



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-19-00127

Approval Code: 003413 5/3/2019 11:02 am

E-mailed To: cascadeplum@yahoo.com

B2019-1848

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: 3905 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: G	
Project Name: Nobibi Ice Cream	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
Rough in and install mop sinks, floor sinks, floor drains water heater grease interceptor, hand sinks etc	
APPLICANT	
Name: Shane Farley	
Phone: 5039270299	Fax: 5032839514
Email:	
CONTRACTOR	
Plumb lic. no.: PB1528	CCB lic. no.: 204392
Business Name: QUALITY WEST PLUMBING LLC	
Contact:	
Address: 2304 NW SHADDEN DR	
City/State/ZIP: MCMINNVILLE, OR 97128	
Phone: 5032897095	Fax: 5032839514
Email: CASCADPLUM@YAHOO.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			
Floor drain/floor sink/hub	5	\$20.31	\$101.55
Interceptor/grease trap	1	\$20.31	\$20.31
Sink/basin/lavatory	4	\$20.31	\$81.24
Water heater	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$223.41
State surcharge (12% of permit total)			\$26.81
TOTAL PERMIT FEE			\$250.22

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
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 Phone: 503-526-2542
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Residential Plumbing Authorization To Begin Work

05350-BPB-19-00128

Approval Code: 09006G 5/3/2019 1:33 pm

E-mailed To: permits@3mountainsplumbing.com

32019-1851

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: 13872 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.: 1S116CD00611	
DESCRIPTION OF WORK	
Replace in building water lines for 2 bath house (2 bath repipe rough in only). replace 70' water service line from meter to house, by bore. install 50' gal gas water heater, PRV and expansion tank	
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"/> 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			
Water heater	1	\$20.31	\$20.31
Expansion tank	1	\$20.31	\$20.31
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			\$238.56
State surcharge (12% of permit total)			\$28.63
TOTAL PERMIT FEE			\$267.19

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

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

82019-1854

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00129

Approval Code: 003271 5/3/2019 3:05 pm

E-mailed To: dwight@eworksnw.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: 11975 SW BEAVERCREST CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BD01400	
DESCRIPTION OF WORK	
spot repair of sewer line via trenching on property	
APPLICANT	
Name: Dwight Carlisle	
Phone: 5037196715	Fax: 5039721766
Email:	
CONTRACTOR	
Plumb lic. no.: PB1756	CCB lic. no.: 185781
Business Name: ENVIRONMENTAL WORKS LLC	
Contact:	
Address: 2634 SE STEELE ST	
City/State/ZIP: PORTLAND, OR 97202	
Phone: 5037196715	Fax: 5039721866
Email: ryan@eworksnw.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"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Vacuum drainage waste and vent 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"/> Wastewater pretreatment system		
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - 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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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

Permit# B2017-0086

OFFICE USE ONLY	
Date Received: 4/30/19	Permit No.: B2019-1705
Date Issued: 5/3/19	By: [Signature]
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: 15571 SW Thrush Lane	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name: Westmont (Russell)
Cross street/directions to job site:	
Subdivision: WESTMONT	Lot no.: 119
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.Steve44@yahoo	Plumbing, Inc. 6203
CCB lic.: 11353	City or metro lic. no.: 6796
Authorized signature: [Signature]	
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 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	107.00
		Plan review (25% of permit fee)	
		State surcharge (12% of permit fee)	10.54
		TOTAL PERMIT FEE	225.54

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



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-19-00125

Approval Code: 591096 5/3/2019 6:58 am

E-mailed To: dawsonsplumbing77@gmail.com

B2019-1839

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: 5245 SW SHERWOOD PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Rudebeck shower	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CB08100	
DESCRIPTION OF WORK	
installed new shower valve and shower stall	
APPLICANT	
Name: Dusty Dawson	
Phone: 9712631508	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB2118	CCB lic. no.: 223590
Business Name: DAWSONS PLUMBING LLC	
Contact:	
Address: 1034 37TH AVE	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5413994962	Fax:
Email: CDDAWSON2@ICLOUD.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			
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

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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-19-00126

Approval Code: 96945G 5/3/2019 9:34 am

E-mailed To: frontierplumbing@coho.net

B2019-1840

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: 11212 SW PINTAIL LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 11212 Pintail	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DB07500	
DESCRIPTION OF WORK	
Rough in shower valve.	
APPLICANT	
Name: Jeff Higdon	
Phone: 5035474344	Fax: 5033360791
Email:	
CONTRACTOR	
Plumb lic. no.: PB1465	CCB lic. no.: 201058
Business Name: FRONTIER PLUMBING & DRAIN LLC	
Contact:	
Address: 6107 SW MURRAY BLVD #241	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5035474344	Fax:
Email: FRONTIERPLUMBING@COHO.NET	
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			
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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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.

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

Application



14723 SW Whittington Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222
BeavertonOregon.gov

Date Received: 4-25-19	Permit No.: B2019-1702
Date Issued: 5-3-19	By: TK
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: 14723 SW TEAL BLVD	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Insomnia Murrayhill
Cross street/directions to job site: TEAL & MURRAY	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
TBI ; Insomnia coffee	
<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: Whittington & Sons Plumbing Company	
Address: 6345 SW Cherryhill Dr.	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 536-5910	Fax:
E-mail: Plumbinglegend@telcloud.com	Plumbing lic.: PB1639
CCB lic.: 107828	City or metro lic. no.:

FEE SCHEDULE			
>>CLICK HERE TO DETERMINE IF PLAN REVIEW IS REQUIRED<<			
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.) <<Enter square footage>			
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>) <<Enter linear feet			
Storm sewer (no. linear ft.: <u>0</u>) <<Enter linear feet			
Water service (no. linear ft.: <u>0</u>) <<Enter linear feet			
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	3	20.31	
Garbage disposal		20.31	
Hose bib		20.31	0.00
Ice maker		20.31	
Interceptor/grease trap	1	20.31	
Medical gas (value: \$ <u>0</u>) <<Enter valuation>			
Roof drain (commercial)		20.31	
Sink/basin/lavatory	3	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: ESPRESSO	2	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.

CALCULATE PLUMBING PERMIT FEES



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: 5/3/19	Permit No.: B2019-1834
Date Issued:	By: [Signature]
	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: 10250 SW Crestwood Court	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Scholls Ferry	
Subdivision:	Lot no.:
Tax map/parcel no.: 15126 BBD 3500 / R236220	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Pete and Malinda Senger	
Address: 10250 SW Crestwood Court	
City/State/ZIP: Beaverton, Oregon 97008	
Phone: 503-501-6634	Fax:
E-mail: pete.senger@gmail.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: Stanley Brooks Plumbing	
Address: 6310 McEwan Road	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: 602-367-5727	Fax:
E-mail:	Plumbing. lic.: PB1972
CCB lic.: 218172	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		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

Print name: Peter M. Senger Date: 5/3/19
 REV 10/17

Authorized signature: [Signature]



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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00124

Approval Code: 002604 5/2/2019 12:02 pm

E-mailed To: andrea@eworksnw.com

32019-1824

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: 5150 SW WESTERN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Water Service	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CB01000	
DESCRIPTION OF WORK	
Water Service	
APPLICANT	
Name: Andrea Smith	
Phone: 5037196715	Fax: 5039721866
Email:	
CONTRACTOR	
Plumb lic. no.: PB1756	CCB lic. no.: 185781
Business Name: ENVIRONMENTAL WORKS LLC	
Contact:	
Address: 2634 SE STEELE ST	
City/State/ZIP: PORTLAND, OR 97202	
Phone: 5037196715	Fax: 5039721866
Email: ryan@eworksnw.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			
Backflow preventer	1	\$43.68	\$43.68
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$96.67
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.27

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

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

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



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

Residential Plumbing Authorization To Begin Work

B2019-1818

05350-BPB-19-00123

Approval Code: 07632G 5/2/2019 9:49 am

E-mailed To: office@apollodrain.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: 12450 SW 7TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB06500	
DESCRIPTION OF WORK	
INSTALL UP TO 12FT CIPP LINER THROUGH 2 EXTERIOR CLEAN OUT ACCESS POINTS. STARTING AT THE ABS/CONCRETE TRANSITION AND ENDING WITHIN ONE FOOT OF THE CITY MAIN. USING LMK TECHNOLOGIES.	
APPLICANT	
Name: MARQUITA MARTIN	
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
Sewer			
Sanitary sewer - 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.



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.: B2018-3994
Date Issued: 5-2-19	By: HR
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 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: 15655 SW BLUERIDGE DRIVE	
City/State/ZIP: Beaverton	
Suite/bldg./apt. no.:	Project name: Element Hotel
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New 4 story hotel	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: BHG-E of Beaverton, LLC	
Address: 2640 47th Street South	
City/State/ZIP: Fargo, N.D. 58104	
Phone: (701) 551-8905	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Brandt Hospitality Group	
Contact name: Matt Kalbus	
Address: 2640 47th Street South	
City/State/ZIP: Fargo, N.D. 58104	
Phone: (701) 551-8911	Fax:
E-mail: matt.kalbus@brandthg.com	
CONTRACTOR	
Business name: TAPANI PLUMBING	
Address: PO Box 2350	
City/State/ZIP: BATTLE GROUND, WA 98604	
Phone: 360-687-3983	Fax:
E-mail: DAVIDM@TAPANIPLUMBING.COM	Plumbing lic. STATE 37-269PB
CCB lic.: 60958	City or metro lic. no.:
Authorized signature: <i>David Miller</i>	
Print name: DAVID MILLER SORP	Date: 5-1-2019

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	1	20.31	20.31
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>100</u>)		*	52.99
Storm sewer (no. linear ft.: <u>100</u>)		*	52.99
Water service (no. linear ft.: <u>100</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)	4	20.31	81.24
Backflow preventer	4	43.68	174.72
Backwater valve	1	20.31	20.31
Clothes washer	5	20.31	101.55
Dishwasher	102	20.31	2,071.62
Drinking fountain	2	20.31	40.62
Ejectors/sump	3	20.31	60.93
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	33	20.31	670.23
Garbage disposal		20.31	
Hose bib	12	20.31	243.72
Ice maker	5	20.31	101.55
Interceptor/grease trap	1	20.31	20.31
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)	20	20.31	406.20
Sink/basin/tavatory	226	20.31	4,590.06
Tub/shower/shower pan	109	20.31	2,213.79
Urinal	2	20.31	40.62
Water closet	113	20.31	2,295.03
Water heater/expansion tank	6	20.31	121.86
Water meter pvt	1	20.31	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: Beverage machines	2	20.31	40.62
Subtotal			13,494.57
Minimum permit fee			
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		3,323.75
	State surcharge (12% of permit fee)		
TOTAL PERMIT FEE			15,135.99

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: 5-2-19	Permit No.: B2019-1813
Date Issued: 5-2-19	By: ML
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 type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7860 SW Hall Boulevard	
City/State/ZIP: Beaverton, Oregon 97008	
Suite/bldg./apt. no.: along walk near 5	Project name: Crescent Ridge
Cross street/directions to job site: Tesla Terrace	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace 1/2" irrigation DCVA (back-flow) located to the right of swimming pool and sidewalk near Apartment #5	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Cambridge Real Estate Services	
Address: PO Box 2968	
City/State/ZIP: Portland, Oregon 97208	
Phone: (503) 450-0230	Fax: (503) 450-0240
E-mail: jnelson@cambridgeres.com	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Enstrom Landscape Management, Inc.	
Contact name: Patrick Enstrom	
Address: 13300 SW Galbreath Drive	
City/State/ZIP: Sherwood, Oregon 97140	
Phone: (503) 260-4807	Fax: (503) 625-1285
E-mail: enstrom.landscape@frontier.com	
CONTRACTOR	
Business name: Enstrom Landscape Management, Inc.	
Address: 13300 SW Galbreath Drive	
City/State/ZIP: Sherwood, Oregon 97140	
Phone: (503) 260-4807	Fax: (503) 625-1285
E-mail: same as above	Plumbing lic.: n/a
CCB lic.: LCB # 7308	City or metro lic. no.: Metro 7447
Authorized signature:	Date: 05/02/19
Print name: Patrick L Enstrom	

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

RECEIVED	
Date Received: 02/15/2019	Permit No.: B2019-0657
Date Issued: 5-2-19	By: <i>MK</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

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: 17401 SW Dotterel Lane	
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.: 183
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 (<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	1	20.31	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	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: \$ <u>0</u>)		.	
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 prv		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			\$390.13

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-19-00122

Approval Code: 08677G 5/1/2019 6:09 pm

E-mailed To: plumbing@prodrainpdx.com

32019-1806

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: 11710 SW CORBY DR	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: ADI Water Service	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S103BA01700	
DESCRIPTION OF WORK	
Install 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"/> 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			
Expansion tank	1	\$20.31	\$20.31
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Pressure reducing valve	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$3.03
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

OFFICE USE ONLY	
Date Received: 5-2-19	Permit No.: B2019-1811
Date Issued: 5-2-19	By: [Signature]
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: 10040 SW Heather LN	
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 approx 40ft.	
<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: NW Home Services LLC	
Contact name: John Hernandez	
Address: 13871 Caulfield Rd	
City/State/ZIP: Oregon City, OR 97045	
Phone: 503-722-9599	Fax: 503-722-9779
E-mail: NWHomeService@comcast.net	
CONTRACTOR	
Business name: NW Home Services LLC	
Address: 13871 Caulfield Rd	
City/State/ZIP: Oregon City, OR 97045	
Phone: 503-722-9599	Fax: 503-722-9779
E-mail: NWHomeService@comcast.net	Plumbing lic.: PB 216
CCB lic.: 172358	City or metro lic. no.:

Authorized signature: **[Signature]**

Print name: **John Hernandez** Date: **5-2-19**

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 (_____ 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.: 40)		*	
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			\$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

BLDG 4



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: 5/1/09	Permit No.: B2019-1785
Date Issued: 5/1/09	By: CUC
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: 12140 SW WALDEN LANE	
City/State/ZIP: BEAVERTON OR 97008	
Suite/bldg./apt. no.:	Project name: REDWOOD CREEK HPIS
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 HC	
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: BRAD@CROMWELLINC.COM	Plumbing lic.: 34-167 PB
CCB lic.: 44712	City or metro lic. no.: 00188167

Authorized signature:	Date:
Print name:	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		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/tavatory	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			
Check for Plan Review Plan review (25% of permit fee)			213.26
State surcharge (12% of permit fee)			102.36
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
 # 1000.161

CONTRACTOR BUSINESS INCREASE 11.4%

B1119 41



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: 5/11/19	Permit No.: B2019-1780
Date Issued: 5/11/19	By: COL
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: 12164 SW WALDEN LANE	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: REDWOOD LAKE HHS
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
interior plumbing	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: COMMONS 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: Billmark@CromwellInc.com	Plumbing lic.: 34-167 PB
CGB lic.: 44712	City or metro lic. no.: 00188167

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	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	12	20.31	243.72
Tub/shower/shower pan	12	20.31	243.72
Urinal		20.31	
Water closet		20.31	
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			995.19
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		248.80
State surcharge (12% of permit fee)			119.42
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

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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: <u>5/1/19</u>	Permit No.: <u>50319-1791</u>
Date Issued: <u>5/1/19</u>	By: <u>[Signature]</u>
Payment Type: <u>VISA</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>8532 SW Apple Way #5556</u>	
City/State/ZIP: <u>Beaverton, OR 97225</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>Beaverton Hillsdale Hwy 17 pedicure chairs, 9 floor sinks, 2 hand sinks</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Installing new plumbing for Salon / restroom</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 Co.</u>	
Address: <u>3100 SW Elmwood St</u>	
City/State/ZIP: <u>Portland, OR 97223</u>	
Phone: <u>503 522 2725</u>	Fax: <u>503 542 2639</u>
E-mail:	Plumbing. lic.: <u>PB 815</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 (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	2	43.68	87.36
Backwater valve		20.31	
Clothes washer	1	20.31	20.31
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	9	20.31	182.79
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	4	20.31	81.24
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: <u>Pedicure Chairs</u>	17	20.31	345.27
Subtotal			757.54
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			90.9160
TOTAL PERMIT FEE			848.50

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: Khoi Nguyen Date: 4-25-19



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:	Permit No. B 2019-1784
Date Issued: 5/1/2019	<i>AW</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: 12010 SW Baker Loop	
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	
Backflow device for irrigation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Hillcrest Custom Homes	
Address: 16460 SW Snowy Owl	
City/State/ZIP: Beaverton, OR 97007	
Phone:	Fax:
E-mail: hillcrest_homes@msn.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: TruScapes, LLC	
Contact name: Stacey Whitfield	
Address: 7800 NE Walker Rd	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 707-0213	Fax:
E-mail: stacey@truscapes.com	
CONTRACTOR	
Business name: TruScapes, LLC	
Address: 7800 NE Walker Rd.	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 707-0213	Fax:
E-mail: stacey@truscapes.com	Plumbing lic.:
CCB lic.: LLC# 7962	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	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 prv		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: *Stacey Whitfield*

Print name: Stacey Whitfield Date: 04/30/19

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:	5/1/2019	Permit No. B2019-1783
Date Issued:	5/1/2019	ML
		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 bulder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12012 SW Baker Loop	
City/State/ZIP: Beaverton, OR 97008	
Suble/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Backflow device for irrigation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Hillcrest Custom Homes	
Address: 16460 SW Snowy Owl	
City/State/ZIP: Beaverton, OR 97007	
Phone:	Fax:
E-mail: hillcrest_homes@msn.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: TruScapes, LLC	
Contact name: Stacey Whitfield	
Address: 7800 NE Walker Rd	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 707-0213	Fax:
E-mail: stacey@truscapes.com	
CONTRACTOR	
Business name: TruScapes, LLC	
Address: 7800 NE Walker Rd.	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 707-0213	Fax:
E-mail: stacey@truscapes.com	Plumbing lic.:
CCB lic.: LLC# 7962	City or metro lic. n6.:

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/tlavatory		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: Stacey Whitfield Date: 04/30/19

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: 5-16-19	Permit No.: B2019-2110
Date issued: 5-16-19	By: HW
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: 3610 SW Singletree Dr.	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: Barnum
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install backflow for sprinkler system.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lewis Landscape Services	
Address: 21500 NW Farm Park Dr.	
City/State/ZIP: Hillsboro OR 97124	
Phone:	Fax:
E-mail: office2@landscape.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Lewis Landscape	
Contact name: Jim Lewis	
Address: 21500 NW Farm Park Dr.	
City/State/ZIP: Hillsboro OR 97124	
Phone: 503 524 3079	Fax:
E-mail: office2@lewislandscape.com	
CONTRACTOR	
Business name: Lewis Landscape Services	
Address: 21500 NW Farm Park Dr.	
City/State/ZIP: Hillsboro OR 97124	
Phone:	Fax:
E-mail:	Plumbing lic.:
CCB lic.: LCB: 8112	City or metro lic. no.: 9303me10
Authorized signature:	Date: 5/14/19
Print name: Jim Lewis	Date: 5/14/19

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	
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
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



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-19-00143

Approval Code: 56642G 5/15/2019 10:09 pm

E-mailed To: efrankgolfing@comcast.net

B2019-2098

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: 16525 SW ESTUARY DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site: SW Delta Drive off of NW Walker Rd	
Tax map/parcel no.: 1S106AD06000	
DESCRIPTION OF WORK	
there is replacement, moving and adding of fixtures in the complete house.	
APPLICANT	
Name: Earl Frank	
Phone: 503-648-1855	Fax: 503-648-2765
Email:	
CONTRACTOR	
Plumb lic. no.: 34-308PB	CCB lic. no.: 104311
Business Name: AAPPLE PLUMBING INC	
Contact:	
Address: 31480 NW HORNECKER RD	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036481855	Fax:
Email:	
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
Clothes washer	3	\$20.31	\$60.93
Garbage disposal	1	\$20.31	\$20.31
Ice maker	1	\$20.31	\$20.31
Sink/basin/lavatory	8	\$20.31	\$162.48
Tub/shower/shower pan	3	\$20.31	\$60.93
Water closet	3	\$20.31	\$60.93
Water heater	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$426.51
State surcharge (12% of permit total)			\$51.18
TOTAL PERMIT FEE			\$477.69

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.

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

B2019-2092
Residential Plumbing Authorization To Begin Work

05350-BPB-19-00142

Approval Code: 040396 5/15/2019 11:28 am

E-mailed To: eagleplumbing@integra.net

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: 13355 SW COTTONTAIL LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 13355 SW Cottontail	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133AC04300	
DESCRIPTION OF WORK	
Plumbing for remodel of Master Bath	
APPLICANT	
Name: Carl Cross	
Phone: 5036508703	Fax: 5036508720
Email:	
CONTRACTOR	
Plumb lic. no.: 3-154PB	CCB lic. no.: 47914
Business Name: EAGLE PLUMBING ENTERPRISES INC	
Contact:	
Address: 13801 S FORSYTHE RD	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5036508703	Fax:
Email: eagleplumbing@qwest.net	
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	2	\$20.31	\$40.62
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$101.55
State surcharge (12% of permit total)			\$12.19
TOTAL PERMIT FEE			\$113.74

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.



Theodore Seeber

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: <i>5/16/19</i>	Permit No.: <i>32019-2104</i>
Date Issued:	By: <i>CJL</i>
Payment Type: <i>USA</i>	

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: <i>5470 SW Erickson Ave.</i>	
City/State/ZIP: <i>Beaverton, OR 97005</i>	
Suite/bldg./apt. no.:	Project name: <i>Theodore Seeber</i>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<i>50' Burst from property to sidewalk sanitary sewer</i>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <i>Theodore & Shannon Seeber</i>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <i>Treble Seven LLC dba 3 Mountains</i>	
Contact name: <i>Faelynn Erhardt</i>	
Address: <i>5304 N Albina Ave</i>	
City/State/ZIP: <i>Portland, OR 97217</i>	
Phone: <i>503-670-1342</i>	Fax:
E-mail: <i>permits@3mountainsplumbing.com</i>	
CONTRACTOR	
Business name: <i>Treble Seven LLC dba 3 Mountains Plumbing</i>	
Address: <i>same as applicant</i>	
City/State/ZIP:	
Phone: <i>503-670-1342</i>	Fax:
E-mail:	Plumbing lic.: <i>8878</i>
CCB lic.: <i>109499</i>	City or metro lic. no.: <i>8878</i>
Authorized signature: <i>[Signature]</i>	
Print name: <i>Faelynn Erhardt</i>	Date: <i>5-8-19</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.: <i>0 50</i>)	<i>1</i>	*	
Storm sewer (no. linear ft.: <i>0</i>)		*	
Water service (no. linear ft.: <i>0</i>)		*	
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: \$ <i>0</i>)		*	
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: 5-16-19	Permit No.: B2019-2099
Date Issued: 5-16-19	By: TKH
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: 10700 SW Oriole Cir	
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	
converting drop in tub to a free standing tub	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Sandra Hoppenrat	
Address: 10700 SW Oriole Cir	
City/State/ZIP: Beaverton, OR 97007	
Phone: (971) 678-4335	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: 05/15/19

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		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	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: 5-16-19	Permit No.: B2019-2095
Date Issued: 5-16-19	By: [Signature]
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: 11550 SW Baker St.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: lawn sprinkler system
Cross street/directions to job site: SW Queen Ln.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
back flow preventer for a lawn sprinkler system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Jesse Parry	
Address: 31030 SW Sandy Ct.	
City/State/ZIP: Wilsonville, OR 97070	
Phone: (503) 519-0791	Fax:
E-mail: jesse.parry@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: Home Owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

Authorized signature: Jesse Parry	Date: 5/16/19
Print name: Jesse Parry	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		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 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



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-19-00140

Approval Code: 059963 5/14/2019 4:53 pm

E-mailed To: JDENNIS@ARS.COM

B2019-2073

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: 12460 SW DAVIES RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: WHALEN	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BB08200	
DESCRIPTION OF WORK	
APPROX 50 FT EXTERIOR SANITARY SEWER REPLACEMENT ON PROPERTY BY BURST METHOD ALEC WHALEN	
APPLICANT	
Name: JOYCE DENNIS	
Phone: 5038503100	Fax: 9012719706
Email:	
CONTRACTOR	
Plumb lic. no.: 34-168PB	CCB lic. no.: 127325
Business Name: AMERICAN RESIDENTIAL SERVICES LLC	
Contact:	
Address: 965 RIDGE LAKE BLVD SUITE 201	
City/State/ZIP: MEMPHIS, TN 38120	
Phone: 9012719700	Fax: 9012719706
Email: mfrederick@ars.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"/> 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	<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		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - 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 Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00141

Approval Code: 01408D 5/15/2019 8:50 am

E-mailed To: service@powerplumbingco.com

32019-2087

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: 9755 SW BARNES RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 19-064	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S102CA00400	
DESCRIPTION OF WORK	
TENANT IMPROVEMENT, SUITE 210 OREGON FORESTRY RESOURCES INSTITUTE	
APPLICANT	
Name: Josh Crume	
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"/> 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
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.



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: 5-15-19	Permit No.: B2019-2084
Date Issued: 5-15-19	By: ML
Payment Type: AMX	

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: 15901 SW Jenkins Rd	
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Costco
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S105CC004	

DESCRIPTION OF WORK	
plumbing work for freshline remodel	

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: BILL STANFIELD	
Address: 15901 SW JENKINS ROAD	
City/State/ZIP: BEAVERTON OR 97006	
Phone:	Fax:
E-mail:	

<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Refrigeration Unlimited LLC	
Contact name: Erin Manners	
Address: 5102 20th Street East #102	
City/State/ZIP: Fife, WA 98424	
Phone: (253) 474-3100	Fax: (253) 474-4039
E-mail: emanners@ru-inc.com	

CONTRACTOR	
Business name: D&F Plumbing	
Address: 4636 N Albina ave.	
City/State/ZIP: Portland OR 97217	
Phone: (503) 282-0993	Fax:
E-mail: randy@d-f-plumbing.com	Plumbing. lic.: 26-23 PB
CCB lic.: 465	City or metro lic. no.:

Authorized signature:

Print name: **Erin Manners** Date: **05/13/19**

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	25	20.31	507.75
Floor drain/floor sink/hub/ primer	39	20.31	792.09
Garbage disposal		20.31	
Hose bib	3	20.31	60.93
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	15	20.31	304.65
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	4	20.31	81.24
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			1,665.42
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			199.85
TOTAL PERMIT FEE			\$1,956.26

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: 5-14-19	Permit No.: B2019-2065
Date Issued: 5-14-19	By: [Signature]
Payment Type: MC	

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: 11720 SW 14th ST	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Re worked per plans submitted	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Basem Hadeed	
Address: 4279 SW Eastwood	
City/State/ZIP: Gresham OR 97080	
Phone: 503.317.6827	Fax:
E-mail: zacc@zacc.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: TBS LLC	
Contact name: Basem Hadeed	
Address: 13511 SE Division ST.	
City/State/ZIP: Portland OR	
Phone: 503.317.6827	Fax:
E-mail:	
CONTRACTOR	
Business name: Zaccas Carpets OWNER	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	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	X	20.31	
Dishwasher	X	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	X	20.31	
Urinal	X	20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe	X	144.95	
Multi-family/commercial re-pipe (first 20 fixtures)	X	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			230.59

Authorized signature: **Basem Hadeed**

Print name: **B H** Date: **5-14-19**

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-19-00139

Approval Code: 388668 5/13/2019 12:11 pm

E-mailed To: admin@creeksapedesign.com

32019-2020

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: 6670 SW LOMBARD AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Landscape & Irrigation	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122BD04500	
DESCRIPTION OF WORK	
Landscape and Irrigation	
APPLICANT	
Name: CREEKSCAPE DESIGN LLC Gutierrez	
Phone: 5035725589	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8718	CCB lic. no.:
Business Name: CREEKSCAPE DESIGN LLC	
Contact: CREEKSCAPE DESIGN LLC	
Address: 4305 SW 185TH AVE	
City/State/ZIP: ALOHA, OR 97078	
Phone: (503) 572-5589	Fax:
Email: info@creeksapedesign.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			
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.

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-19-00135

BZ09-1952 Approval Code: 07993B 5/9/2019 9:49 am

E-mailed To: flow-riteplumbing@live.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: 217 SW 105TH TER	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S103AA07900	
DESCRIPTION OF WORK	
bathroom and laundry remodel	
APPLICANT	
Name: Colleen Pe'a	
Phone: 503-258-7352	Fax: 503-214-8423
Email:	
CONTRACTOR	
Plumb lic. no.: PB1194	CCB lic. no.: 196936
Business Name: AKA ENTERPRISES INC	
Contact:	
Address: 19902 SW JAY ST	
City/State/ZIP: BEAVERTON, OR 97003	
Phone: 5032587352	Fax: 5032148423
Email: flow-riteplumbing@live.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	2	\$20.31	\$40.62
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.

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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00132

B2019-1936

Approval Code: 07016G 5/8/2019 12:32 pm

E-mailed To: deborah@modernplumbing.us

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4470 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 1	
Project Name: Phase 5	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC09800	
DESCRIPTION OF WORK	
replace water and sewer lines for entire building	
APPLICANT	
Name: Deborah George	
Phone: 5036916166	Fax: 5036916771
Email:	
CONTRACTOR	
Plumb lic. no.: 34-250PB	CCB lic. no.: 87906
Business Name: D & D ACQUISITIONS INC	
Contact:	
Address: 11120 SW INDUSTRIAL WAY, BLD 9-3	
City/State/ZIP: TUALATIN, OR 97062	
Phone: 5036916166	Fax: 5036916771
Email: modplumb@pacifier.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		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
Multi-family/commercial re-pipe (1st 20 fixtures)	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 Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

32019-1979

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00136

Approval Code: 54347G 5/9/2019 3:43 pm

E-mailed To: jason@oasis-plumbing.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12725 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Site Address: 11350 SW Canyon Rd Beaverton, OR.	
APPLICANT	
Name: Jason Teece	
Phone: 503-557-5555	Fax: 503-212-0165
Email:	
CONTRACTOR	
Plumb lic. no.: PB96	CCB lic. no.: 169234
Business Name: OASIS PLUMBING INC	
Contact:	
Address: 11177 S ALLEN CT	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5033510743	Fax: 5032120165
Email: jason@oasisplumbing.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
Fixture or Item			
Ejectors/sump	1	\$20.31	\$20.31
Interceptor/grease trap	1	\$20.31	\$20.31
Sink/basin/lavatory	1	\$20.31	\$20.31
Water heater	1	\$20.31	\$20.31
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$187.22
State surcharge (12% of permit total)			\$22.47
TOTAL PERMIT FEE			\$209.69

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.

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

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00133

B2019-1946

Approval Code: 078592 5/9/2019 9:00 am

E-mailed To: duanew@dennis7dees.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: 12700 SW TRIGGER DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Whisman	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128DA04700	
DESCRIPTION OF WORK	
install backflow preventer	
APPLICANT	
Name: Duane Wilson	
Phone: 5037777777	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB511	CCB lic. no.: OLCB 5009
Business Name: DENNIS SEVEN DEES LANDSCAPING INC	
Contact:	
Address: 7355 SE JOHNSON CREEK BLVD	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5037777777	Fax: 5037772399
Email: scottt@dennis7dees.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"/> Vacuum drainage waste and vent 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			
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.

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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00134

B2019-1947

Approval Code: 119090 5/9/2019 9:09 am

E-mailed To: rebelv@mrroooterportland.com

TYPE OF WORK			
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement		
CATEGORY OF CONSTRUCTION			
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION			
Job Address: 6096 SW VALLEY AVE			
City/State/ZIP: BEAVERTON, OR 97008			
Suite/bldg./apt.no.:			
Project Name:			
Cross Street/directions to job site:			
Tax map/parcel no.: 1S121AB01900			
DESCRIPTION OF WORK			
Replace up to 30 feet of sewer line in crawl space.			
APPLICANT			
Name: Rebel Vaughn			
Phone: 5036535301	Fax: 5036535376		
Email:			
CONTRACTOR			
Plumb lic. no.: 3-434PB	CCB lic. no.: 138941		
Business Name: FERREE ASSOCIATES LLC			
Contact:			
Address: PO BOX 789			
City/State/ZIP: GLADSTONE, OR 97027			
Phone: 5036535301	Fax: 5036535376		
Email: stevef@mrroooterportland.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
Sewer			
Sanitary sewer - 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.



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: 5/10/2019	Permit No. 52019-5854
Date Issued: 5/10/2019	By: [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 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: SW 75th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: 75th Terrace Subdivisio
Cross street/directions to job site: SW Canyon Ln and SW 75th Terrace	
Subdivision:	Lot no.: 4
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Sylvan West Estates LLC	
Address: 333 S. State St V-146	
City/State/ZIP: Lake Oswego, OR	
Phone: 503-922-9055	Fax:
E-mail: hillcrest_homes@msn.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Sylvan West Estates LLC	
Contact name: Chris Boerste - Makana Homes and Consulting LLC	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Rome Plumbing	
Address: 17295 SW Edy Rd	
City/State/ZIP: Sherwood, OR	
Phone: 503-407-9616	Fax: 503-625-1452
E-mail: romeplumbing@hotmail.com	Plumbing. lic.: 34-265PB
CCB lic.: 96346	City or metro lic. no.:
Authorized signature: Rich Rome	Date: 1/18/2019
Print name: Rich Rome	Date: 1/18/2019

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
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

COB Revision/Tracking Number

REV 19-024

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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:	5/10/2019	Permit No.:	B2018-5854
Date Issued:	5/10/2019	By:	[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 builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: SW 75th Terrace	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: 75th Terrace Subdivisio
Cross street/directions to job site: SW Canyon Ln and SW 75th Terrace	
Subdivision: West Sylvan Estates	Lot no.: 4
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Sylvan West Estates LLC	
Address: 333 S. State St V-146	
City/State/ZIP: Lake Oswego, OR	
Phone: 503-922-9055	Fax:
E-mail: hillcrest_homes@msn.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Sylvan West Estates LLC	
Contact name: Chris Boerste - Makana Homes and Consulting LLC	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Elkhorn Construction LLC	
Address: Po Box 2061	
City/State/ZIP: Sandy OR	
Phone: 503-880-4388	Fax:
E-mail: elkhorncon@aol.com	Plumbing. lic.: PB2025
CCB lic.: 210544	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		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)		0
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature:

Print name: **Shani Thompson** Date: **11/8/19**

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

* See Fee Schedule

506-67



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. 52019-1950
Date Issued: 01/01/2019	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 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: 4580 SW Watson Ave	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Whole Bowl
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Plumbing TI of existing space.	
<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: Evolution Plumbing LLC	
Contact name: Shaina Pasi	
Address: 7210 NE 47th Ave	
City/State/ZIP: Portland, OR 97218	
Phone: (503) 655-3388	Fax: (503) 305-8373
E-mail: shaina.pasi@evoplumbing.net	
CONTRACTOR	
Business name: Evolution Plumbing LLC	
Address: 7210 NE 47th Ave	
City/State/ZIP: Portland, OR 97218	
Phone: (503) 655-3388	Fax: (503) 305-8373
E-mail: same as above	Plumbing. lic.: PB834
CCB lic.: 189876	City or metro lic. no.: Metro 10266

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	3	20.31	60.93
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap	1	20.31	20.31
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		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:		20.31	
Subtotal			121.86
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			14.62
TOTAL PERMIT FEE			\$136.48

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: Shaina Pasi Date: 05/08/19



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

RECEIVED	
Date Received: 02/27/2019	Permit No.: B2019-0767
Date Issued: 3/8/2019	By: <i>[Signature]</i>
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: 17357 SW Dotterel Lane	
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.: 182
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

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			\$390.13

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: *Cliff Bowman*

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



Plumbing Permit Application

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

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

RECEIVED

Date Received: 05/08/2019	Permit No.: B2019-1918
Date Issued: 5-8-19	By: MLL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: MC	

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: 1088 NW Turnberry Terr	
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Watson - 32207
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1N132BC03800	
DESCRIPTION OF WORK	
Install sump pump	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Gale Watson	
Address: 1088 NW Turnberry Terr	
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.:

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: 05/07/19



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:	Permit No. 52019-1903
Date Issued: 5/7/2019	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: 12305 SW Horizon Blvd., Bldg J	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.: Ste. 15	Project name: Stretchlabs
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Plumbing system for TI	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: PMSI LLC	
Contact name: Brandy Solano	
Address: 21195 NW Evergreen Pkwy., Ste. 204	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 466-2222	Fax: (503) 466-2211
E-mail: bsolano@msi-systems.com	
CONTRACTOR	
Business name: PMSI LLC	
Address: 21195 NW Evergreen Pkwy., Ste. 204	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 466-2222	Fax: (503) 466-2211
E-mail: bsolano@msi-systems.com	Plumbing, lic.: 34-434PB
CCB lic.: 158286	City or metro lic. no.: 7928

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	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	1	20.31	20.31
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:		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: *Brandy Solano*

Print name: Brandy Solano Date: 5-7-19



Plumbing Permit Application

City of Beaverton Community Development
 PO Box 4755, Beaverton, OR 97078
 Phone: (503) 528-2403; Fax: (503) 526-2550
 Internet address: www.beavertonoregon.gov

OFFICE USE ONLY	
Date Received:	Permit No. 152019-1892
Date Issued: 5/7/2019	Payment Type:

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/iteration/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: 10657 SW Beaverton Hillsdale Hwy	
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name: chick-fil-a
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Backflow for Irrigation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Chick-fil-a	
Address: 10657 SW Beaverton Hillsdale Hwy	
City/State/ZIP: Beaverton OR 97005	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Living color landscape	
Contact name: Jean Ingle	
Address: PO Box 514	
City/State/ZIP: Wilsonville OR 97070	
Phone: 503-678-3364	Fax: 503-678-5981
E-mail:	
CONTRACTOR	
Business name: Living color / Jean Ingle	
Address: PO Box 514	
City/State/ZIP: Wilsonville OR 97070	
Phone: 503-710-7475	Fax: 503-678-5981
E-mail:	Plumbing lic.:
CCB lic.: 7311	City or metro lic. no.:
Authorized signature: Jean Ingle	
Print name: Jean Ingle	Date: 5-6-19

FEE SCHEDULE			
For special information, use check/dst.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		266.20	
SFR (2) bath		308.12	
SFR (3) bath		340.08	
Each additional bath/kitchen		31.98	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		13.86	
Drywell, leach line, or trench drain		13.86	
Footing drain (no. linear ft. _____)		*	
Manufactured home utilities		13.86	
Rain drain connector		13.86	
Sanitary sewer (no. linear ft. _____)		*	
Storm sewer (no. linear ft. _____)		*	
Water service (no. linear ft. _____)		*	
Fixture or item			
Absorption valve (water hammer)		13.86	
Backflow preventer	1	29.81	29.81
Backwater valve		13.86	
Clothes washer		13.86	
Dishwasher		13.86	
Drinking fountain		13.86	
Ejectors/sump		13.86	
Fixture/sewer cap		13.86	
Floor drain/floor sink/hub/ primer		13.86	
Garbage disposal		13.86	
Hose bib		13.86	
Ice maker		13.86	
Interceptor/grease trap		13.86	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		13.86	
Sink/basin/lavatory		13.86	
Tub/shower/shower pan		13.86	
Urinal		13.86	
Water closet		13.86	
Water heater/expansion tank		13.86	
Water meter pvt		13.86	
1&2 family dwelling re-pipe		99.00	
Multi-family/commercial re-pipe (first 20 fixtures)		99.00	
Multi-family/commercial re-pipe ea. fixture over 20		6.60	
Other:		13.86	
Subtotal			
Minimum permit fee			66.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			7.92
TOTAL PERMIT FEE			73.92

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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00131

Approval Code: 03670G 5/6/2019 3:55 pm

E-mailed To: install@3mountainsplumbing.com

B2019-1879

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: 12725 SW SCOUT DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Sue Scott	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128DA04600	
DESCRIPTION OF WORK	
50 Gallon Electric Water Heater Replacement	
APPLICANT	
Name: Taira Stronach	
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"/> 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
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



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

Commercial Plumbing Authorization To Begin Work

B2019-18002

05350-BPB-19-00130

Approval Code: 05138G 5/6/2019 11:48 am

E-mailed To: PLUMBING@APOLLODRAIN.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: 6155 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AA00103	
DESCRIPTION OF WORK	
REPLACE 20 GALLON PER MINUTE GREASE INTERCEPTOR UNDER 3 COMPARTMENT SINK	
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
Fixture or Item			
Interceptor/grease trap	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.



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: 5/16/19	Permit No.: 2019-1876
Date Issued: 5/16/19	By: CASEY L.
	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: 12325 SW STILLWELL LANE	
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	
shower	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: LESYA TOWNSEND	
Address: as above	
City/State/ZIP:	
Phone: 503-574-2204	Fax:
E-mail: lesya.9126@yahoo.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: same	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

Authorized signature: *Lesya Townsend*

Print name: LESYA TOWNSEND Date: 5/16/19

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.: _____)		*	
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	X	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

REV

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Plumbing Permit Application

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

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

Date Received:	Permit No.:
Date Issued: 04/18/2019	By: MLL B2018-4988
5-3-19 CITY OF BEAVERTON BUILDING DIVISION	
	Payment Type: Check

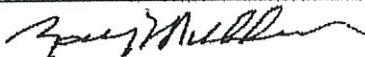
TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> 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: 17229 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 HT	Lot no.: 76
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland, OR 97209	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Edward Mullen Plumbing	
Address: 1601 SE River Rd #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing. lic.: 34-260PB
CCB lic.: 92689	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	1	448.20	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	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 checked="" 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

Authorized signature:



Print name: **Ray Mullen**

Date: 4/16/19

Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Fax: (503) 526-2550

Phone: (503) 526-2222

http://www.beavertonoregon.gov

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

Date Received:	Permit No.:
Date Issued: 04/18/2019	By: MK B2018-4988
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: 17229 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.: 76
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethhomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethhomesnw.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: 4/16/19

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
 Fax: (503) 526-2550
 (503) 526-2222
 BeavertonOregon.gov

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

RECEIVED

Date Received: 04/18/2019	Permit No.: B2018-4986
Date Issued: 5-3-19	By: <i>MLL</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

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: 17221 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 HT	Lot no.: 74
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland, OR 97209	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Edward Mullen Plumbing	
Address: 1601 SE River Rd #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing. lic.: 34-260PB
CCB lic.: 92689	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	1	448.20	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	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 checked="" type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			6567.47

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: *Ray Mullen*

Print name: **Ray Mullen** Date: 4/16/19

Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Fax: (503) 526-2550

BeavertonOregon.gov

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

RECEIVED

Date Received: 04/18/2019	Permit No.: B2018-4986
Date Issued: 5-3-19	By: <i>MLL</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

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: 17221 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.: 74
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@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: *William O Smith* president

Print name: William O Smith, president Date: 4/16/19

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

COB Revision/Tracking #:

REV

T 19-010

Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Fax: (503) 526-2550

Information (503) 526-2222

BeavertonOregon.gov

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

Date Received:	Permit No.:
Date Issued: 04/18/2019 5-3-19	By: <i>MLL</i> B2018-4987
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

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: 17225 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 HT	Lot no.: 75
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland, OR 97209	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Edward Mullen Plumbing	
Address: 1601 SE River Rd #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing. lic.: 34-260PB
CCB lic.: 92689	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	1	448.20	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	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 checked="" 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

Authorized signature: *Ray Mullen*

Print name: Ray Mullen Date: 4/16/19

Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

3 Fax: (503) 526-2550

ation (503) 526-2222

BeavertonOregon.gov

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

RECEIVED

Date Received: 04/18/2019	Permit No.: B2018-4987
Date Issued: 5-3-19	By: <i>HL</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

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: 17225 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.: 75
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@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

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

Authorized signature: *William O Smith* president

Print name: William O Smith, president Date: 4/16/19



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

Date Received: 5/2/2019	Permit No.: 152019-1808
Date Issued: 5-3-19	By: MZ
Payment Type: VISA	

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 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: 3955 sw murray blvd	
City/State/ZIP: beaverton oregon	
Suite/bldg./apt. no.:	Project name: west end
Cross street/directions to job site: TV Hwy and Murray Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Demolition	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: West End Apartments LLC	
Address: 703 Broadway Street Suite 510	
City/State/ZIP: Beaverton Oregon	
Phone: (971) 237-6673	Fax:
E-mail: alex.walters@polygonhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Northwest Demolition & Dismantling	
Address: PO Box 230819	
City/State/ZIP: Tigard Oregon 97281	
Phone: (503) 638-6900	Fax: (503) 620-1708
E-mail: office@nwdemolition.com	Plumbing. lic.:
CCB lic.: 48263	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	1	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: **Alex Walters**

Date: **04/30/19**



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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00170

Approval Code: 21254G 5/30/2019 12:12 pm

E-mailed To: jason@oasis-plumbing.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2024 SW MERLO CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 126	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108BB01400	
DESCRIPTION OF WORK	
Changing out tub/shower and valve	
APPLICANT	
Name: Jason Teece	
Phone: 503-557-5555	Fax: 503-212-0165
Email:	
CONTRACTOR	
Plumb lic. no.: PB96	CCB lic. no.: 169234
Business Name: OASIS PLUMBING INC	
Contact:	
Address: 11177 S ALLEN CT	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5033510743	Fax: 5032120165
Email: jason@oasisplumbing.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			
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.



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

Residential Plumbing Authorization To Begin Work

B2019-2318

05350-BPB-19-00169

Approval Code: 07394G 5/30/2019 11:32 am

E-mailed To: deborah@modernplumbing.us

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: 13260 SW SARATOGA LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: driscoll	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128DC09000	
DESCRIPTION OF WORK	
remodel with Neil Kelly Co. Remodel kitchen, Hall bath, master bath and grandmas bath. Job will be done in phases.	
APPLICANT	
Name: Deborah George	
Phone: 5036916166	Fax: 5036916771
Email:	
CONTRACTOR	
Plumb lic. no.: 34-250PB	CCB lic. no.: 87906
Business Name: D & D ACQUISITIONS INC	
Contact:	
Address: 11120 SW INDUSTRIAL WAY, BLD 9-3	
City/State/ZIP: TUALATIN, OR 97062	
Phone: 5036916166	Fax: 5036916771
Email: modplumb@pacifier.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	4	\$20.31	\$81.24
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	3	\$20.31	\$60.93
Plumbing Permit Fees			
Subtotal			\$182.79
State surcharge (12% of permit total)			\$21.93
TOTAL PERMIT FEE			\$204.72

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: 5/30/2019	Permit No: B 2019-2314
Date Issued: 5/30/2019	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: backflow
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: 5320 sw 149th ave	
City/State/ZIP: beaverton, oregon 97007	
Suite/bldg./apt. no.:	Project name: backflow for sprinkler
Cross street/directions to job site: 149th and division	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
backflow preventer for sprinkler system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: peter befanti	
Address: 5320 sw 149th ave	
City/State/ZIP: beaverton, oregon 97007	
Phone: (503) 803-6627	Fax:
E-mail: peterbefanti@yahoo.com	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: peter befanti	
Address: 5320 sw149th ave	
City/State/ZIP: beaverton, oregon 97007	
Phone: (503) 803-6627	Fax:
E-mail: peterbefanti@yahoo.com	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	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	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

Authorized signature: *peter befanti*

Print name: peter befanti Date: 05/30/19



Plumbing Permit Application

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

OFFICE USE ONLY

Date Received: 4-4-18	Permit No.: B2018-1466
Date Issued: 5/3/2018	By: [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 builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12115 SW Tesla Terrace	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: Tesla Terrace
Cross street/directions to job site:	
Subdivision:	Lot no.: 5
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New - reissue # B2018-0996	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SAA	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Allison May	
Address: 12700 NW Cornell Rd	
City/State/ZIP: Portland, OR 97229	
Phone: 503-713-6294	Fax:
E-mail: Allison@westwoodhomesllc.com	
CONTRACTOR	
Business name: H & H Mechanical	
Address: 5757 SE Willow Lane	
City/State/ZIP: Milwaukie, OR 97267	
Phone: (503) 975-9787	Fax: (503) 659-2979
E-mail:	Plumbing lic.:
CCB lic.: 178122	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		292.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath	1	380.67	0.00
Each additional bath/kitchen	1	35.16	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
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)		15.25	0.00
Backflow preventer	1	32.79	0.00
Backwater valve		15.25	0.00
Clothes washer		15.25	0.00
Dishwasher		15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/floor sink/hub/ primer		15.25	0.00
Garbage disposal		15.25	0.00
Hose bib		15.25	0.00
Ice maker		15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/lavatory		15.25	0.00
Tub/shower/shower pan		15.25	0.00
Urinal		15.25	0.00
Water closet		15.25	0.00
Water heater/expansion tank	1	15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.90	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.26	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.60
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			\$619.90

Authorized signature: [Signature]

Print name: JUSTINE HAUGUE

Date: 5/3/18

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

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2019-1367
Date Issued: 5/3/2019	By: [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 builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12117 SW Tesla Terrace	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: Tesla Terrace
Cross street/directions to job site:	
Subdivision:	Lot no.: 6
Tax map/parcel no.:	
DESCRIPTION OF WORK	
REISSUE OF Tesla Terrace Lot 14 B2018-0997	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SAA	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Allison May	
Address: 12700 NW Cornell Rd	
City/State/ZIP: Portland, OR 97229	
Phone: 503-713-6294	Fax:
E-mail: Allison@westwoodhomesllc.com	
CONTRACTOR	
Business name: H & H Mechanical	
Address: 5757 SE Willow Lane	
City/State/ZIP: Milwaukie, OR 97267	
Phone: (503) 975-9787	Fax: (503) 659-2979
E-mail:	Plumbing lic.:
CCB lic.: 178122	City or metro lic. no.:

Authorized signature: [Signature]

Print name: DUSTINE HAUGUE Date: 5/3/19

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		292.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath	1	380.67	0.00
Each additional bath/kitchen	1	35.16	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
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)		15.25	0.00
Backflow preventer		32.79	0.00
Backwater valve		15.25	0.00
Clothes washer		15.25	0.00
Dishwasher		15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/floor sink/hub/ primer		15.25	0.00
Garbage disposal		15.25	0.00
Hose bib		15.25	0.00
Ice maker		15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/lavatory		15.25	0.00
Tub/shower/shower pan		15.25	0.00
Urinal		15.25	0.00
Water closet		15.25	0.00
Water heater/expansion tank		15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.90	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.26	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.60
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			\$619.90

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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00171

Approval Code: 030023 5/30/2019 3:59 pm

E-mailed To: dwight@eworksnw.com

B2019-2312

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: 14125 SW ROCHESTER DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC08300	
DESCRIPTION OF WORK	
Replace approx 70 ft of sewer line via hydraulic bursting	
APPLICANT	
Name: Dwight Carlisle	
Phone: 5037196715	Fax: 5039721766
Email:	
CONTRACTOR	
Plumb lic. no.: PB1756	CCB lic. no.: 185781
Business Name: ENVIRONMENTAL WORKS LLC	
Contact:	
Address: 2634 SE STEELE ST	
City/State/ZIP: PORTLAND, OR 97202	
Phone: 5037196715	Fax: 5039721866
Email: ryan@eworksnw.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
Sewer			
Sanitary sewer - 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 Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00168

Approval Code: 029615 5/29/2019 2:57 pm

E-mailed To: mary@craftworkplumbing.com

B2019-2298

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9275 SW ROYAL WOODLANDS DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Sandy Moore	
Cross Street/directions to job site: Jamieson	
Tax map/parcel no.: 1S114DB05900	
DESCRIPTION OF WORK	
remodel bath & kitchen	
APPLICANT	
Name: Mary Kruchoski	
Phone: 5036448698	Fax: 5036445989
Email:	
CONTRACTOR	
Plumb lic. no.: 20-148PB	CCB lic. no.: 79666
Business Name: CRAFTWORK PLUMBING INC	
Contact:	
Address: 7737 SW CIRRUS DR	
City/State/ZIP: BEAVERTON, OR 970085967	
Phone: 5036448698	Fax: 5036445989
Email: POLLARDP@CRAFTWORKPLUMBING.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	Installation of multi-purpose fire sprinkler systems		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Garbage disposal	1	\$20.31	\$20.31
Sink/basin/lavatory	2	\$20.31	\$40.62
Water closet	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$15.40
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

05350-BPB-19-00166

Approval Code: 08524G 5/28/2019 7:49 pm

E-mailed To: fosterplumbinginc@gmail.com

B 2019-2299

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: 16191 NW MISSION OAKS DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CB01600	
DESCRIPTION OF WORK	
Master Bath remodel	
APPLICANT	
Name: Scott Foster	
Phone: 5039512050	Fax: 5034825310
Email:	
CONTRACTOR	
Plumb lic. no.: PB853	CCB lic. no.: 190583
Business Name: FOSTER PLUMBING INC	
Contact:	
Address: 10100 SW EVERGREEN CT	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5039512050	Fax: 5034825310
Email: FOSTERPLUMBINGINC@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"/> 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	2	\$20.31	\$40.62
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$15.40
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00167

Approval Code: 032695 5/29/2019 12:21 pm

E-mailed To: JDENNIS@ARS.COM

B2019-2303

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: 15115 SW GIBRALTAR CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: DEGON	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AB01800	
DESCRIPTION OF WORK	
APPROX 60 FT EXTERIOR WATER SERVICE REPLACEMENT ON PROPERTY ROBERT DEGON	
APPLICANT	
Name: JOYCE DENNIS	
Phone: 5038503100	Fax: 9012719706
Email:	
CONTRACTOR	
Plumb lic. no.: 34-168PB	CCB lic. no.: 127325
Business Name: AMERICAN RESIDENTIAL SERVICES LLC	
Contact:	
Address: 965 RIDGE LAKE BLVD SUITE 201	
City/State/ZIP: MEMPHIS, TN 38120	
Phone: 9012719700	Fax: 9012719706
Email: mfrederick@ars.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
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.

B1009 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: 5/16/2019	Permit No.: B2019-1982
Date Issued: 5/20/2019	By: DA
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: 11921 SW Steamboat	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: REDWOOD LAGAK 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: MANIONS AT REDWOOD CREEK HC	
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: CROWMILL PLUMBING	
Address: 25599 SW. 95th AVE SUITE B	
City/State/ZIP: WILSONVILLE OR. 97070	
Phone: 971-224-6304	Fax: 503-703-0707
E-mail: Brian@crowmillinc.com	Plumbing lic.: 34-167 PB
CGB lic.: 44712	City or metro lic. no.: 00188167

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	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	12	20.31	243.72
Tub/shower/shower pan	12	20.31	243.72
Urinal		20.31	
Water closet		20.31	
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			
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			1,114.61

Authorized signature: _____ Date: _____

Print name: _____ Date: _____

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

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: 5/10/2019	Permit No. B2019-1980
Date Issued: 5/30/2019	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: 11925 SW Steamboat	
City/State/ZIP: BEAVERTON OR 97008	
Suite/bldg./apt. no.:	Project name: REDWOOD LAKE HP15
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: MANIONS 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: 971-224-6304	Fax:
E-mail: Brian.Kennedy@CromwellInc.com	Plumbing lic.: 34-167 PB
CCB lic.: 44712	City or metro lic. no.: 00198167

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 (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			
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			750.86

Authorized signature: *Brian Kennedy*

Print name: **BRIAN KENNEDY** Date: **1/3/2019**

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: B2019-2301
Date Issued: 5/30/2019	By: <i>[Signature]</i>
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: 5425 SW Chestnut Ave	
City/State/ZIP: Beaverton/Oregon/97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Royalwoodlands	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
installation of backflow for residential irrigation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Tim Johnson	
Address: 5425 SW Chestnut Ave	
City/State/ZIP: Beaverton/Oregon/97005	
Phone: (503) 380-4994	Fax:
E-mail: petcrew@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: <i>Same as owner</i>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	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	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

Authorized signature: *[Signature]*

Print name: **Tim Johnson** Date: **05/29/19**

ELECTRONIC SUBMITTAL
SEE I/ LDG 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



RECEIVED

Date Received: 04/25/2019	Permit No.: B2019-1833
Date Issued: 5/29/2019	
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> Construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Repair/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> New 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Existing building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Other builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Address: 12110 SW Terrace	
City: BEAVERTON, OR 97007	
Parcel no.:	Project name:
Directions to job site:	
SOUTH AVE AND SW BARROWS RD	
Section: SOUTH COOPER MT	Lot no.: 176
Description of work:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 35 SW 158TH AVE	
City: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
Email: guerrero@arborhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Name: SK HOFF CONSTRUCTION	
City: SANDRO GUERRERO	
Address: 35 SW 158TH AVE	
City: BEAVERTON, OR 97006	
Phone: (503) 319-6960	Fax: (503) 641-7661
Email: guerrero@arborhomes.com	
CONTRACTOR	
Name: WOLCOTT PLUMBING	
Address: 1075 W HISTORIC COLUMBIA RIVER HWY	
City: TROUTDALE, OR 97060	
Phone: (503) 667-1781	Fax: (503) 667-9891
Email: b@wolcott.com	Plumbing lic.: 26-824PB
City: 12220	City or metro lic. no.: 8082
Signature: <i>Cliff Bowman</i>	
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 prv		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			\$390.13

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: 5/29/2019	Permit No: 52019-2280
Date Issued: 5/29/2019	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: 12675 SW 159th Ct	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Sump pump - correcting installation by others, per Garth Bently	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Wendy Stekloff	
Address: 12675 SW 159th Ct	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 521-9749	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

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 (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: Joel Dirickson

Date:



Plumbing Permit Application

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

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

RECEIVED

Date Received: 04/05/2019	Permit No.: B2019-1376
Date Issued: 5-29-18	By: CLC
CITY OF BEAVERTON BUILDING DIVISION	
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 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 HWY (previous project address 4757 SW 99th Ave.)	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S114ABA05200	
DESCRIPTION OF WORK	
Tenant Improvements - on-site plumbing	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Quattro Development, LLC.	
Address: 110 Jorie Boulevard	
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: Mel Delahoz	
Address: 15895 SW 72nd Ave, Suite 200	
City/State/ZIP: Portland OR 97224	
Phone: (503) 226-1285	Fax:
E-mail: meld@cidainc.com	
CONTRACTOR	
Business name: Joseph Highes Construction	
Address: 11125 SW Barbur Blvd	
City/State/ZIP: Portland OR	
Phone: (503) 624-7100	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	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	5	20.31	101.55
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector	8	20.31	162.48
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 640)		*	211.99
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			476.02
Minimum permit fee			
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		119.01
State surcharge (12% of permit fee)			57.12
TOTAL PERMIT FEE			\$652.15

Authorized signature:

Print name: **Mel Delahoz** Date: **04/03/19**

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-19-00165

Approval Code: 05568G 5/28/2019 11:45 am

E-mailed To: brunerplumbing@me.com

B2019-2274

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: Bailey	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133AC04600	
DESCRIPTION OF WORK	
Rough in new water stub outs for sink and toilet. Replace tub with new 60"X32" Duravit tub and new valve with single outlet; includes new waste and overflow.	
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"/> 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			
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

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
 Fax: (503) 526-2550
 Phone: (503) 526-2222
 www.beavertonoregon.gov

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

RECEIVED

Date Received: 04/26/2019	Permit No.: B2019-1724
Date Issued: 5-28-19	By: CR
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 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: 5620 SW MENLO	
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	
1 Bathroom / 1 Sink	
<input checked="" 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: David Green Construction	
Contact name: David Green	
Address: 429 SW Maple St	
City/State/ZIP: Hillsboro OR	
Phone: 503-201-5837	Fax:
E-mail: dgreen.dgc@gmail.com	
CONTRACTOR	
Business name: Reamac Plumbing	
Address: 430 SW Walnut	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-969-6252	Fax:
E-mail:	Plumbing lic.: 34-389 PB
CCB lic.: 148437	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	X	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	
Tub/shower/shower pan	1	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 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: **DAVID GREEN** Date:

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



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-19-00164

Approval Code: 03113G 5/27/2019 2:55 pm

E-mailed To: install@3mountainsplumbing.com

B2019-2267

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: 6135 SW 150TH AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Grant & Eilene Snodgrass	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AA02600	
DESCRIPTION OF WORK	
Replacing in building drain lines from crawlspace to kitchen and washing machine. Rough In Only.	
APPLICANT	
Name: Taira Stronach	
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"/> 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			
Clothes washer	1	\$20.31	\$20.31
Sink/basin/lavatory	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: 5-24-19	Permit No.: B2019-2042
Date Issued: 5-28-19	By: MK
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: 4590 SW Watson Ave.	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Lionheart Coffee
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Plumbing new core restrooms for Lionheart Coffee.	
<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: Evolution Plumbing LLC	
Contact name: Shaina Pasi	
Address: 7210 NE 47th Ave.	
City/State/ZIP: Portland, OR 97218	
Phone: (503) 655-3388	Fax:
E-mail: Shaina.Pasi@evoplumbing.net	
CONTRACTOR	
Business name: Evolution Plumbing LLC	
Address: 7210 NE 47th Ave.	
City/State/ZIP: Portland, OR 97218	
Phone: (503) 655-3388	Fax:
E-mail: Same as above...	Plumbing lic.: PB834
CCB lic.: 189876	City or metro lic. no.: Metro 10266

Authorized signature:

Print name: **Shaina Pasi** Date: **05/24/19**

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	2	20.31	40.62
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	2	20.31	40.62
Tub/shower/shower pan		20.31	
Urinal	1	20.31	20.31
Water closet	3	20.31	60.93
Water heater/expansion tank	2	20.31	40.62
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			203.10
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			24.37
TOTAL PERMIT FEE			\$227.47

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

BP019-2174

Residential Plumbing Authorization To Begin Work
05350-BPB-19-00148

Approval Code: 769767 5/21/2019 3:43 pm

E-mailed To: admin@creeksapedesign.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6555 SW DALE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Backflow Instal	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AD01800	
DESCRIPTION OF WORK	
Backflow device for irrigation	
APPLICANT	
Name: JUAN GUTIERREZ	
Phone: 5035725589	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8718	CCB lic. no.:
Business Name: CREEKSCAPE DESIGN LLC	
Contact: CREEKSCAPE DESIGN LLC	
Address: 4305 SW 185TH AVE	
City/State/ZIP: ALOHA, OR 97078	
Phone: (503) 572-5589	Fax:
Email: info@creeksapedesign.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.

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

OFFICE USE ONLY	
Date Received: <u>4-17-19</u>	Permit No. <u>15379</u>
Date Issued: <u>5-22-19</u>	By: <u>CR</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>15084 SW Kilchis Ct</u>	
City/State/ZIP: <u>Beaverton OR 97007</u>	
Suite/bldg./apt. no.:	Project name: <u>CAMPBELL ADU</u>
Cross street/directions to job site: <u>152nd Between Hart & Davis</u>	
Subdivision: <u>Brookhaven #2</u>	Lot no.: <u>25 Block 4</u>
Tax map/parcel no.: <u>15120 AB 5300</u>	
DESCRIPTION OF WORK	
<u>New Detached ADU</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>William Campbell</u>	
Address: <u>14775 SW Wheaton Ln</u>	
City/State/ZIP: <u>Beaverton OR 97007</u>	
Phone: <u>503-312-1872</u>	Fax:
E-mail: <u>Bill Bela @ Gmail.com</u>	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Same as owner/Builder</u>	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>N/A</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing lic.:
CCB lic.:	City or metro lic. no.:

Authorized signature: William Campbell
Print name: William Campbell 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	<u>X</u>	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.:____)		*	
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

501.98



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

B2019-2202

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00155

Approval Code: 002016 5/22/2019 3:33 pm

E-mailed To: barbara@rentalrepairs.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: 7620 SW DANIELLE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CA06000	
DESCRIPTION OF WORK	
Moving laundry washing machine box from hallway to the garage.	
APPLICANT	
Name: WADE LOGAN	
Phone: 5033582341	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB333	CCB lic. no.: 163427
Business Name: RENTAL HOUSING MAINTENANCE SERVICES INC	
Contact:	
Address: PO BOX 788	
City/State/ZIP: CANBY, OR 97013	
Phone: 5036782136	Fax: 5036782138
Email: barbara@rentalrepairs.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
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

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

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

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



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

B2019-2199

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00156

Approval Code: 03497G 5/22/2019 3:34 pm

E-mailed To: brunerplumbing@me.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: 5220 SW FRANKLIN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 4	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB01100	
DESCRIPTION OF WORK	
Repipe water supplies for water heater, kitchen sink, auto wash, toilet, tub, and basin in each unit of 4-plex using a combination of PEX and copper stub outs. Includes chrome angle stops and braided supplies and new tub/shower faucet	
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"/> 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
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 Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

82019-2198

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00154

Approval Code: 01235G 5/22/2019 3:27 pm

E-mailed To: brunerplumbing@me.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5220 SW FRANKLIN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 3	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB01100	
DESCRIPTION OF WORK	
Repipe water supplies for water heater, kitchen sink, auto wash, toilet, tub, and basin in each unit of 4-plex using a combination of PEX and copper stub outs. Includes chrome angle stops and braided supplies and new tub/shower faucet. Install 140' water service.	
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 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
Water Service - Each additional 100 feet	1	\$43.68	\$43.68
Plumbing Permit Fees			
Subtotal			\$241.62
State surcharge (12% of permit total)			\$28.99
TOTAL PERMIT FEE			\$270.61

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

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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

B2019-2197

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00153

Approval Code: 00060G 5/22/2019 3:10 pm

E-mailed To: brunerplumbing@me.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5220 SW FRANKLIN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 2	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB01100	
DESCRIPTION OF WORK	
Repipe water supplies for water heater, kitchen sink, auto wash, toilet, tub, and basin in each unit of 4-plex using a combination of PEX and copper stub outs. Includes chrome angle stops and braided supplies and new tub/shower faucet	
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"/> 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
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

2009-2196

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00152

Approval Code: 05525G 5/22/2019 2:58 pm

E-mailed To: brunerplumbing@me.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5220 SW FRANKLIN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 1	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB01100	
DESCRIPTION OF WORK	
Repipe water supplies for water heater, kitchen sink, auto wash, toilet, tub, and basin in each unit of 4-plex using a combination of PEX and copper stub outs. Includes chrome angle stops and braided supplies and new tub/shower faucet	
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"/> 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
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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City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B2019-2191

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00151

Approval Code: 626442 5/22/2019 11:54 am

E-mailed To: Rawarnerplumbing@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: 7620 SW WILSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Wilson Ave	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CA04000	
DESCRIPTION OF WORK	
Rough in and install shower	
APPLICANT	
Name: Jerime Maloney	
Phone: 3607722490	Fax: 3602104739
Email:	
CONTRACTOR	
Plumb lic. no.: 37-521PB	CCB lic. no.: 151329
Business Name: R A WARNER PLUMBING CO INC	
Contact:	
Address: PO BOX 820785	
City/State/ZIP: VANCOUVER, WA 98682	
Phone: 3608960370	Fax:
Email: Rawarnerplumbing@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"/> 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.

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

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



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

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00150

B2019-2187

Approval Code: 01417G 5/22/2019 10:13 am

E-mailed To: jason@oasis-plumbing.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: 5825 SW ARCTIC DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CD01500	
DESCRIPTION OF WORK	
6 rain drains	
APPLICANT	
Name: Jason Teece	
Phone: 503-557-5555	Fax: 503-212-0165
Email:	
CONTRACTOR	
Plumb lic. no.: PB96	CCB lic. no.: 169234
Business Name: OASIS PLUMBING INC	
Contact:	
Address: 11177 S ALLEN CT	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5033510743	Fax: 5032120165
Email: jason@oasisplumbing.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
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Site Utilities			
Storm Sewer - first 100 feet	1	\$52.99	\$52.99
Storm Sewer - Each additional 100 feet	3	\$26.50	\$79.50
Water Service - first 100 feet	1	\$52.99	\$52.99
Water Service - Each additional 100 feet	1	\$43.68	\$43.68
Plumbing Permit Fees			
Subtotal			\$282.15
State surcharge (12% of permit total)			\$33.86
TOTAL PERMIT FEE			\$316.01

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

B2019-2186

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00149

Approval Code: 012223 5/22/2019 8:32 am

E-mailed To: allan@accurateplumbingusa.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: 5370 SW CHERRY AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: kitchen and laundry/shower	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA05900	
DESCRIPTION OF WORK	
new sink and faucet, reuse ex dishwasher, disposer, new shower valve	
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"/> 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			
Dishwasher	1	\$20.31	\$20.31
Garbage disposal	1	\$20.31	\$20.31
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$101.55
State surcharge (12% of permit total)			\$12.19
TOTAL PERMIT FEE			\$113.74

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

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

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



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

B2019-2215

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00157

Approval Code: 133301 5/22/2019 8:30 pm

E-mailed To: kikonlyj@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: 8493 SW CHEVY PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BA05900	
DESCRIPTION OF WORK	
hall bath /r&r tub and valve, r&r water closet on exist rough/r&r 2 lavs/ r&R kit sink and dw	
APPLICANT	
Name: jay jacobs	
Phone: 5037996951	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB123	CCB lic. no.: 170273
Business Name: B & G EXCAVATION & PLUMBING LLC	
Contact:	
Address: 4241 SE 136TH	
City/State/ZIP: PORTLAND, OR 97236	
Phone: 5037612038	Fax: 5038876445
Email: bobo@iinet.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			
Dishwasher	1	\$20.31	\$20.31
Sink/basin/lavatory	3	\$20.31	\$60.93
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$121.86
State surcharge (12% of permit total)			\$14.62
TOTAL PERMIT FEE			\$136.48

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

B2019-2214

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00158

Approval Code: 044260 5/22/2019 9:11 pm

E-mailed To: escobar_landscape@yahoo.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8510 SW 147TH TER	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 101	
Project Name: Backflow replacement	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AD90112	
DESCRIPTION OF WORK	
Backflow replacement	
APPLICANT	
Name: Erick Ramirez	
Phone: 5034877418	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 9383	CCB lic. no.:
Business Name: ESCOBAR LANDSCAPE AND IRRIGATION INC	
Contact: ESCOBAR LANDSCAPE AND IRRIGATION INC	
Address: 10940 SW WILSONVILLE RD APT 44	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5038080632	Fax:
Email: escobar_landscape@yahoo.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			
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.

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

B2019-2018

Commercial Plumbing Authorization To Begin Work

05350-BPB-19-00159

Approval Code: 113253 5/23/2019 9:35 am

E-mailed To: rebelv@mrrooterportland.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7720 SW BEL AIRE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 7	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CD09100	
DESCRIPTION OF WORK	
Repipe 120 feet of interior water line.	
APPLICANT	
Name: Rebel Vaughn	
Phone: 5036535301	Fax: 5036535376
Email:	
CONTRACTOR	
Plumb lic. no.: 3-434PB	CCB lic. no.: 138941
Business Name: FERREE ASSOCIATES LLC	
Contact:	
Address: PO BOX 789	
City/State/ZIP: GLADSTONE, OR 97027	
Phone: 5036535301	Fax: 5036535376
Email: stevef@mrrooterportland.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			
Multi-family/commercial re-pipe (1st 20 fixtures)	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

2019-2230

Residential Plumbing Authorization To Begin Work

05350-BPB-19-00160

Approval Code: 06148G 5/23/2019 12:32 pm

E-mailed To: NOEL@SUNRISESCAPES.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: 6690 SW 153RD AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Janet Cole	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AC01100	
DESCRIPTION OF WORK	
Installation of backflow preventer	
APPLICANT	
Name: SUNRISE LANDSCAPE SERVICES INC Inc.	
Phone: 5035382386	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8663	CCB lic. no.:
Business Name: SUNRISE LANDSCAPE SERVICES INC	
Contact: SUNRISE LANDSCAPE SERVICES INC	
Address: 23750 SW MOUNTAIN CREEK RD	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5035382386	Fax:
Email: NOEL@SUNRISESCAPES.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
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.

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

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