Building Permit Application

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

Beaverton OREGON

Community Development Department
Building Division
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: 9-12-18	Permit No.: B2018-4228
Date Issued: 10/19/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 8855 SW Davies Rd

City/State/ZIP: Beaverton, OR 97008

Suite/bldg./apt. no.:

Project name: Davies Addition

Cross street/directions to job site: SW Stirrup St

Subdivision: Sorrento Ridge

Lot no.: 18

Tax map/parcel no.: 1S128BC Taxlot: 03400

DESCRIPTION OF WORK

Build an attached two story, 1500 sft (total), 2 car garage with new driveway (entrance on SW Stirrup). Current garage (located on Davies) will be converted into living space and old driveway will be removed and replaced with curb, gutter, sidewalk and parking strip.

☑ PROPERTY OWNER	☐ TENANT
Name: Gregory Geller	
Address: 8855 SW Davies Rd	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 330-9092	Fax:
E-mail: gregoryg672@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name:	
Contact name: Gregory Geller	
Address: 8855 SW Davies Rd	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 330-9092	Fax:
E-mail: gregoryg672@gmail.com	

CONTRACTOR

Business name: Home Owner: Gregory Geller

Address:

City/State/ZIP:

Phone: | Fax:

CCB lic.:

Authorized signature:

Print name:	Date:
Gregory Geller	09/12/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation

Number. of bedrooms:		2
Number of bathrooms:		2
Total number of floors:		2
New dwelling area:	square feet	750
Garage/carport area:	square feet	750
Covered porch area:	square feet	184
Deck area:	square feet	
Other structure area:	square feet	

REQUIRED DATA: COMMERCIAL USE CHECKLIST

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

Valuation

Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$648.58
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building Permit Application

Community Development Department
Building Division
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: 9/14/2018	Permit No.: B 2018. 2620
Date Issued: 10-19-18	By:
	Payment Type: Visa

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9645 SW Beaverton Hillsdale Hwy
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.: | Project name: New Office
Cross street/directions to job site: SW 96th Ave
Subdivision: Woodland Acres No.2 | Lot no.: 31
Tax map/parcel no.: 1S114BA

DESCRIPTION OF WORK

Remove and replace roof, new entry dormer, replacement windows, removal of the existing driveway to SW Beaverton Hillsdale Hwy, addition of parking stalls and walkway.

☑ PROPERTY OWNER	☐ TENANT
Name: Matt Williams	
Address: 15252 SW Ivy Glen Ct.	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 616-8592	Fax:
E-mail: Matt@straightlinedr.com	

☐ APPLICANT	☑ CONTACT PERSON
Business name: Straight Line Design & Remodeling LLC.	
Contact name: Steven A. Griffin	
Address: 9645 SW Beaverton Hillsdale Hwy	
City/State/ZIP: Beaverton, OR 97005	
Phone: (971) 275-3261	Fax:
E-mail: Steve@straightlinedr.com	

CONTRACTOR

Business name: Straight Line Design & Remodeling LLC.
Address: 9645 SW Beaverton Hillsdale Hwy
City/State/ZIP: Beaverton, OR 97005
Phone: (971) 275-3261 | Fax:
CCB lic.: 195218

Authorized signature: Matt Williams

Print name: Matt Williams	Date:
Steven A. Griffin	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$75,000
Existing building area:	square feet 1350
New building area:	square feet 0
Number of stories:	2
Type of construction:	
Occupancy groups:	2
Existing:	2
New:	0

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	1,160.74
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: 10-19-18	Permit No.: B2018-4834
Date Issued: 10-19-18	By: JLK
	Payment Type: VISA

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 8905 SW Nimbus Ave.

City/State/ZIP: Beaverton, OR. 97008

Suite/bldg./apt. no.: Suite 400 | Project name: NVoicepay Expansion

Cross street/directions to job site: SW Hall Blvd.

Subdivision: | Lot no.:

Tax map/parcel no.: 1S127AC01000

DESCRIPTION OF WORK

Demolition of existing partitions. Construction of new demising wall, interior partitions and casework.

☒ PROPERTY OWNER	☐ TENANT

Name: Lincoln Property Company - Lee Morrison

Address: 1211 SW 5th Avenue Suite 700

City/State/ZIP: Portland, OR. 97204

Phone: (503) 673-2805 | Fax:

E-mail: LMorrison@LPC.com

☒ APPLICANT	☐ CONTACT PERSON

Business name: LRS Architects

Contact name: Darcie McConnaha

Address: 720 NW Davis Suite 300

City/State/ZIP: Portland, OR. 97209

Phone: (503) 221-1121 | Fax:

E-mail: dmcconnaha@lrsarchitects.com

CONTRACTOR

Business name: Commercial Contractors Inc.

Address: 5573 S. 1st Circle

City/State/ZIP: Ridgefield, WA. 98642

Phone: (503) 227-4440 | Fax:

CCB lic.: 123729

Authorized signature: Darcie McConnaha

Print name:	Date:
Darcie McConnaha	10/15/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$285,000
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
12725 SW Millikan Way / PO Box 4755
Beaverton, OR 97076
Fax: (503) 526-2550
Information (503) 526-2222
BeavertonOregon.gov

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

OFFICE USE ONLY	
Date Received: 10-18-18	Permit No.: B2018-4824
Date Issued: 10-18-18	By: JLL
	Payment Type: Visa

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☑ Other: Solar

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☑ Other: Solar

JOB SITE INFORMATION AND LOCATION

Job site address: 9625 SW Duncan Lane
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.:
Project name: Keller- Solar
Cross street/directions to job site:
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Installation and hook up of roof mount 4.88 kW solar system

☑ PROPERTY OWNER	☐ TENANT

Name: Georgina Keller
Address: 9625 SW Duncan Lane
City/State/ZIP: Beaverton, OR 97005
Phone: (503) 601-9685
Fax:
E-mail: gkeller42@hotmail.com

☑ APPLICANT	☐ CONTACT PERSON

Business name: Green Ridge Power
Contact name: Hilary Conway
Address: P.O. Box 1336
City/State/ZIP: Sherwood, OR 97140
Phone: (503) 349-5182
Fax:
E-mail: operations@greenridgepower.com

CONTRACTOR

Business name: Green Ridge Power
Address: P.O. Box 1336
City/State/ZIP: Sherwood, OR 97140
Phone: (503) 217-2175
Fax:
CCB lic.: 210450

Authorized signature:

Print name:	Date:
Brian Butterfield	10/18/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$25,260
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$128.80
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 10-9-18	Permit No.: B2018-4622
Date Issued: 10/19/2018	Payment Type: Visa

TYPE OF WORK	
☑ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 2895 SW Cedar Hills Blvd

City/State/ZIP: Beaverton OR 97005

Suite/bldg./apt. no.: | Project name: Roxy's Island Grill

Cross street/directions to job site: Cedar Hills & Jenkins

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Install wet chemical fire suppression system in Type I Hood

☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Guardian Fire Protection	
Contact name: Mark Ferguson	
Address: PO Box 1555	
City/State/ZIP: Albany OR 97321	
Phone: (541) 926-4920	Fax: (541) 926-4942
E-mail: mark@guardianfireor.com	

CONTRACTOR

Business name: Guardian Fire Protection

Address: PO Box 1555

City/State/ZIP: Albany OR 97321

Phone: (541) 926-4920 | Fax: (541) 926-4942

CCB lic.: 100355

Authorized signature:

Print name:	Date:
Mark Ferguson	10/9/18 10/07/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	4500.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$74.13
Amount received	$256.64
Date received:	10-9-18

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building Permit Application

Community Development Department
Building Division
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:	9-26-18	Permit No.:	B2018-44116
Date Issued:	10-17-18	By:	MK
		Payment Type:	Visa

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address:	7889 SW Cirrus Dr.
City/State/ZIP:	Beaverton, OR 97008
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	SW Hall to SW Cirrus
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Structural framing for replacement RTU.

☒ PROPERTY OWNER	☐ TENANT
Name:	HARSCH
Address:	8275 SW CIRRUS DR.
City/State/ZIP:	BEAVERTON, OR 97008
Phone: 503.643.7552	Fax:
E-mail:	

☒ APPLICANT	☐ CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: 503.530.6787	Fax:
E-mail:	steve c @ pacificcrestweb.com

CONTRACTOR

Business name:	PACIFIC CREST STRUCTURES
Address:	17750 SW UPPER BOONES FERRY #190
City/State/ZIP:	DURHAM, OR 97224
Phone: 503.968.8949	Fax:
CCB lic.:	66915

Authorized signature: Steve Close

Print name:	STEVE CLOSE	Date:	9/25/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$900 —
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$133.80
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

RECEIVED

Building Permit Application

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

OFFICE USE ONLY

Date Received: SEP 6 2018	Permit No.: B2018-4126
Date Issued: 10/17/2018	By:
BUILDING SERVICES DIVISION	Payment Type:

TYPE OF WORK

☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 4325 SW 142 Ave
City/State/ZIP: Beaverton OR
Suite/bldg./apt. no.: | Project name: Nike
Cross street/directions to job site: 142 nd and TV Highway
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Install shelving and pallet rack

☒ PROPERTY OWNER	☒ TENANT
Name: Nike	
Address: 1 Bowerman Dr	
City/State/ZIP: Beaverton OR 97005	
Phone: (503) 671-6453	Fax:
E-mail:	

☒ APPLICANT	☒ CONTACT PERSON
Business name: Northwest Handling	
Contact name: Ryan Broderick	
Address: 18008 N E Airport Way	
City/State/ZIP: 97230	
Phone: 503 969 1958	Fax:
E-mail: ryanb@nwhs.com	

CONTRACTOR

Business name: B and B Installations
Address: 14401 S Glen Oak Rd
City/State/ZIP: Oregon City OR 97045
Phone: 503 887 2618 | Fax:
CCB lic.: 67419

Authorized signature:

Print name: Ryan Broderick | Date: 9/6/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation
Number. of bedrooms:
Number of bathrooms:
Total number of floors:
New dwelling area: square feet
Garage/carport area: square feet
Covered porch area: square feet
Deck area: square feet
Other structure area: square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation: 166,787.00
Existing building area: 63,000 square feet
New building area: 63,000 square feet
Number of stories:
Type of construction: B/S
Occupancy groups: III B
Existing:
New:

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	1,910.40
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: B2018-4558
Date Issued: 10/4/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 15546 SW Brookings Ln.

City/State/ZIP: Beaverton OR 97007

Suite/bldg./apt. no.: | Project name: ES - Tugas

Cross street/directions to job site:

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Prescriptive 7.8kW roof mounted solar array.

☑ PROPERTY OWNER	☐ TENANT

Name: Mariano and Elizabeth Tugas

Address:

City/State/ZIP:

Phone: | Fax:

E-mail:

☑ APPLICANT	☑ CONTACT PERSON

Business name: Energy Solutions, LLC

Contact name: Grant Lindsley

Address: PO Box 887

City/State/ZIP: Beavercreek OR 97004

Phone: (503) 680-3718 | Fax:

E-mail: grant@esolutions-or.com

CONTRACTOR

Business name: Energy Solutions, LLC

Address: PO Box 887

City/State/ZIP: Beavercreek OR 97004

Phone: (503) 680-3718 | Fax:

CCB lic.: 202002

Authorized signature:

Print name: Grant Lindsley | Date: 10/3/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$16,000
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 10/3/2018	Permit No B2018.4554
Date Issued: 10/3/2018	By:
	Payment Type:

TYPE OF WORK

☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 8625 SW CASCADE SQ. AVE
City/State/ZIP: BEAVERTON OR 97008
Suite/bldg./apt. no.: 420 | Project name: Suite 420 TI
Cross street/directions to job site: SW HALL BLVD.
Subdivision: 1S127A D00102 | Lot no.: 180
Tax map/parcel no.:

DESCRIPTION OF WORK

Tenant improvement to provide (6) offices, (2) conference rooms and (1) ADA gender-neutral single occupancy toilet for the building.

☒ PROPERTY OWNER	☐ TENANT
Name: HARSCH INV. PROPERTIES	
Address: 1430 SW BROADWAY.	
City/State/ZIP: PORTLAND OR 97201	
Phone: 503 242-2900	Fax:
E-mail:	

☒ APPLICANT	☒ CONTACT PERSON
Business name: INK BUILT	
Contact name: MELYNDA RETALLACK	
Address: 2207 SE 51ST AVE	
City/State/ZIP: PORTLAND OR 97215	
Phone: 503-701-5277	Fax:
E-mail: mel@inkbuiltdesign.com	

CONTRACTOR

Business name: PACIFIC CREST STRUCTURES
Address: 17750 SW UPPER BOONES FERRY RD #190
City/State/ZIP: DURHAM OR 97224
Phone: 503-968-7509 | Fax:
CCB lic.: 66915

Authorized signature:

Print name:	Date: 10/2/2018
MELYNDA RETALLACK	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$133,700
Existing building area:	96,620 square feet
New building area:	Ø square feet
Number of stories:	6
Type of construction:	1B
Occupancy groups:	
Existing:	B M S
New:	N/A

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	4,140.72
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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.: B2018-4650
Date Issued: 10/3/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 1470 NW LANCASHIRE CT	
City/State/ZIP: BEAVERTON OR 97006	
Suite/bldg./apt. no.:	Project name: ALCOCK
Cross street/directions to job site:	
Subdivision: FIELDSTONE #2	Lot no.: 64
Tax map/parcel no.:	

DESCRIPTION OF WORK

RAISE FAMILY AND LIVING ROOM FLOORS, REMODEL KITCHEN

☒ PROPERTY OWNER	☐ TENANT
Name: SCOTT & JERI ALCOCK	
Address: 1470 NW LANCASHIRE CT	
City/State/ZIP: BEAVERTON OR 97006	
Phone: 503 704-3615	Fax:
E-mail:	

☒ APPLICANT	☐ CONTACT PERSON
Business name: TOM ROGERS CONST LLC	
Contact name: TOM ROGERS	
Address: P.O. BOX 231296	
City/State/ZIP: TIGARD OR 97281	
Phone: 503 704-0000	Fax:
E-mail: tomrogersconstruction@GMAIL.com	

CONTRACTOR

Business name: SAME AS APPLICANT	
Address:	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 95900	

Authorized signature: Tom Rogers

Print name: TOM ROGERS	Date: 10/3/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	25,000
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	807.93
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: 10-2-18	Permit No.: B2018-4523
Date Issued: 10-2-18	By: HK
	Payment Type: Check

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☒ Other: Solar

CATEGORY OF CONSTRUCTION	
☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 17942 Northwest Dustin Lane, Beaverton, Oregon, 97006,

City/State/ZIP: United States

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 kw

5.31

☒ PROPERTY OWNER	☐ TENANT

Name: Jessica Leitner

Address: 17942 Northwest Dustin Lane, Beaverton,

City/State/ZIP: Oregon, 97006, United States

Phone: 5038307702 | Fax:

E-mail: jessicaleitner@comcast.net

☒ APPLICANT	☐ CONTACT PERSON

Business name: Blue Raven Solar, LLC

Contact name: Tara Mount

Address: 1220 S 630 E #430

City/State/ZIP: American Fork, UT 84003

Phone: 385-482-0045 | Fax:

E-mail: permitting.department@blueravensolar.com

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:

CCB lic.: 210112

Authorized signature: Jeffrey Lee

Print name:	Date:
Jeff Lee	10/01/2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation $11,082.22

Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation

Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$207.20
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: 10-2-18	Permit No.: B2018-4525
Date Issued: 10-2-18	By: TLL
	Payment Type: Check

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☑ Other: Solar

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 17726 Northwest Pioneer Road, Beaverton, Oregon, 97006,

City/State/ZIP: United States

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 kw

5.31

☑ PROPERTY OWNER	☐ TENANT

Name: Rafe Christopherson

Address: 17726 Northwest Pioneer Road, Beaverton,

City/State/ZIP: Oregon, 97006, United States

Phone: 5033290649 | Fax:

E-mail: rafe.christopherson@gmail.com

☑ APPLICANT	☐ CONTACT PERSON

Business name: Blue Raven Solar, LLC

Contact name: Tara Mount

Address: 1220 S 630 E #430

City/State/ZIP: American Fork, UT 84003

Phone: 385-482-0045 | Fax:

E-mail: permitting.department@blueravensolar.com

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:

CCB lic.: 210112

Authorized signature: Jeffrey Lee

Print name:	Date:
Jeff Lee	09/28/2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation $11,082.22

Number. of bedrooms:

Number of bathrooms:

Total number of floors:

New dwelling area: square feet

Garage/carport area: square feet

Covered porch area: square feet

Deck area: square feet

Other structure area: square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation

Existing building area: square feet

New building area: square feet

Number of stories:

Type of construction:

Occupancy groups:

Existing:

New:

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$207.20
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 10-2-18	Permit No.: B2018-4522
Date Issued: 10-2-18	By: MK
	Payment Type: Visa

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 2725 SW Cedar Hills Blvd Suite 000
City/State/ZIP: Beaverton OR 97005
Suite/bldg./apt. no.: 000 | Project name: Share Tea
Cross street/directions to job site: SW Jenkins Road
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Add 6 Sprinkler Heads under new ceilings

☑ PROPERTY OWNER	☐ TENANT
Name: JE John	
Address: 1701 SE Columbia River Drive	
City/State/ZIP: Vancouver WA 98661	
Phone: (503) 283-5365	Fax:
E-mail: jejinfo@jejohn.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Vanport Mechanical and Fire Sprinklers	
Contact name: Ivan Krajeski	
Address: 6101 NE 127th Ave	
City/State/ZIP: Vancouver WA 98682	
Phone: (360) 256-9838	Fax:
E-mail: ivank@vanportmech.com	

CONTRACTOR

Business name: Vanport Mechanical and Fire Sprinklers
Address: 6101 NE 127th Ave
City/State/ZIP: Vancouver WA 98682
Phone: (360) 256-9838 | Fax:
CCB lic.: 208502

Authorized signature: Ivan Krajeski

Print name: Ivan Krajeski | Date: 10-2-18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	900
Existing building area:	square feet
New building area:	square feet
Number of stories:	2
Type of construction:	
Occupancy groups:	Ordinary
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$115.42
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building 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: 10-2-18	Permit No.: B2018-4516
Date Issued: 10-2-18	By: MC
	Payment Type: MC

TYPE OF WORK

☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9555 SW Barnes Rd.

City/State/ZIP: Portland, OR

Suite/bldg./apt. no.: 255 | Project name: Peterkort Centre I AIM Phase 2

Cross street/directions to job site:

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Add one sprinkler head and relocate 3 for coverage

☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

☐ APPLICANT	☐ CONTACT PERSON
Business name: Delta Fire, Inc.	
Contact name:	
Address: 14795 SW 72nd Ave.	
City/State/ZIP: Portland, OR 97224	
Phone: 503-620-4020	Fax: 503-620-1058
E-mail: patty@deltafire.com	

CONTRACTOR

Business name: Delta Fire, Inc.	
Address: 14795 SW 72nd Ave.	
City/State/ZIP: Portland, OR 97224	
Phone: 503-620-4020	Fax: 503-620-1058
CCB lic.: 64174	

Authorized signature:

Print name:	Date:
Patty Cartales	10/2/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $2795	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$206.11
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

rev 07/13

Building Permit Application

Community Development Department
Building Division
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: 10-1-18	Permit No.: B2018-4491
Date Issued: 10-1-18	By: MK
	Payment Type: Check

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 12620 SW FARMINGTON RD	
City/State/ZIP: BEAVERTON OR 97005	
Suite/bldg./apt. no.:	Project name: SGS OFFICE
Cross street/directions to job site: SW WATSON	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

REPLACE EXISTING TOILET WITH ADA COMPLIANT, INSTALL "KITCHENETTE" INSTALL STORAGE LOFT

☐ PROPERTY OWNER	☒ TENANT
Name: STEWART GORDON STRAUS ARCHITECT	
Address: 12600 SW CRESCENT ST #100	
City/State/ZIP: BEAVERTON OR 97005	
Phone: 503 672 7517	Fax:
E-mail: sgs@s-straus.com	

☒ APPLICANT	☒ CONTACT PERSON
Business name: STEWART GORDON STRAUS ARCHITECT PC	
Contact name: STEWART STRAUS	
Address: 12600 SW CRESCENT ST #100	
City/State/ZIP: BEAVERTON OR 97005	
Phone: 503 672 7517	Fax:
E-mail: sgs@s-straus.com	

CONTRACTOR

Business name: FISCHER CONSTRUCTION SERVICES, INC.	
Address: 2450 THREE LAKES RD. SUITE A.	
City/State/ZIP: ALBANY, OR 97322	
Phone:	Fax:
CCB lic.: 153650	

Authorized signature: [signature]

Print name: STEWART STRAUS	Date: 1 OCT 2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$ 10000
Existing building area:	square feet
New building area: 0	square feet
Number of stories: 2	
Type of construction: VB	
Occupancy groups: B	
Existing: B	
New: B	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

APPROVED - 9-27-18 - BRIAN B.

Building Permit Application

Community Development Department
Building Division
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

Beaverton OREGON

OFFICE USE ONLY	
Date Received: 7/6/2018	Permit No.: B2018-3014
Date Issued: 10-1-18	By: [illegible]
	Payment Type: Check

TYPE OF WORK

☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 3485 SW Cedar Hills Blvd. Suite 170
City/State/ZIP: Beaverton, Oregon 97005
Suite/bldg./apt. no.: Project name: buy buy Baby TI
Cross street/directions to job site: Cedar Hills Crossing
Subdivision: Lot no.: 200
Tax map/parcel no.: 1S10900

DESCRIPTION OF WORK

Tenant Improvements for a new buy buy Baby store in an existing commercial retail space. Work includes new plumbing fixtures, electrical fixtures, RTUs/HVAC, wall partitions and finishes.

☑ PROPERTY OWNER	☐ TENANT
Name: ~~C.E. John Company, Inc.~~ Center Developments Oreg, LLC	
Address: 1701 S.E. Columbia River Dr.	
City/State/ZIP: Vancouver, WA 98661	
Phone: (360) 696-0837	Fax: (360) 696-1007
E-mail: sgarey@cejohn.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: MCG Architecture	
Contact name: Brian Sager	
Address: 7100 E. Pleasant Valley Rd. Suite 320	
City/State/ZIP: Cleveland, OH 44131	
Phone: (216) 520-1551	Fax: (216) 520-1567
E-mail: bsager@mcgarchitecture.com	

CONTRACTOR

Business name: James E. John Construction Co., Inc.
Address: 1701 SE Columbia River Drive
City/State/ZIP: Vancouver, WA 98661
Phone: (360) 696-0837 Fax: (360) 696-9723
CCB lic.: 63261

Authorized signature: [signature]

Print name:	Date:
BRIAN SAGER	07/06/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		$1,100,000
Existing building area:	square feet	23,780
New building area:	square feet	0
Number of stories:		1
Type of construction:		VB
Occupancy groups:		
Existing:		-
New:		M, B

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	8,102.14
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

APPROVED BRIAN B 9-25-18

Building Permit Application

Community Development Department
Building Division
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.: B2018-4254
Date Issued: SEP 14 2018	By:
10-1-18	Payment Type: Visa

BUILDING SERVICES DIVISION

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 8645 SW MONTICELLO ST
City/State/ZIP: BEAVERTON, OR. 97008
Suite/bldg./apt. no.: Project name: CEILING MOD
Cross street/directions to job site: SORRENTO TO CARR; LEFT ON MONTICELLO
Subdivision: MARITA PARK Lot no.: 14
Tax map/parcel no.: 1S128AC02400

DESCRIPTION OF WORK

MODIFY KITCHEN CEILING TO CATHEDRAL CEILING

☒ PROPERTY OWNER	☐ TENANT
Name: JOHN BARBAY	
Address: 8645 SW MONTICELLO	
City/State/ZIP: BEAVERTON, OR. 97008	
Phone: 503-502-3804	Fax:
E-mail: jabtps@yahoo.com	

☒ APPLICANT	☒ CONTACT PERSON
Business name:	
Contact name: JOHN BARBAY	
Address:	
City/State/ZIP:	
Phone: 503-502-3804	Fax:
E-mail: Same as above	

CONTRACTOR

Business name: Golden Construction
Address: 108 NE 57th Ave
City/State/ZIP: Portland, OR 97213
Phone: 503-422-6429 Fax:
CCB lic.: 183877

Authorized signature:

Print name: JOHN BARBAY	Date: 9/4/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$3,000
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	87.89
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

Permit Application

Clear Form

Beaverton OREGON

Development Department
Building Division
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: 09/05/2018	Permit No.: B2018-4110
Date Issued: 10-4-18	By: Me
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☑ Other: Foundation Repair

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 14955 SW Carolwood Dr
City/State/ZIP: Beaverton OR 97007
Suite/bldg./apt. no.:
Project name: Ray Resid. Underpinning
Cross street/directions to job site:
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

voluntary underpinning of existing foundation using helical piles

☑ PROPERTY OWNER	☐ TENANT
Name: Bill Ray	
Address: 14955 SW Carolwood Dr	
City/State/ZIP: Beaverton OR 97007	
Phone: (503) 453-5833	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Ram Jack West	
Contact name: Curt Klein	
Address: PO Box 11701	
City/State/ZIP: Eugene OR 97440	
Phone: (503) 278-5570	Fax:
E-mail: curt@ramjackor.com	

CONTRACTOR

Business name: Ram Jack West
Address: PO Box 11701
City/State/ZIP: Eugene OR 97440
Phone: (541) 688-7177 Fax:
CCB lic.: 146906

Authorized signature:

Print name:	Date:
Curt Klein	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$6,500
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$138.74
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: 10-4-18	Permit No.: B2018-45608
Date Issued: 10-4-18	By: JH
	Payment Type: Check

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9215 SW BEAVERTON - HILLSDALE HWY	
City/State/ZIP: BEAVERTON	
Suite/bldg./apt. no.:	Project name: NVS GLASSWORKS
Cross street/directions to job site: 92ND AVE	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

RELOCATE TOILET & PROVIDE ADA ACCESSIBLE

☐ PROPERTY OWNER	☒ TENANT
Name: JOSH BERGMAN	
Address: 9215 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON	
Phone: 503-354-4746	Fax:
E-mail:	

☒ APPLICANT	☒ CONTACT PERSON
Business name: STEWART GORDON STRAUS ARCHITECTS PC	
Contact name: STEWART STRAUS OR ADRIANNE DECOTEAU	
Address: 12600 SW CRESCENT ST #100	
City/State/ZIP: BEAVERTON OR 97005	
Phone: 503-672-7517	Fax:
E-mail: sgs@s-straus.com	

CONTRACTOR

Business name: TEAM CONSTRUCTION LLC	
Address:	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 198197	

Authorized signature: Stewart Straus

Print name: STEWART STRAUS	Date: 4 OCT 2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$4500 –
Existing ~~building~~ tenant area:	1407 square feet
New building area:	0 square feet
Number of stories:	1
Type of construction:	V, B
Occupancy groups:	M
Existing:	M
New:	M

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$373.96
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Beaverton OREGON

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 10-3-18	Permit No B2018-4548
Date Issued: 10-4-18	By: TLK
	Payment Type: Check

TYPE OF WORK	
☒ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 6115 SW Murray Blvd
City/State/ZIP: Beaverton, OR 97008
Suite/bldg./apt. no.: | Project name: Fantastea House
Cross street/directions to job site: Murray Blvd & Allen Blvd
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Tenant improvement for a Bubble Tea Shop

☐ PROPERTY OWNER	☒ TENANT
Name: Ronald Chen	
Address: 6115 SW Murray Blvd	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-374-4444	Fax:
E-mail: Fantasteahouse@gmail.com	

☒ APPLICANT	☐ CONTACT PERSON
Business name: Fantastea House LLC	
Contact name: Ronald Chen	
Address: 6115 SW Murray Blvd	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-374-4444	Fax:
E-mail: Fantasteahouse@gmail.com	

CONTRACTOR

Business name: Polytech Heating LLC
Address: 11300 SE Cascade View Dr
City/State/ZIP: Happy Valley, OR 97086
Phone: 206-765-0471 | Fax: N/A
CCB lic.: 162238

Authorized signature:
Print name: Ronald Ce | Date: 10-3-18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	25000.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	1,133.50
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Washington County Phone: 503-846-3470, Fax: 503-846-3993, **Inspection Request: 503-846-3699**
155 N. 1st AV, Suite 350, MS 12, Hillsboro, OR 97124 www.co.washington.or.us
Land Use Approval: **Project #** 10/4/2018 **Permit #** B2018-4555

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
JOB SITE INFORMATION AND LOCATION	
Job site address: 306 SW 105th Terrace	
City/State/ZIP: Portland OR 97225	
Suite/bldg./apt. no.:	Project name: Front stairs
Cross street/directions to job site: Valleria View	
Plan No.	Reissue: No ☐ Yes ☐ Reissue Proj:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Remove and replace the existing front stair case (exterior).	
☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone: ( )	Email:
☒ APPLICANT	☐ CONTACT PERSON
Business name: Pacific Construction Group LLC	
Contact name: Chris mackenzie	
Address: 515 NW Saltzman Rd. #906	
City/State/ZIP: Portland OR 97229	
Phone: (503) 481-7925	Fax: : ( )
Email: Pacificconstructiongroup@yahoo.com	
CONTRACTOR	
Business name: Pacific Construction Group LLC	
Address: 515 NW Saltzman Rd. #906	
City/State/ZIP: Portland OR 97229	
Phone: (503) 481-7925	Fax: ( )
CCB lic.: 196992 OR	Email:
ENGINEER	**ARCHITECT**
Engineer:	Architect:
Address:	Address:
City/State/Zip:	City/State/Zip:
Phone:( )	Phone:( )
Email:	Email:

Authorized signature:

Print name: Chris mackenzie Date: 10/31/2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation 2.5 K	
Number. of bedrooms: 3	
Number of bathrooms: 2.5	
Total number of floors: 2	
New dwelling area: 1890	square feet
Garage/carport area: 500	square feet
Covered porch area: 60	square feet
Deck area: N/A	square feet
Other structure area: N/A	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$ 238.93
Amount received	$
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

10/3

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 10-3-18	Permit No.: B2018-4549
Date Issued: 10/17/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 15305 SW Gleneden Dr.
City/State/ZIP: Beaverton, OR 97007
Suite/bldg./apt. no.: Project name: Booth-#30546
Cross street/directions to job site:
Subdivision: Lot no.:
Tax map/parcel no.: 1S120DC04300

DESCRIPTION OF WORK

Encapsulation of a crawlspace

☒ PROPERTY OWNER	☐ TENANT
Name: Cory & Ione Booth	
Address: 15305 SW Gleneden Dr.	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 780-0685	Fax:
E-mail:	

☒ APPLICANT	☒ CONTACT PERSON
Business name: TerraFirma Foundation Systems	
Contact name: Heather Rogers	
Address: 7910 SW Hunziker St.	
City/State/ZIP: Tigard, OR 97223	
Phone: (541) 492-2435	Fax:
E-mail: hrogers@terrafirmafs.com	

CONTRACTOR

Business name: TerraFirma Foundation Systems
Address: 7910 SW Hunziker St.
City/State/ZIP: Tigard, OR 97223
Phone: (541) 492-2435 Fax:
CCB lic.: 173541

Authorized signature:

Print name: H. Rogers	Date: 9.26.18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$10,097.00
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Electrical Permit Application

Beaverton OREGON

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: 10-16-18	Permit No.: B2018-4732
Date Issued: 10-16-18	By: JLL
	Payment Type: Visa

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: 9555 NW BARNES RD.

City/State/ZIP: PORTLAND, OR 97225

Suite/bldg./apt. no.: 201 | Project name: EYE HEALTH NW

Cross street/directions to job site:

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Signal System

☐ PROPERTY OWNER ☒ TENANT

Name: EYE HEALTH NW

Address: 9555 NW BARNES RD. SUITE 201

City/State/ZIP: PORTLAND, OR 97225

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: Point Monitor Corp.

Contact name: Brooke Williams

Address: 5863 Lakeview Blvd #100

City/State/ZIP: Lake Oswego, OR 97035

Phone: (503) 627-0100 | Fax:

E-mail: bwilliams@pointmonitor.com

CONTRACTOR

Business name: Point Monitor Corp.

Address: 5863 Lakeview Blvd #100

City/State/ZIP: Lake Oswego, OR 97035

Phone: (503) 627-0100 | Fax:

E-mail: bwilliams@pointmonitor.com | CCB lic. no.: 135901

Electrical lic. no.: 34-508CLE | City or metro lic.:

Supervising electrician signature, required:

Print name: Ben Breit | Date: 10/16/18

Authorized signature:

Print name: Ben Breit | Date: 10/16/18

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		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.

Building Permit Application

Community Development Department
Building Division
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: 9/16/2018	Permit No.: B2018-4733
Date Issued: 10/16/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☒ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 4570 SW Lombard Ave.
City/State/ZIP: Beaverton OR 97005
Suite/bldg./apt. no.: Project name: K Town
Cross street/directions to job site: Farmington Rd,
Subdivision: Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Remove sheetrock and fixtures, ceiling sheetrock for structural engineering,

☒ PROPERTY OWNER	☐ TENANT
Name: MIRA BAE	
Address: 11201. NE. 182nd St Battle Ground	
City/State/ZIP: WA. 98604	
Phone: 503-313-3167	Fax:
E-mail:	

☒ APPLICANT	☐ CONTACT PERSON
Business name: Modern Visions Construction Inc	
Contact name: Anthony Kim	
Address: 12218 SE Sherman St.	
City/State/ZIP: Portland OR 97233	
Phone: 503 784 1563	Fax: N/A
E-mail: tkhi@hotmail.com	

CONTRACTOR

Business name: Modern Visions Construction Inc.
Address: 12218 SE sherman st.
City/State/ZIP: Portland, OR 97233
Phone: 503 784 1563 Fax: N/A
CCB lic.: 166489

Authorized signature:

Print name: Anthony Kim Date: 10-16-18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation $15,000.	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $ 15,000.00	
Existing building area: 5704	square feet
New building area: 0	square feet
Number of stories: 1	
Type of construction: II-13	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	753.73
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: 10-16-18	Permit No.: B2018-4720
Date Issued: 10-16-18	By:
	Payment Type: VISA

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9625 SW CASCADE SQ. AVE	
City/State/ZIP: BEAVERTON OR 97008	
Suite/bldg./apt. no.: 602	Project name: Suite 602 TI
Cross street/directions to job site: SW HALL BLVD.	
Subdivision: 1S1-27A D00102	Lot no.: 180
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Tenant improvement to relocated a break area cabinet and sink, remodel two offices and add two offices and a work room. No changes to structural system.	

☒ PROPERTY OWNER	☐ TENANT
Name: HARSCH INV. PROPERTIES	
Address: 1430 SW BROADWAY.	
City/State/ZIP: PORTLAND OR 97201	
Phone: 503 242-2900	Fax:
E-mail:	

☒ APPLICANT	☒ CONTACT PERSON
Business name: INK BUILT	
Contact name: MELYNDA RETALLACK	
Address: 2207 SE 51ST AVE	
City/State/ZIP: PORTLAND OR 97215	
Phone: 503-701-5277	Fax:
E-mail: mel@inkbuiltdesign.com	

CONTRACTOR	
Business name: PACIFIC CREST STRUCTURES	
Address: 17750 SW UPPER BOONES FERRY RD #190	
City/State/ZIP: DURHAM OR 97224	
Phone: 503-968-7509	Fax:
CCB lic.: 66915	

Authorized signature:

Print name:	Date: 10/12/2018
MELYNDA RETALLACK	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation $25,000	
Existing building area: 96,620	square feet
New building area: Ø	square feet
Number of stories: 6	
Type of construction: 1B	
Occupancy groups:	
Existing: B M S	
New: N/A	

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$1,486.86
Amount received	$1,486.86
Date received: 10-16-18	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building Permit Application

Community Development Department
Building Division
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: 10/11/18	Permit No.: B2018-4663
Date Issued: 10/11/18	By: MN
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 14600 NW Greenbrier Parkway
City/State/ZIP: Beaverton, OR 97006
Suite/bldg./apt. no.: | Project name: Merlin Security Upgrade
Cross street/directions to job site:
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Add fire alarm relays to new turnstiles to open on alarm.

☐ PROPERTY OWNER	☑ TENANT
Name: Nike, Inc. - Brian Mandt	
Address: 1 Bowerman Way	
City/State/ZIP: Beaverton, OR 97214	
Phone: (971) 276-4761	Fax:
E-mail: Brian.Mandt@nike.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Siemens	
Contact name: CJ Volesky	
Address: 15201 NW Greenbrier Pkwy, A4	
City/State/ZIP: Beaverton, OR 97006	
Phone: (503) 896-9387	Fax:
E-mail: cj.volesky@siemens.com	

CONTRACTOR

Business name: Siemens
Address: 15201 NW Greenbrier Pkwy, A4
City/State/ZIP: Beaverton, OR 97006
Phone: (503) 896-9387 | Fax:
CCB lic.: 133041

Authorized signature:

Print name:	Date:
CJ Volesky	10/10/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$6,352.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	221.78
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 9/18/2018	Permit No. B2018-4294
Date Issued: 10-15-18	By: MC
	Payment Type: ~~VISA~~ MC

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 5270 SW Elm Ave,
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.:
Project name: Kerry Seed
Cross street/directions to job site:
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

PV ROOF MOUNT

☑ PROPERTY OWNER	☐ TENANT

Name: Kerry Seed
Address: 5270 SW Elm Ave,
City/State/ZIP: Beaverton, OR 97005
Phone:
Fax:
E-mail:

☑ APPLICANT	☐ CONTACT PERSON

Business name: SolarCity Corp.
Contact name: Melissa Farias
Address: 6132 NE 112th Ave
City/State/ZIP: Portland OR 97220
Phone: (503) 894-6903
Fax:
E-mail: Melissa.Farias@SolarCity.com

CONTRACTOR

Business name: SolarCity Corp.
Address: 6132 NE 112th Ave
City/State/ZIP: Portland OR 97220
Phone: (503) 894-6903
Fax:
CCB lic.: 180498

Authorized signature: MFarias

Print name:	Date: 09.18.18
Melissa Farias	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	7000
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	360.72
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 09/28/2018	Permit No.: B2018-4475
Date Issued: 10/15/2018	By:
	Payment Type:

TYPE OF WORK

☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 1905 NW 169th Place

City/State/ZIP: Beaverton, OR 97006

Suite/bldg./apt. no.: Twin Oaks Plaza Roof | Project name: Roof sheer wall bracing

Cross street/directions to job site: Off of Cornell

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Install sheer wall bracing per code.

☑ PROPERTY OWNER ☐ TENANT

Name: Allstrat LLC

Address: 111 SW Columbia suite 1380

City/State/ZIP: Portland, OR 97201

Phone: (503) 223-4777 | Fax:

E-mail: msegerdahl@melvinmark.com

☑ APPLICANT ☑ CONTACT PERSON

Business name: Melvin Mark Companies

Contact name: Matt Segerdahl

Address: 111 SW Columbia suite 1380

City/State/ZIP: Portland, OR 972001

Phone: (503) 314-4794 | Fax:

E-mail: msegerdahl@melvinmark.com

CONTRACTOR

Business name: ~~Not yet selected~~ Davis & Walker Fabrication

Address: P.O. Box 820407

City/State/ZIP: Vancouver, WA 98682

Phone: 360-944-0057 | Fax:

CCB no.: 99387

Authorized signature:

Print name:

REQUIRED DATA: 1 AND 2 FAMILY DWELLING

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

Valuation

Number of bedrooms:

Number of bathrooms:

Total number of floors:

New dwelling area: square feet

Garage/carport area: square feet

Covered porch area: square feet

Deck area: square feet

Other structure area: square feet

REQUIRED DATA: COMMERCIAL/USE GROUP

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

Valuation $3,500

Existing building area: square feet 18,000

New building area: square feet

Number of stories: 2

Type of construction: Structural

Occupancy groups:

Existing:

New:

NOTICE

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BUILDING PERMIT FEES

Please refer to fee schedule

Fees due upon application	103.61
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building

Building Permit Application

Community Development Department
Building Division
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.: B2018-4648
Date Issued: 10/15/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION	
Job site address: 13320 SW Snowshoe Ln,	
City/State/ZIP: Beaverton, OR 9700	
Suite/bldg./apt. no.:	Project name: Vincent Chou
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

PV ROOF MOUNT

☑ PROPERTY OWNER	☐ TENANT
Name: Vincent Chou	
Address: 13320 SW Snowshoe Ln,	
City/State/ZIP: Beaverton, OR 97008	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: SolarCity Corp. dba tesla	
Contact name: Melissa Farias	
Address: 6132 NE 112th Ave	
City/State/ZIP: Portland OR 97220	
Phone: (503) 894-6903	Fax:
E-mail: Melissa.Farias@SolarCity.com	

CONTRACTOR	
Business name: SolarCity Corp.	
Address: 6132 NE 112th Ave	
City/State/ZIP: Portland OR 97220	
Phone: (503) 894-6903	Fax:
CCB lic.: 180498	

Authorized signature: Mfarias

Print name:	Date:
Melissa Farias	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	7000
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	207.20
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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: 9/25/2018	Permit No: B2018-4396
Date Issued: 10/15/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 14305 SW MILLIKAN WAY

City/State/ZIP: BEAVERTON OR 97005

Suite/bldg./apt. no.: | Project name: PM INDUSTRIES

Cross street/directions to job site:

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

REPALCE EXISTING BACKFLOW WITH NEW 8"DCDA

☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: VIKING SPRINKLER	
Contact name: DAVE BATEMAN	
Address: 3245 NW FRONT AVE	
City/State/ZIP: PORTLAND OR 97210	
Phone: (503) 227-1171	Fax: (503) 227-1552
E-mail: dave.bateman@vikingsprinkler.net	

CONTRACTOR

Business name: VIKING SPRINKLER

Address: 3245 NW FRONT AVE

City/State/ZIP: PORTLAND OR 97210

Phone: (503) 227-1171 | Fax: (503) 227-1552

CCB lic.: 64837

Authorized signature:

Print name:	Date:
Dave Bateman	09/25/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$14,750
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	149.42
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Approved 10/15/18 S.V.T.

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

Beaverton OREGON

Building 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: 10-1-18	Permit No.: B2018-4504
Date Issued: 10/15/2018	By:
	Payment Type:

TYPE OF WORK	
☒ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9555 SW Barnes Rd
City/State/ZIP: Portland, OR 97225
Suite/bldg./apt. no.: 201 | Project name: Peterkort Centre I Eye Health NW
Cross street/directions to job site:
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Add/Relocate 22 sprinkler heads

☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

☒ APPLICANT	☐ CONTACT PERSON
Business name: Delta Fire, Inc.	
Contact name:	
Address: 14795 SW 72nd Ave.	
City/State/ZIP: Portland, OR 97224	
Phone: 503-620-4020	Fax: 503-620-1058
E-mail: patty@deltafire.com	

CONTRACTOR

Business name: Delta Fire, Inc.
Address: 14795 SW 72nd Ave.
City/State/ZIP: Portland, OR 97224
Phone: 503-620-4020 | Fax: 503-620-1058
CCB lic.: 64174

Authorized signature: Patty Cartales

Print name:	Date:
Patty Cartales	10/1/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $6196	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$89.19
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

rev 07/13

7/20

Building Permit Application

Community Development Department
Building Division
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: 7-19-18	Permit No.: B2018-3237
Date Issued: 10/10/2019	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9300 SW Gemini Drive
City/State/ZIP: Hillsboro, Oregon 97008
Suite/bldg./apt. no.:
Project name: Biamp Systems
Cross street/directions to job site: SW Gemini Drive and SW Nimbus Ave
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Demolition of existing non-structural interior partitions, light fixtures, and ceilings. New non-structural interior partitions, ceilings, light fixtures, casework, plumbing fixtures, doors, relites, and finishes.

New employee coffee bar amenity to have new casework, light fixtures, plumbing fixtures, ceilings, and finishes.

☐ PROPERTY OWNER	☑ TENANT
Name: Terrance Paschal	
Address: 9300 SW Gemini Drive	
City/State/ZIP: Beaverton, Oregon 97008	
Phone: (503) 641-7287	Fax:
E-mail: Terrance.Paschal@biamp.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Fluent Design	
Contact name: Alex Aujero	
Address: 1931 SE Powell Blvd.	
City/State/ZIP: Portland, Oregon 97002	
Phone: (503) 432-8617	Fax:
E-mail: alex@fluentdesignpdx.com	

CONTRACTOR

Business name: BNK Construction
Address: 45 82nd Drive, Suite 53B
City/State/ZIP: Gladstone, Oregon 97027
Phone: (503) 557-0866 Fax:
CCB lic.: 107555

Authorized signature:

Print name:	Date:
Alex Aujero	07.18.2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		$355,365.00
Existing building area:	square feet	
New building area:	square feet	n/a
Number of stories:		2
Type of construction:		III-B
Occupancy groups:		B
Existing:		B
New:		n/a

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$3,353.61
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

APPROVED - DRAW B - 10-12-18

Mechanical Permit Application

City of Beaverton Community Development
Building Division
12725 SW Millikan Way
PO Box 4755, Beaverton, OR 97076
Phone: (503) 526-2403 Fax: (503) 526-2550
www.BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 9/11/2018	Permit No.: B2018-4210
Date Issued: 10/15/2018	By:
	Payment Type:

TYPE OF WORK

- ☐ New construction
- ☐ Addition/alteration/replacement
- ☐ Demolition
- ☑ Other, Specify:

CATEGORY OF CONSTRUCTION

- ☐ 1- and 2-family dwelling
- ☑ Commercial/industrial
- ☐ Accessory building
- ☐ Multi-family
- ☐ Master builder
- ☐ Other, Specify:

JOB SITE INFORMATION AND LOCATION

Job site address: 16325 SW Barrows Rd	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Casa Lola
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install a 9' type one hood & gas line.

☐ PROPERTY OWNER	☑ TENANT
Name: Carlos Cortes	
Address:	
City/State/ZIP:	
Phone: 971-322-6867	Fax:
E-mail: Carlos@casalolapdx.com	

APPLICANT

Business name: PKNW Construction	
Contact name: Karina Leyva	
Address: PO Box 3686	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-530-6127	Fax:
E-mail: pknwconstruction@gmail.com	

CONTRACTOR

Business name:	
Address: Same as above	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CCB lic.: 209936	City or metro lic.:

Authorized signature: _____

Print name: Karina Leyva Date: 9-11-18

COMMERCIAL FEE SCHEDULE – USE CHECKLIST

Mechanical permit fees are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all mechanical materials, equipment, labor, overhead, and profit. *Use Table on Page 2 for value.

*Value: $0.00 $16,000

RESIDENTIAL EQUIPMENT / SYSTEMS FEES

For special information use checklist.

Description	Qty.	Ea.	Total
Heating/cooling **For Furnace, select>> Select One			
Furnace, incl. ductwork, vent, and liner **			
Air conditioner 1		46.75	
Heat pump 1		61.06	
Duct work, alterations and additions		23.32	
Hydronic piping system		23.32	
Boiler, incl. vent** Select One			
Gas heaters/unit in-wall, in-duct, suspended, etc. **not** incl. vent.		46.75	
Other:		23.32	
Other fuel appliances			
Water heater		23.32	
Gas fireplace/insert/stove		33.39	
Gas log/log lighter		23.32	
Pool or spa heater, kiln*		23.32	
Wood/pellet stove/insert		33.39	
Wood fireplace		33.39	
Chimney/liner/flue/vent w/o appliance		33.39	
Oil tanks/gas/diesel generators		23.32	
Other:		23.32	
Environmental exhaust and ventilation			
Range hood/other kitchen equipment		33.39	
Clothes dryer exhaust		33.39	
Single-duct exhaust (bathrooms, toilet compartments, utility rooms)		23.32	
Attic/crawlspace fans		23.32	
Whole house ventilation or Radon mitigation		23.32	
Other:		23.32	
Fuel piping			
$14.15 for first four; $4.03 for each additional			
Furnace		#/outlets	Total # of fuel piping outlets:
Wall/suspended/unit heater		#/outlets	
Water heater		#/outlets	
Fireplace/log lighter/gas log		#/outlets	0
Range		#/outlets	Total cost for fuel piping outlets:
Barbecue		#/outlets	
Clothes dryer		#/outlets	
Other:		#/outlets	

CALCULATE MECHANICAL PERMIT FEES

Subtotal	
Minimum permit fee	97.63
☐ Check for Plan Review (25% of permit fee)	
State surcharge (12% of permit fee)	11.72
TOTAL PERMIT FEE	~~$109.35~~ 225.00

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

1 - Site plan required for an outdoor unit.

2 - Requires approval from Building Codes Division.

7/16

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 7-16-18	Permit No.: B2018-3172
Date Issued: 10-12-18	By: YK
	Payment Type: Check

TYPE OF WORK

☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 11925 SW. Camden Ln.
City/State/ZIP: Beaverton, OR 97008
Suite/bldg./apt. no.: | Project name:
Cross street/directions to job site: Lombard / Denny
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Garage conversion

☒ PROPERTY OWNER ☐ TENANT

Name: Armando & Kym Amador
Address: 11925 SW. Camden Ln.
City/State/ZIP: Beaverton, OR
Phone: 503 312-4275 | Fax:
E-mail:

☒ APPLICANT ☐ CONTACT PERSON

Business name: Crownwood Construction LLC
Contact name: Armando Amador Jr.
Address: 13350 SW. Hazel St.
City/State/ZIP: Beaverton, OR 97005
Phone: 971 246-2363 | Fax:
E-mail: crownwoodconstruction@yahoo.com

CONTRACTOR

Business name: Same as above
Address:
City/State/ZIP:
Phone: | Fax:
CCB lic.: 205126

Authorized signature: Armando Amador
Print name: Armando Amador | Date: 7/16/2018

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	30,000.	
Number. of bedrooms:	2	
Number of bathrooms:	1	
Total number of floors:	1	
New dwelling area:	563	square feet
Garage/carport area:	0	square feet
Covered porch area:	0	square feet
Deck area:	0	square feet
Other structure area:	0	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$280.73
Amount received	$280.73
Date received: 7-16-18	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: B2018-4448
Date Issued: SEP 27 2018 10.12.18	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type: Check

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 13955 SW Millikan Way

City/State/ZIP: Beaverton, OR 97005

Suite/bldg./apt. no.: | Project name: Slitter

Cross street/directions to job site: Between 141st and SW Hocken on SW Millikan

Subdivision: | Lot no.:

Tax map/parcel no.: R2088984

DESCRIPTION OF WORK

Equipment Install: Slitter; one (1) piece of equipment.

☐ PROPERTY OWNER	☑ TENANT
Name: Nike	
Address: 1 Bowerman Drive	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	

☐ APPLICANT	☑ CONTACT PERSON
Business name: Nike, Air M.I.	
Contact name: Nick Pisciotto	
Address:	
City/State/ZIP:	
Phone: (503) 206-2899	Fax:
E-mail: nick.pisciotto@nike.com	

CONTRACTOR

Business name: Omega Morgan

Address: 23810 NW Huffman St

City/State/ZIP: Hillsboro, OR, 97005

Phone: (503) 647-7474 | Fax:

CCB lic.: 127213

Authorized signature:

Print name: [signature] | Date: 9/25/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation

Number. of bedrooms:

Number of bathrooms:

Total number of floors:

New dwelling area: square feet

Garage/carport area: square feet

Covered porch area: square feet

Deck area: square feet

Other structure area: square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $5,000

Existing building area: square feet

New building area: square feet

Number of stories:

Type of construction:

Occupancy groups:

Existing:

New:

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	373.96
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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

RECEIVED
OCT 4 2018
BUILDING SERVICES DIVISION

OFFICE USE ONLY	
Date Received:	Permit No.: B2018-42447
Date Issued: 10-12-18	By:
	Payment Type: Trust Account

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 13955 SW Millikan Way
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.:
Project name: KBAR 4
Cross street/directions to job site: Between 141st and SW Hocken on SW Millikan
Subdivision:
Lot no.:
Tax map/parcel no.: R2088984

DESCRIPTION OF WORK

Equipment Install: KBAR 4; three (3) pieces of equipment.

☐ PROPERTY OWNER	☑ TENANT

Name: Nike
Address: 1 Bowerman Drive
City/State/ZIP: Beaverton, OR 97005
Phone:
Fax:
E-mail:

☐ APPLICANT	☑ CONTACT PERSON

Business name: Nike, Air M.I.
Contact name: Nick Pisciotto
Address:
City/State/ZIP:
Phone: (503) 206-2899
Fax:
E-mail: nick.pisciotto@nike.com

CONTRACTOR

Business name: Omega Morgan
Address: 23810 NW Huffman St
City/State/ZIP: Hillsboro, OR, 97005
Phone: (503) 647-7474
Fax:
CCB lic.: 127213

Authorized signature:

Print name:
Date: 10/4/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation
Number. of bedrooms:
Number of bathrooms:
Total number of floors:
New dwelling area: square feet
Garage/carport area: square feet
Covered porch area: square feet
Deck area: square feet
Other structure area: square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $5,000
Existing building area: square feet
New building area: square feet
Number of stories:
Type of construction:
Occupancy groups:
Existing:
New:

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$373.96
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

Community Development Department
Building Division
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

RECEIVED

OFFICE USE ONLY	
Date Received OCT 4 2018	Permit No.: B 2018-3784
Date Issued: 10-12-18	By: NR
	Payment Type: Trust Account

BUILDING SERVICES DIVISION

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 13955 SW Millikan Way	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: KBAR 3
Cross street/directions to job site: Between 141st and SW Hocken on SW Millikan	
Subdivision:	Lot no.:
Tax map/parcel no.: R2088984	
DESCRIPTION OF WORK	
Equipment Install: KBAR 3; Three (3) pieces of equipment.	
☐ PROPERTY OWNER	☑ TENANT
Name: Nike	
Address: 1 Bowerman Drive	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	
☐ APPLICANT	☑ CONTACT PERSON
Business name: Nike, Air M.I.	
Contact name: Nick Pisciotto	
Address:	
City/State/ZIP:	
Phone: (503) 206-2899	Fax:
E-mail: nick.pisciotto@nike.com	
CONTRACTOR	
Business name: Omega Morgan	
Address: 23810 NW Huffman St	
City/State/ZIP: Hillsboro, OR, 97005	
Phone: (503) 647-7474	Fax:
CCB lic.: 127213	
Authorized signature: [signature]	
Print name: NICK PISCIOTTO	Date: 10/4/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation $5,000	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$373.96
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building Permit Application

Beaverton

Community Development Department
Building Division
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: 10-12-18	Permit No.: B2018-4679
Date Issued: 10-12-18	By: TK
	Payment Type: Check

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 16715 NW Mission Oaks Drive

City/State/ZIP: Beaverton, Oregon 97006

Suite/bldg /apt. no.: | Project name: Faraudo

Cross street/directions to job site: NW Waterhouse Avenue

Subdivision: | Lot no.:

Tax map/parcel no.: 1N131AD019

DESCRIPTION OF WORK

Frame in new, smaller rough openings for windows in Master Bathroom, utilizing existing header. Frame in more non-load bearing walls throughout Master and Guest Bathroom. Frame in smaller door opening for Master Bath.

☑ PROPERTY OWNER	☐ TENANT

Name: Jim and Chantal Faraudo

Address: 16715 NW Mission Oaks Drive

City/State/ZIP: Beaverton, OR. 97006

Phone: (503) 241-4059 | Fax:

E-mail: keela@maughandesign.com

☑ APPLICANT	☑ CONTACT PERSON

Business name: Maughan Design and Remodel

Contact name: Keela Scrivner

Address: 1910 NW Lovejoy Street

City/State/ZIP: Portland, Oregon 97209

Phone: (503) 241-4059 | Fax:

E-mail: keela@maughandesign.com

CONTRACTOR

Business name: Maughan Design and Remodel

Address: 1910 NW Lovejoy Street

City/State/ZIP: Portland, Oregon 97209

Phone: (503) 241-4059 | Fax:

CCB lic.: 124374

Authorized signature: Keela Scrivner

Print name:	Date:
Keela Scrivner	10/11/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation		$70,000.00
Number of bedrooms:		4
Number of bathrooms:		3
Total number of floors:		2
New dwelling area:	square feet	n/a
Garage/carport area:	square feet	n/a
Covered porch area:	square feet	n/a
Deck area:	square feet	n/a
Other structure area:	square feet	n/a

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$2,197.22
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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:	10-11-18	Permit No.:	B2018-4607
Date Issued:	10-11-18	By:	MC
		Payment Type:	M/C

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

X Job site address: 15195 NW Greenbrier Pkwy
City/State/ZIP: Beaverton OR 97006
Suite/bldg./apt. no.: | Project name: Sage
Cross street/directions to job site:
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

X Remove existing Roof membrane and damaged insulation, install ½" Densdeck, self adhered vapor barrier and fleece back membrane

X ☒ PROPERTY OWNER	☐ TENANT
Name: Sage Software Inc	
Address: 15195 NW Greenbrier Parkway	
City/State/ZIP: Beaverton OR 97006	
Phone:	Fax:
E-mail:	

☐ APPLICANT	☐ CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

CONTRACTOR

X Business name: Flynn BEC LP
Address: 5500 SW Arctic Dr Ste 2
City/State/ZIP: Beaverton OR 97005
Phone: 253 887 1500 | Fax:
CCB lic.: 220332

Authorized signature:

X Print name:	Date:
Kevin Christian	10/8/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

X Valuation	$273,497
Existing building area:	35,000 square feet
New building area:	35,000 square feet
Number of stories:	2
Type of construction:	Reroof
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$3,074.10
Amount received	$3,074.10
Date received:	10-11-18

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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

RECEIVED
BUILDING SERVICES DIVISION

OFFICE USE ONLY	
Date Received: SEP 18 2018	Permit No.: B2018-4304
Date Issued:	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 2905 SW CEDAR HILLS BLVD SUITE 140
City/State/ZIP: BEAVERTON, OR 97005
Suite/bldg./apt. no.: SUITE 140
Project name: BARGARTEN ROOFTOP SCREENING
Cross street/directions to job site: SW CEDAR HILLS BLVD & SW JENKINS
Subdivision:
Lot no.: PT 6
Tax map/parcel no.: 1S109000200

DESCRIPTION OF WORK

MECH. SCREEN AT ROOFTOP: 16'-0 & 20'-0 SECTIONS

☑ PROPERTY OWNER	☐ TENANT
Name: CE JOHN COMPANY INC.	
Address: 1701 SE COLUMBIA RIVER DRIVE	
City/State/ZIP: VANCOUVER, WA 98661	
Phone: 360-823-2779	Fax:
E-mail: SGAREY@CEJOHN.COM	

☑ APPLICANT	☐ CONTACT PERSON
Business name: CONTRACTOR	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

CONTRACTOR

Business name: JAMES E JOHN CONSTRUCTION
Address: 1701 SE COLUMBIA RIVER DRIVE
City/State/ZIP: VANCOUVER, WA 98661
Phone: 360-600-2507
Fax:
CCB lic.: OR-63261

Authorized signature:

Print name: JEREMIE SCHAFER	Date: 9/18/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area: 216	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation: 26,674 -	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups: V-B	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	366.51
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

Building Permit Application

Community Development Department
Building Division
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: 09/27/2018	Permit No.: B2018-4459
Date Issued: 10/10/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 2755 SW 153rd Drive
City/State/ZIP: Beaverton Oregon
Suite/bldg./apt. no.: BC-19-1054 | Project name: Re-support wall
Cross street/directions to job site: from Jenkins take 153rd ave over the max tracks Building is second on the right
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

I need to re-support a wall in BC-19-1054 so it will accommodate 2-75" TVs and video conferencing systems

☐ PROPERTY OWNER	☑ TENANT
Name: NIKE	
Address: ONE BOWERMAN DRIVE	
City/State/ZIP: Beaverton Oregon 97005	
Phone: (503) 671-6453	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: NIKE inc	
Contact name: Kevin Sabbe	
Address: ONE BOWERMAN DRIVE (Dream-6 building)	
City/State/ZIP: Beaverton Oregon 97005	
Phone: (503) 250-4525	Fax:
E-mail: kevin.sabbe@nike.com	

CONTRACTOR

Business name: Fred Shearer&Sons
Address: 5500 SW Arctic way
City/State/ZIP: Beaverton Oregon
Phone: (503) 520-9991 | Fax:
CCB lic.: 357

Authorized signature:

Print name:	Date:
KEVIN SABBE	09/25/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$5000.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	299.83
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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: 10-9-18	Permit No.: B2018-4614
Date Issued: 10-10-18	By: MC
	Payment Type: M/C

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 17235 NW CORRIDOR CT

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt. no.: 175 | Project name: JAYA HANUMAN TEMP

Cross street/directions to job site: Contact [redacted] Surzess Babu 678-983-4108

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

ADD 4 NEW HEADS IN TEMPLE ALCOVES.

☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: WYATT FIRE PROTECTION	
Contact name: ASHLEY NISHIHARA	
Address: 9095 SW BURNHAM ST	
City/State/ZIP: TIGARD, OREGON	
Phone: (503) 684-2928	Fax:
E-mail: A.NISHIHARA@WYATTFIRE.COM	

CONTRACTOR

Business name: ABOVE

Address:

City/State/ZIP:

Phone: | Fax:

CCB lic.: 64077

Authorized signature: Ashley Nishihara

Print name:	Date:
ASHLEY NISHIHARA	10/05/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		1037
Existing building area:	square feet	
New building area:	square feet	0
Number of stories:		1
Type of construction:		III-B
Occupancy groups:		
Existing:		LIGHT HAZARD
New:		

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$127.14
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

8/10

Building Permit Application

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

Beaverton OREGON

Community Development Department
Building Division
...kan 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: 8-10-18	Permit No.: B2018- 3719
Date Issued: 10-9-18	By: JK
	Payment Type: Check

Revised 8/27/18 Revised 9/20/18

SW2018-0190

TYPE OF WORK	
☑ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 12204 SW GOOSE LANE

City/State/ZIP: Beaverton, OR

Suite/bldg./apt. no.: | Project name:

Cross street/directions to job site: SW Goose Lane

Subdivision: South Cooper Mtn | Lot no.: 158

Tax map/parcel no.:

DESCRIPTION OF WORK

NSFR

☑ PROPERTY OWNER	☐ TENANT

Name: Lennar NW Inc.

Address: 11807 NE 99th St. #1170

City/State/ZIP: Vancouver, WA 98682

Phone: (360) 258-7900 | Fax: (360) 258-7901

E-mail:

☑ APPLICANT	☑ CONTACT PERSON

Business name: Lennar NW Inc.

Contact name: Juls Call

Address: same as above

City/State/ZIP:

Phone: (360) 258-7906 | Fax:

E-mail: juls.call@lennar.com

CONTRACTOR

Business name: Lennar NW Inc.

Address: same as above

City/State/ZIP:

Phone: | Fax:

CCB lic.: 195307

Authorized signature:

Print name:	Date:
Juls Call	07/20/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$302,156.30	
Number. of bedrooms:	3	
Number of bathrooms:	2.5	
Total number of floors:	2	
New dwelling area:	2322	square feet
Garage/carport area:	439	square feet
Covered porch area:	115	square feet
Deck area:		square feet
Other structure area:	168	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$1,288.62
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

8/10

Building Permit Application

Community Development Department
Building Division
...kan Way / PO Box 4755
Beaverton, OR 97076
...93 Fax: (503) 526-2550
...rmation (503) 526-2222
BeavertonOregon.gov

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG-8...

OFFICE USE ONLY	
Date Received: 8-10-18	Permit No.: B2018-3727
Date Issued: 10-9-18	By: JK
	Payment Type: CHECK

Routed 8/27/18

TYPE OF WORK	
☑ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 12301 SW 174TH TERRACE
City/State/ZIP: Beaverton, OR
Suite/bldg./apt. no.:
Project name:
Cross street/directions to job site: Corner of SW Goose Ln & SW 147th Terrace
Subdivision: South Cooper Mtn
Lot no.: 139
Tax map/parcel no.:

DESCRIPTION OF WORK

NSFR

☑ PROPERTY OWNER	☐ TENANT

Name: Lennar NW Inc.
Address: 11807 NE 99th St. #1170
City/State/ZIP: Vancouver, WA 98682
Phone: (360) 258-7900
Fax: (360) 258-7901
E-mail:

☑ APPLICANT	☑ CONTACT PERSON

Business name: Lennar NW Inc.
Contact name: Juls Call
Address: same as above
City/State/ZIP:
Phone: (360) 258-7906
Fax:
E-mail: juls.call@lennar.com

CONTRACTOR

Business name: Lennar NW Inc.
Address: same as above
City/State/ZIP:
Phone:
Fax:
CCB lic.: 195307

Authorized signature:

Print name:	Date:
Juls Call	07/20/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation $320,361.61
Number. of bedrooms: 4
Number of bathrooms: 2.5
Total number of floors: 2
New dwelling area: 2479 square feet
Garage/carport area: 429 square feet
Covered porch area: 182 square feet
Deck area: square feet
Other structure area: 105 square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation
Existing building area: square feet
New building area: square feet
Number of stories:
Type of construction:
Occupancy groups:
Existing:
New:

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$1,343.80
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building Permit Application

Community Development Department
Building Division
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

RECEIVED

OFFICE USE ONLY	
Date Received: 10/08/2018	Permit No.: B2018-4611
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☑ Other: Solar

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☑ Other: Solar

JOB SITE INFORMATION AND LOCATION	
Job site address: 12945 SW Glenn Dr.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Installation and hook up of roof mount 5.795 KW solar system

☑ PROPERTY OWNER	☐ TENANT
Name: Roberta Michaels and Donald Toomin	
Address: 12945 SW Glenn Dr.	
City/State/ZIP: Beaverton, OR 97008	
Phone: (707) 206-2850	Fax:
E-mail: yourhealthwellbeing@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Green Ridge Power	
Contact name: Hilary Conway	
Address: P.O. Box 1336	
City/State/ZIP: Sherwood, OR 97140	
Phone: (503) 349-5182	Fax:
E-mail: operations@greenridgepower.com	

CONTRACTOR	
Business name: Green Ridge Power	
Address: P.O. Box 1336	
City/State/ZIP: Sherwood, OR 97140	
Phone: (503) 217-2175	Fax:
CCB lic.: 210450	

Authorized signature:

Print name:	Date:
Brian Butterfield	10/03/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$26,078
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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.: B2018-4630
Date Issued: 10/9/2018	By: SH
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address:	4905 SW Griffith Dr.
City/State/ZIP:	Beaverton OR 97005
Suite/bldg./apt. no.:	Project name: Griffith Park
Cross street/directions to job site:	Elevator Recall
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Add 4 smokes + 1 heat and 1 pull station for elevator recall. Deliver relay outputs to recall for FIRE ALARM

☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

☐ APPLICANT	☐ CONTACT PERSON
Business name:	American Security / Secure Pacific
Contact name:	Rich Miller
Address:	8220 N. Interstate Ave.
City/State/ZIP:	Portland OR 97217
Phone: 503-231 0303	Fax:
E-mail:	rmiller@securepacific.com

CONTRACTOR

Business name:	American Security / Secure Pacific
Address:	8220 N. Interstate Ave
City/State/ZIP:	Portland OR 97217
Phone: 503. 231 0303	Fax:
CCB lic.:	185850
Authorized signature:	
Print name: Rich Miller	Date: 6/4/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$ 5282.00
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 10-9-18	Permit No.: B2018-4624
Date Issued: 10-9-18	By:
	Payment Type: Visa

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 3831 SW 17TH AVE
City/State/ZIP: BEAVERTON, OR 97229
Suite/bldg./apt. no.: Project name:
Cross street/directions to job site:
Subdivision: Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

ADD 2 HEADS TO ACCOMODATE NEW BATHROOM

☐ PROPERTY OWNER	☒ TENANT
Name:	BURRY LOVELY BRIDE
Address:	3831 SW 17TH
City/State/ZIP:	BEAVERTON, OR
Phone:	Fax:
E-mail:	

☒ APPLICANT	☐ CONTACT PERSON
Business name:	FIRE ONE FIRE SYSTEMS, INC
Contact name:	NICK BOCCHIETTI
Address:	PO BOX 734
City/State/ZIP:	OREGON CITY, OR 97045
Phone:	5035579050
Fax:	5035579268
E-mail:	NICK@FIREONE.ORG

CONTRACTOR

Business name: SAME AS ABOVE
Address:
City/State/ZIP:
Phone: Fax:
CCB lic.: 98140

Authorized signature:

Print name: NICK BOCCHIETTI Date: 09OCT18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	500.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	II
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$92.00
Amount received	$92.00
Date received:	10-9-18

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Chick-fil-A

Community Development Department
Building Division
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: 9/11/2018	Permit No: B2018-4193
Date Issued: 10-9-18	By: TH
	Payment Type: Visa

TYPE OF WORK	
☑ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 10657 SW Beaverton HillsDale HWY

City/State/ZIP: Beaverton OR 97005

Suite/bldg./apt. no.:

Project name: Chick Fill A

Cross street/directions to job site:

Subdivision:

Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Sprinkler Fire Protection system
New Sprinkler heads, New pipe

☐ PROPERTY OWNER	☐ TENANT

Name: Buffalo Construction

Address: 12700 Otto Loop Drive

City/State/ZIP: Louis Ville 40299-6391

Phone: (502) 327-4686 Fax: (502) 243-5266

E-mail:

☐ APPLICANT	☐ CONTACT PERSON

Business name: Buffalo Construction

Contact name: Faith Rhine

Address: 10657 SW Beaverton Hills Dale HWY

City/State/ZIP: Beaverton, OR, 97005

Phone: Fax: (502) 243-5266

E-mail:

CONTRACTOR

Business name: Johnson Controls

Address: 6305 SW RoseWood ST.

City/State/ZIP: Lake Oswego 97035

Phone: (503) 683-9000 Fax: (503) 675-6521

CCB lic.: 197010

Authorized signature: Ghandi

Print name:	Date:
Jacques Alia Ghandi	08/21/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	32,500.00
Existing building area:	square feet
New building area:	square feet 5022
Number of stories:	One
Type of construction:	wood
Occupancy groups:	Light Hazard
Existing:	
New:	Ninty-Five

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	268.33
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building 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: 10/8/2018	Permit No.: B2018-4602
Date Issued: 10/8/2018	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☒ Other: RE-ROOF

CATEGORY OF CONSTRUCTION	
☒ 1- and 2-family dwelling	☒ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 16145 SW PEBBLE CT

City/State/ZIP: Beaverton OR 97007

Suite/bldg./apt. no.: | Project name:

Cross street/directions to job site:

SW Murray Blvd southbound. Right on SW Weir Rd. Right on SW 163rd Ave. Right on SW Pebble Ct.

Subdivision: | Lot no.:

Tax map/parcel no.: R1392932

DESCRIPTION OF WORK

Replace 34 sq comp shingles. Full plywood re-sheet.

☒ PROPERTY OWNER	☐ TENANT

Name: BHASKAR UTHANUMALLIAH

Address: 16145 SW PEBBLE CT

City/State/ZIP: Beaverton OR 97007

Phone: (503) 453-5067 | Fax:

☐ APPLICANT	☒ CONTACT PERSON

Business name: Northwest Permit Inc.

Contact name: Naida Khan

Address: 9808 31st St SE

City/State/ZIP: Everett WA 98208

Phone: (360) 945-2787 | Fax: (888) 400-0383

E-mail: naida@nwpermit.com

CONTRACTOR

Business name: HOME DEPOT USE

Address: 2455 PACES FERRY RD, C-11 COMPLIANCE

City/State/ZIP: ATLANTA GA 30339

Phone: (360) 945-2787 | Fax:

CCB lic.: 95843

Authorized signature: Naida Khan

Print name: Naida Khan / Northwest Permit Inc. | Date: 10/03/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$19,853.56
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

rev 06/11

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 8-29-18	Permit No.: B2018-4039
Date Issued: 10/8/2018	By:
	Payment Type:

TYPE OF WORK

☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 7570 SW BELMONT DR
City/State/ZIP: BEAVERTON OR 97008
Suite/bldg./apt. no.: Project name: BOB B.
Cross street/directions to job site:

Subdivision: Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

REPLACE EXISTING DECK AND STEPS.

☐ PROPERTY OWNER	☐ TENANT
Name: BOB BOWLER	
Address: 7570 SW BELMONT DR.	
City/State/ZIP: BEAVERTON OR 97008.	
Phone: (971) 506 5674	Fax:
E-mail:	

☒ APPLICANT	☐ CONTACT PERSON
Business name: ABOVE ALL FENCES, DECKS & CONST.	
Contact name: BEN LOGOS	
Address: 7424 SW FIR ST	
City/State/ZIP: TIGARD OR 97223	
Phone: (971) 404 7609	Fax:
E-mail: aboveallconstruction@gmail.com.	

CONTRACTOR

Business name: ABOVE ALL FENCES, DECKS & CONS
Address: 7424 SW FIR ST
City/State/ZIP: TIGARD OR 97223
Phone: (971) 404 7609 Fax:
CCB lic.: 190649

Authorized signature: BEN LOGOS

Print name: Date: 8/29/18.

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area: 160	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $13,172.	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$220.72
Amount received	$220.72
Date received: 8-29-18	

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

* Fee methodology set by Tri-County Building Industry Service Board

8/7/18

Building Permit Application

Community Development Department
Building Division
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

Beaverton OREGON

OFFICE USE ONLY	
Date Received: 8-7-18	Permit No.: B2018-3588
Date Issued: 10-8-18	By: [illegible]
	Payment Type: Visa

Routed 8/14/18

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 8535 SW BIRCHWOOD RD.
City/State/ZIP: PORTLAND, OREGON, 97225
Suite/bldg./apt. no.: Project name: GREAT ROOM.
Cross street/directions to job site: SW 87TH STREET FROM CANYON SW LAURELWOOD AVE, FROM BEAVERTON HILLSDALE
Subdivision: Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

BUILD GREAT ROOM, 18' WIDE x 32' LONG AND ATTACHED TO NORTH SIDE OF EXISTING RESIDENCE

☒ PROPERTY OWNER	☐ TENANT
Name: BARRY & PHYLLIS RODGERS	
Address: 8535 SW BIRCHWOOD ROAD	
City/State/ZIP: PORTLAND, OREGON 97225	
Phone: 503 747 9043	Fax:
E-mail: brsunrise@aol.com	

☒ APPLICANT	☐ CONTACT PERSON
Business name:	
Contact name: BARRY RODGERS	
Address: 8535 SW BIRCHWOOD ROAD	
City/State/ZIP: PORTLAND, OREGON, 97225	
Phone: 503 747 9043	Fax:
E-mail: brsunrise@aol.com	

CONTRACTOR

Business name: All Rich Construction Services.
Address: 5870 SW FRANKLIN AVE B
City/State/ZIP: BEAVERTON OR 97005
Phone: 503 757 7433 Fax:
CCB lic.: 207984
Authorized signature: [signature]
Print name: BARRY RODGERS Date: 8/7/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation $70,567.02

Number. of bedrooms:		
Number of bathrooms:		
Total number of floors:		
New dwelling area:	576	square feet $86,400
Garage/carport area:		square feet
Covered porch area:		square feet
Deck area:	108	square feet $1,620
Other structure area:		square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation

Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$517.01
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14

Building 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

RECEIVED
SEP 27 2018
BUILDING SERVICES DIVISION

OFFICE USE ONLY	
Date Received:	Permit No.: B2018-44164
Date Issued: 10-8-18	By:
	Payment Type: Visa

TYPE OF WORK

☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9555 SW Barnes Road (Peterkort Centre I)

City/State/ZIP: Portland, OR 97225

Suite/bldg./apt. no.: Suite 201	Project name: Eye Health NW

Cross street/directions to job site:

Subdivision:	Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Install fire alarm devices in suite 201 per plans.

☐ PROPERTY OWNER	☐ TENANT

Name: Peterkort Properties

Address: 9755 SW Barnes Road Suite 620

City/State/ZIP: Portland, OR 97225

Phone: (503) 546-5632	Fax:

E-mail:

☐ APPLICANT	☐ CONTACT PERSON

Business name:

Contact name:

Address:

City/State/ZIP:

Phone:	Fax:

E-mail:

CONTRACTOR

Business name: Capitol Electric Company, Inc.

Address: 11401 NE Marx Street

City/State/ZIP: Portland, OR 97220

Phone: (503) 255-9488	Fax: (503) 255-1966

CCB lic.: 48748

Authorized signature: Shane J. Tercek

Print name:	Date:
Shane Tercek NICET Level III, Fire Alarms	09/25/18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$9,875
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$111.78
Amount received	$389.98
Date received: 9-28-18	

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

* Fee methodology set by Tri-County Building Industry Service Board

Routed 1/22/19

Building Permit Application

Beaverton OREGON

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: 1-18-18	Permit No.: B2018-0278
Date Issued: 10-8-18	By: MK
	Payment Type: Check

TYPE OF WORK

☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION

☒ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 2730 SW West Point Ave
City/State/ZIP: Portland OR 97225
Suite/bldg./apt. no.: | Project name:
Cross street/directions to job site: Canyon Lane
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

-- New Entry
Change Stairs
Vault Ceiling
Change Interior Walls

☒ PROPERTY OWNER	☐ TENANT
Name:	Barbara Böttcher
Address:	2730 SW West Point Ave
City/State/ZIP:	Portland OR 97225
Phone:	503 891 3166 Fax:
E-mail:	kanalhaus@msn.com

☐ APPLICANT	☒ CONTACT PERSON
Business name:	Don Böttcher
Contact name:	Böttcher
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

CONTRACTOR

Business name: Owner / Contractor
Address:
City/State/ZIP:
Phone: | Fax:
CCB lic.:

Authorized signature: Donald L Böttcher
Print name: Don Böttcher | Date: 1/18/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	32,500.00
Number. of bedrooms:	Four
Number of bathrooms:	Four
Total number of floors:	Two (2)
New dwelling area:	300 square feet
Garage/carport area:	square feet
Covered porch area:	170 square feet
Deck area:	171 square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	3234 square feet
New building area:	300 square feet
Number of stories:	ONE (1)
Type of construction:	Wood Frame
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$299.96
Amount received	$299.96
Date received:	1-18-18

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

APPROVED 10/02/18 SVT

Community Development Department
Building Division
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

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG 8...

OFFICE USE ONLY	
Date Received: 09/11/2018	Permit No.: B2018-4195
Date Issued: 10-5-18	By: JK
	Payment Type: Visa

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 10300 SW Allen Blvd
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.:
Project name: Epiq Westflex Reconfig
Cross street/directions to job site: Allen Blvd/ Hwy 217
Subdivision:
Lot no.:
Tax map/parcel no.: 1S123BB00300

DESCRIPTION OF WORK

Reconfigure interior furniture systems, limited 85" high panels, no ceiling work, no mechanical work, no fire/life safety work, no sprinkler work, no emergency lighting work.

☑ PROPERTY OWNER	☑ TENANT
Name: Epiq Systems/ Scott Dueker	
Address: 10300 SW Allen Blvd.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 350-7804	Fax:
E-mail: sdueker@epiqsystems.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Tathwell Design Associates	
Contact name: Jeff Tathwell	
Address: 1521 NE 63rd Ave.	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 290-4991	Fax:
E-mail: jeff@tathwelldesign.com	

CONTRACTOR

Business name: Office Furniture Services
Address: 110 SE Taylor St
City/State/ZIP: Portland, OR 97214
Phone: 503-230-7895
Fax:
CCB lic.: 150680

Authorized signature:

Print name: JEFF TATHWELL	Date: 09.11.18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		50,500-
Existing building area:	square feet	88,000
New building area:	square feet	0
Number of stories:		1
Type of construction:		III-N
Occupancy groups:		
Existing:		B,F-1,S-1
New:		B,F-1,S-1

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	932.21
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Building Permit Application

Community Development Department
Building Division
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

Beaverton OREGON

RECEIVED

OFFICE USE ONLY	
Date Received: SEP 13 2018	Permit No: B2018-4200
Date Issued: 10-5-18	By: [illegible]
	Payment Type: Visa

BUILDING SERVICES DIVISION

Routed 9/14/18

TYPE OF WORK	
☐ New construction	☐ Demolition
☒ Addition/alteration/replacement	☐ Other:

CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☒ Other: Deck

JOB SITE INFORMATION AND LOCATION	
Job site address: 15385 SW Petrel ln.	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Schatz deck
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Replacing existing deck with one of same size.

☒ PROPERTY OWNER	☐ TENANT
Name: Bill and Jan Schatz	
Address: 15385 SW Petrel ln. Beaverton	
City/State/ZIP:	
Phone: 503-720-6059	Fax:
E-mail: wlschatz@gmail.com	

☒ APPLICANT	☐ CONTACT PERSON
Business name: Deck Masters, LLC	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

CONTRACTOR	
Business name: Deck Masters, LLC	
Address: 1901 NE Buffalo st.	
City/State/ZIP: Portland, OR 97211	
Phone: 503-277-9382	Fax:
CCB lic.: 181 034	

Authorized signature: [signature]

Print name: Chris Marquand	Date: 9-11-18

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	20,000	
Number. of bedrooms:		
Number of bathrooms:		
Total number of floors:		
New dwelling area:		square feet
Garage/carport area:		square feet
Covered porch area:		square feet
Deck area:	420	square feet
Other structure area:		square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	290.98
Amount received	
Date received:	

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

* Fee methodology set by Tri-County Building Industry Service Board

Form B70-1001 REV 2/14