

Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2550

Fax: (503) 526-2222

BeavertonOregon.gov

Beaverton

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

RECEIVED

Date Received: 03/21/2019	Permit No.: B2019-5397
Date Issued: 4-3-19	By: CRL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17209 SW GoldCrest Ln	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: SCMH
Cross street/directions to job site:	
Subdivision: South Cooper MTN HTS	Lot no.: 70
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New Single Family	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: 5037267041	Fax:
E-mail: Hannah@everetthomesnw.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Hannah Leas	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: 5037267041	Fax:
E-mail: Hannah@everetthomesnw.com	
CONTRACTOR	
Business name: Pacific Ground Works, Inc.	
Address: P.O. Box 646	
City/State/ZIP: Scappoose OR 97056	
Phone: (503) 987-1283	Fax: (503) 549-8669
E-mail: pgroundw@msn.com	Plumbing. lic.: 34-451PB
CCB lic.: 152746	City or metro lic. no.: 7442
Authorized signature: <i>William O Smith</i> president	
Print name: William O Smith, president	Date: 02/22/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

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

Date Received:	Permit No.: B2019-0615
Date Issued: 4-17-19	By: CM
	Payment Type: CHECK

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12090 SW 17RD TERRACE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 178
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: WOLCOTT PLUMBING	
Address: 1075 W HISTORIC COLUMBIA RIVER HWY	
City/State/ZIP: TROUTDALE, OR 97060	
Phone: (503) 667-1781	Fax: (503) 667-9891
E-mail: cliffb@wolcott.pro	Plumbing lic.: 26-824PB
CCB lic.: 112220	City or metro lic. no.: 8082

Authorized signature: *Cliff Bowman*

Print name: **Cliff Bowman** Date: **01/29/19**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)			*
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector	1	20.31	20.31
Sanitary sewer (no. linear ft.: 0)			*
Storm sewer (no. linear ft.: 0)			*
Water service (no. linear ft.: 0)			*
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer	1	20.31	20.31
Dishwasher	1	20.31	20.31
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	20.31
Hose bib	2	20.31	40.62
Ice maker	1	20.31	20.31
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			*
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan	3	20.31	60.93
Urinal		20.31	
Water closet	4	20.31	81.24
Water heater/expansion tank	1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			348.33
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			41.80
TOTAL PERMIT FEE			\$616.39

This permit application expires if a permit is not obtained within 100 days after it has been accepted as complete.

* See Fee Schedule

ELECTRONIC SUBMITTAL
SEE I/BLDG DIV WG-8

Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Beaverton
OREGON

RECEIVED

Date Received: JAN 28 2019	Permit No: B2019-0398
Date Issued: 4/25/2019	
CITY OF BEAVERTON	
BUILDING DIVISION	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 2180 SW 170th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: BSD Maint. Facility
Cross street/directions to job site: South of Merlo on east side of 170th	
Subdivision:	Lot no.: 200 & 600
Tax map/parcel no.: 1S107AA	
DESCRIPTION OF WORK	
Site utilities for new parking lot to north, small building addition and replacing CB in yard with filter CB for treatment	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Scott Johnson - Beaverton School District	
Address: 16550 SW Merlo Rd	
City/State/ZIP: Beaverton, OR 97006	
Phone: (503) 356-4552	Fax:
E-mail: scott_johnson@beaverton.k12.or.us	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: FFA Architecture + Interiors	
Contact name: Laura Roark	
Address: 520 SW Yamhill	
City/State/ZIP: Portland, OR 97204	
Phone: (503) 327-0375	Fax: (503) 222-1701
E-mail: lroark@ffadesign.com	
CONTRACTOR	
Business name: Weitman Excavation Inc	
Address: 11225 SW Clay Street	
City/State/ZIP: Sherwood, OR 97140	
Phone: 503.682.3322	Fax: 503.682.3366
E-mail: evan@weitmanexcavation.com	Plumbing. llo. 3-552PB
CCB llo.: 217837	City or metro llo. no.: 8556

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Eq.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole	15	20.31	304.65
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 124)			96.67
Storm sewer (no. linear ft.: 1,393)			291.49
Water service (no. linear ft.: 1,735)			446.11
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib	1	20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			
Roof drain (commercial)		20.31	
Sink/basin/bathtub		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			1,138.92
Minimum permit fee			398.59
<input checked="" type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			284.73
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			1,808.43

Authorized signature: *Laura Roark*

Print name: Laura Roark Date: 01/24/19

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



Plumbing Permit Application

Washington County Phone: 503-846-3470, Fax: 503-846-3993, **Inspection Request: 503-846-3699**
 155 N. 1st AV, Suite 350-12, Hillsboro, OR 97124 www.co.washington.or.us **Permit #** B 2019-1692
 Current Planning Approval: _____ **Project #** _____ **Permit #** _____

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>9855 SW 153</u>	
City/State/ZIP: <u>BEAVERTON, OR.</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	
Lot no.:	
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Tub-Free standing, shower pan</u>	
<u>Change fixtures</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>VICTORIA FENTON</u>	
Address:	
City/State/ZIP:	
Phone: (503) <u>475-9614</u>	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name: <u>LARSEN & SON Pllc</u>	
Address: <u>8537 SW 54</u>	
City/State/ZIP: <u>PDX 97219</u>	
Phone: (503) <u>246-7004</u>	Fax: (503) <u>246-8336</u>
CCB lic.: <u>37650</u>	Lic. no.: <u>26-281PB</u>

Authorized signature: _____

Print name: Thorben Larsen Date: 4-11-19

FEE* SCHEDULE an			
For special information use checklist.			
Description	Qty.	Ea.	Total
New 1- 2 family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		339.00	
SFR (2) bath		435.00	
SFR (3) bath		530.00	
Each additional bath/kitchen		93.00	
Fire sprinkler (# _____ sq. ft.)		By Sq. ft.	
Site utilities			
Catch basin or area drain		15.50	
Drywell, leach line, or trench drain		15.50	
Footing Drain (each 100' increment)		45.00	
Manufactured home utilities		103.00	
Manholes		15.50	
Rain drain connector		15.50	
Sanitary sewer (each 100 ft.): # of ft.		45.00	
Septic Connection		32.00	
Storm sewer (each 100 ft.): # of ft.		45.00	
Water service (each 100 ft.): # of ft.		45.00	
Fixture or item			
Absorption Valve		15.50	
Backflow preventor		15.50	
Backwater valve		15.50	
Clothes washer		15.50	
Dishwasher		15.50	
Drinking fountain		15.50	
Ejectors/sump		15.50	
Expansion tank		15.50	
Fixture/sewer cap		15.50	
Floor drain/floor sink/hub		15.50	
Garbage disposal		15.50	
Hose bib		15.50	
Hydroponic piping system		15.50	
Ice maker		15.50	
Interceptor/grease trap		15.50	
Medical gas (value: \$ _____)		By Value	
Primer (s)		15.50	
Residential Re-pipe: 3600 sq.ft/less		93.00	
Residential Re-pipe: 3601 sq.ft/more		139.00	
Roof drain (Commercial)		15.50	
Sink/basin/lavatory	<u>6</u>	15.50	
Tub/shower/shower pan	<u>3</u>	15.50	
Urinal		15.50	
Water closet	<u>3</u>	15.50	
Water heater		15.50	
Other:			
Subtotal			
Minimum permit fee			\$60.00
Plan review (65% of permit fee)			\$
State surcharge (12% of permit fee)			\$
TOTAL PERMIT FEE			\$

16.75
272.97
440-4616T (6/19/C8)

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.



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00121

Approval Code: 03569G 4/30/2019 10:34 am

E-mailed To: permits@3mountainsplumbing.com

B2019-1775

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13950 SW BONNIE BRAE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CD00613	
DESCRIPTION OF WORK	
35' laundry line replacement under slab- rough in only	
APPLICANT	
Name: RaeLynn Erhardt	
Phone: 5036701342	Fax: 5036709104
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 5304 N ALBINA AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5036701342	Fax: 5038280515
Email: permits@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

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

April 2019

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

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

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00120

Approval Code: 04350G 4/30/2019 7:37 am

E-mailed To: woodburnplumbing@woodburnplumbing.com

B2019-1769

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 12800 SW NIGHT HERON LN

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.: 102

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 2S105BC92083

DESCRIPTION OF WORK

INSTALL NEW BATHTUB

APPLICANT

Name: Victoria Spencer

Phone: 3608342889

Fax:

Email:

CONTRACTOR

Plumb lic. no.: 37-385PB

CCB lic. no.: 97064

Business Name: WOODBURN PLUMBING INC A CORP OF WASHINGTON

Contact:

Address: 3311 SE MCKEVER RD

City/State/ZIP: CAMAS, WA 98607

Phone: 3608432889

Fax: 3608332889

Email: woodburnplumbing@woodburnplumbing.com

Metro lic. no.:

City lic. no.:

PLAN REVIEW

Please check all that apply:

- Med gas/vacuum system or health care facility
 Vacuum drainage waste and vent system
 Commercial booster pump
 Addition of a new motor load
 Installation of multi-purpose fire sprinkler systems
 Wastewater pretreatment system
- Reclaimed wastewater
 Chemical drainage waste and vent systems
 Multi-purpose Fire sprinkler system
 Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer

FEE SCHEDULE

Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



Beaverton
OREGON

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00119

Approval Code: 05303G 4/29/2019 10:26 am

E-mailed To: Permits@3mountainsplumbing.com

B20019-1744

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6605 SW WISTERIA PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Carol Hatler	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AD10800	
DESCRIPTION OF WORK	
60' water service replacement from meter to house by means of bore.	
APPLICANT	
Name: Raelynn Erhardt	
Phone: 5036701342	Fax: 5038280515
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 5304 N ALBINA AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5036701342	Fax: 5038280515
Email: permits@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

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

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

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

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



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

Residential Plumbing Authorization To Begin Work

B 2019-1707

05350-BPB-19-00116

Approval Code: 06012G 4/25/2019 9:35 am

E-mailed To: plumbing@prodrainpdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11205 SW PARTRIDGE LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: O'Callaghan Water Service	
Cross Street/directions to job site: SW Nighthawk Dr	
Tax map/parcel no.: 1S132CA01800	
DESCRIPTION OF WORK	
Install new water service	
APPLICANT	
Name: Deja Hollingshead	
Phone: 5035330430	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-776PB	CCB lic. no.: 108504
Business Name: PRO DRAIN & ROOTER SERVICE INC	
Contact:	
Address: 10200 SW ALLEN BLVD #H	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5035330430	Fax:
Email: plumbing@prodrainpdx.com	
Metro lic. no.:	City lic. no.:

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

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00115

Approval Code: 07709D 4/25/2019 8:48 am

E-mailed To: service@powerplumbingco.com

B2019-1706

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6075 SW ELM AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 19R010	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114DC11100	
DESCRIPTION OF WORK	
REPLACE WATER SERVICE/REPIPE	
APPLICANT	
Name: Carl Siewell	
Phone: 5032441900	Fax: 5032448825
Email:	
CONTRACTOR	
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378
Business Name: POWER PLUMBING CO	
Contact:	
Address: PO BOX 19418	
City/State/ZIP: PORTLAND, OR 97280	
Phone: 5032441900	Fax: 5032448825
Email: service@powerplumbingco.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$197.94
State surcharge (12% of permit total)			\$23.75
TOTAL PERMIT FEE			\$221.69

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

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



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

B 2019-1686

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00114

Approval Code: 614212 4/24/2019 2:21 pm

E-mailed To: STEPHANIE@BEAVERTONPLUMBING.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13870 SW BONNIE BRAE ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: EDWARDS CENTER	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CD00626	
DESCRIPTION OF WORK	
INSTALL NEW GAS WATER HEATER	
APPLICANT	
Name: STEPHANIE Pratt-McRoberts	
Phone: 5036437619	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

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

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

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

B 2019-1683

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00113

Approval Code: 749255 4/24/2019 1:54 pm

E-mailed To: tonyj@americanplumbingservices.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3205 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 18	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1090000200	
DESCRIPTION OF WORK	
Adding Hair Washing Sink	
APPLICANT	
Name: Anthony Johnston	
Phone: 503-289-6498	Fax: 503-247-2429
Email:	
CONTRACTOR	
Plumb lic. no.: 26-567PB	CCB lic. no.: 151062
Business Name: AMERICAN PLUMBING SERVICES LP	
Contact:	
Address: 5905 N INTERSTATE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5032896498	Fax: 5032472429
Email: plumbing@americanplumbingservices.com	
Metro lic. no.:	City lic. no.:

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

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

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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00112

Approval Code: 884664 4/23/2019 10:12 am

E-mailed To: ashley.york@yorkcustom.com

B2019-1662

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15975 SW REGATTA LN	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: McDonalds RR Remodel	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BA01200	
DESCRIPTION OF WORK	
Renovate for ADA	
APPLICANT	
Name: Travis York	
Phone: 503-584-1771	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1481	CCB lic. no.: 203341
Business Name: YORK CUSTOM MECHANICAL INC	
Contact:	
Address: PO BOX 21474	
City/State/ZIP: KEIZER, OR 97307	
Phone: 5035841771	Fax:
Email: TRAVIS.YORK@YORKCUSTOM.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Fixture cap	3	\$20.31	\$60.93
Sink/basin/lavatory	3	\$20.31	\$60.93
Urinal	1	\$20.31	\$20.31
Water closet	3	\$20.31	\$60.93
Plumbing Permit Fees			
Subtotal			\$203.10
State surcharge (12% of permit total)			\$24.37
TOTAL PERMIT FEE			\$227.47

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

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

B 2019-1654

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00111

Approval Code: 63943E 4/22/2019 3:18 pm

E-mailed To: hillsboroplumbing@frontier.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8675 SW REBECCA LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BC01300	
DESCRIPTION OF WORK	
INSTALL SHOWER PAN	
APPLICANT	
Name: jerry gunther,jr	
Phone: 5036402525	Fax: 5036406570
Email:	
CONTRACTOR	
Plumb lic. no.: 34-207PB	CCB lic. no.: 35851
Business Name: HILLSBORO PLUMBING CO	
Contact:	
Address: PO BOX 1823	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036402525	Fax:
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility		<input type="checkbox"/> Chemical drainage waste and vent systems	
<input type="checkbox"/> Vacuum drainage waste and vent system		<input type="checkbox"/> Multi-purpose Fire sprinkler system	
<input type="checkbox"/> Commercial booster pump		<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$35.71
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00109

Approval Code: 06784G 4/16/2019 9:05 am

E-mailed To: PLUMBING@APOLLODRAIN.COM

B 2019-1565

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7935 SW 131ST AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DC06000	
DESCRIPTION OF WORK	
water service replacement	
APPLICANT	
Name: KYLEE BRATCHIK	
Phone: 5032398801	Fax: 5039699568
Email:	
CONTRACTOR	
Plumb lic. no.: 26-533PB	CCB lic. no.: 49418
Business Name: APOLLO DRAIN & ROOTER SERVICE INC	
Contact:	
Address: 853 NE HARLOW RD	
City/State/ZIP: TROUTDALE, OR 97060	
Phone: 5032398801	Fax: 5039699568
Email: darlene@apollodrain.com	
Metro lic. no.:	City lic. no.:

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

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00110

Approval Code: 03039G 4/18/2019 12:51 pm

E-mailed To: sdavisplumbing@gmail.com

B 2019-1610

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6775 SW IMPERIAL DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AC03600	
DESCRIPTION OF WORK	
Full house water repipe	
APPLICANT	
Name: Ross Davis	
Phone: 5033071920	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 3-558PB	CCB lic. no.: 163590
Business Name: ROSS STEPHEN DAVIS	
Contact:	
Address: 37490 RACHAEL DR	
City/State/ZIP: SANDY, OR 97055	
Phone: 5032018876	Fax:
Email: davisplumbingnw@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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

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Beaverton
OREGON

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00107

B2019-1545

Approval Code: 015402 4/15/2019 4:12 pm

E-mailed To: russrenner@thegardenretreatllc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9775 SW CYPRESS ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA01100	
DESCRIPTION OF WORK	
Backflow installation	
APPLICANT	
Name: Russ Renner	
Phone: 9715331045	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8893	CCB lic. no.:
Business Name: THE GARDEN RETREAT LLC	
Contact: THE GARDEN RETREAT LLC	
Address: 9908 SW 57TH	
City/State/ZIP: PORTLAND, OR 97219	
Phone: (971) 533-1045	Fax:
Email: russrenner@thegardenretreatllc.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Minimum Fees			
Balance of permit fees			\$52.96
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

Residential Plumbing Authorization To Begin Work

R2019-1540

05350-BPB-19-00108

Approval Code: 00614G 4/15/2019 4:23 pm

E-mailed To: sdavisplumbing@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW 22ND ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC10300	
DESCRIPTION OF WORK	
Full house water repipe	
APPLICANT	
Name: Ross Davis	
Phone: 5033071920	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 3-558PB	CCB lic. no.: 163590
Business Name: ROSS STEPHEN DAVIS	
Contact:	
Address: 37490 RACHAEL DR	
City/State/ZIP: SANDY, OR 97055	
Phone: 5032018876	Fax:
Email: davisplumbingnw@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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

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

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00106

Approval Code: 05010G 4/12/2019 10:08 am

E-mailed To: office@pexpdx.com

B2019-1506

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6420 SW LOMBARD AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Kupish 715169	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122BA07211	
DESCRIPTION OF WORK	
Repipe interior waters and replace service line	
APPLICANT	
Name: Deanna Reith	
Phone: 5038868664	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB2092	CCB lic. no.: 222556
Business Name: FORTHRIGHT CONSTRUCTION INC	
Contact:	
Address: 1915 NE STUCKI AVE STE 400	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5038868664	Fax:
Email: GREG@PEXPDX.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$197.94
State surcharge (12% of permit total)			\$23.75
TOTAL PERMIT FEE			\$221.69

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

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00104

Approval Code: 009080 4/8/2019 10:08 pm

E-mailed To: compass.plumbing.or@gmail.com

B2019-1431

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13670 SW CHARIOT CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CA09700	
DESCRIPTION OF WORK	
Moving Drain and waters a few feet over; install kitchen fixtures	
APPLICANT	
Name: Luciano CIOBANASIU	
Phone: 9715709949	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1238	CCB lic. no.: 197786
Business Name: COMPASS PLUMBING LLC	
Contact:	
Address: 16639 SE JESSICA ERIN LANE	
City/State/ZIP: MILWAUKIE, OR 97267	
Phone: 9715709949	Fax: 5035152929
Email: compass.plumbing.or@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Dishwasher	1	\$20.31	\$20.31
Garbage disposal	1	\$20.31	\$20.31
Sink/basin/lavatory	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$35.71
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



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

Residential Plumbing Authorization To Begin Work

32019-1430

05350-BPB-19-00103

Approval Code: 029710 4/8/2019 7:32 pm

E-mailed To: austin@myplumberllc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6765 SW GRIFFIN DR	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S124AA02100	
DESCRIPTION OF WORK	
Replace 1 tub/shower and 1 shower.	
APPLICANT	
Name: Austin Hays	
Phone: 3609919991	Fax: 3609919991
Email:	
CONTRACTOR	
Plumb lic. no.: PB1718	CCB lic. no.: 209111
Business Name: MY PLUMBER LLC A LIMITED LIABILITY COMPANY OF WASHI	
Contact:	
Address: 14604 NE 129TH ST	
City/State/ZIP: BRUSH PRAIRIE, WA 98606	
Phone: 3609919991	Fax: 3609919991
Email: myplumbernw@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	2	\$20.31	\$40.62
Minimum Fees			
Balance of permit fees			\$56.02
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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Beaverton
O R E G O N

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00105

BA019-1437

Approval Code: 014329 4/9/2019 11:50 am

E-mailed To: woodburnplumbing@woodburnplumbing.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11208 SW BEL AIRE LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CD90007	
DESCRIPTION OF WORK	
INSTALL NEW BATH TUB	
APPLICANT	
Name: Victoria Spencer	
Phone: 3608342889	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 37-385PB	CCB lic. no.: 97064
Business Name: WOODBURN PLUMBING INC A CORP OF WASHINGTON	
Contact:	
Address: 3311 SE MCKEVER RD	
City/State/ZIP: CAMAS, WA 98607	
Phone: 3608432889	Fax: 3608332889
Email: woodburnplumbing@woodburnplumbing.com	
Metro lic. no.:	City lic. no.:

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

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00101

Approval Code: 01998G 4/8/2019 4:07 pm

E-mailed To: PLUMBING@APOLLODRAIN.COM

B2019-1426

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6718 SW PEYTON RD	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S124AA01900	
DESCRIPTION OF WORK	
WATER SERVICE REPLACEMENT	
APPLICANT	
Name: KYLEE BRATCHIK	
Phone: 5032398801	Fax: 5039699568
Email:	
CONTRACTOR	
Plumb lic. no.: 26-533PB	CCB lic. no.: 49418
Business Name: APOLLO DRAIN & ROOTER SERVICE INC	
Contact:	
Address: 853 NE HARLOW RD	
City/State/ZIP: TROUTDALE, OR 97060	
Phone: 5032398801	Fax: 5039699568
Email: darlene@apollodrain.com	
Metro lic. no.:	City lic. no.:

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

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

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00102

Approval Code: 08038D 4/8/2019 4:27 pm

E-mailed To: mike@blackcatplumbing.com

B2019-1427

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5545 SW DOVER LN	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: SW Dover Ln	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA07900	
DESCRIPTION OF WORK	
Rough in and set fixtures	
APPLICANT	
Name: Mike Perrotti	
Phone: 5037880300	Fax: 5037882180
Email:	
CONTRACTOR	
Plumb lic. no.: PB467	CCB lic. no.: 178183
Business Name: BLACK CAT PLUMBING INC	
Contact:	
Address: 8230 SE 72nd Ave	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5037880300	Fax: 5037882180
Email: mike@blackcatplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Reclaimed wastewater	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Multi-purpose Fire sprinkler system	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Sink/basin/lavatory	3	\$20.31	\$60.93
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	2	\$20.31	\$40.62
Hose bib	2	\$20.31	\$40.62
Plumbing Permit Fees			
Subtotal			\$203.10
State surcharge (12% of permit total)			\$24.37
TOTAL PERMIT FEE			\$227.47

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00099

Approval Code: 04264G 4/8/2019 11:51 am

E-mailed To: brunerplumbing@me.com

32019-1396

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10535 SW 133RD PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133AC04600	
DESCRIPTION OF WORK	
Rough in new water stub outs in powder bathroom; drains remain unchanged. Rough in new valve with two outlets and drain to accommodate Wedi pan. New water stub outs for lav and toilet.	
APPLICANT	
Name: Ward Bruner	
Phone: 503-624-4880	Fax: 503-624-2173
Email:	
CONTRACTOR	
Plumb lic. no.: 26-445PB	CCB lic. no.: 81837
Business Name: BRUNER PLUMBING INC	
Contact:	
Address: PO BOX 23985	
City/State/ZIP: PORTLAND, OR 972813985	
Phone: 5036244880	Fax: 5036242173
Email: BRUNERPLUMBING.IAN@MAC.COM	
Metro lic. no.:	City lic. no.:

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

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

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

B2019-1403

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00100

Approval Code: 02622D 4/8/2019 12:36 pm

E-mailed To: SERVICE@powerplumbingco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9225 SW BUCKSKIN TER	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 19R016	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CA07900	
DESCRIPTION OF WORK	
BATH/KITCHEN REMODEL	
APPLICANT	
Name: Carl Siewell	
Phone: 5032441900	Fax: 5032448825
Email:	
CONTRACTOR	
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378
Business Name: POWER PLUMBING CO	
Contact:	
Address: PO BOX 19418	
City/State/ZIP: PORTLAND, OR 972810418	
Phone: 0002441900	Fax: 5032448825
Email: laurad@powerplumbingco.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Wastewater pretreatment system		<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Ice maker	1	\$20.31	\$20.31
Sink/basin/lavatory	4	\$20.31	\$81.24
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$162.48
State surcharge (12% of permit total)			\$19.50
TOTAL PERMIT FEE			\$181.98

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

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

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



Beaverton
OREGON

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00095

Approval Code: 02884J 4/2/2019 10:44 am

E-mailed To: shelly@excellenceplumbing.com

B2019-1320

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13010 SW HEATHER CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Droste	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DB01600	
DESCRIPTION OF WORK	
Repipe house	
APPLICANT	
Name: Shelly Eugenio	
Phone: 503-643-3459	Fax: 503-643-2815
Email:	
CONTRACTOR	
Plumb lic. no.: PB344	CCB lic. no.: 175768
Business Name: EXCELLENCE PLUMBING LLC	
Contact:	
Address: 7520 SW 140TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036433459	Fax: 5036432815
Email: shelly@excellenceplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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

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

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



Plumbing Permit Application

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

Date Received: 4-3-19	Permit No.: B209-1341
Date Issued: 4-3-19	By: Carl
	Payment Type: USA

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7200 SW Tierra Del Mar Dr.	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Kitchen Alteration - New Cabinets, Appliances & Countertops	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Charles E Emmanuel	
Address: 7200 SW Tierra Del Mar	
City/State/ZIP: Beaverton, OR 97007	
Phone: 971-228-8772	Fax:
E-mail: cemmanuel@gmail.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Same as owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

Authorized signature: **[Signature]**
 Print name: **Charles E Emmanuel** Date: **4/3/19**

FEE SCHEDULE			
<i>For special information, use checklist.</i>			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	1	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	1	20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>4/3/2019</u>	Permit No. <u>B2019-1337</u>
Date Issued: <u>4/3/2019</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:

CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:

JOB SITE INFORMATION AND LOCATION	
Job site address: <u>1700 NW 167th Pl.</u>	
City/State/ZIP: <u>Beaverton OR</u>	
Suite/bldg./apt. no.: <u>220</u>	Project name: <u>JSR Humidifier</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK	
<u>Add 1/2" CW line + 1" Drain for Humidifier hookup</u>	

<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

CONTRACTOR	
Business name: <u>James Reed Plumbing Inc.</u>	
Address: <u>125 S. 1st Ave #542</u>	
City/State/ZIP: <u>Hillsboro OR 97123</u>	
Phone: <u>503-547-0491</u>	Fax: <u>503-547-0492</u>
E-mail: <u>reedplumbing@bmail</u>	Plumbing lic.: <u>P8559</u>
CGB lic.: <u>182701</u>	City or metro lic. no.: <u>9778</u>

Authorized signature: [Signature]

Print name: James Reed Date: 4/3/2019

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Eq.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heaters/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: <u>CW line + Drain</u>	<u>2</u>	<u>20.31</u>	<u>40.62</u>
Subtotal			
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4/2/2019	Permit No: 152019-1324
Date Issued: 4/2/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11195 SW Timberline 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	
Sewer spot repair	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: John Callahan Construction	
Address: 5506 SE 47th Ave	
City/State/ZIP: Portland, OR 97206	
Phone: 503 706-8925	Fax:
E-mail:	Plumbing lic.: [Signature]
CCB lic.: 160912	City or metro lic. no.:

Authorized signature: [Signature]

Print name: John Callahan Date: 4/2/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0/10)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

RECEIVED



Plumbing Permit Application

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

JUN 05 2018	
Date Received:	Permit No: B2018-2509
Date Issued: CITY OF BEAVERTON	By: CEL
BUILDING DIVISION 4-2-19	Payment Type: CHECK

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15017 SW WRENDA	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: RUSSELL
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 31P
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HORTON INC	
Address: 4380 SW MACADAM AVE	
City/State/ZIP: PORTLAND OR 97239	
Phone: 5032224151	Fax:
E-mail: PLANCHECK@DRHORTON.COM	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name: AMANDA LOVERIDGE	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Edward Mullen Plumbing	
Address: 1601 SE River Rd	
City/State/ZIP: Hillsboro, OR 97213	
Phone: (503) 640-0113	Fax: (503) 640-4483
E-mail: jeremy@edwardmullenplub	Plumbing. lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.: 3526
Authorized signature:	Date:
Print name: Jeremy Grace	Date:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	1	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	
Hose bib	2	20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

507.47



Plumbing Permit Application

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

RECEIVED
OFFICE USE ONLY

Date Received: JUN 05 2018
 Date Issued: _____
 Permit No.: B2018-2510
 By: CRL
 Payment Type: check
 CITY OF BEAVERTON
 BUILDING DIVISION
 4-2-19

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15017 SW Wren Ln	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 310
Tax map/parcel no.:	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or Item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1/2	39.71	39.71
Backwater valve		18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ 0)			
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			
Minimum permit fee			87.85
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.54
TOTAL PERMIT FEE			\$98.39

DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Emerald Weeks	
Address: 4380 SW Macadam Ave Suite 100	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Trademark Landscapes, Inc	
Address: P.O. Box 2410	
City/State/ZIP: Oregon City, OR 97045	
Phone: (503) 631-3893	Fax: (503) 631-4737
E-mail: Ellis, Steve 440 yahoo	Plumbing, Inc: 6203
CCB lic.: 11353	City or metro lic. no.: 4796
Authorized signature: <i>Steve Ellis</i>	
Print name: STEVEN C. ELLIS	Date: 1/19/19

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

* See Fee Schedule

108.24



Plumbing Permit Application

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

RECEIVED	
Date Received: AUG 1 2018	Permit No.:
Date Issued: 4-2-19	By:
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15711 SW Wren Lane	
City/State/ZIP: Beaverton/OR	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 39
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Adding excavator to plumbing permit per inspector's request.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc. - Portland	
Address: 4380 SW Macadam Ave, Suite	
City/State/ZIP: Portland/OR/97239	
Phone: (503) 222-4151	Fax:
E-mail: magrismr@drhorton.com	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc. - Portland	
Contact name: Mark Grismer	
Address: 4380 SW Macadam Ave, Suite 100	
City/State/ZIP: Portland/OR/97239	
Phone: (503) 222-4151	Fax:
E-mail: magrismr@drhorton.com	
CONTRACTOR	
Business name: Renner Trucking & Excavating Inc.	
Address: 228 SW Walnut St.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-846-1512	Fax: 503-846-1354
E-mail: shaughn.renner@gmail.com	Plumbing lic.: pb463
CCB lic.: 163385	City or metro lic. no.: 9956

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		380.74	0
SFR (2) bath		448.20	0
SFR (3) bath		506.67	0
Each additional bath/kitchen		46.81	0
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	0
Drywell, leach line, or trench drain		20.31	0
Footing drain		20.31	0
Manufactured home utilities		20.31	0
Rain drain connector		20.31	0
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		220331	0
Backflow preventer		483688	0
Backwater valve		220331	0
Clothes washer		220331	0
Dishwasher		20.31	0
Drinking fountain		220331	0
Ejectors/sump		220331	0
Fixture/sewer cap		20.31	0
Floor drain/floor sink/hub/ primer		220331	0
Garbage disposal		220331	0
Hose bib		220331	0
Ice maker		220331	0
Interceptor/grease trap		220331	0
Medical gas (value: \$ 0) <<Enter valuation*			0
Roof drain (commercial)		220331	0
Sink/basin/lavatory		220331	0
Tub/shower/shower pan		220331	0
Urinal		220331	0
Water closet		220331	0
Water heater/expansion tank		220331	0
Water meter pvt		220331	0
1&2 family dwelling re-pipe		1144.95	0
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	0
Multi-family/commercial re-pipe ea. fixture over 20		9.67	0
Other:		220331	0
0		Subtotal	
		Minimum permit fee	
		995634	
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
		State surcharge (12% of permit fee)	
		11.6	
		TOTAL PERMIT FEE	
		108.24	

Authorized signature:

Print name: **Shaughn Renner** Date:

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

* See Fee Schedule

Always recalculate when adding or



Plumbing Permit Application

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

RECEIVED	
OFFICE USE ONLY	
Date Received: AUG 1 2018	Permit No.: 2018-3557
Date Issued: 4-2-19	By: CRL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: CHECK	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15711 SW Wren Lane	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 39
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Emerald Weeks	
Address: 4380 SW Macadam Ave Suite 100	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Trademark Landscapes, Inc	
Address: P.O. Box 2410	
City/State/ZIP: Oregon City, OR 97045	
Phone: (503) 631-3893	Fax: (503) 631-4737
E-mail: Ellis.steve@yahoo	Plumbing lic.: 6203
CCB lic.: 11353	City or metro lic. no.: 6796
Authorized signature: <i>Steve Ellis</i>	
Print name: STEVEN C. ELLIS	Date: 1/19/19

FEE SCHEDULE			
<i>For special information, use checklist.</i>			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1	39.71	39.71
Backwater valve	1	18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ 0)			
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			
Minimum permit fee			87.85
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.54
TOTAL PERMIT FEE			\$98.39

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

* See Fee Schedule

CONTRACTOR CHANGE



Plumbing Permit Application

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

Date Received:	Form No.: 32018-3556
Date Issued: 4-2-18	By: CRL
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15711 SW Wilson Lane	
City/State/ZIP:	
Block/lot/sect. no.:	Project name: Westmin
Cross street/direction to job site:	
Subdivision:	Lot no.: 39
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Contractor change	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DJ Horton	
Address: 2050 SW WACARUM #200	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-222-4154	
E-mail: djhorton@malmedal.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Emerald Works	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Malmedal Enterprises Inc.	
Address: PO Box 207	
City/State/ZIP: Banks, OR, 97108	
Phone: (503) 324-0759	Fax: (503) 324-0580
E-mail: carolina@malmedalplumbing.com	Plumbing lic.: 34-276PB
CCR lic.: 102535	City of metro lic. no.: 8232
Authorized signature:	
Print name: Carolina Malmedal	Date: 10/25/18

FEE SCHEDULE			
For special information, see checklist.			
Description	Qty.	Eq.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath			389.74
SFR (2) bath			448.20
SFR (3) bath	1		506.67
Each additional bath/kitchen			46.81
Fire sprinkler (0 to 2)			
Job fixtures			
Catch basin/area drain/trap/riser			20.31
Drywell, leach line, or trench drain			20.31
Feeding drain			20.31
Manufactured home drain			20.31
Rain drain connector			20.31
Sanitary sewer (no. lines 1; 0)			
Storm sewer (no. lines 1; 0)			
Water service (no. lines 1; 0)			
Fixtures or parts			
Absorption valve (water hammer)			20.31
Backflow preventer			43.88
Backwater valve			20.31
Clothes washer			20.31
Dishwasher			20.31
Drinking fountain			20.31
Ejector/pump			20.31
Exhaust power cap			20.31
Floor drain/door sink/tub primer			20.31
Garbage disposal			20.31
Knee hb			20.31
Ice maker			20.31
Inspection/grass trap			20.31
Medical gas (value \$ 0)			
Roof drain (commercial)			20.31
Sink/basin/savatory			20.31
Tub/shower/shower pan			20.31
Urinal			20.31
Water closet			20.31
Water heater/expansion tank			20.31
Water meter pvt			20.31
1-2 family dwelling re-pipe			144.85
Multi-family/commercial re-pipe (first 20 fixtures)			144.85
Multi-family/commercial re-pipe ex. fixtures over 20			9.67
Other			20.31
Subtotal			
Minimum permit fee			95.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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



Plumbing Permit Application

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

Date Received: <u>4-1-19</u>	Permit No.: <u>B2019-1311</u>
Date Issued: <u>4-1-19</u>	By: <u>CPL</u>
Payment Type: <u>MC</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15650 SW Bobwhite Cir</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>Teal Blvd + Scholls Ferry Rd</u>	
Subdivision: <u>Murrayhill</u>	Lot no.: <u>447</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>new drainage added behind retaining wall.</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Nicole Baker</u>	
Address: <u>15650 SW Bobwhite Cir</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Phone: <u>503-621-7789</u>	Fax:
E-mail: <u>nicolebaker789@gmail.com</u>	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: <u>Nicole Baker</u>	
Address: <u>15650 SW Bobwhite Cir</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Phone: <u>503-621-7789</u>	Fax:
E-mail: <u>nicolebaker789@gmail.com</u>	
CONTRACTOR	
Business name: <u>LandServices</u>	
Address: <u>PO Box 1777</u>	
City/State/ZIP: <u>North Plains, OR 97133</u>	
Phone: <u>503-644-8575</u>	Fax:
E-mail: <u>steve@landservicesoforegon.com</u>	
CEC lic.: <u>LCB - 5108</u>	City or metro lic. no.:

Authorized signature: Nicole Baker

Print name: Nicole Baker Date: 4/1/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:	<u>1</u>	20.31	<u>20.31</u>
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>2-19-19</u>	Permit No.: <u>B2019-0676</u>
Date Issued: <u>4-10-19</u>	By: <u>CM</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 14555 SW Tualatin Valley Hwy	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: NW Corner of SW Tualatin Valley Hwy and SW Murray Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S108DD 00300	
DESCRIPTION OF WORK	
Removal of all site improvements, cap/plug water and sewer stubs at Right-of-Way	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: BP West Coast Products C/O Richard Reininger/Kim Medicus	
Address: 4519 Grandview Road	
City/State/ZIP: Blaine, WA 98230	
Phone: (425) 221-1571	Fax:
E-mail: Richard.Reininger.bp.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Barghausen Consulting Engineers, Inc.	
Contact name: Joshua A. Harlan	
Address: 18215 72nd Avenue South	
City/State/ZIP: Kent, WA 98032	
Phone: (425) 251-6222	Fax: (425) 251-8782
E-mail: jharlan@barghausen.com	
CONTRACTOR	
Business name: <u>Clearcreek Contractors, Inc</u>	
Address: <u>3203 15th Street</u>	
City/State/ZIP: <u>Everett WA 98201</u>	
Phone: <u>360-659-2459</u>	Fax: <u>360-659-9346</u>
E-mail:	Plumbing lic.:
CCB lic.:	City or metro lic. no.: <u>150411</u>
Authorized signature:	
Print name: Richard Reininger	Date: <u>2/8/19</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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



Plumbing Permit Application

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

Date Received:	Permit No.: 5209-1099
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12220 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 155
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 _____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0 _____)		*	
Storm sewer (no. linear ft.: 0 _____)		*	
Water service (no. linear ft.: 0 _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0 _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: 52019-1060
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12214 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 156
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No: 2019-1058
Date Issued: 4-11-19	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12304 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 146
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 2/3/2019	Permit No.: B2019-0867
Date Issued: 2/3/2019	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12311 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 137
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4-11-19	Permit No.: B2019-1405
Date Issued: 4-11-19	By: AK
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 5335 SW Oleson Road	
City/State/ZIP: Beaverton OR 97225	
Suite/bldg./apt. no.:	Project name: Berg
Cross street/directions to job site: Oleson Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Add Half Bath and Sink to Garage with Ejector Pump	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Berg	
Address: 5335 SW Oleson Road	
City/State/ZIP: Beaverton, OR 97225	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Rayborn's Plumbing Inc.	
Address: P.O. Box 69	
City/State/ZIP: Tualatin, OR 97062	
Phone: 503 692-4139	Fax: 503 691-2328
E-mail: Nate@rayborns.com	Plumbing lic.: 34-166PB
CCB lic.: 87852	City or metro lic. no.: 1806

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	2	20.31	40.62
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	1	20.31	20.31
Water heater/expansion tank	1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: Ejector Pump	1	20.31	20.31
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: *Kenneth A. Provancher*
 Print name: **Kenneth A. Provancher** Date: **4/9/19**

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4-10-19	Permit No.: B2019-1452
Date Issued: 4-10-19	By: Mike
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12020 SW Clifford St	
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	
kitchen and bathroom remodel	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Carolyn Moffatt	
Address: 12020 SW Clifford St	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 672-9181	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Kennedy Plumbing	
Contact name: Joel Dirickson	
Address: 13985 SW Farmington Rd.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 643-5535	Fax: (503) 643-3335
E-mail: jdirickson@kennedyplumbing.com	
CONTRACTOR	
Business name: Kennedy Plumbing	
Address: 13985 SW Farmington Rd.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 643-5535	Fax: (503) 643-3335
E-mail: jdirickson@kennedyplumbi	Plumbing. lic.: 34-42PB
CCB lic.: 10967	City or metro lic. no.: 1373

Authorized signature:

Print name: Joel Dirickson Date: 04/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	1	20.31	20.31
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	20.31
Hose bib		20.31	
Ice maker	1	20.31	20.31
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	2	20.31	40.62
Tub/shower/shower pan	1	20.31	20.31
Urinal		20.31	
Water closet	1	20.31	20.31
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			142.17
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			17.06
TOTAL PERMIT FEE			\$159.23

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4-10-19	Permit No.: B2019-0535
Date Issued: 4-10-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 2420 S.W. 75TH TERRACE	
City/State/ZIP: PORTLAND OR 97225	
Suite/bldg./apt. no.:	Project name: SYLVAN WEST
Cross street/directions to job site: CANYON LN TO S.W. 75TH.	
Subdivision:	Lot no.: LOT-3
Tax map/parcel no.:	
DESCRIPTION OF WORK	
ALL PLUMBING FOR NEW HOME	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: WESTWOOD CUSTOM HOMES LLC	
Address: 22470 S.W. 76TH AVE	
City/State/ZIP: TUALATIN OR 97062	
Phone: 503-317-9777	Fax:
E-mail: WESTWOODHOMES@GMAIL.COM	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: WESTWOOD CUSTOM HOMES	
Contact name: GENE BRODSKY	
Address: 22470 S.W. 76TH AVE	
City/State/ZIP: TUALATIN OR 97062	
Phone: 503-317-9777	Fax:
E-mail: WESTWOODHOMES@GMAIL.COM	
CONTRACTOR	
Business name: DELUXE EXCAVATION INC	
Address: 19958 S. BAKERS FERRY RD	
City/State/ZIP: OREGON CITY OR 97045	
Phone: 503-201-5637	Fax:
E-mail:	Plumbing. lic.:
CCB lic.: 189157	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen	1	46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain	1	20.31	
Manufactured home utilities		20.31	
Rain drain connector	1	20.31	
Sanitary sewer (no. linear ft.: 0)	-	*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	
Dishwasher	1	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	
Hose bib	2	20.31	
Ice maker	1	20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	1	20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Gene Brodsky**

Date: **2-26-19**



Plumbing Permit Application

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

Date Received: 4-9-19	Permit No.: B2019-0535
Date Issued: 4-9-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 2420 S.W. 75TH TERRACE	
City/State/ZIP: PORTLAND OR 97225	
Suite/bldg./apt. no.:	Project name: SYLVAN WEST
Cross street/directions to job site: CANYON LN TO S.W. 75TH.	
Subdivision:	Lot no.: LOT-3
Tax map/parcel no.:	
DESCRIPTION OF WORK	
ALL PLUMBING FOR NEW HOME	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: WESTWOOD CUSTOM HOMES LLC	
Address: 22470 S.W. 76TH AVE	
City/State/ZIP: TUALATIN OR 97062	
Phone: 503-317-9777	Fax:
E-mail: WESTWOODHOMES@GMAIL.COM	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: WESTWOOD CUSTOM HOMES	
Contact name: GENE BRODKEY	
Address: 22470 S.W. 76TH AVE	
City/State/ZIP: TUALATIN OR 97062	
Phone: 503-317-9777	Fax:
E-mail: WESTWOODHOMES@GMAIL.COM	
CONTRACTOR	
Business name: ASCENT PLUMBING LLC	
Address: 16133 SWAN AVE	
City/State/ZIP: OR CITY OR 97085	
Phone: 503-572-5717	Fax:
E-mail:	Plumbing lic. no.: 2PB-854
CCB lic. no.: 182275	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen	1	46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain	1	20.31	
Manufactured home utilities		20.31	
Rain drain connector	1	20.31	
Sanitary sewer (no. linear ft.: 0)	-	*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	
Dishwasher	1	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	
Hose bib	2	20.31	
Ice maker	1	20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	1	20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Vladimir Timofeyev

Print name:

Vladimir Timofeyev Date: **04.09.2019**

REV 10/17



Plumbing Permit Application

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

Date Received: <u>4-9-19</u>	Permit No.: <u>B2019-1444</u>
Date Issued: <u>4-9-19</u>	By: <u>CEL</u>
Payment Type: <u>USA</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>3615 SW Hall Blvd</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>SW Cedar Hill Blvd</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Install new plumbing for the chiropractic offices.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Lotus Plumbing Company</u>	
Address: <u>8100 SW Elmwood St</u>	
City/State/ZIP: <u>Portland, OR 97005</u>	
Phone: <u>503 522 2728</u>	Fax: <u>503 892 2639</u>
E-mail:	Plumbing. lic.: <u>PB 85</u>
CCB lic.: <u>189416</u>	City or metro lic. no.: <u>10240</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	<u>1</u>	20.31	<u>20.31</u>
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	<u>1</u>	20.31	<u>20.31</u>
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<u>3</u>	20.31	<u>60.93</u>
Tub/shower/shower pan	<u>1</u>	20.31	<u>20.31</u>
Urinal		20.31	
Water closet	<u>2</u>	20.31	<u>40.62</u>
Water heater/expansion tank	<u>1</u>	20.31	<u>20.31</u>
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			<u>182.79</u>
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			<u>21.93160</u>
TOTAL PERMIT FEE			<u>-\$108.24</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete. 204.72

* See Fee Schedule

Authorized signature: <u>Khôi N. Ngyen</u>	Date: <u>4-9-19</u>
Print name: <u>Khôi N. Ngyen</u>	



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>30019-1382</u>
Date Issued: <u>4-8-19</u>	By: <u>OCU</u>
Payment Type: <u>USA</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 13125 SW Heather Ct	
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	
replace water service	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Leslie Valentine	
Address: 13125 SW Heather Ct	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 866-1691	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Kennedy Plumbing	
Contact name: Joel Dirickson	
Address: 13985 SW Farmington Rd.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 643-5535	Fax: (503) 643-3335
E-mail: jdirickson@kennedyplumbing.com	
CONTRACTOR	
Business name: Kennedy Plumbing	
Address: 13985 SW Farmington Rd.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 643-5535	Fax: (503) 643-3335
E-mail: jdirickson@kennedyplumbi	Plumbing. lic.: 34-42PB
CCB lic.: 10967	City or metro lic. no.: 1373

Authorized signature: 
 Print name: Joel Dirickson Date: 05/05/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>70</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>2/2/2019</u>	Permit No.: <u>B2019-0535</u>
Date Issued: <u>4-25-19</u>	By: <u>CM</u>
	Payment Type: <u>check</u>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>2400 SW 75th Terrace</u>	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: <u>Sylvan West</u>
Cross street/directions to job site:	
Subdivision:	Lot no.: <u>3</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>New SFR</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Westwood Custom Homes</u>	
Address: <u>22470 SW 74th Ave</u>	
City/State/ZIP: <u>Tualatin OR 97062</u>	
Phone: <u>503-317-9777</u>	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Samus as owner</u>	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>TBD</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing, lic.:
CCB lic.:	City or metro lic. no.:

Authorized signature:	Date:
Print name:	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	<u>1</u>	506.67	
Each additional bath/kitchen	<u>1</u>	46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			<u>\$108.24</u>

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

* See Fee Schedule

619.90

**COB Revision/Tracking #:
REV 19-092**



Plumbing Permit Application

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

Date Received: RECEIVED	Permit No.: B2019-1290
Date Issued: 4-2-19 03/14/2019	By: all
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12331 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 133
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

CITY OF BEAVERTON BUILDING DIVISION

FEE SCHEDULE
For special information, use checklist.

Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>4-12-19</u>	Permit No.: <u>P2019-1512</u>
Date Issued: <u>4-12-19</u>	By: <u>CRL</u>
Payment Type: <u>USA</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>4545 SW Angel</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.:	Project name: <u>Rain Prox Tap House</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Install plumbing in small bar</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>CH Knuse Plumbing</u>	
Contact name: <u>Ryan Knuse</u>	
Address: <u>5802 NE 88th</u>	
City/State/ZIP: <u>Vanouver WA 98665</u>	
Phone: <u>360 573 4337</u>	Fax: <u>360 573 5303</u>
E-mail: <u>ryan@chknuseplumbing.com</u>	
CONTRACTOR	
Business name:	
Address: <u>same as above</u>	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.: <u>37-296 PB</u>
CCB lic.: <u>111654</u>	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	<u>1</u>	43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	<u>1</u>	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	<u>1</u>	20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker	<u>1</u>	20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<u>2</u>	20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	<u>2</u>	20.31	
Water heater/expansion tank	<u>1</u>	20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: [Signature]
 Print name: Ryan Knuse Date: 4-12-19

230.90



Plumbing Permit Application

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

Date Received: 3-27-19	Permit No.: B2019-1230
Date Issued: 4-12-19	By: CEL
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12341 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 131
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 12/21/2018	Permit No.: B2018-6051
Date Issued: 4-12-19	By: CPL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12341 SW 174th Terrace	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 131
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lennar NW Inc	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7900	Fax: (360) 258-7901
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc	
Contact name: Juls Call	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7906	Fax:
E-mail: Juls.Call@lennar.com	
CONTRACTOR	
Business name: Renner Trucking & Excavating Inc.	
Address: 228 SW Walnut St.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-846-1512	Fax: 503-846-1354
E-mail: shaughn.renner@gmail.com	
CCB lic.: 163385	City or metro lic. no.: 9956

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	0
SFR (2) bath		448.20	0
SFR (3) bath		506.67	0
Each additional bath/kitchen		46.81	0
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	0
Drywell, leach line, or trench drain		20.31	0
Footing drain		20.31	0
Manufactured home utilities		20.31	0
Rain drain connector		20.31	0
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		220331	0
Backflow preventer		483688	0
Backwater valve		220331	0
Clothes washer		220331	0
Dishwasher		20.31	0
Drinking fountain		220331	0
Ejectors/sump		220331	0
Fixture/sewer cap		20.31	0
Floor drain/floor sink/hub/ primer		220331	0
Garbage disposal		220331	0
Hose bib		220331	0
Ice maker		220331	0
Interceptor/grease trap		220331	0
Medical gas (value: \$ 0) <<Enter valuation*			0
Roof drain (commercial)		220331	0
Sink/basin/lavatory		220331	0
Tub/shower/shower pan		220331	0
Urinal		220331	0
Water closet		220331	0
Water heater/expansion tank		220331	0
Water meter pvt		220331	0
1&2 family dwelling re-pipe		1144.95	0
Multi-family/commercial re-pipe (first 20 fixtures)		1144.95	0
Multi-family/commercial re-pipe ea. fixture over 20		9.67	0
Other:		220331	0
Subtotal			
Minimum permit fee			98684
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.6
TOTAL PERMIT FEE			108.24

Authorized signature:

Print name: **Shaughn Renner** Date: **11-27-18**

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

* See Fee Schedule

Always recalculate when adding or



Plumbing Permit Application

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

RECEIVED

Date Received: 12/21/2018	Permit No.: B2018-6051
Date Issued: 4-9-19	By: cm
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12341 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn	Lot no.: 131
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> 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: Wolcott Plumbing	
Address: 1075 W. Historic Columbia River Hwy	
City/State/ZIP: Troutdale, Or. 97060	
Phone: (503) 667-1781	Fax: (503) 667-9981
E-mail:	Plumbing. lic.: 26-824pb
CCB lic.: 112220	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	506.67
Each additional bath/kitchen		46.81	
Fire sprinkler (0 3,296 sq ft.)		*	219.29
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve	1	20.31	20.31
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			\$567.17

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

* See Fee Schedule

Authorized signature:

Print name: Mark Baleme Date: 07/20/18



Plumbing Permit Application

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

RECEIVED

Date Received: 12/21/2018	Permit No.: B2018-6054
Date Issued: 4-12-19	By: CMC
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: Check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12335 SW 174th Ter	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn	Lot no.: 132
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> 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: Wolcott Plumbing	
Address: 1075 W. Historic Columbia River Hwy	
City/State/ZIP: Troutdale, Or. 97060	
Phone: (503) 667-1781	Fax: (503) 667-9981
E-mail:	Plumbing. lic.: 26-824pb
CCB lic.: 112220	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	506.67
Each additional bath/kitchen		46.81	
Fire sprinkler (0 3,296 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	43.68
Backwater valve		20.31	43.68
Clothes washer		20.31	20.31
Dishwasher		20.31	20.31
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	20.31
Hose bib		20.31	40.62
Ice maker		20.31	20.31
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	101.55
Tub/shower/shower pan		20.31	60.93
Urinal		20.31	
Water closet		20.31	60.93
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			4507.47

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

* See Fee Schedule

Authorized signature:

Print name: Mark Baleme

Date: 07/20/18



Plumbing Permit Application

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

Date Received: 12/21/2018	Permit No.: B2018-6054
Date Issued: 4-2-19	By: cm
CITY OF BEAVERTON BUILDING DIVISION	
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12335 SW 174th Terrace	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 132
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lennar NW Inc	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7900	Fax: (360) 258-7901
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc	
Contact name: Juls Call	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7906	Fax:
E-mail: Juls.Call@lennar.com	
CONTRACTOR	
Business name: Renner Trucking & Excavating Inc.	
Address: 228 SW Walnut St.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-846-1512	Fax: 503-846-1354
E-mail: shaughn.renner@gmail.com	Plumbing. lic.: PB463 exp. 7-1-2020
CCB lic.: 163385	City or metro lic. no.: 9956

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	0
SFR (2) bath		448.20	0
SFR (3) bath		506.67	0
Each additional bath/kitchen		46.81	0
Fire sprinkler (0 _____ sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	0
Drywell, leach line, or trench drain		20.31	0
Footing drain		20.31	0
Manufactured home utilities		20.31	0
Rain drain connector		20.31	0
Sanitary sewer (no. linear ft.: 0 _____) <<Enter linear feet			
Storm sewer (no. linear ft.: 0 _____) <<Enter linear feet			
Water service (no. linear ft.: 0 _____) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		20331	0
Backflow preventer		44368	0
Backwater valve		20331	0
Clothes washer		20331	0
Dishwasher		20.31	0
Drinking fountain		20331	0
Ejectors/sump		20331	0
Fixture/sewer cap		20.31	0
Floor drain/floor sink/hub/ primer		20331	0
Garbage disposal		20331	0
Hose bib		20331	0
Ice maker		20331	0
Interceptor/grease trap		20331	0
Medical gas (value: \$ 0 _____) <<Enter valuation*			0
Roof drain (commercial)		20331	0
Sink/basin/lavatory		20331	0
Tub/shower/shower pan		20331	0
Urinal		20331	0
Water closet		20331	0
Water heater/expansion tank		20331	0
Water meter pvt		20331	0
1&2 family dwelling re-pipe		114495	0
Multi-family/commercial re-pipe (first 20 fixtures)		1144.95	0
Multi-family/commercial re-pipe ea. fixture over 20		9.67	0
Other:		20331	0
Subtotal			
Minimum permit fee			98664
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.6
TOTAL PERMIT FEE			108.24

Authorized signature:

Print name: **Shaughn Renner** Date: **11-27-18**

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

* See Fee Schedule

Always recalculate when adding or



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 3-29-19	Permit No.: B2019-1291
Date Issued: 4-12-19	By: CAL
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12335 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 132
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4/11/2019	Permit No. B2019-1482
Date Issued:	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11355 SW 14th St	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Graley - 31981
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S115DC06900	
DESCRIPTION OF WORK	
Install Sump Pump	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Jeff Graley	
Address: 11355 SW 14th St	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: TerraFirma Foudation Systems	
Contact name: Heather Rogers	
Address: 13110 SW Wall St	
City/State/ZIP: Tigard, OR 97223	
Phone: (971) 205-5222	Fax:
E-mail: hrogers@terrafirmafs.com	
CONTRACTOR	
Business name: TerraFirma Foundation Systems	
Address: 13110 SW Wall St	
City/State/ZIP: Tigard, OR 97223	
Phone: (971) 205-5222	Fax:
E-mail: hrogers@terrafirmafs.com	Plumbing. lic.: PB1545
CCB lic.: 173547	City or metro lic. no.:

Authorized signature: [Signature]

Print name: Heather Rogers Date: 04/05/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump	1	20.31	20.31
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received:	Permit No. B2019-1061
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12325 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 134
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received:	Permit No.: B2019-1478
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17333 SW Harrier Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 142
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: 82019-1419
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12303 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 143
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	
Plumbing. lic.:	
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: 132019-1486
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12247 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 144
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail: Plumbing. lic.:	
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1487
Date Issued: 4-1-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12237 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 145
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No. B2019-1064
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12302 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 147
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No. B2019-1065
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12300 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 148
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1489
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12244 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 150
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1490
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12240 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 151
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature:	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1493
Date Issued: 4-11-19	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12234 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 152
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 3/18/2019	Permit No.: B2019-1063
Date Issued: 4-15-19	By: HK
Payment Type: Visa	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12315 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 136
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metr lic. no.: 13191
Authorized signature:	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1477
Date Issued: 4-15-19	By: TK
	Payment Type: visa

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17343 SW Harrier Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 140
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1488
Date Issued: 4-15-19	By: ME
	Payment Type: visa

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12250 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 149
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature:	Date: 02/08/19
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1994
Date Issued: 4-15-19	By: ML
	Payment Type: VISC

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12230 SW Goose Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 153
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature:	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 4-15-19	Permit No.: 38019-1534
Date Issued:	By: CPL
Payment Type: visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7540 SW 7040 SW Heath Place	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Isar/Komber
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Repipe house	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Excellence Plumbing LLC	
Address: 7913 SW Nimbus Ave	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-643-3459	Fax: none
E-mail: shelly@excellenceplumbing.com	Plumbing. lic.: PB 344
CCB lic.: 175768	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe	1	144.95	144.95
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: **Shelly Eugenio**

Print name: **Shelly Eugenio** Date: **4/15/19**



Plumbing Permit Application

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

OFFICE USE ONLY	
Date Received: <u>4-15-19</u>	Permit No.: <u>P2019-152</u>
Date Issued: <u>4-15-19</u>	By: <u>CLL</u>
Payment Type: <u>CRN</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>13555 SW Jualtin Valley Hwy</u>	
City/State/ZIP: <u>Beaverton OR</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>13555 SW Jualtin Valley Hwy</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replace Sewer Service on property</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>CRN Excavation, Inc.</u>	
Contact name: <u>Shawn Nielsen</u>	
Address: <u>PO Box 301517</u>	
City/State/ZIP: <u>Portland OR 97294</u>	
Phone: <u>503-254-2540</u>	Fax: <u>503-254-2474</u>
E-mail: <u>CRNexcavation@gmail.com</u>	
CONTRACTOR	
Business name: <u>CRN Excavation, Inc.</u>	
Address:	
City/State/ZIP: <u>Stamcisco, Ore</u>	
Phone:	Fax:
E-mail:	Plumbing. lic.: <u>\$ P81196</u>
CCB lic.: <u>197050</u>	City or metro lic. no.: <u>10946</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		18.46	
Backflow preventer		39.71	
Backwater valve		18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			
Minimum permit fee			87.85
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.54
TOTAL PERMIT FEE			\$98.39

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

* See Fee Schedule

Authorized signature: Shawn Nielsen

Print name: Shawn Nielsen Date: 4/15/19



Plumbing Permit Application

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

blm # 7

Date Received: 4-9-19	Permit No.: B2019-1440
Date Issued: 4-12-19	By: CLK
	Payment Type: CASH

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 121024 SW WARDEN LANE	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: REDWOOD CASCAD HILLS
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: CRAWFORD AT REDWOOD CASCAD HILLS	
Address: 1200 SW 66th AVE Suite 300	
City/State/ZIP: Portland OR 97225	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: CROMWELL PLUMBING	
Address: 25599 SW 95th AVE Suite B	
City/State/ZIP: Wilsonville OR 97070	
Phone: 971-224-5304	Fax:
E-mail: Bill@CromwellPlumbing.com	Plumbing lic.: 34-167 PB
CCB lic.: 44712	City or metro lic. no.: 00198167

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	8	20.31	162.48
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib	1	20.31	20.31
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan	16	20.31	324.96
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	8	20.31	162.48
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			670.23
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			80.43
TOTAL PERMIT FEE			750.66

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



Plumbing Permit Application

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

6/19 9

Date Received: 4-9-19	Permit No.: 32019-1442
Date Issued: 4-12-19	By: CRL
Payment Type: USA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12173 SW Steamboat	
City/State/ZIP: BEAVERTON OR 97008	DR
Suite/bldg./apt. no.:	Project name: REDWOOD CREEK APIS
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: CUMMINS AT REDWOOD CREEK LLC	
Address: 1200 SW 66th AVE Suite 300	
City/State/ZIP: PORTLAND OR 97225	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: CROMWELL PLUMBING	
Address: 25599 SW 95th AVE Suite B	
City/State/ZIP: WILSONVILLE OR 97070	
Phone: 971-224-5304	Fax:
E-mail: BILLY@CROMWELLINC.COM	Plumbing. lic.: 34-167 PB
CCB lic.: 44712	City or metro lic. no.: 00198167

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	12	20.31	243.72
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	2	20.31	40.62
Tub/shower/shower pan	14	20.31	284.34
Urinal		20.31	
Water closet	2	20.31	40.62
Water heater/expansion tank	12	20.31	243.72
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			853.02
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			102.36
TOTAL PERMIT FEE			955.38

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

* See Fee Schedule

Contractor Business License 11.411



Plumbing Permit Application

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

RECEIVED

Date Received: 12/21/2018	Permit No.: B2018-6047
Date Issued: 4-12-19	By: CSL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12403 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn	Lot no.: 129
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> 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: Wolcott Plumbing	
Address: 1075 W. Historic Columbia River Hwy	
City/State/ZIP: Trousdale, Or. 97060	
Phone: (503) 667-1781	Fax: (503) 667-9981
E-mail:	Plumbing. lic.: 26-824pb
CCB lic.: 112220	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	506.67
Each additional bath/kitchen		46.81	
Fire sprinkler (1 _____ ft.)		*	219.29
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve	1	20.31	20.31
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

Authorized signature:

Print name: **Mark Baleme** Date: **07/20/18**

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 12/21/2018	Permit No.: B2018-6047
Date Issued: 4-12-19	By: CPL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12403 SW 174th Terrace	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 129
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lennar NW Inc	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7900	Fax: (360) 258-7901
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc	
Contact name: Juls Call	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7906	Fax:
E-mail: Juls.Call@lennar.com	
CONTRACTOR	
Business name: Renner Trucking & Excavating Inc.	
Address: 228 SW Walnut St.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-846-1512	Fax: 503-846-1354
E-mail: shaughn.renner@gmail.com	Plumbing lic.: PB463 exp. 7-1-2020
CCB lic.: 163385	City or metro lic. no.: 9956

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	0
SFR (2) bath		448.20	0
SFR (3) bath		506.67	0
Each additional bath/kitchen		46.81	0
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	0
Drywell, leach line, or trench drain		20.31	0
Footing drain		20.31	0
Manufactured home utilities		20.31	0
Rain drain connector		20.31	0
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		220331	0
Backflow preventer		483688	0
Backwater valve		220331	0
Clothes washer		220331	0
Dishwasher		20.31	0
Drinking fountain		220331	0
Ejectors/sump		220331	0
Fixture/sewer cap		20.31	0
Floor drain/floor sink/hub/ primer		220331	0
Garbage disposal		220331	0
Hose bib		220331	0
Ice maker		220331	0
Interceptor/grease trap		220331	0
Medical gas (value: \$ 0) <<Enter valuation*			0
Roof drain (commercial)		220331	0
Sink/basin/lavatory		220331	0
Tub/shower/shower pan		220331	0
Urinal		220331	0
Water closet		220331	0
Water heater/expansion tank		220331	0
Water meter pvt		220331	0
1&2 family dwelling re-pipe		1144955	0
Multi-family/commercial re-pipe (first 20 fixtures)		1144.95	0
Multi-family/commercial re-pipe ea. fixture over 20		9.67	0
Other:		220331	0
Subtotal			
Minimum permit fee			98634
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.6
TOTAL PERMIT FEE			108.24

Authorized signature:

Print name: **Shaughn Renner** Date: 11-27-18

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

* See Fee Schedule

Always recalculate when adding or



Plumbing Permit Application

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

Date Received:	Permit No.: B2019-1501
Date Issued: 4-22-19	By: OMC
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12403 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 129
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

RECEIVED

Date Received: 12/21/2018	Permit No.: B2018-6046
Date Issued: 4-12-19	By: CM
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17332 SW Harrier Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn	Lot no.: 120
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> 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: Wolcott Plumbing	
Address: 1075 W. Historic Columbia River Hwy	
City/State/ZIP: Trousdale, Or. 97060	
Phone: (503) 667-1781	Fax: (503) 667-9981
E-mail:	Plumbing. lic.: 26-824pb
CCB lic.: 112220	City or metro lic. no.:

FEE SCHEDULE			
<i>For special information, use checklist.</i>			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	506.67
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> 3,296 sq ft.)		*	219.29
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve	1	20.31	20.31
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			507.47

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

* See Fee Schedule

Authorized signature:

Print name: **Mark Baleme** Date: **07/20/18**



Plumbing Permit Application

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

Date Received: 12/21/2018	Permit No.: B2018-6046
Date Issued: 4/12/19	By: cre
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17332 SW Harrier Lane	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 120
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lennar NW Inc	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7900	Fax: (360) 258-7901
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc	
Contact name: Juls Call	
Address: 11807 NE 99th Street #1170	
City/State/ZIP: Vancouver/WA/98682	
Phone: (360) 258-7906	Fax:
E-mail: Juls.Call@lennar.com	
CONTRACTOR	
Business name: Renner Trucking & Excavating Inc.	
Address: 228 SW Walnut St.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-846-1512	Fax: 503-846-1354
E-mail: shaughn.renner@gmail.com	Plumbing. lic.: PB463 exp. 7-1-2020
CCB lic.: 163385	City or metro lic. no.: 9956

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	0
SFR (2) bath		448.20	0
SFR (3) bath		506.67	0
Each additional bath/kitchen		46.81	0
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	0
Drywell, leach line, or trench drain		20.31	0
Footing drain		20.31	0
Manufactured home utilities		20.31	0
Rain drain connector		20.31	0
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		220331	0
Backflow preventer		48368	0
Backwater valve		220331	0
Clothes washer		220331	0
Dishwasher		20.31	0
Drinking fountain		220331	0
Ejectors/sump		220331	0
Fixture/sewer cap		20.31	0
Floor drain/floor sink/hub/ primer		220331	0
Garbage disposal		220331	0
Hose bib		220331	0
Ice maker		220331	0
Interceptor/grease trap		220331	0
Medical gas (value: \$ 0) <<Enter valuation*			0
Roof drain (commercial)		220331	0
Sink/basin/lavatory		220331	0
Tub/shower/shower pan		220331	0
Urinal		220331	0
Water closet		220331	0
Water heater/expansion tank		220331	0
Water meter pvt		220331	0
1&2 family dwelling re-pipe		1144.95	0
Multi-family/commercial re-pipe (first 20 fixtures)		1144.95	0
Multi-family/commercial re-pipe ea. fixture over 20		9.67	0
Other:		220331	0
Subtotal			
Minimum permit fee			98664
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.6
TOTAL PERMIT FEE			108.24

Authorized signature:

Print name: **Shaughn Renner** Date: 11-27-18

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

* See Fee Schedule

Always recalculate when adding or



Plumbing Permit Application

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

Date Received: 3-27-19	Permit No.: 32019-1229
Date Issued: 4-30-19	By: Che
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17332 SW Harrier Lane	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 120
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing. lic.:
LCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: RECEIVED	Permit No.: B2018-6058
Date Issued: 03/14/2019 4-12-19	By: Call
CITY OF BEAVERTON BUILDING DIVISION	
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12331 SW 174th Ter	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn	Lot no.: 133
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> 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: Wolcott Plumbing	
Address: 1075 W. Historic Columbia River Hwy	
City/State/ZIP: Trousdale, Or. 97060	
Phone: (503) 667-1781	Fax: (503) 667-9981
E-mail:	Plumbing. lic.: 26-824pb
CCB lic.: 112220	City or metro lic. no.:

Authorized signature:

Print name: **Mark Baleme**

Date: **07/20/18**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	506.67
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	20.31
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received:	Permit No. B 2019-1673
Date Issued: 4/24/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11865 SW BRUCE DR.	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: TURN N. on QUEEN TL. on BRUCE DR.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: TIBOR LAKATOS	
Address:	
City/State/ZIP:	
Phone: (503) 810-4894	Fax:
E-mail: LAKATOS104@COMCAST.NET	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: CLEARWATER PLUMBING LLC	
Address: 11755 SE HOLGATE BLVD.	
City/State/ZIP: PORTLAND OR 97266	
Phone: 503-935 0918	Fax:
E-mail:	Plumbing. lic.: PB554
CCB lic.: 180 730	City or metro lic. no.:

Authorized signature: **[Signature]**

Print name: **GWAIRY TOWNSENK** Date: **4/24/19**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	3	20.31	
Tub/shower/shower pan	22	20.31	
Urinal		20.31	
Water closet	1	20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

136.48



Plumbing Permit Application

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

Date Received: 4/22/2019	Permit No.: B2019-1632
Date Issued: 4/22/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17510 NW Woodmere Ct	
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Heijden - 32121
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1N131DB05900	
DESCRIPTION OF WORK	
Install sump pump	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Rudolf Heijden	
Address: 17510 NW Woodmere Ct	
City/State/ZIP: Beaverton, OR 97006	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: TerraFirma Foundation Systems	
Contact name: Heather Rogers	
Address: 13110 SW Wall St	
City/State/ZIP: Tigard, OR 97223	
Phone: (971) 205-5222	Fax:
E-mail: hrogers@terrafirmafs.com	
CONTRACTOR	
Business name: TerraFirma Foundation Systems	
Address: 13110 SW Wall St	
City/State/ZIP: Tigard, OR 97223	
Phone: (971) 205-5222	Fax:
E-mail: hrogers@terrafirmafs.com	Plumbing lic.: PB1545
CCB lic.: 173547	City or metro lic. no.: 10400

Authorized signature: _____
 Print name: Heather Rogers Date: 04/19/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump	1	20.31	20.31
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/avatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>4/18/2019</u>	Permit No. <u>B2019-1600</u>
Date Issued: <u>4/18/2019</u>	By: <u>OR</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>16855 SW Ivy Glenn St.</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Suite/bldg./apt. no.:	Project name: <u>Daly 32016</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: <u>1S119AA 03300</u>	
DESCRIPTION OF WORK	
<u>Install sump pump</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Tom + Dianne Daly</u>	
Address: <u>16855 SW Ivy Glenn St.</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Phone: <u>971-207-7500</u>	Fax: <u>-</u>
E-mail: <u>-</u>	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>Terra Firma Foundation Systems</u>	
Contact name: <u>Emily Singleton</u>	
Address: <u>13110 SW Wall St.</u>	
City/State/ZIP: <u>Tigard, OR 97223</u>	
Phone: <u>971-205-5223</u>	Fax:
E-mail: <u>esingleton@terrafirmafds.com</u>	
CONTRACTOR	
Business name: <u>Same as above</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing lic.: <u>PB1545</u>
CCB lic.:	City or metro lic. no.: <u>10400</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump	<u>1</u>	20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: [Signature]

Print name: Emily Singleton Date: 4/17/19



Plumbing Permit Application

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

Date Received: 4/18/2019	Permit No: B2019-1597
Date Issued: 4/18/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9158 SW 169TH AVE	
City/State/ZIP: BEAVERTON OR 97007	
Suite/bldg./apt. no.:	Project name: NOBLE
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
REPLACEMENT SHOWER PAN	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: ALBERT NOBLE	
Address: 9158 SW 169TH AVE	
City/State/ZIP: BEAVERTON OR 97007	
Phone: (503) 453-7306	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: LAURENCE ADAMS: MASTER PLUMBER	
Contact name: LAURENCE ADAMS	
Address: 1724 OAK ST	
City/State/ZIP: LAKE OSWEGO OR 97034	
Phone: (503) 309-7755	Fax:
E-mail: laurence.adams88@yahoo.com	
CONTRACTOR	
Business name: SAME AS APPLICANT	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing lic.:
CCB lic.: 124225	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan	1	20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

Authorized signature: [Signature]

Print name: LAURENCE ADAMS Date: 4.18.19.



Plumbing Permit Application

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

Date Received: 4/16/2019	Permit No: B2019-1564
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 13900 SW Secretariat Ct	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Remley - 32081
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S128BA02800	
DESCRIPTION OF WORK	
install sump pump	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Tom & Lynn Remley	
Address: 13900 SW Secretariat Ct	
City/State/ZIP: Beaverton, OR 97008	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: TerraFirma Foudation Systems	
Contact name: Heather Rogers	
Address: 13110 SW Wall St	
City/State/ZIP: Tigard, OR 97223	
Phone: (971) 205-5222	Fax:
E-mail: hrogers@terrafirmafs.com	
CONTRACTOR	
Business name: TerraFirma Foudation Systems	
Address: 13110 SW Wall St	
City/State/ZIP: Tigard, OR 97223	
Phone: (971) 205-5222	Fax:
E-mail: hrogers@terrafirmafs.com	Plumbing. lic.: PB1545
CCB lic.: 173547	City or metro lic. no.: 10400

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump	1	20.31	20.31
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: Heather Rogers

Date: 04/16/19



Plumbing Permit Application

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

OFFICE USE ONLY	
Date Received: 4-17-19	Permit No.: B2019-1580
Date Issued: 4-17-19	By: VJK TKK
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 4975 SW Watson Ave	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW 5th St	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replacing 6ft of concrete sewer line with 4" 3034 PVL under sidewalk	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Pregnancy Resource Center	
Address: 4975 SW Watson Ave	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Mr Rooter Plumbing	
Contact name: Brian Lee	
Address: PO Box 789	
City/State/ZIP: Gladstone, OR 97027	
Phone: 503-653-5301	Fax:
E-mail: BrianL@mrrooterportland.com	
CONTRACTOR	
Business name: Same as above	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: BrianL@mrrooterportland.com	Plumbing lic.: 3-434PB
CCB lic.: 138941	City or metro lic. no.: 6249
Authorized signature:	Date: 4/17/19
Print name: Brian Lee	Date: 4/17/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>2</u>)		*	
Storm sewer (no. linear ft.: _____)		*	
Water service (no. linear ft.: _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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

* See Fee Schedule

ELECTRONIC SUBMITTAL
SEE 1-BLDG DIV. W/ 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

Date Received: **02/19/2019** Permit No.: B2019-0664
 Date Issued: **4-16-19** By: *[Signature]*
CITY OF BEAVERTON
BUILDING DIVISION Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9945 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Higher Ground
Cross street/directions to job site: SW 99th Ave. & Beaverton-Hillsdale High	
Subdivision:	Lot no.: 5200
Tax map/parcel no.: 1S114BA	
DESCRIPTION OF WORK	
Interior revisions to existing restaurant space, to create new classrooms and toilet rooms	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Quattro Development, LLC.	
Address: 110 Jorie Boulevard, Suite 140	
City/State/ZIP: Oak Brook, IL 60523	
Phone: (630) 870-1921	Fax:
E-mail: brett@quattrodevelopment.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: CIDA, Inc.	
Contact name: Sander Kohler	
Address: 15895 SW 72nd Ave. Suite 200	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 226-1285	Fax:
E-mail: sanderk@cidainc.com	
CONTRACTOR	
Business name: DP Plumbing Inc.	
Address: 15825 NE Springbrook Rd.	
City/State/ZIP: Newberg OR 97132	
Phone: 503-519-7448	Fax:
E-mail: Dplumbingguy@gmail.com	Plumbing. lic.: PB 2171
CCB lic.: 224685	City or metro lic. no.:
Authorized signature: <i>[Signature]</i>	Date: 4/16/19
Print name: Darren Plank	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	20.31
Dishwasher	1	20.31	20.31
Drinking fountain	1	20.31	20.31
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/tub/ primer	5	20.31	101.55
Garbage disposal		20.31	
Hose bib	4	20.31	81.24
Ice maker	4	20.31	81.24
Interceptor/grease trap	1	20.31	20.31
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	20	20.31	406.20
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	12	20.31	243.72
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			913.95
Minimum permit fee			
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		228.49
	State surcharge (12% of permit fee)		139.09
TOTAL PERMIT FEE			1,281.53

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 03/14/2019	Permit No.: B2019-0998
Date Issued: 4-15-19	By: CRK
CITY OF BEAVERTON BUILDING DIVISION	
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9855 SW Denney Rd	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Building 6
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 16
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: - Same -	
Contact name: Mike Wille	
Address:	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
CONTRACTOR	
Business name: Northwest Plumbing Co dba Local Plumbing Co	
Address: 2870 SE 75th Ave Ste. 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 601-3717	Fax:
E-mail: haleys@localplumbingco.c	Plumbing, lic.: 34-197PB
CCB lic.: 72253	City or metro lic. no.: 1690

Authorized signature: <i>Haley Shannon</i>	Date: 03/06/19
Print name: <i>Haley Shannon</i>	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			567.47

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



Plumbing Permit Application

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

RECEIVED

Date Received: 03/14/2019	Permit No.: B2019-1001
Date Issued: 4-5-19	By: CEL
CITY OF BEAVERTON BUILDING DIVISION	
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9853 SW Denney Rd	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Building 6
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 15
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: - Same -	
Contact name: Mike Wille	
Address:	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
CONTRACTOR	
Business name: Northwest Plumbing Co dba Local Plumbing Co	
Address: 2870 SE 75th Ave Ste. 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 601-3717	Fax:
E-mail: haleys@localplumbingco.c	Plumbing. lic.: 34-197PB
CCB lic.: 72253	City or metro lic. no.: 1690

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$567.47

Authorized signature: *Haley Shannon*

Print name: **Haley Shannon** Date: **03/06/19**

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



Plumbing Permit Application

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

Date Received: 4-15-19	Permit No.: B0019-1540
Date Issued: 4-15-19	By: CR
Payment Type: CARD	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11895 SW 9TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
REMOVE SEWERLINE ROOT INTRUSION AND REPLACE ORANGEBURG WITH HDPE/ABS PIPE.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: AMERICAN DRAIN CLEANING	
Contact name: PAUL MEUSLING	
Address: 12303 SE 80TH AVE	
City/State/ZIP: PORTLAND, OR 97222	
Phone: (503) 265-9593	Fax:
E-mail: PAULAMERICANDRAIN@GMAIL.COM	
CONTRACTOR	
Business name: AMERICAN DRAIN CLEANING	
Address: 12303 SE 80TH AVE	
City/State/ZIP: PORTLAND, OR 97222	
Phone: (503) 265-9593	Fax:
E-mail: SEE ABOVE	Plumbing lic.:
CCB lic.: 168294	City or metro lic. no.: 12161

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>99</u>)		.	52.99
Storm sewer (no. linear ft.: <u>0</u>)		.	
Water service (no. linear ft.: <u>0</u>)		.	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		.	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:	Date: 04/12/20
Print name: PAUL MEUSLING	



Plumbing Permit Application

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

Date Received: 4-15-19	Permit No.: B2019-1541
Date Issued: 4-15-19	By: CM
	Payment Type: CARP

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11875 SW 9th Ave	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace sewer line from house to curb with HDPE pipe.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: American Drain Cleaning	
Contact name: Paul Meusling	
Address: 12303 SE 80th Ave	
City/State/ZIP: Portland, OR 97222	
Phone: 5032659593	Fax:
E-mail: Paulamericandrain@gmail.com	
CONTRACTOR	
Business name: American Drain Cleaning	
Address: 12303 SE 80th Ave	
City/State/ZIP: Portland, OR 97222	
Phone: 5032659593	Fax:
E-mail: See above	Plumbing. lic.:
CCB lic.: 168294	City or metro lic. no.: 12161

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 99)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: *Paul Meusling*
 Print name: Paul Meusling Date: 04/15/2019



Plumbing Permit Application

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

Date Received:	Permit No. B2019-1062
Date Issued: 4-15-19	By: TKK
	Payment Type: visa

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12321 SW 174th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: South Cooper Mtn Hts	Lot no.: 135
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR - Backflow Preventer	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> 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:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Lennar NW Inc.	
Contact name: Maggie Sturm	
Address: same as above	
City/State/ZIP:	
Phone: (360) 258-7894	Fax:
E-mail: Maggie.Sturm@lennar.com	
CONTRACTOR	
Business name: Pacific Landscape Services, Inc.	
Address: PO Box 821903	
City/State/ZIP: Vancouver, WA 98682	
Phone: (360) 891-0367	Fax: (360) 604-1242
E-mail:	Plumbing, lic.:
CCB lic.: 8472	City or metro lic. no.: 13191
Authorized signature: <i>Trianna Reed</i>	
Print name: Trianna Reed	Date: 02/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: APR 26 2019	Permit No.: B0019-1723
Date Issued: APR 26 2019	By: <i>[Signature]</i>
BUILDING SERVICES DIVISION	
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7770 SW Nimbus	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Building 10
Cross street/directions to job site: Parkside Business Park	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
1-Water heater 1-SINK 1-Toilet 1-F.D./PRIMER	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Gridline Plumbing	
Address: 14844 SW 109th Ave	
City/State/ZIP: Tigard, OR 97224	
Phone: 971-375-6167	Fax:
E-mail: gridlineplumbing97@gmail.com	Plumbing. lic.: 26-449 PB
CCB lic.: 74105	City or metro lic. no.: 1725
Authorized signature: <i>[Signature]</i>	Date: 4-26-19
Print name: Jeff Duncan	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	X 1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	X 1	20.31	20.31
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 1-4-2019	Permit No.: 152018-3839
Date Issued: 4/26/2019	(Signature)
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master bullder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15727 SW Wren Ln	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 40
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Malmedal Enterprises Inc.	
Address: PO Box 207	
City/State/ZIP: Banks, OR. 97106	
Phone: (503) 324-0759	Fax: (503) 324-0580
E-mail: carolina@malmedalplumbig	Plumbing. lic.: 34-276PB
CCB lic.: 102 535	City or metro lic. no.: 4232

Authorized signature:

Print name: Carolina Malmedal Date: 10/05/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	
Dishwasher	1	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	
Hose bib	1	20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

RECEIVED
BEAVERTON
APR 26 2019

Date Received:	Permit No.: B209-1718
Date Issued:	By: [Signature]
BUILDING SERVICES DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7716 SW Nimbus	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Building 10
Cross street/directions to job site: parkside business park	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
1-Water heater 1-SINK	
1-Toilet 1-F.D./PRIMER	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Gridline Plumbing	
Address: 14844 SW 109th ave	
City/State/ZIP: Tigard, OR 97224	
Phone: 971-275-6167	Fax:
E-mail: gridlineplumbing989@gmail.com	Plumbing lic.: 26-449 Pb
CCB lic.: 74105	City or metro lic. no.: 1725

Authorized signature: **[Signature]**

Print name: **Jeff Duncan** Date: **4-26-19**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	X 1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	X 1	20.31	20.31
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

RECEIVED
OF BEAVERTON

Date Received: **APR 26 2019** Permit No.: **B2019-1719**
 Date Issued: **APR 26 2019** By: **NK**
 BUILDING SERVICES DIVISION Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7720 SW Nimbus	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Building 10
Cross street/directions to job site: parkside business park	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
1-water heater 1-sink	
1-Toilet 1-FD./PRIMER	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Cridline Plumbing	
Address: 14844 SW 109th ave	
City/State/ZIP: Tigard, OR 97224	
Phone: 971-275-6167	Fax:
E-mail: cridlineplumbing989@gmail.com	Plumbing, lic.: 26-449 PB
CCB lic.: 74105	City or metro lic. no.: 1725
Authorized signature: Jeff Duncan	
Print name: Jeff Duncan	Date: 4-26-19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	X 1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	X 1	20.31	20.31
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: APR 26 2019	Permit No.: 32019-1721
Date Issued:	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7762 SW Nimbus	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Building 10
Cross street/directions to job site: Parkside Business Park	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
1-Water heater 1-SINK 1-Toilet 1-F.D./PRIMER	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Gridline Plumbing	
Address: 14844 SW 109th Ave	
City/State/ZIP: Tigard, OR 97224	
Phone: 971-275-6167	Fax:
E-mail: gridlineplumbing97@gmail.com	Plumbing Lic.: 26-449 PB
CCB lic.: 74105	City or metro lic. no.: 1725
Authorized signature: [Signature]	
Print name: Jeff Duncan	Date: 4-26-19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	X 1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	X 1	20.31	20.31
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

RECEIVED
CITY OF BEAVERTON

Date Received: APR 26 2019	Permit No.: B2019-1722
Date Issued: APR 26 2019	By: MZ
BUILDING SERVICES DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7766 SW Nimbus	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Building 10
Cross street/directions to job site: Parkside Business Park	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
1- Water heater 1- Sink	
1- Toilet 1- F.D./PRIMER	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Gridline Plumbing	
Address: 14844 SW 109th Ave	
City/State/ZIP: Tigard, OR 97224	
Phone: 971-275-6167	Fax:
E-mail: gridlineplumbing989@gmail.com	Plumbing lic.: 26-449 PB
CCB lic.: 74105	City or metro lic. no.: 1725

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	X 1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	X 1	20.31	20.31
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: **Jeff Duncan**

Print name: **Jeff Duncan** Date: **4-26-19**

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



Plumbing Permit Application

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

Date Received: APR 26 2019	Permit No.: B2019-1720
Date Issued:	By: ML
BUILDING SERVICES DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 5724 SW Nimbus	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Building 10
Cross street/directions to job site: Parkside Business Park	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
1-Water heater 1-SINK 1-Toilet 1-F.D./PRIMER	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Gridline Plumbing	
Address: 14844 SW 109th Ave	
City/State/ZIP: Tigard, OR 97224	
Phone: 971-275-6167	Fax:
E-mail: gridlineplumbing989@gmail.com	Plumbing. lic.: 26-449 Pb
CCB lic.: 74105	City or metro lic. no.: 1725

Authorized signature:	Date: 4-26-19
Print name: Jeff Duncan	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	X 1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	X 1	20.31	20.31
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

OFFICE USE ONLY	
Date Received: 1-4-2019	Permit No.: B2018-4353
Date Issued: 4/20/2019	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15733 SW Wren Lane	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no: 41
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Emerald Weeks	
Address: 4380 SW Macadam Ave Suite 100	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Trademark Landscapes, Inc	
Address: P.O. Box 2410	
City/State/ZIP: Oregon City, OR 97045	
Phone: (503) 631-3893	Fax: (503) 631-4737
E-mail: Ellis.Steve@yahoo.com	Plumbing, Inc. 6203
CCB lic.: 11353	City or metro lic. no.: 6796
Authorized signature: <i>Steve Ellis</i>	
Print name: STEVEN E. ELLIS	Date: 1/19/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (0 sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: 0)		.	
Storm sewer (no. linear ft.: 0)		.	
Water service (no. linear ft.: 0)		.	
Fixture or Item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1	39.71	39.71
Backwater valve		18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ 0)		.	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter prv		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
		Subtotal	
		Minimum permit fee	87.85
		Plan review (25% of permit fee)	
		State surcharge (12% of permit fee)	10.54
		TOTAL PERMIT FEE	\$98.39

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>32018-4352</u>
Date Issued: <u>4/22/2019</u>	<u>du</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15733 SW Wren Lane</u>	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: <u>Westmont</u>
Cross street/directions to job site:	
Subdivision:	Lot no.: <u>41</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Change Excavation Vendor</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR Horton</u>	
Address: <u>4380 SW Macadam Ste 300</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>503-222-4151</u>	Fax:
E-mail: <u>sjslade@drhorton.com</u>	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Presto Homes Inc</u>	
Address: <u>15410 SE 94th Ave</u>	
City/State/ZIP: <u>Clackamas, OR 97015</u>	
Phone: <u>(503) 387-6937</u>	Fax:
E-mail: <u>prestohomes@gmail.com</u>	Plumbing lic.:
CCB lic.: <u>196215</u>	City or metro lic. no.: <u>12081</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> eq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		.	
Storm sewer (no. linear ft.: <u>0</u>)		.	
Water service (no. linear ft.: <u>0</u>)		.	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/ump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		.	
Roof drain (commercial)		20.31	
Sink/basin/evatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: Nicole Camara

Print name: Nicole Camara Date: 4/2/19

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 1.4.2019	Permit No.: B2018 4352
Date Issued: 4/26/2019	<i>EW</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15733 SW Wren Lane	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 41
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Malmedal Enterprises Inc.	
Address: PO Box 207	
City/State/ZIP: Banks, OR. 97106	
Phone: (503) 324-0759	Fax: (503) 324-0580
E-mail: carolina@malmedalplumbig	Plumbing. lic.: 34-276PB
CCB lic.: 102 535	City or metro lic. no.: 4232

Authorized signature:

Print name: Carolina Malmedal Date: 10/05/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	
Dishwasher	1	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	
Hose bib	1	20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No. B2018-3920
Date Issued:	4/24/2019
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15728 SW Wren Ln	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 12
Tax map/parcel no.:	

DESCRIPTION OF WORK	
NSFR	

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail:	

<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Emerald Weeks	
Address: 4380 SW Macadam Ave Suite 100	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: esweeks@drhorton.com	

CONTRACTOR	
Business name: Trademark Landscapes, Inc	
Address: P.O. Box 2410	
City/State/ZIP: Oregon City, OR 97045	
Phone: (503) 631-3893	Fax: (503) 631-4737
E-mail: Ellis, Steve 440@yahoo	Plumbing, lic: 6203
CCB lic.: 11353	City or metro lic. no.: 6794
Authorized signature: <i>Steve Ellis</i>	
Print name: STEVEN C. ELLIS	Date: 1/19/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or Item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1	39.71	39.71
Backwater valve		18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ 0)			
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			
Minimum permit fee			87.85
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.54
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

CONTRACTOR CHANGE



Plumbing Permit Application

12725 SW Millikan Way / PO Box 2755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

Date Received: 4/26/2014	Form No: 32018-3840
Date Issued: 4/26/2014	Payment Type:

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/repair/convert	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15728 SW Wren Lane	
City/State/ZIP:	
Block/lot/sect. no.:	Project name: WESAMIN
Cross street/direction to job site:	
Subdivision:	Lot no.: 12
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Contractor Change	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR HANSON	
Address: 12350 SW WILLOW DR 200	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 503-222-4154	
E-mail: DRHANSON@DRHANSON.COM	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: CAROLINA MALMEDAL	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Malmedal Enterprises Inc.	
Address: PO Box 207	
City/State/ZIP: Beaverton, OR 97106	
Phone: (503) 324-0759	Fax: (503) 324-0580
E-mail: carolina@malmedalplumbing.com	Plumbing Lic.: 34-278PB
OCB Lic.: 102353	City or metro ID no.: 4232
Authorized Signature:	
Print name: Carolina Malmedal	Date: 10/05/18

FEE SCHEDULE			
For special information, see checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 fl. for each utility connection)			
SFR (1) bath		388.74	
SFR (2) bath		448.20	
SFR (3) bath	1	508.87	
Each additional bathroom:	1	48.81	
Fire sprinkler (0 _____ sq ft.)			
Other services			
Close drain/area drain/openhole		20.31	
Drywall, teach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0 _____)			
Storm sewer (no. linear ft.: 0 _____)			
Water service (no. linear ft.: 0 _____)			
Plumbing fees			
Abolition Valve (water hammer)		20.31	
Backflow preventer		49.85	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Electron/airp		20.31	
Flange/sewer cap		20.31	
Floor drain/floor sink/tilt/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grates trap		20.31	
Medical gas (value: \$ 0 _____)			
Roof drain (commercial)		20.31	
Sink/basin/savatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/suspension tank		20.31	
Water meter prv		20.31	
1-2 family dwelling re-pipe		144.05	
Multi-family/commercial re-pipe (first 20 fixtures)		144.05	
Multi-family/commercial re-pipe ex. mains over 20		9.87	
Other:		20.31	
Subtotal			
Minimum permit fee			88.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application implies if a permit is not obtained within 100 days after it has been accepted as complete.

* See Fee Schedule

A



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

Date Received: <u>4-8-19</u>	Permit No.: <u>B2018-3840</u>
Date Issued: <u>4/20/2019</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15728 SW Wren Lane</u>	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: <u>Westmont</u>
Cross street/directions to job site:	
Subdivision:	Lot no.: <u>12</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Change Excavation Vendor</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR Horton</u>	
Address: <u>4380 SW Macadam Ste 300</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>503-222-4151</u>	Fax:
E-mail: <u>sjslade@drhorton.com</u>	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Presto Homes Inc</u>	
Address: <u>15410 SE 94th Ave</u>	
City/State/ZIP: <u>Clackamas, OR 97015</u>	
Phone: <u>(503) 387-6937</u>	Fax:
E-mail: <u>prestohomes@gmail.com</u>	
CCB lic.: <u>196215</u>	City or metro lic. no.: <u>12081</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 fl. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: [Signature]

Print name: Nicole Camara Date: 4/2/19

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

* See Fee Schedule



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

OFFICE USE ONLY	
Date Received: 1-4-2019	Permit No: B2018-3870
Date Issued: 4/26/2019	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master buidder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15727 SW Wren Ln	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 40
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Emerald Weeks	
Address: 4380 SW Macadam Ave Suite 100	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Trademark Landscapes, Inc	
Address: P.O. Box 2410	
City/State/ZIP: Oregon City, OR 97045	
Phone: (503) 631-3893	Fax: (503) 631-4737
E-mail: Ellis, Steve 440@yahoo	Plumbing lic: 6203
CCB lic: 11353	City or metro lic. no.: 6796
Authorized signature: <i>Steve Ellis</i>	
Print name: STEVEN C. ELLIS	Date: 1/19/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (0 sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: 0)		.	
Storm sewer (no. linear ft.: 0)		.	
Water service (no. linear ft.: 0)		.	
Fixture or Item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1	39.71	39.71
Backwater valve	1	18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ 0)		.	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter prv		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
		Subtotal	
		Minimum permit fee	87.85
		Plan review (25% of permit fee)	
		State surcharge (12% of permit fee)	10.54
		TOTAL PERMIT FEE	\$98.39

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

* See Fee Schedule



Plumbing Permit Application

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

**CONTRACTOR
 CHANGE**

Date Received: 4-8-19	Permit No.: B2018-3839
Date Issued: 4/2/2019	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15727 SW Wren Lane	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision:	Lot no.: 40
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Change Excavation Vendor	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ste 300	
City/State/ZIP: Portland, OR 97239	
Phone: 503-222-4151	Fax:
E-mail: sjslade@drhorton.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Presto Homes Inc	
Address: 15410 SE 94th Ave	
City/State/ZIP: Clackamas, OR 97015	
Phone: (503) 387-8937	Fax:
E-mail: prestohomes@gmail.com	
CCB lic.: 196215	City or metro lic. no.: 12081

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath			389.74
SFR (2) bath			448.20
SFR (3) bath			506.67
Each additional bath/kitchen			46.81
Fire sprinkler (0 eq ft.)			*
Site utilities			
Catch basin/ area drain/manhole			20.31
Drywell, leach line, or trench drain			20.31
Footing drain			20.31
Manufactured home utilities			20.31
Rain drain connector			20.31
Sanitary sewer (no. linear ft.: 0)			*
Storm sewer (no. linear ft.: 0)			*
Water service (no. linear ft.: 0)			*
Fixture or item			
Absorption valve (water hammer)			20.31
Backflow preventer			43.68
Backwater valve			20.31
Clothes washer			20.31
Dishwasher			20.31
Drinking fountain			20.31
Ejectors/sump			20.31
Fixture/sewer cap			20.31
Floor drain/floor sink/hub/ primer			20.31
Garbage disposal			20.31
Hose bib			20.31
Ice maker			20.31
Interceptor/grease trap			20.31
Medical gas (value: \$ 0)			*
Roof drain (commercial)			20.31
Sink/basin/avatory			20.31
Tub/shower/shower pan			20.31
Urinal			20.31
Water closet			20.31
Water heater/expansion tank			20.31
Water meter pvt			20.31
1&2 family dwelling re-pipe			144.95
Multi-family/commercial re-pipe (first 20 fixtures)			144.95
Multi-family/commercial re-pipe ea. fixture over 20			9.67
Other:			20.31
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature:

Print name: **Nicole Camara** Date: **4/2/19**

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

* See Fee Schedule



Plumbing Permit Application

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

OFFICE USE ONLY	
Date Received: <u>1/16/2019</u>	Permit No: <u>B2018-3916</u>
Date Issued: <u>1/16/2019</u>	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15716 SW Wren Lane</u>	
City/State/ZIP: <u>BEAVERTON OR</u>	
Suite/bldg./apt. no.:	Project name: <u>Westmont (Russell)</u>
Cross street/directions to job site:	
Subdivision: <u>WESTMONT</u>	Lot no.: <u>11</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>NSFR</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR Horton, Inc</u>	
Address: <u>4380 SW Macadam Ave</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>(503) 222-4151</u>	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>DR Horton, Inc</u>	
Contact name: <u>Emerald Weeks</u>	
Address: <u>4380 SW Macadam Ave Suite 100</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>(503) 222-4151</u>	Fax:
E-mail: <u>esweeks@drhorton.com</u>	
CONTRACTOR	
Business name: <u>Trademark Landscapes, Inc</u>	
Address: <u>P.O. Box 2410</u>	
City/State/ZIP: <u>Oregon City, OR 97045</u>	
Phone: <u>(503) 631-3893</u>	Fax: <u>(503) 631-4737</u>
E-mail: <u>Ellis, Steve 44@yahoo</u>	Plumbing lic.: <u>6203</u>
CCB lic.: <u>11353</u>	City or metro lic. no.: <u>6776</u>
Authorized signature: <u>Steve Ellis</u>	
Print name: <u>STEVEN C. ELLIS</u>	Date: <u>1/19/19</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (<u>0</u> sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: <u>0</u>)		.	
Storm sewer (no. linear ft.: <u>0</u>)		.	
Water service (no. linear ft.: <u>0</u>)		.	
Fixture or item			
Absorption valve (water hammer)		18.46	
Backflow preventer	<u>1</u>	39.71	39.71
Backwater valve	<u>1</u>	18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ <u>0</u>)		.	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			
Minimum permit fee			87.85
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.54
TOTAL PERMIT FEE			\$98.39

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete. 108.24

* See Fee Schedule



Plumbing Permit Application

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

CONTRACTOR CHANGE

Date Received: 4-8-19	Permit No.: B3018-3800
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15716 SW Wren Lane	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision:	Lot no.: 11
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Change Excavation Vendor	
CONTRACTOR CHANGE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ste 300	
City/State/ZIP: Portland, OR 97239	
Phone: 503-222-4151	Fax:
E-mail: sjslade@drhorton.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Presto Homes Inc	
Address: 15410 SE 94th Ave	
City/State/ZIP: Clackamas, OR 97015	
Phone: (503) 387-6937	Fax:
E-mail: prestohomes@gmail.com	Plumbing lic.:
CCB lic.: 196215	City or metro lic. no.: 12081

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.87	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejector/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: *Nicole Camara*

Print name: **Nicole Camara** Date: **4/2/19**

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



Plumbing Permit Application

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

Date Received: <u>6-7-18</u>	Permit No.: <u>B2018-2540</u>
Date Issued: <u>4-30-19</u>	By: <u>CPL</u>
Payment Type: <u>check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15104 SW Thrush Ln</u>	
City/State/ZIP: <u>BEAVERTON OR</u>	
Suite/bldg./apt. no.:	Project name: <u>RUSSELL</u>
Cross street/directions to job site:	
Subdivision: <u>WESTMONT</u>	Lot no.: <u>83</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR HORTON INC</u>	
Address: <u>4380 SW MACADAM AVE</u>	
City/State/ZIP: <u>PORTLAND OR 97239</u>	
Phone: <u>5032224151</u>	Fax:
E-mail: <u>PLANCHECK@DRHORTON.COM</u>	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>SAME AS ABOVE</u>	
Contact name: <u>AMANDA LOVERIDGE</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Edward Mullen Plumbing</u>	
Address: <u>1601 SE River Rd</u>	
City/State/ZIP: <u>Hillsboro, OR 97213</u>	
Phone: <u>(503) 640-0113</u>	Fax: <u>(503) 640-4483</u>
E-mail: <u>jeremy@edwardmullenplub</u>	Plumbing. lic.: <u>34-260PB</u>
CCB lic.: <u>92689</u>	City or metro lic. no.: <u>3526</u>
Authorized signature:	Date:
Print name: <u>Jeremy Crace</u>	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	<u>1</u>	506.67	
Each additional bath/kitchen	<u>1</u>	46.81	
Fire sprinkler (<u>0</u> sq ft)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	<u>1</u>	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	<u>1</u>	20.31	
Hose bib	<u>2</u>	20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			<u>619.90</u>

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

* See Fee Schedule



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

OFFICE USE ONLY	
Date Received: 6-7-18	Permit No.: B2018-2541
Date Issued: 4/30/19	By: CPL
Payment Type: check	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15614 SW THURSTON LN	
City/State/ZIP: BEAVERTON OR	
Site/bldg /apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 83
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Emerald Weeks	
Address: 4380 SW Macadam Ave Suite 100	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Trademark Landscapes, Inc	
Address: P.O. Box 2410	
City/State/ZIP: Oregon City, OR 97045	
Phone: (503) 631-3893	Fax: (503) 631-4737
E-mail: Ellis.steve@yahoo	Plumbing lic. 6203
CCB lic.: 11353	LCB # 6796
Authorized signature: <i>Steve Ellis</i>	
Print name: STEVEN E. ELLIS	Date: 1/19/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (0 sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rein drain connector		18.46	
Sanitary sewer (no. linear ft.: 0)		.	
Storm sewer (no. linear ft.: 0)		.	
Water service (no. linear ft.: 0)		.	
Fixture or item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1	39.71	39.71
Backwater valve	1	18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ 0)		.	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
		Subtotal	
		Minimum permit fee	87.85
		Plan review (25% of permit fee)	
		State surcharge (12% of permit fee)	10.54
		TOTAL PERMIT FEE	\$108.24

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



CONTRACTOR CHANGE

Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>B2018-2540</u>
Date Issued: <u>4-30-19</u>	By: <u>CPL</u>
Payment Type: <u>check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15614 SW Thrush Lane</u>	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: <u>Westmont</u>
Cross street/directions to job site:	
Subdivision:	Lot no.: <u>83</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Change Excavation Vendor</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR Horton</u>	
Address: <u>4380 SW Macadam Ste 300</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>503-222-4151</u>	Fax:
E-mail: <u>sjslade@drhorton.com</u>	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Presto Homes Inc</u>	
Address: <u>15410 SE 94th Ave</u>	
City/State/ZIP: <u>Clackamas, OR 97015</u>	
Phone: <u>(503) 387-8937</u>	Fax:
E-mail: <u>prestohomes@gmail.com</u>	Plumbing. lic.:
CCB lic.: <u>195215</u>	City or metro lic. no.: <u>12081</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	EA.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath			389.74
SFR (2) bath			448.20
SFR (3) bath			506.67
Each additional bath/kitchen			46.81
Fire sprinkler (<u>0</u> sq ft.)			.
Site utilities			
Catch basin/ area drain/manhole			20.31
Drywell, leach line, or trench drain			20.31
Footing drain			20.31
Manufactured home utilities			20.31
Rain drain connector			20.31
Sanitary sewer (no. linear ft.: <u>0</u>)			.
Storm sewer (no. linear ft.: <u>0</u>)			.
Water service (no. linear ft.: <u>0</u>)			.
Fixture or item			
Absorption valve (water hammer)			20.31
Backflow preventer			43.68
Backwater valve			20.31
Clothes washer			20.31
Dishwasher			20.31
Drinking fountain			20.31
Ejectors/sump			20.31
Fixture/sewer cap			20.31
Floor drain/floor sink/hub/ primer			20.31
Garbage disposal			20.31
Hose bib			20.31
Ice maker			20.31
Interceptor/grease trap			20.31
Medical gas (value: \$ <u>0</u>)			.
Roof drain (commercial)			20.31
Sink/basin/avatory			20.31
Tub/shower/shower pan			20.31
Urinal			20.31
Water closet			20.31
Water heater/expansion tank			20.31
Water meter pvt			20.31
1&2 family dwelling re-pipe			144.95
Multi-family/commercial re-pipe (first 20 fixtures)			144.95
Multi-family/commercial re-pipe ea. fixture over 20			9.67
Other:			20.31
Subtotal			
Minimum permit fee			98.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: Nicol R Camara
 Print name: Nicol R Camara Date: 4/2/19

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00118

Approval Code: 019254 4/29/2019 8:45 am

E-mailed To: allan@accurateplumbingusa.com

B2019-1753

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11975 SW BLAKENEY ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: hall bath update	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CB03503	
DESCRIPTION OF WORK	
new sink, convert tub to a shower	
APPLICANT	
Name: Allan Ellerman	
Phone: 360-944-8952	Fax: 360-896-4870
Email:	
CONTRACTOR	
Plumb lic. no.: PB903	CCB lic. no.: 190781
Business Name: ACCURATE PLUMBING & HVAC LLC	
Contact:	
Address: 3021 NE 72ND DR #924	
City/State/ZIP: VANCOUVER, WA 98661	
Phone: 3608948952	Fax: 3608964870
Email: allan@accurateplumbingusa.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$56.02
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: B2019-1388
Date Issued: 4-8-19	By: CRL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7620 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>13</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis**

Date: **04/08/19**



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>B2019-1389</u>
Date Issued: <u>4-8-19</u>	By: <u>CR</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7625 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416
Authorized signature:	Date: 04/08/19
Print name: Andy Davis	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>27</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: B2019-1390
Date Issued: 4-8-19	By: CPL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7650 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>13</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: Andy Davis	Date: 04/08/19
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Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: B2019-1391
Date Issued: 4-8-19	By: ORL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7655 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>27</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis**

Date: **04/08/19**



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>32019-1392</u>
Date Issued: <u>4-8-19</u>	By: <u>CRL</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7670 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing, lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>12</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis**

Date: **04/08/19**



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No. 82019-1393
Date Issued: 4-8-19	By: CR
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7675 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416
Authorized signature:	Date: 04/08/19

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>25</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>82019-1394</u>
Date Issued: <u>4-8-19</u>	By: <u>CR</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7690 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>12</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis** Date: **04/08/19**



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: 2019-1395
Date Issued: 4-8-19	By: AKL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7695 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
Installation of new waterline from new water meter to existing water service line.

<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	

CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>26</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:	Date: 04/08/19
Print name: Andy Davis	



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: B2019-1397
Date Issued: 4-8-19	By: CPL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7720 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>13</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis** Date: **04/08/19**



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No. <u>32019-1398</u>
Date Issued: <u>4-8-19</u>	By: <u>CRK</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7725 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>25</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis**

Date: **04/08/19**



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>82019-1309</u>
Date Issued: <u>4-8-19</u>	By: <u>CR</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7790 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>13</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis**

Date: **04/08/19**



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>B2019-1400</u>
Date Issued: <u>4-8-19</u>	By: <u>ARL</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7795 SW 140th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416
Authorized signature:	Date: 04/08/19
Print name: Andy Davis	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>25</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: <u>4-8-19</u>	Permit No.: <u>B2019-1402</u>
Date Issued: <u>4-8-19</u>	By: <u>CPL</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 14115 SW 140th CT	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

Authorized signature:

Print name: **Andy Davis** Date: **04/08/19**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>13</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: B2019-1404
Date Issued: 4-8-19	By: Wh
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7220 SW 140th Ave.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing. lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>9</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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* See Fee Schedule

Authorized signature:

Print name: **Andy Davis**

Date: **04/08/19**



Plumbing Permit Application

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

Date Received: 4-8-19	Permit No.: 32019-1405
Date Issued: 4-8-19	By: JUL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other: City Waterline Project
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: City Waterline Project
JOB SITE INFORMATION AND LOCATION	
Job site address: 7225 SW 140th Ave.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: COB CIP Project 4156
Cross street/directions to job site: SW 140th Ave and SW Hart Road	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of new waterline from new water meter to existing water service line.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: HD Plumbing Service	
Contact name: Andy Davis	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	
CONTRACTOR	
Business name: HD Plumbing Service	
Address: PO Box 1108	
City/State/ZIP: Battle Ground, WA 98604	
Phone: (360) 852-3658	Fax:
E-mail: andy@hdplumbingservices.co	Plumbing, lic.: PB-1622
CCB lic.: 206927	City or metro lic. no.: 12416

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>29</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Andy Davis** Date: **04/08/19**