G 5/7/2018 2:24 pm

E-mailed To: INFO@ROSECITYELECTRICCO.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10968 SW LARCH LN	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Parkbrook	
Cross Street/directions to job site: Pool Bonding	
Tax map/parcel no.: 1S115AC05200	
DESCRIPTION OF WORK	
Need ok to cover	
APPLICANT	
Name: Jerry Schlechter	
Phone: 5032876164	Fax: 5032821060
Email:	
CONTRACTOR	
Elec lic. no.: C729	CCB lic. no.: 193652
Business Name: ROSE CITY ELECTRIC CO	
Contact:	
Address: PO BOX 10004	
City/State/ZIP: PORTLAND, OR 97296	
Phone: 5032876164	Fax: 5032821060
Email: INFO@ROSECITYELECTRICCO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Reconnect only	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-8-18</u>	Permit No.: <u>B2016-1979</u>
Date Issued: <u>5-8-18</u>	By: <u>[Signature]</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>13800 SW Hargis Rd</u>
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Suite/bldg./apt. no.:	Project name: <u>Nielsen Hall Bathroom</u>
Cross street/directions to job site: <u>250' east of SW Hargis Rd / 139th Ave</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Relocate/add outlets, switches, fixtures for one bathroom.</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Brent Nielsen</u>	
Address: <u>13800 SW Hargis Rd</u>	
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Phone: <u>(503) 459-2770</u>	Fax:
E-mail: <u>brentdnielsen@gmail.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>5/8/18</u>
<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:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				9.74
TOTAL PERMIT FEE			\$90.88	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 VTDD
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 5/18/2018	Permit No.: B2018-1974
Date Issued: 5/18/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 2725 SW CEDAR HILLS BLVD.
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt. no.:	Project name: CHC-Freon piping TI
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
run low voltage stat wiring for 17 future units - this goes with our mech permit B2018-1865	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: HVAC, INC.	
Contact name: JODY DEPEW	
Address: 5188 SE INTERNATIONAL WAY	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: (503) 462-4822	Fax: (503) 462-6555
E-mail: jody@hvacinc.com	
CONTRACTOR	
Business name: HVAC, INC.	
Address: SAME AS ABOVE	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: 50897
Electrical lic. no.: 26-571CLE	City or metro lic.: 2129
Supervising electrician signature, required: <i>Mike Schmidgall</i>	Date: 5/7/18
Print name: MIKE SCHMIDGALL	Date: 5/7/18
Authorized signature: <i>Jody Depew</i>	Date: 5/7/18
Print name: JODY DEPEW	Date: 5/7/18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		160.49	0.00	4
Ea. add'l 500 sq. ft. or portion		28.67	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		95.50	0.00	2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		569.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		75.63	0.00	2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		151.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting		75.63	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: run low voltage stat wiring for 17 future	1	75.63	75.63	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees:				
SUBTOTAL			75.63	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.08	
TOTAL PERMIT FEE			\$84.71	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial

B2018-1973

Residential Electrical Authorization To Begin Work

05350-BEL-18-00488

Approval Code: 317024 5/7/2018 11:42 am

E-mailed To: badgerelectric@qwestoffice.net

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4770 SW HALL BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BC07600	
DESCRIPTION OF WORK	
(3) circuits for (2) roof top AC units and service plug.	
APPLICANT	
Name: Todd Gaber	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00487

Approval Code: 117021 5/7/2018 9:12 am

E-mailed To: permits@bearelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12360 SW CADY LN	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB10300	
DESCRIPTION OF WORK	
New AC/HP, service outlet, new electric furnace, light/plug in attic	
APPLICANT	
Name: Bear Electric	
Phone: 503-678-1355	Fax: 503-678-1108
Email:	
CONTRACTOR	
Elec lic. no.: 24-107C	CCB lic. no.: 20919
Business Name: BEAR ELECTRIC INC	
Contact:	
Address: PO BOX 389	
City/State/ZIP: DONALD, OR 97020	
Phone: 5036781355	Fax: 5036781108
Email: sshpherd@bearelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

32018-1969

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00486

Approval Code: 04324G 5/7/2018 8:08 am

E-mailed To: adam.fox@melectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 1800 SW MERLO DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Standard Bag	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106DD00100	
DESCRIPTION OF WORK	
Install (1) new circuit to roll up door in new building.	
APPLICANT	
Name: Adam Fox	
Phone: 503-645-5323	Fax: 503-690-4843
Email:	
CONTRACTOR	
Elec lic. no.: 34-618C	CCB lic. no.: 153480
Business Name: MILESTONE INVESTMENT CO LLC	
Contact:	
Address: 1281 NE 25TH AVE STE T	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036455323	Fax: 5036904843
Email: adam.fox@melectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voitage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00484

Approval Code: 75119D 5/4/2018 10:17 pm

E-mailed To: garzate1@gmail.com

B2018-1966

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12020 SW CLIFFORD ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Cliford Pump	
Cross Street/directions to job site: SW Cresmoor DR & SW Hall	
Tax map/parcel no.: 1S122CB03200	
DESCRIPTION OF WORK	
Add 1 - 20 Amp Receptacle on 20 Amp / 120 Volt dedicated Circuit for Sewage Ejection Pump.	
APPLICANT	
Name: Gary Arzate	
Phone: 3606243048	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1213	CCB lic. no.: 211166
Business Name: A & G ELECTRIC LLC	
Contact:	
Address: 7801 NE QUARRY RD	
City/State/ZIP: LA CENTER, WA 98629	
Phone: 3606243048	Fax:
Email: garzate1@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. B2018-1972
Date Issued: 5/7/2018	EW
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9100 SW Gemini DR.
City/State/ZIP: Beaverton, OR 97008	Project name:
Suite/bldg./apt. no.:	
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
ADD (4) Duct Smoke Detectors	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: METRO SAFETY & FIRE, INC.	
Address: 14324 SE STARK ST.	
City/State/ZIP: PORTLAND, OR 97233	
Phone: 503-231-2999	Fax:
E-mail: MARC@METROSAFETYANDFIRE.COM	CCB lic. no.: 63657
Electrical lic. no.: 3831LEA	City or metro lic.:
Supervising electrician signature, required: Marc Casey	
Print name: MARC CASEY	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% 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



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-7-18	Permit No.: B2018-1961
Date Issued: 5-7-18	By: JHR
	Payment Type: Check

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12650 SW 7TH
City/State/ZIP: BEAVERTON OR 97005	
Suite/bldg./apt. no.:	Project name: ADDITION
Cross street/directions to job site:	
Subdivision:	Lot no.: 6500
Tax map/parcel no.: 1S115CB	
DESCRIPTION OF WORK	
WIRING FOR ADDITION & 200 Amp service upgrade	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: CHIOSETHUA 10N	
Address: 19242 CEDARVIEW LN	
City/State/ZIP: BEAVERTON OR 97007	
Phone: 503.332.7339	Fax:
E-mail: NELUCHI55@YAHOO.COM	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: CHIOSETHUA 10N	
Address: 19242 SW CEDARVIEW LN	
City/State/ZIP: BEAVERTON OR 97007	
Phone: 503 332 7339	Fax:
E-mail: NELUCHI55@YAHOO.COM	
CONTRACTOR	
Business name: ARON ELECTRICAL CONSTRUCTION	
Address: 15704 NE 70TH ST	
City/State/ZIP: VANCOUVER WA, 98682	
Phone: 503-516-3139	Fax: 360-882-7978
E-mail: ARON_EC@YAHOO.COM	CCB lic. no.: 192748
Electrical lic. no.: C813	City or metro lic.: 10810
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: IOSSIF I. ARON	Date: 5-3-18
Authorized signature: <i>[Signature]</i>	
Print name: IOSSIF I. ARON	Date: 5-3-18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Fee schedule				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	5	4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE				\$239.69

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5/7/2018</u>	Permit No.: <u>52018-1957</u>
Date Issued:	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>9120 SW Hall Blvd</u>
City/State/ZIP: <u>Beaverton, OR 97223</u>	
Suite/bldg./apt. no.:	Project name: <u>Furniture w/ Soul</u>
Cross street/directions to job site: <u>Hall and Greenburg</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Hannah Sign Systems</u>	
Contact name: <u>Dave Lanphere</u>	
Address: <u>1660 SW Bertha Blvd</u>	
City/State/ZIP: <u>Portland, OR 97219</u>	
Phone: <u>(503) 946-8373</u>	Fax: <u>(503) 206-4900</u>
E-mail: <u>davel@hannahsignsystems.com</u>	
CONTRACTOR	
Business name: <u>Hannah Sign Systems</u>	
Address: <u>1660 SW Bertha Blvd</u>	
City/State/ZIP: <u>Portland, OR 97219</u>	
Phone: <u>(503) 946-8373</u>	Fax: <u>(503) 206-4900</u>
E-mail: <u>davel@hannahsignsystems.com</u>	
Electrical lic. no.: <u>676SIG</u>	CCB lic. no.: <u>203638</u>
City or metro lic.: <u>11533</u>	
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: <u>Dave Demuth</u>	Date: <u>4/30/18</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>Dave Lanphere</u>	Date: <u>4/30/18</u>

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities		
<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE			
Description	Qty.	Fee	Total *
Residential single- or multi-family dwelling unit (includes attached garage)			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting	2	91.72	183.44
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permits			
SUBTOTAL			183.44
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			22.01
TOTAL PERMIT FEE			\$205.45

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form 070-1002 REV 10/17



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00481

Approval Code: 03499G 5/4/2018 8:01 am

E-mailed To: tamara.glebe@learelectric.com

B2018-1949

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10062 SW ARCTIC DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 18-210	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CD01300	
DESCRIPTION OF WORK	
Warehouse - Tenant Improvement	
APPLICANT	
Name: David Mumford	
Phone: 5032550733	Fax: 5032550676
Email:	
CONTRACTOR	
Elec lic. no.: 26-411C	CCB lic. no.: 52278
Business Name: LEAR ELECTRIC CO INC	
Contact:	
Address: 6002 NE 112TH AVE	
City/State/ZIP: PORTLAND, OR 97220	
Phone: 5032550733	Fax: 5032550676
Email: dave.mumford@learelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00485

Approval Code: 06621G 5/5/2018 7:12 am

E-mailed To: markselectricllc@icloud.com

B 2018-1948

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5484 SW ALGER AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: G3	
Project Name: repair service feeder	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115DB90871	
DESCRIPTION OF WORK	
Replaced feeder from meter to panel due to nail strike. restored power after repair	
APPLICANT	
Name: Andrew Marks	
Phone: 9715067015	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1238	CCB lic. no.: 212706
Business Name: MARKS ELECTRIC LLC	
Contact:	
Address: 9845 N SYRACUSE ST	
City/State/ZIP: PORTLAND, OR 97203	
Phone: 9715067015	Fax:
Email: MARKSELECTRICLLC@ICLOUD.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00482

Approval Code: 015509 5/4/2018 1:05 pm

E-mailed To: portlandpermits@cochraninc.com

B2018-1950

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16250 SW JENKINS RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: TriMet Elmonica Feeder	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106DA00300	
DESCRIPTION OF WORK	
512317 PM231 TriMet Elmonica 200a Feeder Greg Bambusch	
APPLICANT	
Name: Stephanie Swenson	
Phone: 9712054256	Fax: 9712054268
Email:	
CONTRACTOR	
Elec lic. no.: 37-546C	CCB lic. no.: 72942
Business Name: COCHRAN INC	
Contact:	
Address: 7550 SW TECH CENTER DRIVE #220	
City/State/ZIP: TIGARD, OR 97223	
Phone: 9712054242	Fax: 9712054268
Email: rsmith2@cochraninc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Floating buildings
		<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Commercial-use agricultural buildings
		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00483

Approval Code: 814040 5/4/2018 4:04 pm

E-mailed To: dave@westernsuperiorelectric.com

B-2018-1951

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14290 SW SPANIEL CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Suburban	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BB06100	
DESCRIPTION OF WORK	
Kitchen remodel and den addition	
APPLICANT	
Name: david quintana	
Phone: 5038056873	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C802	CCB lic. no.: 191702
Business Name: WESTERN SUPERIOR ELECTRIC LLC	
Contact:	
Address: 21355 SOUTH GREEN MOUNTAIN ROAD	
City/State/ZIP: COLTON, OR 97017	
Phone: 5038056873	Fax:
Email: WESTERNSUPERIORelectric@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

Please Call for Payment



Electrical Permit Application
 City of Beaverton Community Development
 PO Box 4786, Beaverton, OR 97076
 Phone: (503) 626-2403; Fax: (503) 626-2659
 Internet address: www.beavertonoregon.gov

OFFICE USE ONLY		
Date Received:	MAY 4 2018	Permit No: 02218-1943
Date Issued:		By: [Signature]
Payment Type:		

TYPE OF WORK

New construction 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 no.: J85223 Job address: 12900 SW 9th
 City/State/ZIP: Beaverton OR 97005
 Suite/bldg./apt. no.: Project name: Beaverton Lodge
 Cross street/directions to job site:
 Subdivision: Lot no.:
 Tax map/parcel no.:

DESCRIPTION OF WORK

Heat pump wiring. Unit # 214, 209, 232, 216, 226, 236, 311, 316, 328, 336, 203, 215

PROPERTY OWNER TENANT

Name:
 Address:
 City/State/ZIP:
 Phone: Fax:
 E-mail:

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: Date:

APPLICANT CONTACT PERSON

Business name: westside electric
 Contact name: Aaron Watzig
 Address: 1834 SE 8th Ave
 City/State/ZIP: Portland OR 97214
 Phone: 503 231 1548 Fax: 503 736 0656
 E-mail: Crystal.K@westsideelectric.com

CONTRACTOR

Business name: West Side Electric
 Address:
 City/State/ZIP:
 Phone: 503 231 1548 Fax:
 E-mail: CCB lic. no.: 13306
 Electrical lic. no.: 216-135N City or metro lic.:

Supervising electrician signature, required: [Signature]
 Print name: Randall Roberts 46545
 Authorized signature: [Signature]
 Print name: Crystal Krueger Date: 5/4/18

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps.		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marine and boatyards		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage:			
1,000 sq. ft. or less		152.85	4
Ea. add'l 500 sq. ft. or portion		27.50	
Limited energy, residential (with above sq. ft.)		98.46	2
Limited energy, multi-family residential (with above sq. ft.)		72.03	2
Services or feeders installation, alteration, and/or relocation			
200-amps or less		60.95	2
201-amps to 400-amps		109.20	2
401-amps to 800-amps		160.09	2
801-amps to 1,000-amps		235.53	2
Over 1,000-amps or volts		542.03	2
Utility reconnect		72.03	1
Temporary services or feeders installation, alteration, and/or relocation			
200-amps or less		72.03	2
201-amps to 400-amps		100.08	2
401-amps to 800-amps		144.58	2
801-amps to 1000-amps		170.91	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.84	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	63.71	63.71
Each add'l branch circuit	11	3.84	42.24
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		72.03	2
Pump or irrigation circle		72.03	2
Sign or outline lighting		72.03	2
Signal circuit(s) on limited-energy panel, alteration, or extension. Describe:		72.03	2
Each additional inspection over allowable in any of the above:			
Per inspection		53.71	
Investigation fee			
Other:			
Electrical permit fees:			
SUBTOTAL		100.45	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		12.05	
TOTAL PERMIT FEE		112.50	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-4-18</u>	Permit No.: <u>32018-1940</u>
Date Issued: <u>5-4-18</u>	By: <u>[Signature]</u>
	Payment Type: <u>MIC</u>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>11740 SW MERRILL LANE</u>
City/State/ZIP: <u>BEAVERTON OR 97005</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>LUNDGREN TER</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>INSTALL NEMA 14-50 OUTLET, FOR EVSE IN GARAGE, ON NEW CIRCUIT</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>MIKE CLAUSSEN</u>	
Address: <u>11740 SW MERRILL LANE</u>	
City/State/ZIP: <u>BEAVERTON OR 97005</u>	
Phone: <u>503.207.3410</u>	Fax:
E-mail: <u>mike@clausen.org</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u> Date: <u>05/02/18</u>	
<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:
E-mail:	
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea, add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
* Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	<u>1</u>	81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				<u>\$90.88</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00473

Approval Code: 07510J 5/3/2018 8:40 am

E-mailed To: permits@a-solar.com

B2018-1925

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15127 SW IVY GLENN CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Kerns	
Cross Street/directions to job site: Cornell Rd	
Tax map/parcel no.: 1S120AB06600	
DESCRIPTION OF WORK	
Install of car charger circuit	
APPLICANT	
Name: Tina Kayser	
Phone: 3603100260	Fax: 2603100260
Email:	
CONTRACTOR	
Elec lic. no.: C1179	CCB lic. no.: 207641
Business Name: A AND R SOLAR CORP	
Contact:	
Address: 2444 1ST AVE S	
City/State/ZIP: SEATTLE, WA 98134	
Phone: 2067079937	Fax:
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/3/2018	Permit No.: B2018-1916
Date Issued:	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 5150 SW NORMANDY
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
RE GROUND THE SERVICE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: BARNSON ELECTRIC	
Address: 17057 SW 123RD	
City/State/ZIP: TIGARD OR 97224	
Phone: (503) 747-9067	Fax: (503) 512-5140
E-mail: barnsonelectric@gmail.com	CCB lic. no.: 206781
Electrical lic. no.: 4754s	City or metro lic.: 11978
Supervising electrician signature, required:	
Print name: DAVID LISTER	Date: 05/02/18
Authorized signature: [Signature]	
Print name: DAVID LISTER	Date: 05/02/18

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.74	
TOTAL PERMIT FEE			\$90.88	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.

Form 870-1002

REV 10/17



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00477

Approval Code: 413084 5/3/2018 12:48 pm

E-mailed To: melgarner@garnerelectric.com

B2018-1930

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10827 SW NUTCRACKER CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Bill Scott	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132BD09000	
DESCRIPTION OF WORK	
7 Ckts for kitchen, dining and living room remodel.	
APPLICANT	
Name: Charles Garner	
Phone: 5035911320	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 34-305C	CCB lic. no.: 121159
Business Name: GARNER ELECTRIC CO	
Contact:	
Address: 2920 SE BROOKWOOD AVE #A	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036484552	Fax: 5036427925
Email: ge@garnerelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Commercial-use agricultural buildings
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	6	\$4.26	\$25.56
Electrical Permit Fees			
Subtotal			\$106.70
State surcharge (12% of permit total)			\$12.80
TOTAL PERMIT FEE			\$119.50

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00478

Approval Code: 894968 5/3/2018 2:43 pm

E-mailed To: office@youngelectricco.com

B2018-1931

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17795 NW FALL CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Stevens	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131BD06400	
DESCRIPTION OF WORK	
New service, new panel feeder, car charger	
APPLICANT	
Name: Jonathan Garfield	
Phone: 9718885081	Fax: 5036460960
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations		
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more		
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor		
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards		
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys		
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"		
	<input type="checkbox"/> Recreational Vehicle Parks		
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$120.09
State surcharge (12% of permit total)			\$14.41
TOTAL PERMIT FEE			\$134.50

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit

B 2018-1933



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00476

Approval Code: 025070 5/3/2018 10:46 am

E-mailed To: DENNISW@STONERGROUP.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3125 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: CEDAR HILLS CROSSING	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1090000200	
DESCRIPTION OF WORK	
PROVIDE POWER FOR PYLON SIGNS	
APPLICANT	
Name: JOSH WERSCH	
Phone: 5038054125	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B2018-1934

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00475

Approval Code: 003379 5/3/2018 10:41 am

E-mailed To: license@irogerselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14795 SW MURRAY SCHOLLS DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 112	
Project Name: Chipotle 2716	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DA00800	
DESCRIPTION OF WORK	
We are using existing circuits. Adding 12 outlets.	
APPLICANT	
Name: PAUL HOWELL	
Phone: 770-772-3473	Fax: 866-592-9161
Email:	
CONTRACTOR	
Elec lic. no.: 37-727C	CCB lic. no.: 118038
Business Name: LIN R ROGERS ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 2050 MARCONI DR STE 200	
City/State/ZIP: ALPHARETTA, GA 30005	
Phone: 7707723400	Fax: 7705214960
Email: license@irogerselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations		
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more		
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor		
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards		
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys		
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"		
	<input type="checkbox"/> Recreational Vehicle Parks		
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00480

Approval Code: 713025 5/3/2018 3:52 pm

E-mailed To: office@all-pro-electric.com

B2018-1937

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2500 SW 76TH AVE	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 18-2272 JOHNSON	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S112AB05400
DESCRIPTION OF WORK	
Bathroom remodel & kitchen items	
APPLICANT	
Name: Kevin Poole	
Phone: 5032460361	Fax: 5032460406
Email:	
CONTRACTOR	
Elec lic. no.:	26-1099C
CCB lic. no.:	148108
Business Name: ALL PRO ELECTRIC INCORPORATED	
Contact:	
Address: 6312 SW CAPITOL HWY STE 262	
City/State/ZIP: PORTLAND, OR 97239	
Phone: 5032460361	Fax: 5032460406
Email: info@all-pro-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00479

Approval Code: 003342 5/3/2018 3:15 pm

E-mailed To: info@pdxelectric.com

B 2018-1936

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6325 SW SPRUCE AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S123AB02217
DESCRIPTION OF WORK	
Whole house remodel	
APPLICANT	
Name: Kelly Palmer	
Phone: 5036399708	Fax: 5032001362
Email:	
CONTRACTOR	
Elec lic. no.:	C696
CCB lic. no.:	192731
Business Name: PDX ELECTRIC LLC	
Contact:	
Address: 15816 SW UPPER BOONES FERRY RD	
City/State/ZIP: LAKE OSWEGO, OR 97035	
Phone: 5036399708	Fax: 503-200-1362
Email: INFO@PDXELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	8	\$4.26	\$34.08
Electrical Permit Fees			
Subtotal			\$149.91
State surcharge (12% of permit total)			\$17.99
TOTAL PERMIT FEE			\$167.90

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00474

Approval Code: 213092 5/3/2018 10:29 am

E-mailed To: service@clackamaselectric.com

B2018-1935

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 271 NW PACIFIC GROVE DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: KEN-Kaneshiro-18309	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131DD03400	
DESCRIPTION OF WORK	
Replace 50A feed to sub panel , Replace devices in the Garage	
APPLICANT	
Name: Scott Johnston	
Phone: 5036322420	Fax: 5036322421
Email:	
CONTRACTOR	
Elec lic. no.: 3-606C	CCB lic. no.: 161923
Business Name: CLACKAMAS ELECTRIC INC	
Contact:	
Address: PO BOX 51	
City/State/ZIP: BEAVERCREEK, OR 97004	
Phone: 5036322420	Fax: 5036322421
Email: donna@clackamaselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-3-18</u>	Permit No.: <u>B2018-1922</u>
Date Issued: <u>5-3-18</u>	By: <u>[Signature]</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12195 SW Canon Road
City/State/ZIP: Beaverton OR	
Suite/bldg./apt. no.:	Project name: Car Toys 12
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Low Voltage Wiring / T-Stats	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: brad@americanheating.net	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: American Heating Inc.	
Contact name: Brad Manchester	
Address: 5035 SE 24th Ave	
City/State/ZIP: Portland, OR., 97202	
Phone: (503) 239-4600	Fax: (503) 239-7038
E-mail: brad@americanheating.net	
CONTRACTOR	
Business name: American Heating Inc.	
Address: 5035 SE 24th Ave	
City/State/ZIP: Portland, OR., 97202	
Phone: (503) 239-4600	Fax: (503) 239-7038
E-mail: brad@americanheating.net	CCB lic. no.: 33135
Electrical lic. no.: 26-993-CRE	City or metro lic.: 1077
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: T Steve Young	Date: <u>5-3-18</u>
Authorized signature: <u>[Signature]</u>	
Print name: Brad Manchester	Date: <u>5-3-18</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		152.85		4
Ea. add'l 500 sq. ft. or portion		27.30		
Limited energy, residential (with above sq. ft.)		36.46		2
Limited energy, multi-family residential (with above sq. ft.)		72.03		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		90.95		2
201 amps to 400 amps		108.28		2
401 amps to 600 amps		180.09		2
601 amps to 1,000 amps		235.53		2
Over 1,000 amps or volts		542.03		2
Utility reconnect		72.03		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		72.03		2
201 amps to 400 amps		100.06		2
401 amps to 600 amps		144.58		2
601 amps to 1,000 amps		144.58		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.34		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		63.71		2
Each add'l branch circuit		3.34		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		72.03		2
Pump or irrigation circle		72.03		2
Sign or outline lighting		72.03	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	67.95	67.95	2
Each additional inspection over allowable in any of the above				
Per inspection		63.71		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			67.95	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			8.15	
TOTAL PERMIT FEE			<u>\$102.73</u>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

* Number of inspections allowed per permit.



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00472

Approval Code: 01207G 5/3/2018 6:15 am

E-mailed To: markselectricllc@icloud.com

B 2018-1902

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5486 SW ALGER AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: H1	
Project Name: Sequoia park Building H	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115DB91011	
DESCRIPTION OF WORK	
Removing and replacing lighting and GFCIs on all of building H due to residing of buiding	
APPLICANT	
Name: Andrew Marks	
Phone: 9715067015	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1238	CCB lic. no.: 212706
Business Name: MARKS ELECTRIC LLC	
Contact:	
Address: 9845 N SYRACUSE ST	
City/State/ZIP: PORTLAND, OR 97203	
Phone: 9715067015	Fax:
Email: MARKSELECTRICLLC@ICLOUD.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: 152018-1914
Date Issued: 5/3/2018	<i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 13350 SW Hazel St.
City/State/ZIP: Beaverton, OR 97005	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site: Between Menlo/Erickson
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Low Volt. circuit.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Armando Amador	
Address: 13350 SW Hazel St.	
City/State/ZIP: Beaverton, OR 97005	
Phone: 971 246-2363	Fax:
E-mail: crownwoodconstruction@yahoo.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>[Signature]</i>	Date: 5/3/18
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Danus AS Duna	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: 1		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE			102.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/31/2018	Permit No.: B2018-1912
Date Issued: 5/31/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 7445 SW 101st Ave
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Willyerd
Cross street/directions to job site: Scholls Ferry	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
2 story addition	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Bob Willyerd	
Address: 7445 SW 101st Ave	
City/State/ZIP: Beaverton, OR 97008	
Phone: (971) 777-3835	Fax:
E-mail: bodakalu@hotmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: [Signature]	Date: 05/02/18
<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:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	6	4.26	25.56	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE			158.34	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: B2018-1910
Date Issued: 5/3/2018	<i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 108337	Job address: 2725 SW Cedar Hills Blvd
City/State/ZIP: Beaverton, Or 97005	
Suite/bldg./apt. no.:	Project name: Virginia Garcia
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install Wireless Security System	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Virginal Garcia Memorial Health	
Address: PO Box 6149	
City/State/ZIP: Aloha, Or 97007	
Phone: 503-472-1338	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Performance Systems Integration LLC	
Contact name: Bill Driver	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, Or 97224	
Phone: 503-641-2222	Fax:
E-mail: bill@psintegrated.com	
CONTRACTOR	
Business name: Performance Systems Integration LLC	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: 205924
Electrical lic. no.:	City or metro lic.: 11810
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Bill Driver	Date: 05-03-18
Authorized signature: <i>[Signature]</i>	
Print name: Bill Driver	Date: 05-03-18

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17

102.73



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00471

Approval Code: 913774 5/2/2018 11:19 am

E-mailed To: office@youngelectricco.com

B2018-1908

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6300 SW DALE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Lamm	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AA02526	
DESCRIPTION OF WORK	
Grounding and bonding	
APPLICANT	
Name: Darin Adams	
Phone: 9718885081	Fax: 5036460960
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

Community and Economic Development
 PO Box 4765, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov/building

OFFICE USE ONLY	
Date Received: 4-30-18	Permit No.: B2018-1835
Date Issued: 5-3-18	By: <i>[Signature]</i>
	Payment Type: <i>visa</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" 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"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12385 SW Cady Ln,
City/State/ZIP:	Beaverton, OR 97005
Suite/bldg./apt. no.:	Project name: Julie Jones
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
PV ROOF MOUNT 1.95 KW	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Julie Jones	
Address: 12385 SW Cady Ln,	
City/State/ZIP: Beaverton, OR 97005	
Phone: 503 929 6731	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: SolarCity Corp.	
Address: 6132 NE 112th Ave	
City/State/ZIP: Portland OR 97220	
Phone: 503-894-6903	Fax: 1-866-445-7459
E-mail: Melissa.Farias@SolarCity.com	CCB lic. no.: 180498
Electrical lic. no.: C562	City or metro lic.: 10324
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Nicholas Armstrong - 5873S	Date: 04.30.18
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Farias	Date: 04.30.18

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	63.71	0.00
5.01 to 15 kva (2)		90.95	0.00
15.01 to 25 kva (2)		108.28	0.00
25.01 kva and over (2)		180.09	0.00
Miscellaneous fees, hourly rate		80.00	0.00
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		63.71	0.00
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$90.88

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 rev 7/13



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00464

Approval Code: 012092 5/2/2018 8:29 am
 E-mailed To: DARRELL@CEPDX.COM

B2018-1896

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: AZA Hotmelt #16	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
1 Circuit for Hotmelt #16	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> "A", "E", or "1-2" or "1-3"	<input type="checkbox"/> "A", "E", or "1-2" or "1-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00466

Approval Code: 012083 5/2/2018 8:38 am

E-mailed To: DARRELL@CEPDX.COM

B 2018-1895

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: AZA Hotmelt #18	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
1 Circuit for Hotmelt #18	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00465

Approval Code: 012043 5/2/2018 8:34 am

E-mailed To: DARRELL@CEPDX.COM

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 13955 SW MILLIKAN WAY

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: AZA Hotmelt #17

Cross Street/directions to job site:

Tax map/parcel no.: 1S109CD00200

DESCRIPTION OF WORK

1 Circuit for Hotmelt #17

APPLICANT

Name: Darrell McNeel

Phone: 5032559488

Fax: 5032551966

Email:

CONTRACTOR

Elec lic. no.: 26-496C

CCB lic. no.: 48748

Business Name: CAPITOL ELECTRIC CO INC

Contact:

Address: 11401 NE MARX ST

City/State/ZIP: PORTLAND, OR 972201041

Phone: 5032559488

Fax: 5032551966

Email: DARRELL@CEPDX.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder rated at 600 amps or more
- Buildings more than three stor
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger separately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00467

Approval Code: 012074 5/2/2018 8:47 am

E-mailed To: DARRELL@CEPDX.COM

B 2018-1898

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: AZA Rosenthal Fabric Cutter	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
1 Circuit for Rosenthal Fabric Cutter	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00463

Approval Code: 012022 5/2/2018 8:22 am

E-mailed To: DARRELL@CEPDX.COM

B2018-1897

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: AZA Agile Cranes	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
18 circuits for Agile Cranes	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	17	\$4.26	\$72.42
Electrical Permit Fees			
Subtotal			\$153.56
State surcharge (12% of permit total)			\$18.43
TOTAL PERMIT FEE			\$171.99

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00469

Approval Code: 056339 5/2/2018 10:27 am

E-mailed To: sarac@ticeelectric.com

B2018-1900

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12725 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: Trillium Woods - Building B	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Jobsite Address - Trillium Woods Building B, 15495 SW Bunting St, Beaverton, OR	
Add circuit for water heater in each unit - 24 total units/circuits	
APPLICANT	
Name: Sara Currie	
Phone: 5038728256	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-126C	CCB lic. no.: 166
Business Name: TICE ELECTRIC COMPANY	
Contact:	
Address: 5405 N LAGOON AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5038728230	Fax: 9712303330
Email: sarac@ticeelec.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Recreational Vehicle Parks	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	23	\$4.26	\$97.98
Electrical Permit Fees			
Subtotal			\$179.12
State surcharge (12% of permit total)			\$21.49
TOTAL PERMIT FEE			\$200.61

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00468

Approval Code: 012065 5/2/2018 8:56 am

E-mailed To: hillaryp@cepdx.com

B-2018-1899

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 9525 SW GEMINI DR

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 1S127DB01000

DESCRIPTION OF WORK

Add (3) General purpose duplex receptacles in conference rooms.

APPLICANT

Name: Capitol Electric

Phone: 5032559488

Fax: 5032577121

Email:

CONTRACTOR

Elec lic. no.: 26-496C

CCB lic. no.: 48748

Business Name: CAPITOL ELECTRIC CO INC

Contact:

Address: 11401 NE MARX ST

City/State/ZIP: PORTLAND, OR 972201041

Phone: 5032559488

Fax: 5032551966

Email: DARRELL@CEPDX.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

PLAN REVIEW

Please check all that apply:

- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder rated at 600 amps or more
- Buildings more than three stor
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger separately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-18-00470

Approval Code: 093605 5/2/2018 10:47 am

E-mailed To: sarac@ticeelectric.com

B208-1901

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12725 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: Trillium Woods - Building C	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Jobsite Address - Trillium Woods Building C, 15480 SW Bunting St, Beaverton OR	
Add circuit for water heater in each of 28 units, 28 units/circuits total	
APPLICANT	
Name: Sara Currie	
Phone: 5038728256	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-126C	CCB lic. no.: 166
Business Name: TICE ELECTRIC COMPANY	
Contact:	
Address: 5405 N LAGOON AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5038728230	Fax: 9712303330
Email: sarac@ticeelec.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	27	\$4.26	\$115.02
Electrical Permit Fees			
Subtotal			\$196.16
State surcharge (12% of permit total)			\$23.54
TOTAL PERMIT FEE			\$219.70

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-2-18	Permit No.: B2018-1885
Date Issued: 5-2-18	By: <i>[Signature]</i>
Payment Type: <i>Visa</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
13515 Southwest Breccia Drive,	
Job no.:	Job address: Beaverton, Oregon, 97007, United States
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	
Residential rooftop solar PV 4.35kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 05/01/2018
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 05/01/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$90.88

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 Form B70-1005 REV 10/17



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-2-18	Permit No.: B2018-1883
Date Issued: 5-2-18	By: <i>[Signature]</i>
	Payment Type: <i>VISA</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input checked="" type="checkbox"/> Other: Solar PV
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1730 Southwest Merrill Lane, Beaverton, Oregon, 97005, United States
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Central Beaverton	Lot no.: R2125031
Tax map/parcel no.: 1S110CA20600	
DESCRIPTION OF WORK	
Residential rooftop solar PV 3.7kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 05/01/2018
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 05/01/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$90.88

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 Form B70-1005 REV 10/17



Renewable Electrical Energy Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5-2-18	Permit No.: B2018-1881
Date Issued: 5-2-18	By: <i>HLK</i>
Payment Type: <i>Visa</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
1855 Southwest Edgestone Drive,	
Job no.:	Job address: Beaverton, Oregon, 97007, United States
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Sexton Mountain	Lot no.: R2159763
Tax map/parcel no.: 1S130DD09100	
DESCRIPTION OF WORK	
Residential rooftop solar PV ^{11.0}/₂ kw	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1220 S 630 E #430	
City/State/ZIP: American Fork, UT 84003	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: C1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 05/01/2018
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 05/01/2018

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$129.73

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete

Form B70-1005 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 5/2/2018	Permit No: B2018-1889
Date Issued: 5/2/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9505 SW NIMBIS
City/State/ZIP:	BEAVERTON OR
Suite/bldg./apt. no.: BLDG 12	Project name: FA UPGRADE
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	SHORENSTEIN REALTY SERVICES LP
Address:	10220 SW GROEBURG RD ST 310
City/State/ZIP:	PORTLAND OR 97223
Phone:	503-412-4864
Fax:	503-619-3110
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business name:	CHRISTENSON ELECTRIC
Contact name:	TOM SPIUSBOEY
Address:	17201 NE SACRAMENTO
City/State/ZIP:	PORTLAND OR
Phone:	503-419-3300
Fax:	
E-mail:	458
CONTRACTOR	
Business name:	CHRISTENSON ELECTRIC
Address:	17201 NE SACRAMENTO
City/State/ZIP:	PORTLAND OR
Phone:	503-419-3300
Fax:	
E-mail:	CCB lic. no.: 458
Electrical lic. no.:	LEA 847
City or metro lic.:	
Supervising electrician signature, required:	[Signature]
Print name:	TOM SPIUSBOEY
Date:	
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	X	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-1-18</u>	Permit No.: <u>B2018-1873</u>
Date Issued: <u>5-2-18</u>	By: <u>JKH</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>10199 SW Park Way</u>
City/State/ZIP: <u>Portland, OR 97225</u>	
Suite/bldg./apt. no.:	Project name: <u>ICE-4043</u>
Cross street/directions to job site: <u>SW Park Way and SW Marlow Ave</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Transfer panel replacement. Disconnect/reconnect for new generator, some underground.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Industrial Commercial Electric Company</u>	
Contact name: <u>Tim Furlow</u>	
Address: <u>29030 SW Town Center Loop E Suite 202 #159</u>	
City/State/ZIP: <u>Wilsonville OR 97070</u>	
Phone: <u>503 902 0278</u>	Fax: <u>503 981 0053</u>
E-mail: <u>tim@icecoelectric.com</u>	
CONTRACTOR	
Business name: <u>Industrial Commercial Electric Company</u>	
Address: <u>29030 SW Town Center Loop E Suite 202 #159</u>	
City/State/ZIP: <u>Wilsonville, OR 97070</u>	
Phone: <u>503-981-2383</u>	Fax: <u>503-981-0053</u>
E-mail: <u>tim@icecoelectric.com</u>	CCB lic. no.: <u>164304</u>
Electrical lic. no.: <u>C52</u>	City or metro lic.: <u>11173</u>
Supervising electrician signature, required: <u>Thomas Griffith</u>	Date: <u>5/1/18</u>
Print name: <u>Thomas Griffith - 5318S</u>	Date: <u>5/1/18</u>
Authorized signature: <u>Thomas Griffith</u>	Date: <u>5/1/18</u>
Print name: <u>Thomas Griffith</u>	Date: <u>5/1/18</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	\$115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	4	4.26	\$17.04	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			\$132.87	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			\$15.95	
TOTAL PERMIT FEE			\$148.82	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work
05350-BEL-18-00461

Approval Code: 211014 5/1/2018 10:41 am
 E-mailed To: fred@telesphere.cc

PLAN REVIEW

Please check all that apply:

- New Construction
- Addition/allocation/replacement
- 1 or 2 family dwelling
- Multi-family
- Commercial
- Accessory
- Fire pumps
- Emergency systems
- Addition of a new motor load of 100 HP or more
- Six or more residential units in one structure
- Health care facilities
- Hazardous locations
- A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other
- Buildings more than three stor
- Marinas and boat yards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of a 150 KVA or larger separately derived sys
- "A", "E", or "I-2" or "I-3"
- Recreational Vehicle Parks
- Supply voltage for more than 600 supply volts nominal

FEE SCHEDULE

Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

TYPE OF WORK

- New Construction
- Addition/allocation/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling
- Multi-family
- Commercial
- Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 6200 SW ARCTIC DR
 City/State/ZIP: BEAVERTON, OR 97005
 Suite/bldg./apt.no.:
 Project Name: Card Beaverton move Backboard
 Cross Street/directions to job site: Allen and Artic

Tax map/parcel no.: 1S123BA01700

DESCRIPTION OF WORK

Card Backboard move. Replace cables not long enough to be moved.

APPLICAN

Name: Frederic Ciccotelli
 Phone: 503-880-9412 Fax: 503-880-9412
 Email:

CONTRACTOR

Elec lic. no.: CLE118 CCB lic. no.: 149154 **149154**
 Business Name: FREDERIC LEO CICCOTELLI
 Contact:
 Address: 449 SW ALDERWOOD DR
 City/State/ZIP: WEST LINN, OR 97068
 Phone: 5038809412 Fax: 503-880-9412
 Email: fred@telesphere.cc
 Metro lic. no.:
 Supervising Electrician's lic. no.:
 Supervising Electrician's Name:
 Number of inspections included in paid services:
 Residential Service: 4
 Reconnect Only: 1
 All Other Services: 2

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule the inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: (503) 260-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



City Of Beaverton
 4755 SW Griffith Dr
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-18-00462

Approval Code: 001163 5/1/2018 2:06 pm

E-mailed To: Andrew@squireselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14300 SW TEAL BLVD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Sterling Pointe / Building 97 fire	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133CB00102	
DESCRIPTION OF WORK	
Building 97, unit A, B & C. 1 circuit each for temp power after fire in/hear unit D.	
APPLICANT	
Name: Andrew Cohen	
Phone: 5032521609	Fax: 5032521631
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032521631
Email: cheryl@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 5-1-18 Permit No.: B2018-1861
 Date Issued: 5-1-18 By: H/K
 Payment Type: Cheek

TYPE OF WORK
 New construction 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 no.: _____ Job address: 15900 SW Reppatta Ln
 City/State/ZIP: Beaverton OR 97006 Project name: _____
 Suite/bldg./apt. no.: _____
 Cross street/directions to job site: _____ Lot no.: _____
 Subdivision: _____
 Tax map/parcel no.: _____

DESCRIPTION OF WORK
Install low voltage thermostats.

PROPERTY OWNER TENANT
 Name: Sniff Dog Hotel
 Address: 1828 NW Daleigh St
 City/State/ZIP: Portland, OR 97209
 Phone: 503-953-9997 Fax: _____
 E-mail: Cagay@Sniffdoghotel.com
 Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. Date: _____
 Owner signature: _____

APPLICANT CONTACT PERSON
 Business name: Rite Way Heating
 Contact name: Kristina Browner
 Address: P.O. Box 1815
 City/State/ZIP: Hillsboro, OR 97123
 Phone: (503) 693-3161 Fax: _____
 E-mail: kristina@ritewayheating.com

CONTRACTOR
 Business name: Rite Way Heating
 Address: P.O. Box 1815
 City/State/ZIP: Hillsboro, OR 97123
 Phone: 503 693 3161 Fax: _____
 E-mail: kristina@ritewayheating.com
 CCB lic. no.: 71242
 City or metro lic.: LHP 36
 Supervising electrician signature, required: Robin Way Date: 4/23/2018
 Print name: Robin Way
 Authorized signature: [Signature] Date: 4/23/2018
 Print name: Kristina A. Browner

PLAN REVIEW

Please check all that apply:

- Service or feeder 400amps or more
- Fire pump
- Emergency system
- Addition of new motor load of 100HP or more
- Six or more residential units
- Health-care facilities
- Hazardous locations
- Service or feeder over 600 amps
- Building over three stories
- Marinas and boatyards
- Floating buildings
- Commercial-use agricultural buildings
- Installation of 150 KVA or larger separately derived system
- "A," "E," "1-2," "1-3" occupancy
- Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion (with above sq. ft.)		34.77		2
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	<u>1</u>	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE \$102.				

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit. REV 10/17
 Form B70-1002



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-1-18</u>	Permit No.: <u>B2018-1860</u>
Date Issued: <u>5-1-18</u>	By: <u>ML</u>
	Payment Type: <u>Visa</u>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>10065 SW Nimbus Ave</u>
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Suite/bldg./apt. no.:	Project name: <u>Benchmark Physical Ther</u>
Cross street/directions to job site: <u>Hall</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>2 Circuits</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Hannah Sign Systems</u>	
Contact name: <u>Dave Lanphere</u>	
Address: <u>1660 SW Bertha Blvd</u>	
City/State/ZIP: <u>Portland, OR 97219</u>	
Phone: <u>(503) 946-8373</u>	Fax: <u>(503) 206-4900</u>
E-mail: <u>davel@hannahsignsystems.com</u>	
CONTRACTOR	
Business name: <u>Hannah Sign Systems</u>	
Address: <u>1660 SW Bertha Blvd</u>	
City/State/ZIP: <u>Portland, OR 97219</u>	
Phone: <u>(503) 946-8373</u>	Fax: <u>(503) 206-4900</u>
E-mail: <u>davel@hannahsignsystems.com</u>	CCB lic. no.: <u>203638</u>
Electrical lic. no.: <u>676SIG</u>	City or metro lic.: <u>11533</u>
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: <u>Dave Demuth</u>	Date: <u>4/30/18</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>Dave Lanphere</u>	Date: <u>4/20/18</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 800 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit (includes attached garage)				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Service or feeder installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary service or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension (per panel)				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	<u>2</u>	91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				<u>3205.45</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
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 Form 970-1002 REV 10/17



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>5-1-18</u>	Permit No.: <u>B2018-1859</u>
Date Issued: <u>5-1-18</u>	By: <u>[Signature]</u>
Payment Type: <u>VISA</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: <u>upgrading</u>	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>7470 S.W. Sorrento Rd.</u>
City/State/ZIP: <u>Beaverton, OR 97008</u>	Project name:
Suite/bldg./apt. no.:	
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>grounding upgrade</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>KALEV RAPP</u>	
Address: <u>7470 S.W. SORRENTO Rd.</u>	
City/State/ZIP: <u>Beaverton</u>	
Phone: <u>503-484-5317</u>	Fax: <u>503-520-9540</u>
E-mail: <u>kalev.rapp@yaleo.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>5-1-18</u>
<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:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	Date:
Print name:	
Authorized signature:	Date:
Print name:	

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other: <u>Grounding</u>	<u>1</u>			
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				<u>\$90.88</u>

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 Form B70-1002 REV 10/17