



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-4-19	Permit No.: B2019-4168
Date Issued: 10-4-19	By: [Signature]
	Payment Type: Check

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14900 SW BARROWS
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: CRUMBL
Cross street/directions to job site:	
Subdivision: Progress Ridge	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Fire Alarm Tenant Improvement	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Crumbl	
Address: 14900 SW Barrows	
City/State/ZIP: Beaverton Or 97007	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: T&L Communications, Inc.	
Contact name: Larry Bushaw	
Address: PO Box 87387	
City/State/ZIP: Vancouver, WA 98687	
Phone: 360-737-9725	Fax: 360-737-9648
E-mail: office@tl-communications.com	
CONTRACTOR	
Business name: T&L Communications, Inc.	
Address: PO Box 87387	
City/State/ZIP: Vancouver, WA 98687	
Phone: 360-737-9725	Fax: 360-737-9648
E-mail: office@tl-communications.com	CCB lic. no.: 67787
Electrical lic. no.: 37-428CLE	City or metro lic.: 6981
Supervising electrician signature, required:	
Print name: Larry Bushaw	Date:
Authorized signature:	
Print name: Larry Bushaw	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		168.52	4
Ea. add'l 500 sq. ft. or portion		30.10	
Limited energy, residential (with above sq. ft.)		40.19	2
Limited energy, multi-family residential (with above sq. ft.)		79.41	2
Services or feeders: installation, alteration, and/or relocation			
200 amps or less		100.28	2
201 amps to 400 amps		119.38	2
401 amps to 600 amps		198.56	2
601 amps to 1,000 amps		259.68	2
Over 1,000 amps or volts		597.59	2
Utility reconnect		79.41	1
Temporary services or feeders: installation, alteration, and/or relocation			
200 amps or less		79.41	2
201 amps to 400 amps		110.31	2
401 amps to 600 amps		159.40	2
601 amps to 1,000 amps		195.05	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.69	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		70.25	2
Each add'l branch circuit		3.69	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		79.41	2
Pump or irrigation circle		79.41	2
Sign or outline lighting		79.41	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	79.41	2
Each additional inspection over allowable in any of the above			
Per inspection		70.25	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL		0.00	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		0.00	
TOTAL PERMIT FEE		102.73	

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00860

Approval Code: 002695 10/2/2019 5:53 am

E-mailed To: OLEGPRI@MSN.COM

B2019-4123

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: 9200 SW JAMIESON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Kane's Residence	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114AC01500	
DESCRIPTION OF WORK	
Replace old 200amp panel, install lights in living room, wire-in AC unit, and hot tub.	
APPLICANT	
Name: Oleg Primachenko	
Phone: 5033185170	Fax: 5033185170
Email:	
CONTRACTOR	
Elec lic. no.: C1324	CCB lic. no.: 217825
Business Name: PRIME ELECTRICAL SERVICES LLC	
Contact:	
Address: 3312 BELLA VISTA PL	
City/State/ZIP: VANCOUVER, WA 98683	
Phone: 3603353565	Fax: 5033185170
Email: OLEGPRI@MSN.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received: 10-1-19	Permit No.: B2019-4104
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial <input type="checkbox"/> Accessory building
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 19-71-7026	Job address: 160 SW 167th Ave
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Scarlata
Cross street/directions to job site: 167th and Kattegat Dr	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S106AA13600	
DESCRIPTION OF WORK	
6.1kW rooftop solar PV	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Neil Kelly Co	
Address: 804 N Alberta St	
City/State/ZIP: Portland, OR 97217	
Phone: (503) 335-9218	Fax:
E-mail: zane.goff@neilkelly.com	CCB lic. no.: 1663
Electrical lic. no.: C984	City or metro lic.: 5126S
Supervising electrician signature, required: <i>Richard Methvin</i>	DocuSigned by: _____
Print name: Richard Methvin	Date: 9/30/2019
Authorized signature: <i>Zane Goff</i>	DocuSigned by: _____
Print name: Zane Goff	Date: 9/30/2019

FEE SCHEDULE			
Number of inspections per item (1) Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	115.83
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			115.83
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			13.90
TOTAL PERMIT FEE			\$129.73

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



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

B2019-4127

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00861

Approval Code: 80812G 10/2/2019 11:32 am

E-mailed To: vanguardelectric@gmail.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 checked="" type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14900 SW SCHOLLS FERRY RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Clubhouse Remodel	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DD00100	
DESCRIPTION OF WORK	
Monte Vista - Clubhouse Remodel	
APPLICANT	
Name: Christopher Strange	
Phone: 503-537-5006	Fax: 503-537-5019
Email:	
CONTRACTOR	
Elec lic. no.: 36-104C	CCB lic. no.: 164865
Business Name: VANGUARD ELECTRIC INC	
Contact:	
Address: 3800 MORRIS ST	
City/State/ZIP: NEWBERG, OR 97132	
Phone: 5035375006	Fax: 5035375019
Email: vanguardelectric@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

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

B2019-4128

Residential Electrical Authorization To Begin Work

05350-BEL-19-00862

Approval Code: 040116 10/2/2019 1:01 pm

E-mailed To: peter@dickinsonselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6680 SW DOVER ST	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: Francene Grewe	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA02400	
DESCRIPTION OF WORK	
basement bathroom remodel	
APPLICANT	
Name: Peter Dickinson	
Phone: 5037406100	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1190	CCB lic. no.: 209997
Business Name: P DICKINSON ELECTRIC INC	
Contact:	
Address: 20719 SW LIDO CT	
City/State/ZIP: ALOHA, OR 97078	
Phone: 5037406100	Fax:
Email: PETER@DICKINSONSELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00863

Approval Code: 05874D 10/2/2019 1:44 pm

E-mailed To: lesley.alcoser@iescomm.com

B2019-4129

Form with sections: TYPE OF WORK, CATEGORY OF CONSTRUCTION, JOB SITE INFORMATION AND LOCATION, DESCRIPTION OF WORK, APPLICANT, CONTRACTOR. Includes checkboxes for construction types and fields for address, phone, and email.

Form with sections: PLAN REVIEW, FEE SCHEDULE. Includes checklist for plan review and a table for fee schedule with columns for Description, Qty, Ea, and Total.

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



Renewable Electrical Energy Permit Application

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

Date Received: 10/2/19 **B2019-412**

Date Issued: _____

Payment Type: _____

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Other:
<input type="checkbox"/> Accessory building	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17311 NW Bernard Pl.
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation and hook up of 7.2 kW roof mount solar system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Barbara Dowd	
Address: 17311 NW Bernard Pl.	
City/State/ZIP: Beaverton, OR 97006	
Phone: (808) 284-7372	Fax:
E-mail: kandbdowd@yahoo.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Green Ridge Solar	
Address: 19450 SW Mohave Ct.	
City/State/ZIP: Tualatin, OR 97062	
Phone: (503) 395-1943	Fax:
E-mail: operations@greenridgepower.c	CCB lic. no.: 210450
Electrical lic. no.: C1490	City or metro lic.: 12831
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: George Buliga	Date: 09/16/19
Authorized signature: <i>[Signature]</i>	
Print name: Hilary Conway	Date: 09/16/19

FEE SCHEDULE			
Number of inspections per item (1) Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	115.83
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 918-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			115.83
<input type="checkbox"/> Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			13.90
TOTAL PERMIT FEE			\$129.73

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

Form B70-1005 REV 10/17



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00864

B2019-4132

Approval Code: 045327 10/2/2019 3:28 pm

E-mailed To: gabriellem@nwedison.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: 8826 SW CASCADE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Petsmart Beaverton #1532	
Cross Street/directions to job site: Beaverton Tigard Hwy & SW Cascade Ave	
Tax map/parcel no.: 1S127AD00100	
DESCRIPTION OF WORK	
Interior Lighting Upgrade. 1:1 replacements. No new electrical.	
APPLICANT	
Name: Ole Rodne	
Phone: 4258069200	Fax: 4258067455
Email:	
CONTRACTOR	
Elec lic. no.: C940	CCB lic. no.: 187903
Business Name: INDUSTRIAL LIGHT & ENERGY INC	
Contact:	
Address: 11807 N CREEK PKWY S STE B103	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4258069200	Fax: 4258067455
Email: license@nwedison.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2019-4152

Residential Electrical Authorization To Begin Work

05350-BEL-19-00866

Approval Code: 09757G 10/3/2019 4:26 pm

E-mailed To: service@clackamaselectric.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: 7655 SW HYLAND WAY	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: NWR-Kristoff-20517	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DC01101	
DESCRIPTION OF WORK	
1-temp service.	
APPLICANT	
Name: Scott Johnston	
Phone: 5036322420	Fax: 5036322421
Email:	
CONTRACTOR	
Elec lic. no.: 3-606C	CCB lic. no.: 161923
Business Name: CLACKAMAS ELECTRIC INC	
Contact:	
Address: PO BOX 51	
City/State/ZIP: BEAVERCREEK, OR 97004	
Phone: 5036322420	Fax: 5036322421
Email: donna@clackamaselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Temp services or feeders			
Temp services 200 amps or less	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

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

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

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

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



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

BZ091-4153

Residential Electrical Authorization To Begin Work

05350-BEL-19-00865

Approval Code: 003625 10/3/2019 1:59 pm

E-mailed To: precisionweelectrical@yahoo.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: 8135 SW 158TH PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Becher	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129BA03700	
DESCRIPTION OF WORK	
6- alter circuit remodel	
APPLICANT	
Name: Mike McDonald	
Phone: 5038802754	Fax: 5036581615
Email:	
CONTRACTOR	
Elec lic. no.: C47	CCB lic. no.: 163318
Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC	
Contact:	
Address: 14842 SE REGNER TERRACE	
City/State/ZIP: BORING, OR 97009	
Phone: 5038802754	Fax: 5036581615
Email: PRECISIONNWELECTRICAL@YAHOO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/3/19	Permit No.: 2019-4143
Date Issued:	By: crew
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12875 S.W. CRESCENT RD. #2
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt. no.:	Project name: FRANCHISES
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
CONNECT 1 INTERNALLY ILLUMINATED SET OF CHANNEL LETTERS ON A RAILWAY, ON A CANOPY.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: ROSCOE WESTGATE LLC.	
Address: 1 TOWN CENTER RD. #600	
City/State/ZIP: BOCA RATON, FL 33486	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: MEYER SIGN CO. OF OREGON	
Contact name: Tony McCormick	
Address: 15205 S.W. 74th AVE.	
City/State/ZIP: TIBARO, OR 97224	
Phone: 971-232-5021	Fax:
E-mail: PERMITS@MEYERSIGNCO.COM	
CONTRACTOR	
Business name: MEYER SIGN CO. OF OREGON	
Address: 15205 S.W. 74th AVE.	
City/State/ZIP: TIBARO, OR 97224	
Phone: 971-232-5021	Fax:
E-mail: SAME AS ABOVE	CCB lic. no.: 64014
Electrical lic. no.: 20-190 EJS	City or metro lic.: 1899
Supervising electrician signature, required: [Signature]	
Print name: Tony J. Barclay	Date: 10/2/19
Authorized signature: [Signature]	
Print name: Tony McCormick	Date: 10/2/19

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00847

B2019-4057

Approval Code: 616282 9/26/2019 2:28 pm

E-mailed To: CEPermits@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Sulte/bldg./apt.no.:	
Project Name: AZA 2nd Floor Lab	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
(3) 60A Feeders & (6) Circuits for AZA 2nd Floor Lab	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
<input type="checkbox"/> Six or more residential units in one structure			
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	3	\$115.83	\$347.49
Branch circuits			
Branch circuits with service or feeder each circuit	6	\$4.26	\$25.56
Electrical Permit Fees			
Subtotal			\$373.05
State surcharge (12% of permit total)			\$44.77
TOTAL PERMIT FEE			\$417.82

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

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

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

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



City Of Beaverton

12726 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00846

Approval Code: 08660G 9/26/2019 12:49 pm

E-mailed To: Dreamhouseelectric@gmail.com

B2019-4050

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: 15010 SW TELLURIDE TER	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Gerlach Residence	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AA08300	
DESCRIPTION OF WORK	
Remodel Master bathroom	
APPLICANT	
Name: Chris Mahoney	
Phone: 5035196711	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C848	CCB lic. no.: 196726
Business Name: DREAMHOUSE ELECTRIC LLC	
Contact:	
Address: 221 SW MOONRIDGE PL	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 5035196711	Fax:
Email: Dreamhouseelectric@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00845

132019-4057

Approval Code: 00909Z 9/26/2019 11:40 am

E-mailed To: portlandpermits@cochraninc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15500 SW BEAVERTON CREEK CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Beaverton Fit Out Apple	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108DC00600	
DESCRIPTION OF WORK	
515207 PM275 Beaverton Fit Out Apple Temporary feed for onsite trailer Erin Holmes is PM	
APPLICANT	
Name: Stephanie Swenson	
Phone: 9712054256	Fax: 9712054268
Email:	
CONTRACTOR	
Elec lic. no.: 37-546C	CCB lic. no.: 72942
Business Name: COCHRAN INC	
Contact:	
Address: 7550 SW TECH CENTER DRIVE #220	
City/State/ZIP: TIGARD, OR 97223	
Phone: 9712054242	Fax: 9712054268
Email: MGROGAN@COCHRANINC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Temp services or feeders			
Temp services 200 amps or less	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$183.44
State surcharge (12% of permit total)			\$22.01
TOTAL PERMIT FEE			\$205.45

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

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

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

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



Beaverton

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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00841

Approval Code: 025778 9/25/2019 1:28 pm

E-mailed To: precisionnwelectrical@yahoo.com

B2019-40358

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: 10660 SW DAVIES RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 38	
Project Name: AKB/Hassell	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BD80381	
DESCRIPTION OF WORK	
4- circuit kitchen remodel	
APPLICANT	
Name: Kevin Riggs	
Phone: 503-880-2754	Fax: 503-594-2873
Email:	
CONTRACTOR	
Elec lic. no.: C47	CCB lic. no.: 163318
Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC	
Contact:	
Address: 14842 SE REGNER TERRACE	
City/State/ZIP: BORING, OR 97009	
Phone: 5038802754	Fax: 5036581615
Email: PRECISIONNWELECTRICAL@YAHOO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00842

B20 P-4040

Approval Code: 025524 9/25/2019 2:56 pm

E-mailed To: office@coxelectricoregon.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: 9655 SW SUNSHINE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: Element PI	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123BA01101	
DESCRIPTION OF WORK	
one for one LED lighting upgrade in lobby, hallway, offices and receiving	
APPLICANT	
Name: Mike Toalson	
Phone: 5306913180	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1096	CCB lic. no.: 206055
Business Name: COX ELECTRIC INC	
Contact:	
Address: 3855 CASCADIA CANYON AVE STE 110	
City/State/ZIP: SALEM, OR 97302	
Phone: 5039819920	Fax:
Email: zandl@coxelectricoregon.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00843

Approval Code: 611724 9/25/2019 3:11 pm

E-mailed To: Andrew@squireselectric.com

B2091-4042

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: 5350 SW CHERRY AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Daniel project	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA05800	
DESCRIPTION OF WORK	
5 circuits for: master bathroom remodel, change kitchen cans, add 3-way in LR, add plug in master closet and on exterior, change hall bath EF	
APPLICANT	
Name: Andrew Cohen	
Phone: 5032521609	Fax: 5032535831
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

Electrical Permit Application

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

PO Box 4755
n, OR 97076
(3) 526-2550
(3) 526-2222
BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 8/5/2019	Permit No.: B2019-3336
Date issued: 9-20-19	By: <i>clw</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Accessory building
<input type="checkbox"/> Multi-family	<input checked="" type="checkbox"/> Master builder <input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9847 SW Denney Rd
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Building 5
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 12
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: - same -	
Contact name: Mike Wille	
Address: - same -	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
CONTRACTOR	
Business name: On Electric LLC	
Address: 9720 SW Hillman Ct Ste 815	
City/State/ZIP: Wilsonville, OR 97070	
Phone: 503-455-8897	Fax: 503-654-2028
E-mail: permits@on-electric.com	CCB lic. no.: 205100
Electrical lic. no.: C1078	City or metro lic.:
Supervising electrician signature, required: <i>Don Deyoe</i>	
Print name: Don Deyoe	Date:
Authorized signature: <i>Levi Fletcher</i>	
Print name: Levi Fletcher	Date:

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

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

Electrical Permit Application

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

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

RECEIVED

OFFICE USE ONLY

Date Received: 8/5/2019	Permit No.: b2019-3341
Date Issued: 9-20-19	By: <i>Cheryl</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9849 SW Denney Rd
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Building 5
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 13
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: - same -	
Contact name: Mike Wille	
Address: - same -	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
CONTRACTOR	
Business name: On Electric LLC	
Address: 9720 SW Hillman Ct Ste 815	
City/State/ZIP: Wilsonville, OR 97070	
Phone: 503-455-8897	Fax: 503-654-2028
E-mail: permits@on-electric.com	CCB lic. no.: 205100
Electrical lic. no.: C1078	City or metro lic.:
Supervising electrician signature, required: <i>Don Deyoe</i>	
Print name: Don Deyoe	Date:
Authorized signature: <i>Levi Fletcher</i>	
Print name: Levi Fletcher	Date:

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

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

* Number of inspections allowed per permit.

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

Application

Beaverton
OREGON

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

RECEIVED

OFFICE USE ONLY

Date Received: 8/6/2019	Permit No.: B2019-3342
Date issued: 8-26-19	By: clerk
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9851 SW Denney Rd
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Building 5
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 14
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: - same -	
Contact name: Mike Wille	
Address: - same -	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
CONTRACTOR	
Business name: On Electric LLC	
Address: 9720 SW Hillman Ct Ste 815	
City/State/ZIP: Wilsonville, OR 97070	
Phone: 503-455-8897	Fax: 503-654-2028
E-mail: permits@on-electric.com	CCB lic. no.: 205100
Electrical lic. no.: C1078	City or metro lic.:
Supervising electrician signature, required:	
Print name: Don Deyoe	Date:
Authorized signature:	
Print name: Levi Fletcher	Date:

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

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



Beaverton
OREGON

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

B2019-4048

Residential Electrical Authorization To Begin Work

05350-BEL-19-00844

Approval Code: 026671 9/26/2019 8:33 am

E-mailed To: info@multiphaseelectric.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: 5320 SW BARCLAY CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CB02900	
DESCRIPTION OF WORK	
Install various lights & switches and receptacle in garage	
APPLICANT	
Name: Multiphase Electric	
Phone: 5039081593	Fax: 5039081628
Email:	
CONTRACTOR	
Elec lic. no.: C5	CCB lic. no.: 162827
Business Name: MULTIPHASE ELECTRIC LLC	
Contact:	
Address: PO BOX 1416	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5039081593	Fax: 5039081628
Email: info@multiphaseelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 9-27-19	Permit No.: 52019-4015
Date issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 42852	Job address: 9300 SW Gemini Dr.
City/State/ZIP: Beaverton OR 97008	Project name: Biamp phase 1
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Provide 120V power to ADA & IDF panel 1	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Biamp	
Address: 9300 SW Gemini Dr.	
City/State/ZIP: Beaverton OR 97008	
Phone: 800-826-1457	Fax:
E-mail: Chris.Hinnrichsen	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Hamer Electric Inc.	
Contact name: Kelli Hoffman	
Address: 126 Industrial Way	
City/State/ZIP: Longview, WA 98632	
Phone: 360 636 2227	Fax: 360 636 1618
E-mail: kellihoffman@hamerelectric.com	
CONTRACTOR	
Business name: Same	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: 33818
Electrical lic. no.: 59695	City or metro lic.:
Supervising electrician signature, required:	
Print name: Cory T. Cox	Date: 9/25/19
Authorized signature: _____	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marine and boatyards	
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 800 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14
Each add'l branch circuit	1	4.26	4.26
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			85.40
Plan review (25% of permit fee)			21.35
State surcharge (12% of permit fee)			10.25
TOTAL PERMIT FEE			117.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form 870-1062 REV 10/17



City Of Beaverton

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

B2019-4077

Residential Electrical Authorization To Begin Work

05350-BEL-19-00850

Approval Code: 617211 9/27/2019 2:11 pm

E-mailed To: drew@protechpdx.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: 13765 SW HITEON DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Lance	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BA00800	
DESCRIPTION OF WORK	
Guest bathroom remodel	
APPLICANT	
Name: Drew Anderson	
Phone: 5037806207	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C916	CCB lic. no.: 198878
Business Name: PRO TECH POWER CORP	
Contact:	
Address: PO BOX 988	
City/State/ZIP: DALLAS, OR 97338	
Phone: 5037806207	Fax: 5036236023
Email: ba_acct@msn.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00849

B2019-4074

Approval Code: 632579 9/27/2019 11:23 am

E-mailed To: Andrew@squireselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input 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: 9150 SW CHELAN PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 9150 SW Chelan Pl.	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127CB03200	
DESCRIPTION OF WORK	
New panel	
APPLICANT	
Name: Andrew Cohen	
Phone: 5032521609	Fax: 5032535831
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00848

BZ019-4072

Approval Code: 02035G 9/27/2019 9:10 am

E-mailed To: crystalr@westsideelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13155 SW CARR ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 4008-MELISSA JOHNSON	
Cross Street/directions to Job site:	
Tax map/parcel no.: 1S128AB04600	
DESCRIPTION OF WORK	
PANEL CHANGE DONE BY OTHERS AND BRINGING IT UP TO CURRENT CODE.	
APPLICANT	
Name: CRYSTAL KREGER	
Phone: 5032311548	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-135C	CCB lic. no.: 13306
Business Name: WEST SIDE ELECTRIC COMPANY INC	
Contact:	
Address: 1834 SE 8TH AVE	
City/State/ZIP: PORTLAND, OR 972143532	
Phone: 5032311548	Fax: 5037360677
Email: DICKK@WESTSIDEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



Beaverton
O R E G O N

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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00851

B2019-4085

Approval Code: 027901 9/27/2019 4:39 pm

E-mailed To: tyagulskiy@frontier.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12725 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: Tesla charger	
Cross Street/directions to job site: 14420 Sw Aiken Ln Beaverton OR 97005	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Run 240 V 50 Amp circuit for Tesla charger in garage at address 14420 SW Aiken Ln Beaverton OR 97005	
APPLICANT	
Name: Pavel Tyagulskiy	
Phone: 9715704892	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1265	CCB lic. no.: 214174
Business Name: PGM HOME IMPROVEMENT	
Contact:	
Address: 12315 SW 7TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 9715704892	Fax:
Email: TYAGULSKIY@FRONTIER.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY

Date Received: <u>9/30/19</u>	Permit No.: <u>B2019-4091</u>
Date Issued: <u>9/30/19</u>	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB/SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>5825 SW Arctic Drive</u>
City/State/ZIP: <u>Beaverton, OR 97005</u>	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy
	<input type="checkbox"/> Recreational vehicle parks

FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit (includes attached garage)				
1,000 sq. ft. or less		144.20		4
Ea. add'l 500 sq. ft. or portion		25.75		
Limited energy, residential (with above sq. ft.)		34.40		2
Limited energy, multi-family residential (with above sq. ft.)		67.95		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	<u>1</u>	85.80		2
201 amps to 400 amps		102.15		2
401 amps to 600 amps		169.90		2
601 amps to 1,000 amps		222.20		2
Over 1,000 amps or volts		511.35		2
Temporary services of feeders installation, alteration, and/or relocation				
200 amps or less		67.95		2
201 amps to 400 amps		94.40		2
401 amps to 600 amps		136.40		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	<u>5</u>	3.15		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		60.10		2
Each add'l branch circuit		3.15		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		67.95		2
Utility reconnect		67.95		1
Pump or irrigation circle		67.95		2
Sign or outline lighting		67.95		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95		2
Each additional inspection over allowable in any of the above				
Per inspection		60.10		
Investigation fee				
Other:				

DESCRIPTION OF WORK	
<u>wiring new bathroom, warehouse lights</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Edge Development</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____

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

CONTRACTOR	
Business name: <u>Sunlight Electric Inc</u>	
Address: <u>2804 NE 65th Ave Suite D</u>	
City/State/ZIP: <u>Vancouver WA 98661</u>	
Phone: <u>971-222-5758</u>	Fax: <u>360-326-9660</u>
E-mail: <u>sunlight.inc1@comcast.net</u>	CCB lic. no.: <u>172549</u>
Electrical lic. no.: <u>C230</u>	City or metro lic.: <u>11608</u>
Supervising electrician signature, required: <u>Chester Garrett</u>	<u>1793S</u>
Print name: <u>Chester Garrett</u>	Date: <u>9-30-2019</u>
Authorized signature: <u>Peter Kozarez</u>	
Print name: <u>Peter Kozarez</u>	Date: <u>9-30-2019</u>

ELECTRICAL PERMIT FEES				
	Subtotal	0.00		<u>101.5</u>
	Plan review (25% of permit fee)			
	State surcharge (12% of permit fee)	0.00		
	TOTAL PERMIT FEE	0.00		

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00852

Approval Code: 320361 9/30/2019 9:16 pm

E-mailed To: genieel@comcast.net

BZOR 4101

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: 15930 SW REGATTA LN	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Nectar	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BA01600	
DESCRIPTION OF WORK	
Repurpose old home runs	
APPLICANT	
Name: Genie Electric	
Phone: 5037629296	Fax: 5037629188
Email:	
CONTRACTOR	
Elec lic. no.: 34-488C	CCB lic. no.: 56639
Business Name: GENIE ELECTRIC CONSTRUCTION INC	
Contact:	
Address: 8701 SE 156TH AVE	
City/State/ZIP: HAPPY VALLEY, OR 97086	
Phone: 5037629296	Fax: 5037629188
Email: genieel@comcast.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	19	\$4.26	\$80.94
Electrical Permit Fees			
Subtotal			\$162.08
State surcharge (12% of permit total)			\$19.45
TOTAL PERMIT FEE			\$181.53

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

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

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

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



Beaverton
OREGON

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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00858

BZ019-4117

Approval Code: 05056D 10/1/2019 3:28 pm

E-mailed To: office@falconelectricco.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: 3737 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 73	
Project Name: reinstall meter base	
Cross Street/directions to job site: sw center st	
Tax map/parcel no.: 1S110CD00801	
DESCRIPTION OF WORK	
Reinstall meter base after fire	
APPLICANT	
Name: Scott Humphrey	
Phone: 5032084709	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C969	CCB lic. no.: 200111
Business Name: FALCON ELECTRIC INC	
Contact:	
Address: 10180 SW PARK WAY STE C	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 5032084709	Fax:
Email: OFFICE@FALCONELECTRICCO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

B2019-4116

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00857

Approval Code: 611053 10/1/2019 2:35 pm

E-mailed To: Christina@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9755 SW BARNES RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: C190827 - Network CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S102CA00400	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service in suite 250.	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

BZ0101-7113

Residential Electrical Authorization To Begin Work

05350-BEL-19-00859

Approval Code: 09190C 10/1/2019 3:56 pm

E-mailed To: info@electricnorm.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: 15900 SW TOWHEE LN	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105BD21800	
DESCRIPTION OF WORK	
Add 2 circuits for patio	
APPLICANT	
Name: Phil Tussing	
Phone: 5036433500	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 4-1C	CCB lic. no.: 30615
Business Name: ELECTRIC NORM INC	
Contact:	
Address: 6775 SW 111TH SUITE 20	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036433500	Fax: 5038611688
Email: mistersparksbeaverton@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00856

B2019-4112

Approval Code: 511012 10/1/2019 1:21 pm

E-mailed To: CEPermits@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: AZA Relocate Hotmelts	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
(3) 50A Feeders and (3) Circuits for Hotmelts	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPD.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	3	\$115.83	\$347.49
Branch circuits			
Branch circuits with service or feeder each circuit	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$360.27
State surcharge (12% of permit total)			\$43.23
TOTAL PERMIT FEE			\$403.50

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

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

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

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



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

B2019-4109

Residential Electrical Authorization To Begin Work

05350-BEL-19-00855

Approval Code: 411030 10/1/2019 12:03 pm

E-mailed To: Kandice@nwsteele.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: 12120 SW BETTS CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 190835	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BC00800	
DESCRIPTION OF WORK	
Panel Change	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax: 5033726448
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00854

Approval Code: 073576 10/1/2019 9:52 am

E-mailed To: kenc@kecelectric.com

B2019-4107

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: 12325 SW HORIZON BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 31	
Project Name: Dekalash	
Cross Street/directions to Job site:	
Tax map/parcel no.: 2S105AA02301	
DESCRIPTION OF WORK	
1-200a Panel 12-Branch cir 1-LV-FA 1-LV-Speaker	
APPLICANT	
Name: Kenneth Conway	
Phone: 503-439-0904	Fax: 503-640-3838
Email:	
CONTRACTOR	
Elec lic. no.: 34-426C	CCB lic. no.: 99267
Business Name: KEC ELECTRIC INC	
Contact:	
Address: 761 SW BAILY AVE	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5034390904	Fax: 5036403838
Email: kenc@kecelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	12	\$4.26	\$51.12
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$350.39
State surcharge (12% of permit total)			\$42.05
TOTAL PERMIT FEE			\$392.44

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00853

Approval Code: 08238G 10/1/2019 8:06 am

E-mailed To: adam.fox@melectric.com

B209-4100

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: 9525 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Q5 ID	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DB01000	
DESCRIPTION OF WORK	
Rewire lights in open areas, new furniture circuits and modifications to fire alarm system.	
APPLICANT	
Name: Adam Fox	
Phone: 5036455323	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 34-618C	CCB lic. no.: 153480
Business Name: MILESTONE INVESTMENT CO LLC	
Contact:	
Address: 1960 NE 25TH AVE STE 33	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036455323	Fax: 5036904843
Email: adam.fox@melectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	14	\$4.26	\$59.64
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$232.50
State surcharge (12% of permit total)			\$27.90
TOTAL PERMIT FEE			\$260.40

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY

Date Received: 10/2/19	Permit No. B2019-4121
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15602 SW Thrush Lane
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	
Hot tub install	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Hyland Electric	
Address: 14220 SW Wilson Dr	
City/State/ZIP: Beaverton OR 97008	
Phone: (503) 724-7535	Fax:
E-mail: Klwild@msn.com	CCB lic. no.: 219435
Electrical lic. no.: C1362	City or metro lic.: 32839
Supervising electrician signature, required: Kurt Wildgrube 53963	
Print name: Kurt Wildgrube	Date: 10/2/19
Authorized signature:	
Print name:	Date:

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: <u>B2019-32000</u>
Date Issued: <u>10-1-19</u>	By: <u>CLEW</u>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>9816 SW Dapplegrey LP</u>
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Suite/bldg./apt. no.:	Project name: <u>Patty Davis ADU</u>
Cross street/directions to job site: <u>SW Dapplegrey LP & SW Weir RD and east of Mt</u>	
Subdivision:	Lot no.:
Tax map/parcel no.: <u>1S128CC07900</u>	
DESCRIPTION OF WORK	
<u>New ADT sfr in back yard of existing sfr at same address</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Brooke Bernard</u>	
Address: <u>9816 SW Dapplegrey LP</u>	
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Phone: <u>(541) 301-6361</u>	Fax:
E-mail: <u>pattysellinghomes@gmail.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Brian Roberts Architecture</u>	
Contact name: <u>Brian Roberts</u>	
Address: <u>3409 NE John Olsen Ave</u>	
City/State/ZIP: <u>Hillsboro, OR 97124</u>	
Phone: <u>(503) 347-2971</u>	Fax:
E-mail: <u>brian@duckfans.com</u>	
CONTRACTOR	
Business name: <u>Electric NORM INC.</u>	
Address: <u>6775 SW 11th Ave Ste 20</u>	
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Phone: <u>503-643-3500</u>	Fax:
E-mail: <u>info@electricnorman</u>	CCB lic. no.: <u>30615</u>
Electrical lic. no.: <u>4-1C</u>	City or metro lic.:
Supervising electrician signature, required: <u>Maggie Howes</u>	
Print name: <u>Maggie Howes</u>	Date: <u>9-30-19</u>
Authorized signature: <u>Maggie Howes</u>	
Print name: <u>Maggie Howes</u>	Date: <u>9-30-19</u>

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less	1	194.64	194.64	4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	8	4.26	34.08	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			344.55	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			41.35	
TOTAL PERMIT FEE			\$385.90	

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00947

Approval Code: 001278 10/31/2019 3:17 pm

E-mailed To: Steve@Damascuscommunications.com

82019-4527

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: 9800 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Erickson Realty, Ltd	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DD01000	
DESCRIPTION OF WORK	
Data cabling	
APPLICANT	
Name: Steven Wiege	
Phone: 5036636909	Fax: 5036630920
Email:	
CONTRACTOR	
Elec lic. no.: CLE87	CCB lic. no.: 174798
Business Name: DAMASCUS COMMUNICATIONS INC	
Contact:	
Address: 26280 SE WALLY RD	
City/State/ZIP: BORING, OR 97009	
Phone: 5036636909	Fax: 5036630920
Email: Steve@Damascuscommunications.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00946

Approval Code: 544447 10/31/2019 2:05 pm

E-mailed To: permits@christenson.com

Form with sections: TYPE OF WORK, CATEGORY OF CONSTRUCTION, JOB SITE INFORMATION AND LOCATION, DESCRIPTION OF WORK, APPLICANT, CONTRACTOR. Includes checkboxes for New Construction, Addition/alteration/replacement, and various job site details.

Form with sections: PLAN REVIEW, FEE SCHEDULE. Includes checklist for hazardous locations, service/feeder ratings, and a table for permit fees.

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00945

Approval Code: 054307 10/31/2019 1:43 pm

E-mailed To: info@electricnorm.com

B2019-4525

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: 6005 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AB05300	
DESCRIPTION OF WORK	
Upgrade panel and grounding system	
APPLICANT	
Name: Phil Tussing	
Phone: 5036433500	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 4-1C	CCB lic. no.: 30615
Business Name: ELECTRIC NORM INC	
Contact:	
Address: 6775 SW 111TH SUITE 20	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036433500	Fax: 5038611688
Email: mistersparkybeaverton@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00944

Approval Code: 04790G 10/31/2019 9:48 am

E-mailed To: patrick@rightnowhomeservices.com

82019-4518

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: 6535 SW IMPERIAL DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AC04400	
DESCRIPTION OF WORK	
200 amp service and new circuit for furnace and A/C	
APPLICANT	
Name: Marius Simedru	
Phone: 5036621098	Fax: 5037756006
Email:	
CONTRACTOR	
Elec lic. no.: C748	CCB lic. no.: 193608
Business Name: RIGHT NOW HOME SERVICES INC	
Contact:	
Address: 12042 SE SUNNYSIDE RD STE 701	
City/State/ZIP: CLACKAMAS, OR 97015	
Phone: 5036621098	Fax: 5037756006
Email: csepdx@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
TOTAL PERMIT FEE			\$139.27

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No: 192019-4521
Date Issued: 10/31/2019	BEV
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 5825 SW Arctic Dr.
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name: Virtual Supply
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Add a flow and tamper switch to fire system.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for safe, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Security First Alarm, LLC	
Contact name: Rick Waldrop	
Address: 515 NW Saltzman Rd.	
City/State/ZIP: Portland, OR 97229	
Phone: (503) 296-9100	Fax: (503) 672-7751
E-mail: rick@securityfirstalarm.com	
CONTRACTOR	
Business name: Security First Alarm, LLC	
Address: 515 NW Saltzman Rd.	
City/State/ZIP: Portland, OR 97229	
Phone: (503) 296-9100	Fax: (503) 672-7751
E-mail: rick@securityfirstalarm.com	CCB lic. no.: 190582
Electrical lic. no.: CLE 236	City or metro lic.: 6142
Supervising electrician signature, required:	
Print name: Rick Waldrop	Date: 10/31/19
Authorized signature:	
Print name: Rick Waldrop	Date: 10/31/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "F-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.94		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per Inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				11.01
TOTAL PERMIT FEE			\$102.73	

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00942

Approval Code: 000200 10/30/2019 9:26 pm

E-mailed To: jimeastgateelec@aol.com

B2019-4512

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: 14120 SW 22ND ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC09000	
DESCRIPTION OF WORK	
Reconnect Furnace Reconnect A/C	
APPLICANT	
Name: Wired Construction	
Phone: 5037893086	Fax: 5036614136
Email:	
CONTRACTOR	
Elec lic. no.: 26-340C	CCB lic. no.: 43701
Business Name: WIRED CONSTRUCTION INC	
Contact:	
Address: 1410 NE 106TH AVE #206	
City/State/ZIP: PORTLAND, OR 972203934	
Phone: 5032528910	Fax: 5036614136
Email: jimeastgateelec@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00943

Approval Code: 02492G 10/31/2019 5:57 am

E-mailed To: l-k.electric@comcast.net

B2019-4514

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: 300 SW SALIX PL	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 19-8955	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106BB06701	
DESCRIPTION OF WORK	
Panel change on existing feeder to remove FPE equipment. Grounding electrodes added	
APPLICANT	
Name: Larry Peterson	
Phone: 9715068351	Fax: 5036630343
Email:	
CONTRACTOR	
Elec lic. no.: 26-1180C	CCB lic. no.: 157326
Business Name: L & K ELECTRIC INC	
Contact:	
Address: 10122 SE SHADY LANE	
City/State/ZIP: DAMASCUS, OR 97089	
Phone: 9715068351	Fax: 5036630343
Email: l-k.electric@comcast.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



REV X
T 19-018
Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 05/17/2019	Permit No.: B2018-3704
Date Issued: 10-31-19	By: <i>JUL</i>
CITY OF BEAVERTON BUILDING DIVISION	Payment Type: <i>Check</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12518 SW 171st Ter
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.: 51
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: 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: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgamer@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4110
Supervising electrician signature, required: <i>Chuck Garner</i>	
Print name: Chuck Garner	Date: 5/16/19
Authorized signature: <i>MRS</i>	
Print name: Melissa Stock	Date: 5/16/19

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less	1	194.64	4
Ea. add'l 500 sq. ft. or portion	3	34.77	
Limited energy, residential (with above eq. ft.)	1	46.42	46.42
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			46.42
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			5.57
TOTAL PERMIT FEE			\$51.99

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

380651



Electrical Permit Application 9-022

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

REV X

OFFICE USE ONLY

Date Received: 05/17/2019	Permit No.: B2018-3703
Date Issued: 10-31-19	By: <i>ML</i>
CITY OF BEAVERTON BUILDING DIVISION	Payment Type: <i>Check</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12520 SW 171st Ter
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.: 50
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: 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: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3056	City or metro lic.: 4110
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Chuck Garner	Date: 5/16/19
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Stock	Date: 5/16/19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	2	34.77		
Limited energy, residential (with above sq. ft.)	1	46.42	46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per Inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			46.42	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			5.57	
TOTAL PERMIT FEE			\$51.99	

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

347.87



Electrical Permit Application

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

REV X

OFFICE USE ONLY	
Date Received: RECEIVED	Permit No.: B2018-3702
Date Issued: 10-31-19 05/17/2019	By: MK
Payment Type: Check	

CITY OF BEAVERTON

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12524 SW 171st Ter
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.: 49
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethhomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: 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: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4110
Supervising electrician signature, required: <i>Chuck Garner</i>	
Print name: Chuck Garner	Date: 5/16/19
Authorized signature: <i>MRS</i>	
Print name: Melissa Stock	Date: 5/16/19

BUILDING DIVISION		PLAN REVIEW	
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Six or more residential units			
<input type="checkbox"/> Health-care facilities			
<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less	1	194.64	4
Ea. add'l 500 sq. ft. or portion	2	34.77	
Limited energy, residential (with above sq. ft.)	1	46.42	46.42
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			46.42
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			5.57
TOTAL PERMIT FEE			\$51.99

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17
 347-87

BEAVERTON
 OREGON
 PERMIT SUBMITTAL
 SEE BUILDING DIVISION 8

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

REV 19-017

OFFICE USE ONLY

Date Received: **RECEIVED** Permit No.: **B2018-3701**
 Date Issued: **10-31-19** By: *MRS*
05/17/2019 Payment Type: *Check*

CITY OF BEAVERTON

TYPE OF WORK
 New construction Addition/alteration/replacement
 Other:

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

JOB SITE INFORMATION AND LOCATION
 Job no.: Job address: 12528 SW 171st Ter
 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.: 48
 Tax map/parcel no.:

DESCRIPTION OF WORK
NEW SFR

PROPERTY OWNER TENANT
 Name: **Everett Custom Homes INC**
 Address: **3330 NW Yeon Ave, Suite 100**
 City/State/ZIP: **Portland, OR 97210**
 Phone: (503) 726-7060 Fax:
 E-mail: **jreilly@everetthomesnw.com**
 Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: _____ Date: _____

APPLICANT 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: **Garner Electric**
 Address: **2920 SE Brookwood Ave**
 City/State/ZIP: **Hillsboro OR 97123**
 Phone: **503-648-4552** Fax:
 E-mail: **melgarner@garnerelectric.com** CCB lic. no.: **121159**
 Electrical lic. no.: **34-305C** City or metro lic.: **4110**
 Supervising electrician signature, required: *Chuck Garner*
 Print name: **Chuck Garner** Date: **5/16/19**
 Authorized signature: *MRS*
 Print name: **Melissa Stock** Date: **5/16/19**

BUILDING DIVISION PLAN REVIEW

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

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	3	34.77		
Limited energy, residential (with above sq. ft.)	1	46.42	46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			46.42	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			5.57	
TOTAL PERMIT FEE			\$51.99	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17 *2018/5*



Electrical Permit Application

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.: B2018-4983
Date Issued: 10/31/2019	BW
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15753 SW Wren Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 42
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR Contractor Change	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Same as below	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: DR Horton	
Contact name: Emerald Weeks	
Address: 3141 Horton Cir	
City/State/ZIP: Portland	
Phone: Oregon	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.coi	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required:	
Print name: Charles Garner	Date:
Authorized signature:	
Print name: Melissa Stock	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less	1	160.49		4
Ea. add'l 500 sq. ft. or portion	5	28.67	0.00	
Limited energy, residential (with above sq. ft.)	1	38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders Installation, alteration, and/or relocation				
200 amps or less		95.50		2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		569.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders Installation, alteration, and/or relocation				
200 amps or less		75.63		2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		151.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting		75.63	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

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



Electrical Permit Application

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.: 32018-4992
Date Issued: 10/31/2019	<i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15754 SW Thrush Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 77
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR Contractor Change	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Same as below	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: DR Horton	
Contact name: Emerald Weeks	
Address: 3141 Horton Cir	
City/State/ZIP: Portland	
Phone: Oregon	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Charles Garner	Date:
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Stock	Date:

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

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

* Number of inspections allowed per permit.



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00941

Approval Code: 131759 10/30/2019 2:15 pm

E-mailed To: bkrebsbach@lightwerks.com

20019-4510

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6600 SW 92ND AVE	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name: 901262 - National Psoriasis Foundation	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S123AC00600
DESCRIPTION OF WORK	
Video conferencing room	
APPLICANT	
Name: BEAU KREBSBACH	
Phone: 8057947761	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: CLE518	CCB lic. no.: 216374
Business Name: LIGHTWERKS COMMUNICATION SYSTEMS INC	
Contact:	
Address: 3331 JACK NORTHROP AVE	
City/State/ZIP: HAWTHORNE, CA 90250	
Phone: 4246752600	Fax:
Email: DRIBERI@LIGHTWERKS.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

B2019-4497

Residential Electrical Authorization To Begin Work

05350-BEL-19-00938

Approval Code: 02274G 10/30/2019 10:08 am

E-mailed To: phil@cohoelectric.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: 13770 SW OTTER LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Parsons/Klein	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BD03100	
DESCRIPTION OF WORK	
Master Bathroom remodel - lighting, outlets, exhaust fans	
APPLICANT	
Name: PHILLIP KIDD	
Phone: 5035829774	Fax: 5035829840
Email:	
CONTRACTOR	
Elec lic. no.: 3-575C	CCB lic. no.: 157169
Business Name: COHO ELECTRIC INC	
Contact:	
Address: PO BOX 40	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5035829774	Fax: 5035829840
Email: philkidd@verizon.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2019-4498

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00939

Approval Code: 07933G 10/30/2019 10:19 am

E-mailed To: jdevore@phillipsalarm.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: 9640 SW SUNSHINE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 400	
Project Name: Home Instead	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123BA01101	
DESCRIPTION OF WORK	
limited energy access system	
APPLICANT	
Name: Jeff Scott	
Phone: 5032225083	Fax: 5032274992
Email:	
CONTRACTOR	
Elec lic. no.: 26-213CLE	CCB lic. no.: 125364
Business Name: MASTER ALARM LLC	
Contact:	
Address: 3247 NW 29TH AVE	
City/State/ZIP: PORTLAND, OR 97210	
Phone: 5032225083	Fax: 5032274992
Email: cphillips@phillipsalarm.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00940

Approval Code: 003545 10/30/2019 10:27 am

E-mailed To: nic@stumptownconstruction.com

B2019-4499

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: 4925 SW FAIRMOUNT DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Zeger	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DB00100	
DESCRIPTION OF WORK	
Kitchen remodel, bathroom remodel new lighting in bedrooms and living room	
APPLICANT	
Name: Nicolas Valentine	
Phone: 503-267-2081	Fax: 503-747-2306
Email:	
CONTRACTOR	
Elec lic. no.: C162	CCB lic. no.: 189013
Business Name: STUMPTOWN CONSTRUCTION INC	
Contact:	
Address: 4804 NE BETHANY BLVD STE 1-2 PMB #169	
City/State/ZIP: PORTLAND, OR 97229	
Phone: 5032672081	Fax: 503
Email: nic@portlandelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

B2019-4491

05350-BEL-19-00936

Approval Code: 010364 10/30/2019 8:46 am

E-mailed To: info@all-pro-electric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12160 SW DAVIES RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 19-3230 ANDERSON	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S127BB04100
DESCRIPTION OF WORK	
Remodel, bathrooms	
APPLICANT	
Name: Kevin Poole	
Phone: 5032460361	Fax: 5032460406
Email:	
CONTRACTOR	
Elec lic. no.:	26-1099C
CCB lic. no.:	148108
Business Name: ALL PRO ELECTRIC INCORPORATED	
Contact:	
Address: 6312 SW CAPITOL HWY STE 262	
City/State/ZIP: PORTLAND, OR 97239	
Phone: 5032460361	Fax: 5032460406
Email: info@all-pro-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00937

Approval Code: 091428 10/30/2019 9:28 am

E-mailed To: PermitRequest@wachter.com

32019-4492

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: 12870 SW FARMINGTON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 679869	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AD02100	
DESCRIPTION OF WORK	
Replacing 16 low voltage data cables	
APPLICANT	
Name: Wachter Inc	
Phone: 9135412500	Fax: 9135412529
Email:	
CONTRACTOR	
Elec lic. no.: C18	CCB lic. no.: 147808
Business Name: WACHTER INC	
Contact:	
Address: 16001 W 99TH ST	
City/State/ZIP: LENEXA, KS 66219	
Phone: 9135412500	Fax: 9135412529
Email: bbotteron@wachter.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00935

Approval Code: 521334 10/30/2019 8:20 am

E-mailed To: trungbrothers@gmail.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: 4550 SW APPLE WAY	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: apple salon	
Cross Street/directions to job site: beaverton hillsdale	
Tax map/parcel no.: 1S114AD02500	
DESCRIPTION OF WORK	
tenant improvement wire spas, facial room, bathrooms, and nail stations	
APPLICANT	
Name: Trung Nguyen	
Phone: 5037930871	Fax: 5036126603
Email:	
CONTRACTOR	
Elec lic. no.: C280	CCB lic. no.: 175531
Business Name: VAST ELECTRIC INC	
Contact:	
Address: 207 8TH ST	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5037930871	Fax: 5035858828
Email: VASTELECTRIC@COMCAST.NET	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Limited Energy			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	14	\$4.26	\$59.64
Electrical Permit Fees			
Subtotal			\$232.50
State surcharge (12% of permit total)			\$27.90
TOTAL PERMIT FEE			\$260.40

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/21/2019	Permit No.: B2019-4358
Date Issued: 10/29/2019	BY: [Signature]
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 192067	Job address: 9701 SW Barnes RD Suite 150
City/State/ZIP: Beaverton OR	
Suite/bldg./apt. no.: 150	Project name: WHA Mammography
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Add 2- circuits for new mammography machine	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Capitol Electric	
Address: 11401 NE Marx	
City/State/ZIP: Portland OR 97220	
Phone: (503) 255-9488	Fax: (503) 257-7121
E-mail: brian@cepdx.com	OCB lic. no.: 48748
Electrical lic. no.: 3132-S	City or metro lic.:
Supervising electrician signature, required: <i>Darrell McNeel</i>	
Print name: Darrell McNeel	Date: 10/18/19
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input checked="" type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	1	4.26	4.26	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			85.40	
Plan review (25% of permit fee)			21.35	
State surcharge (12% of permit fee)			10.25	
TOTAL PERMIT FEE			\$115.93	

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

* Number of inspections allowed per permit.



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00929

Approval Code: 01752T 10/29/2019 2:50 pm

E-mailed To: phipps@fpsnw.com

B2019-4478

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: 8625 SW CASCADE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 500	
Project Name: Anitian - #3045	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AD00102	
DESCRIPTION OF WORK	
Moving existing strobes and adding one ceiling strobe to accommodate tenant improvement.	
APPLICANT	
Name: David Phipps	
Phone: 5035903732	Fax: 5036286214
Email:	
CONTRACTOR	
Elec lic. no.: 34-488CLE	CCB lic. no.: 154333
Business Name: FIRE PROTECTION SERVICES INC	
Contact:	
Address: 5573 SW ARCTIC DR	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5035903732	Fax: 5036286214
Email: PHIPPS@FPSNW.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00930

Approval Code: 619225 10/29/2019 2:52 pm

E-mailed To: drew@protechpdx.com

B2019-11179

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: 10390 SW CRESTWOOD CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Austin	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126BB02800	
DESCRIPTION OF WORK	
Bathroom remodels	
APPLICANT	
Name: Drew Anderson	
Phone: 5037806207	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C916	CCB lic. no.: 198878
Business Name: PRO TECH POWER CORP	
Contact:	
Address: PO BOX 988	
City/State/ZIP: DALLAS, OR 97338	
Phone: 5037806207	Fax: 5036236023
Email: ba_acct@msn.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00931

Approval Code: 04423G 10/29/2019 3:07 pm

E-mailed To: paul@timberlineelectric.com

B2019-4481

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: 18300 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB01500	
DESCRIPTION OF WORK	
UNIT 3-E: UPDATE SWITCHES, RECEPTACLES, LIGHT, & CIRCUIT FOR MIRCOWAVE	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00932

Approval Code: 01583G 10/29/2019 3:13 pm

E-mailed To: paul@timberlineelectric.com

B2019-4482

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: 18300 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB01500	
DESCRIPTION OF WORK	
UNIT 18-B: UPDATE SWITCHES, RECEPTACLES, LIGHT, & CIRCUIT FOR MIRCOWAVE	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00933

Approval Code: 04205G 10/29/2019 3:17 pm

E-mailed To: paul@timberlineelectric.com

B2019-4483

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: 18300 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.:	1N131CB01500
DESCRIPTION OF WORK	
UNIT 14-E: UPDATE SWITCHES, RECEPTACLES, LIGHT, & CIRCUIT FOR MIRCOWAVE	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.:	26-1211C
CCB lic. no.:	160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

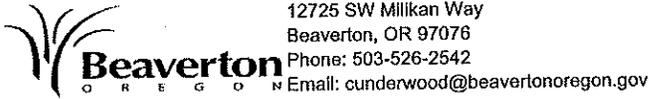
PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings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

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

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

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

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



B 2019-4484

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00934

Approval Code: 029255 10/29/2019 3:55 pm

E-mailed To: toryn.grubbe@cve.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: 15450 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 41838 Anthem Nike Hayward DAS	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S108DB00700
DESCRIPTION OF WORK	
Low Voltage Electrical Cable Pull	
APPLICANT	
Name: Toryn Grubbe	
Phone: 5034316600	Fax: 5036241436
Email:	
CONTRACTOR	
Elec lic. no.: 37-976C	CCB lic. no.: 148222
Business Name: CACHE VALLEY ELECTRIC COMPANY	
Contact:	
Address: PO BOX 405	
City/State/ZIP: LOGAN, UT 843230405	
Phone: 4357526405	Fax: 5034316600
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00928

Approval Code: 00922G 10/29/2019 9:43 am

E-mailed To: paul@timberlineelectric.com

B2019-4465

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: 18300 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB01500	
DESCRIPTION OF WORK	
UNIT 8-D: UPDATE SWITCHES, RECEPTACLES, LIGHT, & CIRCUIT FOR MIRCOWAVE	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

RECEIVED

OFFICE USE ONLY

Date Received: 10/29/2019	Permit No.: b2019-3360
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master bldgr
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 4292M	Job address: 11350 SW CANYON RD
City/State/ZIP: BEAVERTON OR 97005	
Suite/bldg./apt. no.:	Project name: BEAVERTON COMMERC
Cross street/directions to job site: E OF SW 117TH AVE / BROADWAY ST	
Subdivision: CANYON CROSSING	Lot no.: 01500
Tax map/parcel no.: 1S115AB	
DESCRIPTION OF WORK	
MOUNT (2) ILLUMINATED WALL SIGNS & (2) ILLUMINATED ADDRESS NUMBERS	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: BEAVERTON COMMERCIAL	
Address: 11350 SW CANYON RD	
City/State/ZIP: BEAVERTON OR 97005	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>[Signature]</i>	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: SECURITY SIGNS, INC	
Contact name: CYNDI STOCKS	
Address: 2424 SE HOLGATE BLVD	
City/State/ZIP: PORTLAND OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	
CONTRACTOR	
Business name: SECURITY SIGNS, INC	
Address: 2424 SE HOLGATE BLVD	
City/State/ZIP: PORTLAND OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	CCB lic. no.: 122089
Electrical lic. no.: 26-5606LS	City or metro lic.: 2561
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: MARC LINDQUIST	Date: 10/22/19
Authorized signature: <i>[Signature]</i>	
Print name: CYNDI STOCKS	Date: 10/22/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	4	91.72	366.88	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			366.88	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			44.03	
TOTAL PERMIT FEE			\$410.91	

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/29/19	Permit No.: BZ009-44001
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 4294M	Job address: 10029 SW NIMBUS
City/State/ZIP: BEAVERTON OR 97008	Project name: PERFORMANCE
Suite/bldg./apt. no.: 230	Cross street/directions to job site: BODYWORK
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
MOUNT (1) ILLUMINATED WALL SIGN	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: PERFORMANCE BODYWORK	Address: 10029 SW NIMBUS AVE # 230
City/State/ZIP: BEAVERTON OR 97005	Phone:
E-mail:	Fax:
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. N/A	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: SECURITY SIGNS, INC	Contact name: CYNDI STOCKS
Address: 2424 SE HOLGATE BLVD	City/State/ZIP: PORTLAND, OR 97202
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	Business name: SECURITY SIGNS, INC
Address: 2424 SE HOLGATE BLVD	City/State/ZIP: PORTLAND, OR 97202
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	CCB lic. no.: 122809
Electrical lic. no.: 26-560CLS	City or metro lic.: 2561
Supervising electrician signature, required: [Signature]	Print name: MARC LINDQUIST, 383 SIG
Authorized signature: [Signature]	Date: 10/28/19
Print name: CYNDI STOCKS	Date: 10/26/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	1	91.72	91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			91.72	0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	0.00
TOTAL PERMIT FEE			102.73	0.00

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



Electrical Permit Application

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

RECEIVED

OFFICE USE ONLY

Date Received: 10/29/2019	Permit No.: B2019-4469
Date Issued:	By: CLEVY
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master buidler
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 66532C	Job address: 3205 SW CEDAR HILLS BLVD
City/State/ZIP: BEAVERTON OR 97005	
Suite/bldg./apt. no.:	Project name: CEDAR HILLS CROSSIN
Cross street/directions to job site: SW JENKINS RD FRONTAGE	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
ILLUMINATED FREESTANDING SIGN = 1 SIGN LIGHTING	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: CENTER DEVELOPMENETS OREGON II, LLC	
Address: 1701 SE COLUMBIA RIVER DR	
City/State/ZIP: VANCOUVER WA 98661	
Phone:	Fax:
E-mail: sgarey@cejohn.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: SECURITY SIGNS, INC	
Contact name: CYNDI STOCKS	
Address: 2424 SE HOLGATE BLVD	
City/State/ZIP: PORTLAND OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	
CONTRACTOR	
Business name: SECURITY SIGNS, INC	
Address: 2424 SE HOLGATE BLVD	
City/State/ZIP: PORTLAND OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	CCB lic. no.: 122809
Electrical lic. no.: 26-560CLS	City or metro lic.: 2561
Supervising electrician signature, required:	
Print name: MARC LINDQUIST	Date: 10/29/19
Authorized signature:	
Print name: CYNDI STOCKS	Date: 10/29/19

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting	4	91.72	366.88
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			366.88
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			44.03
TOTAL PERMIT FEE			\$410.91

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

Comfort Inn & Suites-13455 SW TV Hwy- Electrical Permit Application

RECEIVED

OFFICE USE ONLY



Electrical Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

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

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 10/28/2019	Permit No.: B2019-4439
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 13455 S.W. TV Hwy
City/State/ZIP: BEAVERTON, OR 97005	Project name: COMFORT INN & SUITES
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.: 13116 BA 04100	
DESCRIPTION OF WORK	
CONNECT 2 INTERNALLY ILLUMINATED WALL SIGNS AND 1 FREESTANDING SIGN & 1 DIRECTIONAL SIGN TO EXISTING ELECTRICAL	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DEKHA PROSPERITY LLC.	
Address: P.O. Box 1120	
City/State/ZIP: BEAVERTON, OR 97075-1120	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: MEYER SIGN Co. of OREGON	
Contact name: Tony McCormick	
Address: 15205 S.W. 74th AVE.	
City/State/ZIP: TIGARD, OR 97224	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: MEYER SIGN Co. of OREGON	
Address: 15205 S.W. 74th AVE.	
City/State/ZIP: TIGARD, OR 97224	
Phone: 971-232-5021	Fax:
E-mail: SAME AS ABOVE	CCB lic. no.: 64014
Electrical lic. no.: 20-1906LS	City or metro lic.: 1899
Supervising electrician signature, required: [Signature]	
Print name: TODD BANCHE	Date: 10/25/19
Authorized signature: [Signature]	
Print name: Tony McCormick	Date: 10/25/19

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00927

Approval Code: 06198G 10/28/2019 3:29 pm

E-mailed To: paul@timberlineelectric.com

B2019-4453

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: 18300 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB01500	
DESCRIPTION OF WORK	
JASPER PLACE APTS UNIT 2-D CKTS TO UPGRADE SWITCHES, RECEPTACLES, LIGHTS, AND CIRCUIT FOR MICROWAVE	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY

Date Received: 10-28-19	Permit No.: B2019-4448
Date Issued: 10-28-19	By: <i>AMC</i>
Payment Type: <i>AMC</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <i>14155 SW Deer Lane</i>
City/State/ZIP: <i>Beaverton, OR 97008</i>	
Suite/bldg./apt. no.:	Project name: <i>Kolp remodel</i>
Cross street/directions to job site: <i>Murray + Scholls Ferry</i>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<i>expand electrical into new second story, lighting and plug loads</i>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <i>Danielle Kolp</i>	
Address: <i>14155 SW Deer Lane</i>	
City/State/ZIP: <i>Beaverton, OR 97008</i>	
Phone: <i>503-999-7857</i>	Fax:
E-mail: <i>dcoteschiff@gmail.com</i>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>Danielle Kolp</i>	Date: <i>10/28/19</i>
<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>home owner</i>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CCB lic. no.:	
City or metro lic.:	
Electrical lic. no.:	
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit	<i>2</i>	4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$100.42	

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00925

Approval Code: 01621G 10/28/2019 7:07 am

E-mailed To: teslapdx@gmail.com

B2019-4442

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: 13420 SW 6TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DB02501	
DESCRIPTION OF WORK	
200 Amp service upgrade	
APPLICANT	
Name: Igor Zelen	
Phone: 503-724-1175	Fax: 503-646-3498
Email:	
CONTRACTOR	
Elec lic. no.: C599	CCB lic. no.: 189699
Business Name: TESLA ELECTRIC COMPANY INC	
Contact:	
Address: 2850 SW CEDAR HILLS BLVD #250	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5037241175	Fax: 5036463498
Email: teslapdx@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00926

Approval Code: 008587 10/28/2019 7:40 am

E-mailed To: andreap@garnerelectric.com

B 2019-4444

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: 15050 SW DAVIS RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AA03001	
DESCRIPTION OF WORK	
Temporary power for construction	
APPLICANT	
Name: Josh McLaughlin	
Phone: 5034845093	Fax: 5036427925
Email:	
CONTRACTOR	
Elec lic. no.: 34-305C	CCB lic. no.: 121159
Business Name: GARNER ELECTRIC CO	
Contact:	
Address: 2920 SE BROOKWOOD AVE #A	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036484552	Fax: 5036427925
Email: ge@garnerelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Temp services or feeders			
Temp services 200 amps or less	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

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

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

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

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



Electrical Permit Application

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

RECEIVED

OFFICE USE ONLY

Date Received: 10/24/2019	Permit No.: B2019-4408
Date Issued: 10-28-19	By: MK
CITY OF BEAVERTON	
Payment Type: MC	

TYPE OF WORK

New construction Addition/alteration/replacement
 Other:

CATEGORY OF CONSTRUCTION

1- and 2-family dwelling Commercial/Industrial Accessory building
 Multi-family Master builder Other:

JOB SITE INFORMATION AND LOCATION

Job no.: Job address: 12600 SW Crescent St

City/State/ZIP: Beaverton OR 97005

Suite/bldg./apt. no.: Project name: Brickhaus Coffee

Cross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Install (2) sign circuits

PROPERTY OWNER TENANT

Name:

Address:

City/State/ZIP:

Phone: Fax:

E-mail: Cbrown@ramsaysigns.com

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: _____ Date: _____

APPLICANT CONTACT PERSON

Business name: Ramsay Signs

Contact name: Chris Brown

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

Phone: (503) 777-4555 Fax: (503) 777-0220

E-mail: Cbrown@ramsaysigns.com

CONTRACTOR

Business name: Ramsay Signs

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

Phone: (503) 777-4555 Fax: (503) 777-0220

E-mail: Cbrown@ramsaysigns.com CCB No. #: 63422

Electrical lic. no.: 26-1006LS City or metro lic. #: 9036

Supervising electrician signature, required: *Phil Steiger*

Print name: Phil Steiger Date:

Authorized signature: *Chris B*

Contact name: Chris Brown

BUILDING DIVISION PLAN REVIEW

Please check all that apply:

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

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential (single- or multi-family dwelling unit) includes attached garage				
1,000 sq. ft. or less		160.49	0.00	4
Ea. add'l 600 sq. ft. or portion		28.07	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders (installation, alteration, and/or relocation)				
200 amps or less		65.60	0.00	2
201 amps to 400 amps		113.89	0.00	2
401 amps to 600 amps		188.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		599.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders (installation, alteration, and/or relocation)				
200 amps or less		75.63	0.00	2
201 amps to 400 amps		105.08	0.00	2
401 amps to 600 amps		161.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included):				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting	2	75.63	151.26	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: Install (2) sign circuits		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		68.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$205.45	

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No. 132019-4440
Date Issued: 10/28/2019	GM
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: A500	Job address: 3300 SW Hocken Ave
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.: 104	Project name: Diamond Nails
Cross street/directions to job site: SW Hocken Ave	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Flush mount led channel letters	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Christina Nguyen	
Address: 3300 SW Hocken Ave	
City/State/ZIP: Beaverton OR 97005	
Phone: 503-720-1591	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Vision Signs	
Contact name: Tom Pham	
Address: 16127 NE Thompson St	
City/State/ZIP: Portland OR 97230	
Phone: 503-442-1195	Fax:
E-mail: Tom@VSigns.com	
CONTRACTOR	
Business name: Vision Signs	
Address: 16127 NE Thompson St	
City/State/ZIP: Portland OR 97230	
Phone: 503-442-1195	Fax:
E-mail: Tom@VSigns.com	CCB lic. no.: 170289
Electrical lic. no.: CL98	City or metro lic.: 12338
Supervising electrician signature, required: _____	
Print name: Tom Pham	Date: 10/25/19
Authorized signature: _____	
Print name: Tom Pham	Date: 10/25/19

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

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

B2019-4431

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: 15220 SW LARK LN	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 15220 SW Lark Ln, Beaverton	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AC01200	
DESCRIPTION OF WORK	
7 circuits- Add sub panel, relocate hot tub, add wiring for new bedroom, office, bathrooms, and family room in basement	
APPLICANT	
Name: Andrew Cohen	
Phone: 5032521609	Fax: 5032535831
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/25/2019	Permit No.: B2019-4427
Date Issued: 10/25/2019	Payment Type:
CITY OF BEAVERTON BUILDING DIVISION	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 10750 SW Denney Rd
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.: Ste 120	Project name: Tillamook Country Smoke
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Thermostats for new RTU's	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as Below.	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC L.L.C.	
Address: 3075 SE Century Blvd. Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax: (503) 848-2597
E-mail: mmalstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.: 7433
Supervising electrician signature, required: <i>Mike Sigard</i>	
Print name: Mike Sigard	Date: 10/21/19
Authorized signature: <i>Michael Malstrom</i>	
Print name: Michael Malstrom	Date: 10/21/19

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

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/17 \$102.73



City Of Beaverton
 12726 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00919

Approval Code: 514252 10/24/2019 1:25 pm

E-mailed To: OFFICE@NWESPD.COM

B2019-4428

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: 16505 NW MISSION OAKS DR	
City/State/ZIP: BEAVERTON, OR 97006	
Sulte/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.:	1N131DA06300
DESCRIPTION OF WORK	
Remodel 2 bathrooms	
APPLICANT	
Name: Jennifer Sherman	
Phone: 5037593952	Fax: 9718043621
Email:	
CONTRACTOR	
Elec lic. no.: C1459	CCB lic. no.: 220921
Business Name: NW ELECTRICAL SOLUTIONS CORPORATION	
Contact:	
Address: PO BOX 805	
City/State/ZIP: MOLALLA, OR 97038	
Phone: 5037593952	Fax: 9718043621
Email: OFFICE@NWESPD.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No. 32019-4427
Date Issued: 10/25/2019	By: _____
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master bulder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 10750 SW Denney Rd
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.: Ste 120	Project name: Tillamook Country Smokey
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Thermostats for new RTU's	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as Below.	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC L.L.C.	
Address: 3075 SE Century Blvd. Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax: (503) 848-2597
E-mail: mmlstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.: 7433
Supervising electrician signature, required: <i>Mike Sicard</i>	
Print name: Mike Sicard	Date: 10/21/19
Authorized signature: <i>Michael Malstrom</i>	
Print name: Michael Malstrom	Date: 10/21/19

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

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

102.73



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00923

Approval Code: 03118G 10/24/2019 4:24 pm

E-mailed To: Scottc@teamelectricco.com

B2019-4423

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: 10700 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: 14489 Pharmacy	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115AD01100	
DESCRIPTION OF WORK	
Pharmacy electrical.	
APPLICANT	
Name: Scott Croteau	
Phone: 5035577180	Fax: 5035578201
Email:	
CONTRACTOR	
Elec lic. no.: 3-225C	CCB lic. no.: 173043
Business Name: TEAM ELECTRIC CO	
Contact:	
Address: 9400 SE CLACKAMAS RD	
City/State/ZIP: CLACKAMAS, OR 970159703	
Phone: 5035577180	Fax: 5035578201
Email: miket@teamelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	9	\$4.26	\$38.34
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$211.20
State surcharge (12% of permit total)			\$25.34
TOTAL PERMIT FEE			\$236.54

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00922

Approval Code: 614252 10/24/2019 2:25 pm

E-mailed To: CDPermits@cepdx.com

B-2019-4421

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: 17020 SW WHITLEY WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 102	
Project Name: C190911 -La Rose CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106AC90011	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service in suite 102 - C190911	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton
 12726 SW Milkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00920

Approval Code: 514235 10/24/2019 1:53 pm

E-mailed To: scheduler@orient-electric.com

B 2019-4420

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: 14140 SW PADDOCK CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Bogle Sunroom	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CB14300	
DESCRIPTION OF WORK	
wiring a sunroom	
APPLICANT	
Name: Orient Electric	
Phone: 5036635881	Fax: 5036633187
Email:	
CONTRACTOR	
Elec lic. no.: C862	CCB lic. no.: 197324
Business Name: ORIENT ELECTRIC INC	
Contact:	
Address: 30532 SE BLUFF RD	
City/State/ZIP: GRESHAM, OR 97080	
Phone: 5036635881	Fax: 5036633187
Email: MIKE@ORIENT-ELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

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

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

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



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

B 2019-4419
Residential Electrical Authorization To Begin Work

05350-BEL-19-00921

Approval Code: 021585 10/24/2019 2:12 pm

E-mailed To: AFARIAS@TESLA.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: 17905 NW WATERFIELD CT	
City/State/ZIP: BEAVERTON, OR 97006	
Sulte/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB13000	
DESCRIPTION OF WORK	
Energy Storage system	
APPLICANT	
Name: Melissa FARIAS	
Phone: 5038946903	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C562	CCB lic. no.: 180498
Business Name: TESLA ENERGY OPERATIONS INC	
Contact:	
Address: 901 PAGE AVE	
City/State/ZIP: FREMONT, CA 94538	
Phone: 6509635100	Fax: 8665922249
Email: businesslicenses@tesla.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00918

Approval Code: 014244 10/24/2019 8:44 am

E-mailed To: CEPermits@cepdx.com

B2019-4416

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: 3805 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: RTU discos	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
(2) RTU's have been replaced by others. reconnect electrical and install new disconnects on the new RTU's	
APPLICANT	
Name: Capitol Electric	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00907

B2019-4352

Approval Code: 018126 10/18/2019 2:05 pm

E-mailed To: office@coxelectricoregon.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: 8058 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Ames Taping Tools	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AA00400	
DESCRIPTION OF WORK	
one for one LED lighting upgrade sales floor, restrooms and warehouse	
APPLICANT	
Name: Sue Herman	
Phone: 5036262373	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1096	CCB lic. no.: 206055
Business Name: COX ELECTRIC INC	
Contact:	
Address: 3855 CASCADIA CANYON AVE STE 110	
City/State/ZIP: SALEM, OR 97302	
Phone: 5039819920	Fax:
Email: zandi@coxelectricoregon.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00908

B2019-4357 Approval Code: 071218 10/18/2019 3:12 pm

E-mailed To: peter@dickinsonselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7020 SW HOODVIEW PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Gary Pool	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CB00501	
DESCRIPTION OF WORK	
Replace cable between meter and panel	
APPLICANT	
Name: Peter Dickinson	
Phone: 5037406100	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1190	CCB lic. no.: 209997
Business Name: P DICKINSON ELECTRIC INC	
Contact:	
Address: 20719 SW LIDO CT	
City/State/ZIP: ALOHA, OR 97078	
Phone: 5037406100	Fax:
Email: PETER@DICKINSONSELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/22/19	Permit No. B2019-4381
Date Issued:	By: CCBM
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Davies RD PRV Vault
Cross street/directions to job site: SW Brockman St	
Subdivision:	Lot no.: 5014
Tax map/parcel no.: 1S128BD	
DESCRIPTION OF WORK	
new 200 amp meter base for vault devices	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Benton Electric, Inc.	
Contact name: Travis Sheffield	
Address: 34037 Excor RD	
City/State/ZIP: Albany, OR 97321	
Phone: 541-936-0980	Fax: 541-967-8257
E-mail: travis@bentonelectric.com	
CONTRACTOR	
Business name: Benton Electric, Inc.	
Address: 34037 Excor RD	
City/State/ZIP:	
Phone: 541-967-1244	Fax:
E-mail: see above	CCB lic. no.: 4213
Electrical lic. no.: 22-84c	City or metro lic.:
Supervising electrician signature, required: <i>Gerald O. Sheffield</i>	
Print name: Gerald O. Sheffield	Date: 10-21-2019
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	1	4.26	4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			120.09	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				14.4108
TOTAL PERMIT FEE			134.5008	

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



Electrical Permit Application

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: 1.4.2019	Permit No.: B2019-3801
Date Issued: 10/23/19	By: crew
Payment Type:	

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

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

JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15731 SW Wren Ln

City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: 110
Tax map/parcel no.:	

DESCRIPTION OF WORK	
NSFR	

<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____

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

CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Charles Garner	Date:
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Stock	Date:

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

FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less	1	160.49		4
Ea. add'l 500 sq. ft. or portion	4	28.67	0.00	
Limited energy, residential (with above sq. ft.)	1	38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	#	95.50		2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		569.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		75.63		2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		151.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting		75.63	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 425.700



Electrical Permit Application

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: 1-4-2019	Permit No.: B2018-1453
Date Issued: 10/23/19	By: CLEM
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15743 SW Wren Ln
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: 109
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required:	
Print name: Charles Garner	Date:
Authorized signature:	
Print name: Melissa Stock	Date:

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

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form B20 1000
 425-710



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00917

Approval Code: 034413 10/23/2019 10:44 am

E-mailed To: csr@mrelectriccc.com

B2019-4404

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: 12215 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105BA01001	
DESCRIPTION OF WORK	
Change out porch lights to wafer lights, swap out floor plug, and convert laundry 2 prong outlet to GFCI outlet	
APPLICANT	
Name: James Kleiser	
Phone: 3605747200	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C136	CCB lic. no.: 168324
Business Name: ADVANCED ELECTRICAL CONCEPTS INC	
Contact:	
Address: 260 82ND DR SUITE 101	
City/State/ZIP: GLADSTONE, OR 97027	
Phone: 5032968555	Fax: 3605747200
Email: csr@mrelectriccc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00916

Approval Code: 728420 10/23/2019 7:27 am

E-mailed To: permits@christenson.com

B2019-4402

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: 10115 SW CLYDESDALE TER	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 94835 Yoerger Panel	
Cross Street/directions to Job site:	
Tax map/parcel no.: 1S133AA10900	
DESCRIPTION OF WORK	
panel install	
APPLICANT	
Name: Christenson Electric	
Phone: 5034193300	Fax: 5034193333
Email:	
CONTRACTOR	
Elec lic. no.: 26-34C	CCB lic. no.: 458
Business Name: CHRISTENSON ELECTRIC INC	
Contact:	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR 97230	
Phone: 5034193300	Fax: 5034193333
Email: marijo.beckman@christenson.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received: 10/23/19	Permit No. B209-4400
Date Issued: 10/23/19	By: <i>CEM</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8320 SW Maverick Terrace
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	
Roof mounted solar array	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Ned Randell	
Address: 8320 SW Maverick Terrace	
City/State/ZIP: Beaverton, OR 97008	
Phone: 971-266-9467	Fax:
E-mail: nedrandell@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Synchro Solar	
Address: 2870 NE Hogan Dr. suit E-240	
City/State/ZIP: Gresham, OR 97030	
Phone: 503-208-4786	Fax:
E-mail: Brion@synchrosolar.com	CCB lic. no.: 188766
Electrical lic. no.: c1129	City or metro lic.: 10170
Supervising electrician signature, required: <i>Richard Poudrier</i>	4678 S
Print name: Richard Poudrier	Date: 10-23-19
Authorized signature: <i>Brion Wickstrom</i>	
Print name: Brion Wickstrom	Date: 10-22-19

FEE SCHEDULE			
Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) <small>(OAR 916-309-0070)</small>		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input checked="" type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

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

Form B70-1005

REV 10/17



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-23-19	Permit No.: B2019-4397
Date Issued: 10-23-19	By: <i>ML</i>
	Payment Type: AMX

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master buldler
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 901230	Job address: 15450 SW MILLIKAN WAY
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt. no.:	Project name: ALICE HAYWARD
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
SWAPPING PROJECTORS IN CONFERENCE ROOM	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: LIGHTWERKS	
Contact name: BEAU KREBSBACH	
Address: 3331 JACIE NORTHROP AVE	
City/State/ZIP: HAWTHORNE CA 90250	
Phone: (424) 675-2600	Fax:
E-mail: bkrebsbach@lightwerks.com	
CONTRACTOR	
Business name: LIGHTWERKS COMMUNICATION, INC.	
Address: 4629 SE 17th AVE UNIT #4	
City/State/ZIP: PORTLAND OR 97202	
Phone: (805) 794-7761	Fax:
E-mail: hkrebsbach@lightwerks.com	CCB lic. no.: 216374
Electrical lic. no.: 4971 CE3	City or metro lic.: CLE518
Supervising electrician signature, required: <i>B. Krebsbach</i>	
Print name: BEAU KREBSBACH	Date: 10/23/19
Authorized signature:	
Print name:	Date:

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/23/2019	Permit No.: 62019-4379
Date Issued: 10/23/2019	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15945 SW Raven Ct.
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: 91151
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace AC & GF	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Mike & Jean Summers	
Address: 15945 SW Raven Ct.	
City/State/ZIP: Beaverton, OR 97007	
Phone: 503-781-3639	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Pyramid Heating & Cooling	
Contact name: Caitlin Alton	
Address: 9409 NE Colfax St	
City/State/ZIP: Portland, OR 97220	
Phone: 503-786-9522	Fax:
E-mail: permits@pyramidheating.com	
CONTRACTOR	
Business name: Pyramid Heating & Cooling	
Address: 9409 NE Colfax St.	
City/State/ZIP: Portland, OR 97220	
Phone: 503-786-9522	Fax:
E-mail: permits@pyramid	CCB lic. no.: 59382
Electrical lic. no.: 116028	City or metro lic.:
Supervising electrician signature, required: [Signature]	
Print name: Corey Parsons	Date: 10/21/19
Authorized signature: [Signature]	
Print name: Corey Parsons	Date: 10/21/19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26	4.26	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per Inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			85.40	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			10.24	
TOTAL PERMIT FEE			95.64	

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-9-18	Permit No.: 82018-46017
Date issued: 10-23-19	By: MK
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 18A757	Job address: 8625 SW CASCADE AVE
City/State/ZIP: BEAVERTON OR 97008	
Suite/bldg./apt. no.:	Project name: 18A757 - CHILLER
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
CONNECT NEW CHILLER	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: HUGHES ELECTRICAL CONTRACTORS	
Address: 5592 NE CLARA LANE	
City/State/ZIP: HILLSBORO OR 97124	
Phone: (503) 647-2221	Fax:
E-mail: hec@hugheselectrical.com	CCB lic. no.: 49850
Electrical lic. no.: 34-281C	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i> 53505	
Print name: DAVID TRAPP	Date: 10/08/18
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input checked="" type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps	2	299.93	599.86	2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	6	4.26	25.56	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			741.25	
Plan review (25% of permit fee)			185.31	
State surcharge (12% of permit fee)			88.95	
TOTAL PERMIT FEE			\$1,015.51	

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00915

Approval Code: 612260 10/22/2019 2:06 pm

E-mailed To: brad@willametteelectric.com

B2019-4390

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: 9000 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Sulte/bldg./apt.no.:	
Project Name: Paychex	
Cross Street/directions to job site: Nimbus	
Tax map/parcel no.: 1S127DA00800	
DESCRIPTION OF WORK	
Tenant Improvement	
APPLICANT	
Name: Brad Adams	
Phone: 5036243631	Fax: 5036242938
Email:	
CONTRACTOR	
Elec lic. no.: 34-283C	CCB lic. no.: 75059
Business Name: WILLAMETTE ELECTRIC INC	
Contact:	
Address: PO BOX 230547	
City/State/ZIP: TIGARD, OR 972810547	
Phone: 5036243631	Fax: 5036242938
Email: david@willametteelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	39	\$4.26	\$166.14
Electrical Permit Fees			
Subtotal			\$247.28
State surcharge (12% of permit total)			\$29.67
TOTAL PERMIT FEE			\$276.95

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00913

Approval Code: 02334G 10/22/2019 12:17 pm

E-mailed To: Matt@hammersonelectric.com

B2019-4393

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: 13150 SW DAWSON WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Kuntl: compressor	
Cross Street/directions to job site: Cedar Hills	
Tax map/parcel no.: 1S109DC00400	
DESCRIPTION OF WORK	
Installing a new air compressor and circuits for future equipment installed by others.	
APPLICANT	
Name: Matt Hammerquist	
Phone: 5032699704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1086	CCB lic. no.: 205607
Business Name: HAMMERSON ELECTRIC LLC	
Contact:	
Address: 10501 NW 3RD AVE	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 5032699704	Fax:
Email: matt@mammersonelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00914

Approval Code: 03638G 10/22/2019 12:24 pm

E-mailed To: Matt@hammersonelectric.com

B 2019-4392

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: 3725 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Kuni; shop swap	
Cross Street/directions to job site: Dawson Way	
Tax map/parcel no.: 1S109DC00200	
DESCRIPTION OF WORK	
Moving 13 car lifts from one building to another. Replacing branch circuits and wiring of existing lifts (7) adding (6) new circuits for additional car lifts	
APPLICANT	
Name: Matt Hammerquist	
Phone: 5032699704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1086	CCB lic. no.: 205607
Business Name: HAMMERSON ELECTRIC LLC	
Contact:	
Address: 10501 NW 3RD AVE	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 5032699704	Fax:
Email: matt@mammersonelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	16	\$4.26	\$68.16
Electrical Permit Fees			
Subtotal			\$149.30
State surcharge (12% of permit total)			\$17.92
TOTAL PERMIT FEE			\$167.22

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.

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



Electrical Permit Application

Community and Economic Development
 PO Box 4755, Beaverton, OR 97005
 Phone: (503) 526-2403 Fax: (503) 526-2650
 www.BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 10/22/2019 Permit No: 52019-4380
 Date Issued: 10/22/2019 By: [Signature]
 Payment Type:

TYPE OF WORK

New construction Addition/alteration/replacement
 Other:

CATEGORY OF CONSTRUCTION

1- and 2-family dwelling Commercial/Industrial Accessory building
 Multi-family Master builder Other:

JOB SITE INFORMATION AND LOCATION

Job no.: _____ Job address: 13227 SW Canyon Rd #8
 City/State/ZIP: Beaverton, OR 97005
 Suite/bldg./apt. no.: _____ Project name: Jasty Pot
 Cross street/directions to job site: SW Hoped Ave
 Subdivision: _____ Lot no: _____
 Tax map/parcel no.: _____

DESCRIPTION OF WORK

Wall Sign Connection

PROPERTY OWNER **TENANT**

Name: Stanley Jaha
 Address: 21014 4th Ave # 310
 City/State/ZIP: Seattle WA 98122
 Phone: 206-441-1080 x1 Fax: _____
 E-mail: Stanley@stanleyre.com

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: N/A Date: _____

APPLICANT **CONTACT PERSON**

Business name: Artico Lsg
 Contact name: Jennah Lee
 Address: 8621 SE Powell Blvd
 City/State/ZIP: Portland, OR 97266
 Phone: 503 253 9406 Fax: none
 E-mail: articolite@hol.com

CONTRACTOR

Business name: Jerry Younger
 Address: 240 N.E. Village Square Ave
 City/State/ZIP: Gresham, OR 97030
 Phone: 503 350 4774 Fax: N/A
 E-mail: None OCB lic. no.: 72685
 Electrical lic. no.: 210274615 City or metro lic.: _____
 Supervising electrician signature, required: [Signature]
 Print name: _____ Date: _____
 Authorized signature: _____
 Print name: JERRY YOUNGER Date: 10/18/19

PLAN REVIEW

Please check all that apply:

<input type="checkbox"/> Service of feeder 40 amps or more	<input type="checkbox"/> Service or feeder over 800 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of 160 KVA or larger separately derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy
	<input type="checkbox"/> Recreational vehicle parks

FEE SCHEDULE

Description	Qty	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less		150.49	4
Ea. add'l 500 sq. ft. or portion		28.67	
Limited energy residential (with above sq. ft.)		38.28	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		95.60	2
201 amps to 400 amps		115.69	2
401 amps to 600 amps		188.10	2
601 amps to 1,000 amps		247.31	2
Over 1,000 amps or volts		569.13	2
Utility reconnect		75.55	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		75.63	2
201 amps to 400 amps		105.65	2
401 amps to 600 amps		151.81	2
601 amps to 1,000 amps		185.78	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		58.90	2
Each add'l branch circuit		3.51	
Miscellaneous service or feeder (not included)			
Each manufactured or modular dwelling, service, and/or feeder		75.63	2
Pump or impeller circle		75.63	2
Sign or outline lighting		25.00	2
Signal circuit(s) or limited energy panel, alteration, or extension. Describe		75.63	2
Each additional inspection over allowable in any of the above			
Per inspection		66.80	
Investigation fee			
Other			
Electrical permit fees			
SUBTOTAL			
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00912

Approval Code: 082689 10/22/2019 11:14 am

E-mailed To: laurel.semprevivogonzalez@oeg.us.com

B 2019-4389

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: 3601 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 10	
Project Name: 101345-111 Prov Murray Business Center	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1080001600	
DESCRIPTION OF WORK	
Conference room "C" Cascade Room.	
APPLICANT	
Name: Steve Zaikoski	
Phone: 5037527174	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-95C	CCB lic. no.: 203
Business Name: OEG INC	
Contact:	
Address: 1709 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: 5032349900	Fax: 5032341001
Email: webaccounting@oregon-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$172.86
State surcharge (12% of permit total)			\$20.74
TOTAL PERMIT FEE			\$193.60

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/21/2019	Permit No: B2019-4363
Date Issued: 10-22-19	By: <i>ME</i>
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: M9045	Job address: 10470 SW Barnes Rd
City/State/ZIP: Beaverton, OR 97225	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Sunset Station Transit Drive & SW Barnes Rd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Underground utilities, parking lot lighting and construction of a new gate house.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: ADK Electric, Inc.	
Contact name: Eva Bruckelmyer	
Address: 9000 NE 90th St.	
City/State/ZIP: Vancouver, WA 98662	
Phone: (360) 546-5155	Fax: (360) 576-6975
E-mail: evab@teamadk.com	
CONTRACTOR	
Business name: ADK Electric, Inc.	
Address: 9000 NE 90th St.	
City/State/ZIP: Vancouver, WA 98662	
Phone: (360) 546-5155	Fax: (360) 576-6975
E-mail: evab@teamadk.com	CCB lic. no.: 148882
Electrical lic. no.: 37-934C	City or metro lic.: 6944
Supervising electrician signature, required: <i>Alan D Kangas</i>	
Print name: Alan D. Kangas	Date: 10/18/19
Authorized signature: <i>Alan D Kangas</i>	
Print name: Alan D Kangas	Date: 10/18/19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits – new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	50	4.26	213.00	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees:				
SUBTOTAL			328.83	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				39.46
TOTAL PERMIT FEE			\$368.29	

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



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

B. 2019-4366

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00909

Approval Code: 605404 10/18/2019 4:10 pm

E-mailed To: kclasssem@sonitrolpacific.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: 2025 SW MERLO CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 32479-1 CWS Field Operations	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S108BB01000
DESCRIPTION OF WORK	
Upgrade of Intrusion system and Expand Access Control System	
APPLICANT	
Name: Kendra Classen	
Phone: 5032235822	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-370CLE	CCB lic. no.: 53535
Business Name: SOUND SECURITY INC	
Contact:	
Address: 8220 N INTERSTATE AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5032235822	Fax: 5039737773
Email: AMOORE@SONITROLPACIFIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00910

Approval Code: 05472G 10/19/2019 3:55 pm

E-mailed To: leonardelectricinc@gmail.com

B 2019-4365

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: 5450 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Creekside Village	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DD02005	
DESCRIPTION OF WORK	
Rewiring for new heating and A/C systems	
APPLICANT	
Name: Keith Leonard	
Phone: 9715708103	Fax: 5039812343
Email:	
CONTRACTOR	
Elec lic. no.: C1348	CCB lic. no.: 218984
Business Name: LEONARD ELECTRIC INC	
Contact:	
Address: PO BOX 411	
City/State/ZIP: HUBBARD, OR 97032	
Phone: 9715708103	Fax: 5039812343
Email: leonardelectricinc@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	12	\$4.26	\$51.12
Electrical Permit Fees			
Subtotal			\$132.26
State surcharge (12% of permit total)			\$15.87
TOTAL PERMIT FEE			\$148.13

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

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

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

Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

This Authorization To Begin Work must be posted at the job site until replaced by a Permit



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00911

Approval Code: 042481 10/21/2019 1:26 pm

E-mailed To: AFARIAS@TESLA.COM

B2019-4371

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: 7650 SW 142ND CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CC10300	
DESCRIPTION OF WORK	
ev installation	
APPLICANT	
Name: Melissa FARIAS	
Phone: 5038946903	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C562	CCB lic. no.: 180498
Business Name: TESLA ENERGY OPERATIONS INC	
Contact:	
Address: 901 PAGE AVE	
City/State/ZIP: FREMONT, CA 94538	
Phone: 6509635100	Fax: 8665922249
Email: businesslicenses@tesla.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/15/19	Permit No.: B2091-4324
Date Issued: 10/15/19	By: CLOW
Payment Type:	

<input checked="" type="checkbox"/> New construction		<input type="checkbox"/> Addition/alteration/replacement	
<input type="checkbox"/> 1- and 2-family dwelling		<input checked="" type="checkbox"/> Commercial/Industrial	
<input type="checkbox"/> Multi-family		<input type="checkbox"/> Master builder	
<input type="checkbox"/> Accessory building		<input type="checkbox"/> Other:	
Job no.: 19-377	Job address: 11423 Southwest Beaverton Hillsdale Hwy		
City/State/ZIP: Beaverton, Or 97005			
Suite/bldg./apt. no.:		Project name: Beaverton Liquor	
Cross street/directions to job site:			
Subdivision:		Lot no.:	
Tax map/parcel no.:			
CCTV			
Name: Beaverton Liquor			
Address: 11423 Southwest Beaverton Hillsdale Hwy			
City/State/ZIP: Beaverton, Or 97005			
Phone: (503) 866-7337		Fax:	
E-mail:			
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.			
Owner signature:		Date:	
Business name: Airwave LLC			
Contact name: Lori Hayes			
Address: 9865 NW 307th Ave.			
City/State/ZIP: North Plains, Or. 97133			
Phone: (503) 647-5999		Fax: (503) 647-7443	
E-mail: lori@airwavellc.com			
Business name: Airwave LLC			
Address: 9865 NW 307th Ave.			
City/State/ZIP: North Plains, Or. 97133			
Phone: (503) 647-5999		Fax: (503) 647-7443	
E-mail: lori@airwavellc.com		CCB lic. no.: 160178	
Electrical lic. no.: 4583LEA		City or metro lic.:	
Supervising electrician signature, required:			
Print name: Jake Spens		Date: 10/17/19	
Authorized signature:		Date: 10/17/19	
Print name:		Date:	

Description	Qty.	Fee	Total	*
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Par inspection		81.14		
Investigation fee				
Other:				
SUBTOTAL			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	
TOTAL PERMIT FEE			\$102.73	

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



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

BZ0109-4347

Residential Electrical Authorization To Begin Work
05350-BEL-19-00903

Approval Code: 029207 10/18/2019 9:24 am

E-mailed To: jphextremework@yahoo.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: 10000 SW BONNIE BRAE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB04800	
DESCRIPTION OF WORK	
kitchen remodel	
APPLICANT	
Name: joshua hough	
Phone: 503-572-3482	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C787	CCB lic. no.: 194987
Business Name: HOUGH ELECTRIC LLC	
Contact:	
Address: 10355 SW BRYTON CT	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5035723482	Fax:
Email: JPHEXTREMEWORK@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27
TOTAL PERMIT FEE			\$105.19

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00904

Approval Code: 039962 10/18/2019 9:43 am

E-mailed To: DENNISW@STONERGROUP.COM

B2091-43409

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: 9605 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: COMCAST	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DD01100	
DESCRIPTION OF WORK	
WIRE FOR OFFICE REMODEL	
APPLICANT	
Name: SHAWN WINTERS	
Phone: 5038060767	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

B2019-4350

Residential Electrical Authorization To Begin Work

05350-BEL-19-00905

Approval Code: 05455G 10/18/2019 10:35 am

E-mailed To: officemgr.mrelectric@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: 4800 SW 141ST AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: DAVIS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BD03201	
DESCRIPTION OF WORK	
Install hot tub circuit +1 additional circuit	
APPLICANT	
Name: Jean Stratford	
Phone: 5035062290	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1168	CCB lic. no.: 208614
Business Name: SB ELECTRIC INC	
Contact:	
Address: 58569 PEBBLE CREEK RD	
City/State/ZIP: VERNONIA, OR 97064	
Phone: 5035062290	Fax:
Email: mrelectricofhillsboro@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B209-4352

Residential Electrical Authorization To Begin Work

05350-BEL-19-00906

Approval Code: 418130 10/18/2019 12:03 pm

E-mailed To: permits@bearelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input 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: 9585 SW DUNCAN LN	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114BD01700	
DESCRIPTION OF WORK	
Install new 120/240V electrical panel.	
APPLICANT	
Name: Bear Electric	
Phone: 503-678-1355	Fax: 503-678-1108
Email:	
CONTRACTOR	
Elec lic. no.: 24-107C	CCB lic. no.: 20919
Business Name: BEAR ELECTRIC INC	
Contact:	
Address: PO BOX 389	
City/State/ZIP: DONALD, OR 97020	
Phone: 5036781355	Fax: 5036781108
Email: sshpherd@bearelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Commercial-use agricultural buildings
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	3	\$4.26	\$12.78
Electrical Permit Fees			
Subtotal			\$128.61
State surcharge (12% of permit total)			\$15.43
TOTAL PERMIT FEE			\$144.04

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/18/2019	Permit No.: 152019-4351
Date Issued:	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 9800 SW Nimbus
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Off highway 217 South Highway 210 exit	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Pulling Low Voltage cable	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Tice Electric Company	
Address: 54050 N Lagoon Ave	
City/State/ZIP: Portland, OR 97217	
Phone: (503) 233-8801	Fax: (503) 231-3372
E-mail: adamc@ticeelec.com	CCB lic. no.: 166
Electrical lic. no.: 26-126C	City or metro lic.:
Supervising electrician signature, required: <i>Bob Richardson 39405</i>	
Print name: Bob Richardson	Date: 10/18/2019
Authorized signature:	
Print name:	Date:

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

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



City Of Beaverton

12725 SW Milikan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00898

B709-4332

Approval Code: 01379G 10/17/2019 9:00 am

E-mailed To: info@tritonnw.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: 9400 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 165	
Project Name: 6270 Aspen Tie Cable	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114AC00200	
DESCRIPTION OF WORK	
Run CAT6 tie cable to suite 165A	
APPLICANT	
Name: Aaron Van Fleet	
Phone: 5036155800	Fax: 5036285689
Email:	
CONTRACTOR	
Elec lic. no.: 34-648CLE	CCB lic. no.: 154665
Business Name: TRITON COMMUNICATIONS LLC	
Contact:	
Address: PO BOX 1091	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036155800	Fax: 5036285689
Email: info@tritonnw.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Beaverton
OREGON

City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00899

Approval Code: 017763 10/17/2019 10:45 am

E-mailed To: office@coxelectricoregon.com

2019-4331

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: 7677 SW CIRRUS DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Cascade Auto Detail	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DD00300	
DESCRIPTION OF WORK	
one for one LED lighting upgrade in reception/waiting area, open office area, eddies office, and shop	
APPLICANT	
Name: Brandi Gates	
Phone: 5039813320	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1096	CCB lic. no.: 206055
Business Name: COX ELECTRIC INC	
Contact:	
Address: 3855 CASCADIA CANYON AVE STE 110	
City/State/ZIP: SALEM, OR 97302	
Phone: 5039819920	Fax:
Email: zandi@coxelectricoregon.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millkan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

B2091-4340

Residential Electrical Authorization To Begin Work

05350-BEL-19-00902

Approval Code: 647662 10/17/2019 3:04 pm

E-mailed To: leeann@aandj-electric.com

Form with sections: TYPE OF WORK, CATEGORY OF CONSTRUCTION, JOB SITE INFORMATION AND LOCATION, DESCRIPTION OF WORK, APPLICANT, CONTRACTOR, and inspection counts.

Form with sections: PLAN REVIEW (checkboxes for hazardous locations, fire pumps, etc.), FEE SCHEDULE (table with Description, Qty, Ea, Total), and Electrical Permit Fees.

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

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

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

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



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

Commercial Electrical Authorization To Begin Work
05350-BEL-19-00901

B2019-4309

Approval Code: 617144 10/17/2019 2:44 pm

E-mailed To: DARRELL@CEPDX.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: AZA Agile ISO Xfmr	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
(1) 150 amp Feeder	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2019-4338

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00900

Approval Code: 617182 10/17/2019 2:28 pm

E-mailed To: CEPermits@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13955 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Agile 30 16KW Generator	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00200	
DESCRIPTION OF WORK	
(1) 300 amp Feeder, (2) 125 amp Feeders	
APPLICANT	
Name: Darrell McNeel	
Phone: 5032559488	Fax: 5032551966
Email:	
CONTRACTOR	
Elec lic. no.: 26-496C	CCB lic. no.: 48748
Business Name: CAPITOL ELECTRIC CO INC	
Contact:	
Address: 11401 NE MARX ST	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: DARRELL@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	2	\$115.83	\$231.66
Services 201 to 400 amps	1	\$137.89	\$137.89
Electrical Permit Fees			
Subtotal			\$369.55
State surcharge (12% of permit total)			\$44.35
TOTAL PERMIT FEE			\$413.90

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

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

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

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



City Of Beaverton

12725 SW Millkan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

B2019-4164

Residential Electrical Authorization To Begin Work

05350-BEL-19-00869

Approval Code: 019088 10/4/2019 10:42 am

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12164 SW WALDEN LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek Apt	
Cross Street/directions to job site: Bld #4	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood. All new devices and LED lighting New T-stats and heaters	
APPLICANT	
Name: Chris Riehle	
Phone: 5037991639	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks
<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	167	\$4.26	\$711.42
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$976.00
State surcharge (12% of permit total)			\$117.12
TOTAL PERMIT FEE			\$1,093.12

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

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

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

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



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

B2019-4313

Residential Electrical Authorization To Begin Work

05350-BEL-19-00893

Approval Code: 216105 10/16/2019 10:50 am

E-mailed To: steve@callahanelectricpdx.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: 10010 SW STEEPLECHASE CIR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CC11200	
DESCRIPTION OF WORK	
Install 100 Amp sub panel and 2 circuits for kitchen	
APPLICANT	
Name: Steve Callahan	
Phone: 5034214553	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C807	CCB lic. no.: 195180
Business Name: CALLAHAN ELECTRIC LLC	
Contact: Steve Callahan	
Address: 5711 SE FOSTER RD	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5034214553	Fax:
Email: steve@callahanelectricpdx.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
TOTAL PERMIT FEE			\$139.27

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00892

Approval Code: 08741D 10/16/2019 10:36 am

E-mailed To: office@falconelectricco.com

2009-4312

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: 13655 SW 23RD ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Bonding/Grounding	
Cross Street/directions to job site: SW Peach Ln	
Tax map/parcel no.: 1S121BD01100	
DESCRIPTION OF WORK	
update bonding and grounding	
APPLICANT	
Name: Scott Humphrey	
Phone: 5032084709	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C969	CCB lic. no.: 200111
Business Name: FALCON ELECTRIC INC	
Contact:	
Address: 10180 SW PARK WAY STE C	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 5032084709	Fax:
Email: OFFICE@FALCONELECTRICCO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work
05350-BEL-19-00891

BZ09-4209 Approval Code: 216101 10/16/2019 10:10 am

E-mailed To: CDPPermits@cepdx.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9755 SW BARNES RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: C190873 - At Wells CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S102CA00400	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service in suite 150	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: RICHARDM@CPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millikan Way

Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00890

Approval Code: 906161 10/16/2019 7:16 am

E-mailed To: andreap@garnerelectric.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: 7600 SW DUNSMUIR LN	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DD03700	
DESCRIPTION OF WORK	
House remodel	
APPLICANT	
Name: Jesse Butterfield	
Phone: 5033295989	Fax: 5036427925
Email:	
CONTRACTOR	
Elec lic. no.: 34-305C	CCB lic. no.: 121159
Business Name: GARNER ELECTRIC CO	
Contact:	
Address: 2920 SE BROOKWOOD AVE #A	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036484552	Fax: 5036427925
Email: ge@garnerelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B0019-4310

Residential Electrical Authorization To Begin Work

05350-BEL-19-00894

Approval Code: 416184 10/16/2019 12:48 pm

E-mailed To: debbiec@atlaslectrical.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: 5164 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 29611	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DA90024	
DESCRIPTION OF WORK	
1 NEW BRANCH CIRCUIT FOR THE KITCHEN AND 1 FOR THE GARAGE.	
APPLICANT	
Name: Debbie Cates	
Phone: 5036592212	Fax: 5036594944
Email:	
CONTRACTOR	
Elec lic. no.: 3-2C	CCB lic. no.: 1532
Business Name: ATLAS ELECTRIC CONTRACTORS INC	
Contact:	
Address: 4403 SE ROETHE RD	
City/State/ZIP: MILWAUKIE, OR 97267	
Phone: 5036592212	Fax: 5036594944
Email: debbiec@atlaslectrical.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Residential Electrical Authorization To Begin Work
05350-BEL-19-00886

1520191-4283

Approval Code: 714161 10/14/2019 3:16 pm

E-mailed To: Kandice@nwsteele.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: 7530 SW 102ND AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 190884	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CC01200	
DESCRIPTION OF WORK	
Replace two panels 200amp and 100amp	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax: 5033726448
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Millkan Way
Beaverton, OR 97076

Phone: 503-526-2542
Email: cunderwood@beavertonoregon.gov

B2001-4285

Residential Electrical Authorization To Begin Work

05350-BEL-19-00887

Approval Code: 08199B 10/14/2019 4:36 pm

E-mailed To: mikeselectric@mikeselectric.biz

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: 6181 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Cossio	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AB07600	
DESCRIPTION OF WORK	
removal of aluminum wiring- bathroom circuit, refrigerator/dining room circuit, kitchen circuit, 3x lighting/outlet circuits	
APPLICANT	
Name: Darryl Mollenhauer	
Phone: 5036496991	Fax: 5032967860
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2019-4288

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00888

Approval Code: 09912G 10/15/2019 8:43 am

E-mailed To: Matt@hammersonelectric.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: Crumbl Cookies	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Low voltage speakers and data 14900 SW Barrows Rd Beaverton OR 97007	
APPLICANT	
Name: Matt Hammerquist	
Phone: 5032699704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1086	CCB lic. no.: 205607
Business Name: HAMMERSON ELECTRIC LLC	
Contact:	
Address: 10501 NW 3RD AVE	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 5032699704	Fax:
Email: matt@mannersonelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$183.44
State surcharge (12% of permit total)			\$22.01
TOTAL PERMIT FEE			\$205.45

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

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

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

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



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

B2019-4320

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00895

Approval Code: 516104 10/16/2019 1:40 pm

E-mailed To: Kandice@nwsteele.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: 8114 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 190879	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AA00500	
DESCRIPTION OF WORK	
Installed dedicated circuits for exhaust fan	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax: 5033726448
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton

12725 SW Milkan Way
Beaverton, OR 97076

Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00896

B2019-4322

Approval Code: 04456G 10/16/2019 2:28 pm

E-mailed To: service@clackamaselectric.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: 10195 SW EXMOOR PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: MW-Watkins-19893	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133AA11700	
DESCRIPTION OF WORK	
Wire new addition	
APPLICANT	
Name: Scott Johnston	
Phone: 5036322420	Fax: 5036322421
Email:	
CONTRACTOR	
Elec lic. no.: 3-606C	CCB lic. no.: 161923
Business Name: CLACKAMAS ELECTRIC INC	
Contact:	
Address: PO BOX 51	
City/State/ZIP: BEAVERCREEK, OR 97004	
Phone: 5036322420	Fax: 5036322421
Email: donna@clackamaselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Health care facilities	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks
		<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	14	\$4.26	\$59.64
Electrical Permit Fees			
Subtotal			\$175.47
State surcharge (12% of permit total)			\$21.06
TOTAL PERMIT FEE			\$196.53

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

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

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

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



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

B209-4323

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00897

Approval Code: 716113 10/16/2019 3:31 pm

E-mailed To: Kandice@nwsteele.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: 10750 SW DENNEY RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 190895	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DA00301	
DESCRIPTION OF WORK	
Build out	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax: 5033726448
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	3	\$115.83	\$347.49
Branch circuits			
Branch circuits with service or feeder each circuit	70	\$4.26	\$298.20
Electrical Permit Fees			
Subtotal			\$645.69
State surcharge (12% of permit total)			\$77.48
TOTAL PERMIT FEE			\$723.17

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-16-19	Permit No. B2019-4318
Date Issued: 10-16-19	By: ME
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: C190819	Job address: 230 NW Lost Springs
City/State/ZIP: Portland, OR 97229	
Suite/bldg./apl. no.:	Project name: H & R 230 CC
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Capitol Data & Communications	
Contact name: Christina Williams	
Address: 11401 NE Marx St	
City/State/ZIP: Portland, OR 97220	
Phone: (503) 255-9488	Fax: (503) 255-1966
E-mail: Christina@cepd.com	
CONTRACTOR	
Business name: Capitol Data & Communications	
Address: 11401 NE Marx St	
City/State/ZIP: Portland, OR 97220	
Phone: (503) 255-9488	Fax: (503) 255-1966
E-mail: CDPPermits@cepd.com	
Electrical lic. no.: 26-1054CLE	City or metro lic.: 6380
Supervising electrician signature, required: <i>Peter Bledsoe</i>	
Print name: Peter Bledsoe	Date: 10/16/19
Authorized signature: <i>Peter Bledsoe</i>	
Print name: Peter Bledsoe	Date: 10/16/19

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

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



Electrical Permit Application
 City of Beaverton Community Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 620-2403; Fax: (503) 626-2550
 Internet address: www.BeavertonOregon.gov

RECEIVED

OFFICE USE ONLY

Date Received: 09/27/2019 Permit No.: B2019-4066
 Date Issued: 10-16-19 By: JMK
 Payment Type: Check

CITY OF BEAVERTON
 BUILDING DIVISION PLAN REVIEW

TYPE OF WORK
 New construction
 Addition/alteration/replacement
 Other

CATEGORY OF CONSTRUCTION
 1- and 2-family dwelling
 Multi-family
 Commercial/Industrial
 Master builder
 Accessory building
 Other

JOB SITE INFORMATION AND LOCATION
 Job no.: Job address: 11703 SW SOPHIA CT.
 City/State/ZIP: BEAVERTON, OR 97225
 Sublot/bldg./sept. no.: Project name: CAMERON PLACE
 Cross street/directions to job site: WALKER RD. to LYNNFIELD LANE
 Sublot/lot: CAMERON PLACE Lot no.:
 Tax map/parcel no.:

DESCRIPTION OF WORK
 NEW SINGLE FAMILY RESIDENCE

PROPERTY OWNER TENANT
 Name: Mission Homes NW, LLC
 Address: PO Box 1688
 City/State/ZIP: Lake Oswego, OR 97035
 Phone: (503) 381-3763 Fax: (503) 214-8524
 Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: Date:

APPLICANT CONTACT PERSON
 Business name: Mission Homes NW, LLC
 Contact name: Josh Kelso
 Address: PO Box 1688
 City/State/ZIP: Lake Oswego, OR 97035
 Phone: (503) 381-3763 Fax: (503) 214-8524
 E-mail: joshkelso3@gmail.com

CONTRACTOR
 Business name: Connections Electric Inc
 Address: PO 7136
 City/State/ZIP: Salem, OR 97303
 Phone: (503) 390-7914 Fax: (503) 488-8883
 E-mail: connections.electric@netnet.com CCB No. 65444
 Electrical No. 24-248C City or metro lic. 6485
 Supervising electrician signature, required:
 Print name: Marvin Bergovin Date:
 Authorized signature:
 Print name: JOSH KELSO Date: 9-25-19

Please check all that apply:

<input type="checkbox"/> Service or feeder 400 amps or more	<input type="checkbox"/> Service or feeder over 600 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marina and boatyards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "F2," "F3" occupancy
	<input type="checkbox"/> Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less	1	144.20		4
Ea. add'l 500 sq. ft. or portion	5	26.76		
Limited energy, residential (with above sq. ft.)	1	34.40		2
Limited energy, multi-family residential (with above sq. ft.)		67.95		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	66.00		2
201 amps to 400 amps		102.15		2
401 amps to 600 amps		169.90		2
601 amps to 1,000 amps		222.20		2
Over 1,000 amps or volts		611.35		2
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		67.95		2
201 amps to 400 amps		94.40		2
401 amps to 600 amps		136.40		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit				
		3.15		2
B. Fee for branch circuits without service or feeder fee, first branch circuit				
		60.10		2
Each add'l branch circuit		3.15		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		67.95		2
Utility reconnect		67.95		1
Pump or irrigation circuit		67.95		2
Sign or outline lighting		67.95		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95		3
Each additional inspection over allowable in any of the above				
Per inspection		60.10		
Investigation fee				
Other:				
ELECTRICAL PERMIT FEES				
Subtotal			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			0.00	

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



Electrical Permit Application
 City of Beaverton Community Development
 PO Box 4755, Beaverton, OR 97078
 Phone: (503) 826-2403; Fax: (503) 626-2650
 Internet address: www.BeavertonOregon.gov

RECEIVED

OFFICE USE ONLY	
Date Received: 8/30/2017	Permit No.: B2019-3718
Date Issued: 10-16-19	By: [Signature]
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: Check	

<input checked="" type="checkbox"/> New construction		<input type="checkbox"/> Addition/alteration/replacement	
<input type="checkbox"/> Other			
CATEGORY OF CONSTRUCTION			
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial	<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder	<input type="checkbox"/> Other	
JOB SITE INFORMATION AND LOCATION			
Job no.:	Job address: 11704 SW SOPHIA COURT		
City/State/ZIP: BEAVERTON, OR 97225	Project name: CAMERON PLACE		
Suite/bldg./apt. no.:	Cross street/directions to job site: WALKER Rd to Lynnfield		
Subdivision: CAMERON PLACE	Lot no.:	9	
DESCRIPTION OF WORK			
NEW SINGLE FAMILY			
<input checked="" type="checkbox"/> PROPERTY OWNER		<input type="checkbox"/> TENANT	
Name: Mission Homes NW, LLO			
Address: PO Box 1689			
City/State/ZIP: Lake Oswego, OR 97036			
Phone: (503) 381-3763		Fax: (503) 214-8624	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.			
Owner signature: _____		Date: _____	
<input checked="" type="checkbox"/> APPLICANT		<input type="checkbox"/> CONTACT PERSON	
Business name: Mission Homes NW, LLO			
Contact name: Josh Kelso			
Address: PO Box 1689			
City/State/ZIP: Lake Oswego, OR 97036			
Phone: (503) 381-3763		Fax: (503) 214-8624	
E-mail: joshkelso3@gmail.com			
CONTRACTOR			
Business name: Connections Electric Inc			
Address: PO 7136			
City/State/ZIP: Salem, OR 97303			
Phone: (503) 390-7914		Fax: (503) 468-8803	
E-mail: connections.electric@hotmail.com		GCCB No.: 65444	
Electrical No.: 24-248C		City or metro No.: 6405	
Supervising electrician signature, required: [Signature]			
Print name: Marvin Bergovin		Date: _____	
Authorized signature: [Signature]			
Print name: JOSH KELSO		Date: 8-30-19	

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I2," "I3" occupancy
	<input type="checkbox"/> Recreational vehicle parks

FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less	1	144.20	
Ea. add'l 600 sq. ft. or portion	5	26.75	
Limited energy, residential (with above sq. ft.)	1	34.40	2
Limited energy, multi-family residential (with above sq. ft.)		67.95	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less	7	65.00	2
201 amps to 400 amps		102.16	2
401 amps to 600 amps		169.90	2
601 amps to 1,000 amps		222.20	2
Over 1,000 amps or volts		611.56	2
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		67.95	2
201 amps to 400 amps		94.40	2
401 amps to 600 amps		136.40	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.16	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		60.10	2
Each add'l branch circuit		3.16	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		67.95	2
Utility reconnection		67.95	1
Pump or irrigation circle		47.95	2
Sign or outline lighting		67.95	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95	2
Each additional inspection over allowable in any of the above			
Per inspection		60.10	
Investigation fee			
Other:			

ELECTRICAL PERMIT FEES	
Subtotal	0.00
Plan review (25% of permit fee)	
State surcharge (12% of permit fee)	0.00
TOTAL PERMIT FEE	0.00

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00882

Approval Code: 03483G 10/9/2019 1:51 pm

E-mailed To: crystair@westsideelectric.com

32019-4241

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: 12355 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 1	
Project Name: 4119-ALLEN CROSSING/TIP PROPERTY	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CC05900	
DESCRIPTION OF WORK	
UNIT#1-14 PANEL CHANGES IN (14) UNITS.	
APPLICANT	
Name: CRYSTAL KREGER	
Phone: 5032311548	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-135C	CCB lic. no.: 13306
Business Name: WEST SIDE ELECTRIC COMPANY INC	
Contact:	
Address: 1834 SE 8TH AVE	
City/State/ZIP: PORTLAND, OR 972143532	
Phone: 5032311548	Fax: 5037360677
Email: DICKK@WESTSIDEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	14	\$115.83	\$1,621.62
Electrical Permit Fees			
Subtotal			\$1,621.62
State surcharge (12% of permit total)			\$194.59
TOTAL PERMIT FEE			\$1,816.21

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

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

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

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



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

82019-4239
Residential Electrical Authorization To Begin Work
05350-BEL-19-00881
 Approval Code: 02826G 10/9/2019 11:10 am
 E-mailed To: phil@cohoelectric.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: 11206 SW PINTAIL LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Parsons/Barnes	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DB07400	
DESCRIPTION OF WORK	
Kitchen remodel - lighting, outlets, appliances	
APPLICANT	
Name: phillip kddd	
Phone: 5035829774	Fax: 5035829840
Email:	
CONTRACTOR	
Elec lic. no.: 3-575C	CCB lic. no.: 157169
Business Name: COHO ELECTRIC INC	
Contact:	
Address: PO BOX 40	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5035829774	Fax: 5035829840
Email: philkddd@verizon.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	7	\$4.26	\$29.82
Electrical Permit Fees			
Subtotal			\$110.96
State surcharge (12% of permit total)			\$13.32
TOTAL PERMIT FEE			\$124.28

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

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

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

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



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

B2019-4238

Residential Electrical Authorization To Begin Work
05350-BEL-19-00880

Approval Code: 009600 10/9/2019 10:52 am

E-mailed To: precisionwelectrical@yahoo.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: 7625 SW 136TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Madland	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CA02700	
DESCRIPTION OF WORK	
6- circuit kitchen remodel	
APPLICANT	
Name: Mike McDonald	
Phone: 5034139870	Fax: 5035942873
Email:	
CONTRACTOR	
Elec lic. no.: C47	CCB lic. no.: 163318
Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC	
Contact:	
Address: 14842 SE REGNER TERRACE	
City/State/ZIP: BORING, OR 97009	
Phone: 5038802754	Fax: 5036581615
Email: PRECISIONNWELECTRICAL@YAHOO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

B 2019-4237

Commercial Electrical Authorization To Begin Work
05350-BEL-19-00879

Approval Code: 01900G 10/9/2019 8:40 am

E-mailed To: omni_electric@hotmail.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: 9140 SW HALL BLVD	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.: B	
Project Name: Borlaugh	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126CA01200	
DESCRIPTION OF WORK	
new service	
APPLICANT	
Name: John Kelso	
Phone: 5037470805	Fax: 5037470815
Email:	
CONTRACTOR	
Elec lic. no.: C297	CCB lic. no.: 176615
Business Name: BROTHERS ELECTRIC INC	
Contact:	
Address: 16670 SW WRIGHT ST	
City/State/ZIP: BEAVERTON, OR 97007	
Phone: 5037470805	Fax: 5036492709
Email: OMNI_ELECTRIC@HOTMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	2	\$115.83	\$231.66
Electrical Permit Fees			
Subtotal			\$231.66
State surcharge (12% of permit total)			\$27.80
TOTAL PERMIT FEE			\$259.46

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 08/20/2019	Permit No.: B2019-3535
Date Issued: 10-10-19	By: JK
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: Check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17436 SW DOTTEREL LN.
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 160
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	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: 01/29/19
<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: Garner Electric	
Address: 2920 SE BROOKWOOD AVE STE A	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: (503) 648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4410
Supervising electrician signature, required:	
Print name: Chuck Garner	Date: 01/29/19
Authorized signature:	
Print name: Melissa Stock	Date: 01/29/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less	1	194.64		4
Ea. add'l 500 sq. ft. or portion	4	34.77		
Limited energy, residential (with above sq. ft.)	1	46.42	46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			162.25	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			19.47	
TOTAL PERMIT FEE			\$181.72	

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00883

Approval Code: 642008 10/10/2019 9:14 am

E-mailed To: office@squireselectric.com

B2019-4247

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: 6185 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AB07700	
DESCRIPTION OF WORK	
7 circuits Rewire 7 branch circuits containing AL wiring) DW, disp, kit plugs/lights, bath heat/ lights, entry switches, LR plugs, bedroom	
APPLICANT	
Name: Jordan Yam	
Phone: 5032521609	Fax: 5032535831
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 2203 NE MARTIN LUTHER KING JR BLVD	
City/State/ZIP: PORTLAND, OR 97212	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/8/2019	Permit No.: B2019-4210
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 5.4777	Job address: 17235 SW Corridor Ct suite 150
City/State/ZIP: Beaverton, Oregon 97006	
Suite/bldg./apt. no.:	Project name: Wunderland Laser Tag
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New black lights and egress lighting for multiple level laser tag. Add receptacles for event items.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Tice Electric	
Contact name: Kevin Shannon	
Address: 5405 N Lagoon Ave	
City/State/ZIP: Portland, OR 97217	
Phone: (503) 872-8238	Fax:
E-mail: kevin@ticeelectric.com	
CONTRACTOR	
Business name: Tice Electric	
Address: 5405 N Lagoon Ave	
City/State/ZIP: Portland, Oregon 97217	
Phone: (503) 233-8801	Fax:
E-mail: permits@ticeelectric.com	CCB lic. no.: 166
Electrical lic. no.: 26-126C	City or metro lic.: 2014
Supervising electrician signature, required:	
Print name: Bob Richardson	Date: 10/07/19
Authorized signature: <i>Bob Richardson</i> 39405	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input checked="" type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit	14	4.26	\$59.64
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	\$81.14
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	\$91.72
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			\$232.50
Plan review (25% of permit fee)			\$58.13
State surcharge (12% of permit fee)			\$27.90
TOTAL PERMIT FEE			\$303.62

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-14-19	Permit No.: B2019-4282
Date issued: 10-14-19	By: ML
Payment Type: Visa	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 13700 NW Science Park Dr
City/State/ZIP: Portland, OR 97229	
Suite/bldg./apt. no.:	Project name: Home Depot
Cross street/directions to job site: Sunset Hwy	
Subdivision:	Lot no.:
Tax map/parcel no.: R0633354	
DESCRIPTION OF WORK	
3 SIGN HOOD UPS	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Home Depot	
Address: 13700 NW Science Park Dr	
City/State/ZIP: Portland, OR 97229	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Hannah Sign Systems	
Contact name: Dave Lanphere	
Address: 1660 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	
CONTRACTOR	
Business name: Hannah Sign Systems	
Address: 1660 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	
Electrical lic. no.: CLS34	CCB lic. no.: 203638
City or metro lic.: 11533	
Supervising electrician signature, required:	
Print name: Dave Demuth	Date:
Authorized signature:	
Print name: Dave Lanphere	Date:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit, includes attached garage			
1,000 sq. ft. or less		194.64	4
Each add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting	3	91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$308.18

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-14-19	Permit No.: B2019-4278
Date Issued: 10-14-19	By: JWC
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: C190823	Job address: 12875 SW Crescent Street
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: The Rise CC
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Capitol Data & Communications	
Contact name: Christina Williams	
Address: 11401 NE Marx St	
City/State/ZIP: Portland, OR 97220	
Phone: (503) 255-9488	Fax: (503) 255-1966
E-mail: Christina@cepdx.com	
CONTRACTOR	
Business name: Capitol Data & Communications	
Address: 11401 NE Marx St	
City/State/ZIP: Portland, OR 97220	
Phone: (503) 255-9488	Fax: (503) 255-1966
E-mail: CDPpermits@cepdx.com	
Electrical lic. no.: 26-1054CLE	CCB lic. no.: 142457
City or metro lic.: 6380	
Supervising electrician signature, required: <i>Peter Bledsoe</i>	
Print name: Peter Bledsoe	Date: 10/14/19
Authorized signature: <i>Peter Bledsoe</i>	
Print name: Peter Bledsoe	Date: 10/14/19

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

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

* Number of inspections allowed per permit.
 Form B70-1002



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-14-19	Permit No.: 32019-4280
Date Issued: 10-14-19	By: <i>[Signature]</i>
	Payment Type: <i>Visa</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 2990 SW West Point Ave
City/State/ZIP: Portland, OR 97225	
Suite/bldg./apt. no.:	Project name: kitchen island
Cross street/directions to job site: corner of SW Linden	
Subdivision: West Point Park	Lot no.: Block 2, Lot 14
Tax map/parcel no.: 1S112BD-02714	
DESCRIPTION OF WORK	
Add outlet on new kitchen island connected to existing kitchen outlet circuit	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Warren C. Deras, trustee/Michael and Megan Gardner	
Address: 2990 SW West Point Ave	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 515-8031	Fax:
E-mail: warrenderas@comcast.net	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>[Signature]</i>	Date: 10/14/19
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Warren C. Deras	
Address: 10559 SW Windwood Way	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 515-8031	Fax:
E-mail: warrenderas@comcast.net	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits – new, alteration, or extension, per panel			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	2
Each add'l branch circuit		4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			<i>890.88</i>

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-11-19	Permit No. B20P1-4259
Date Issued: 10-11-19	By: CLEM
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 190922003	Job address: 6600 SW 92nd Ave
City/State/ZIP: Portland, OR 97223	
Suite/bldg./apt. no.: 280	Project name: JL Audio
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installing Burglar Alarm	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: On Watch Technologies	
Contact name: Andrea Kuntz	
Address: 13023 NE Hwy 99 Suite 7-707	
City/State/ZIP: Vancouver, WA 98686	
Phone: (360) 828-8169	Fax:
E-mail: admin@onwatchtechnologies.com	
CONTRACTOR	
Business name: On Watch Technologies	
Address: 13023 NE Hwy 99 Suite 7-707	
City/State/ZIP: Vancouver, WA 98686	
Phone: (360) 828-8169	Fax:
E-mail: admin@onwatchtechnologies.com	CCB lic. no.: 221138
Electrical lic. no.: CLE526	City or metro lic.:
Supervising electrician signature, required: <i>Shane Kuntz</i>	
Print name: Shane Kuntz	Date: 10/11/19
Authorized signature: <i>Andrea Kuntz</i>	
Print name: Andrea Kuntz	Date: 10/11/19

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00885

Approval Code: 904105 10/14/2019 7:50 am

E-mailed To: hec@hugheselectrical.com

3009-4208

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: 7931 SW CIRRUS DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 19A782 - 23G PARKSIDE BUSINESS CENTERS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DD00300	
DESCRIPTION OF WORK	
REPLACE OUTLETS	
APPLICANT	
Name: Brandy Smith	
Phone: 5066472221	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 34-281C	CCB lic. no.: 49850
Business Name: HUGHES ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 5592 NE CLARA LN	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036472221	Fax: 5036477754
Email: HEC@HUGHESELECTRICAL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-11-19	Permit No.: 32019-4205
Date Issued: 10-11-19	By: [Signature]
Payment Type: Visa	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4655 SW Griffith Dr
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Verizon
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Connect (2) Signs	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Verizon	
Address: 4655 SW Griffith Dr	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Hannah Sign Systems	
Contact name: Dave Lanphere	
Address: 1660 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	
CONTRACTOR	
Business name: Hannah Sign Systems	
Address: 1660 SW Bertha Blvd	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 946-8373	Fax: (503) 206-4900
E-mail: davel@hannahsignsystems.com	
Electrical lic. no.: CLS34	City or metro lic.: 11533
Supervising electrician signature, required: [Signature]	
Print name: Dave Lanphere	Date: 10/11/19
Authorized signature: [Signature]	
Print name: Dave Lanphere	Date: 10/11/19

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

This permit application expires if a permit is not obtained within 100 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received: 10/07/2019	Permit No.: B2019-4182
Date Issued: 10-11-19	By: ML
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: MC	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1N131CD9500	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 4.41 kW	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 10/03/2019
Authorized signature: <i>Jeffrey Lee</i>	
Print name: Jeff Lee	Date: 10/03/2019

FEE SCHEDULE			
Number of Inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$90.88

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2019-4248
Date Issued: 10/11/2019	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: sign installation	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 4283M	Job address: 12620 SW 1st St
City/State/ZIP: Beaverton Oregon 97005	
Suite/bldg./apt. no.:	Project name: syndicate blade sign
Cross street/directions to job site: SW 1st St and Watson Ave	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
installation of new blade sign with exterior neon	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: David Anderson	
Address: 12620 SW 1st St	
City/State/ZIP: Beaverton Oregon 97005	
Phone: (971) 227-0341	Fax:
E-mail: operations@syndicatewines.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Security Signs, Inc.	
Contact name: Cyndi Stocks	
Address: 2424 SE Hoglate Blvd	
City/State/ZIP: Portland, OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	
CONTRACTOR	
Business name: Security Signs, Inc.	
Address: 2424 SE Hoglate Blvd	
City/State/ZIP: Portland, OR 97202	
Phone: (503) 546-7102	Fax: (503) 230-1861
E-mail: permits@securitysigns.com	CCB lic. no.: 122809
Electrical lic. no.:	City or metro lic.: 2561
Supervising electrician signature, required:	
Print name: Marc Linquist	Date: 10/10/19
Authorized signature:	
Print name: Kevin Keljo	Date: 10/10/19

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 8.20.19	Permit No.: B2019-3611
Date Issued:	By:
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8625 SW Cascade Sq. Ave.
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.: 506	Project name: Cascade Sq. Suite 506
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Connecting thermostats.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Same as Below	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Willamette HVAC, LLC	
Address: 3075 SE Century Blvd. Suite 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 259-3200	Fax: (503) 848-2597
E-mail: mmalstrom@willamettehvac.com	CCB lic. no.: 56951
Electrical lic. no.: 34-346CRE	City or metro lic.: 7433
Supervising electrician signature, required:	
Print name: Mike Sicard	Date: 08/19/19
Authorized signature:	
Print name: Michael Malstrom	Date: 08/19/19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more <input type="checkbox"/> Fire pump <input type="checkbox"/> Emergency system <input type="checkbox"/> Addition of new motor load of 100HP or more <input type="checkbox"/> Six or more residential units <input type="checkbox"/> Health-care facilities <input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				9.74
TOTAL PERMIT FEE			\$90.88	

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



Electrical Permit Application

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

RECEIVED

OFFICE USE ONLY

Date Received: 8/28/2019	Permit No.: 2019-3053
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15530 SW Beaverton Creek Ct
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Apollo
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
low voltage controls	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: HVAC, Inc.	
Contact name: Jody DePew	
Address: 5188 SE International Way	
City/State/ZIP: Milwaukie, OR 97222	
Phone: (503) 462-4822	Fax: (503) 462-6555
E-mail: jodyd@hvacinco.com	
CONTRACTOR	
Business name: HVAC, Inc.	
Address: same as above	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: 50897
Electrical lic. no.: 26-571CLE	City or metro lic.: 2129
Supervising electrician signature, required:	
Print name: Mike Schmidgall	Date: 08/27/19
Authorized signature:	
Print name: Jody DePew	Date: 08/27/19

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Installation of 160 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	
TOTAL PERMIT FEE			\$102.73	

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



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received: 09/09/2019	Permit No.: B2019-3814
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 8710 SW Maverick Terrace
City/State/ZIP: Portland, OR 97008	
Suite/bldg./apt. no.:	Project name: Cottrell
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of 4.34kW solar photovoltaic system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Carlton Cottrell	
Address: 8710 SW Maverick Terrace	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-939-7881	Fax:
E-mail: carltoncottrell@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Imagine Energy	
Address: 7001 NE Columbia Blvd	
City/State/ZIP: Portland, OR 97218	
Phone: 5419122390	Fax:
E-mail: H.Kearns@imagineenergy.net	CCB lic. no.: 167964
Electrical lic. no.: 50975	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: <i>Grant R. Langlin</i>	Date: 09/05/19
Authorized signature: <i>[Signature]</i>	
Print name: <i>Heath Kearns</i>	Date: 09/05/19

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

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



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2019-3843
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Five oaks/triple creek	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 6.2 kW	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: Samuel Collier	
Print name: Samuel Collier	Date: 08/27/2019
Authorized signature:	
Print name: Jeff Lee	Date: 08/27/2019

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

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

\$129.73



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2019-3847
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar PV	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Residential Rooftop Solar PV 3.41 kW	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
CONTRACTOR	
Business name: Blue Raven Solar, LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	CCB lic. no.: 210112
Electrical lic. no.: c1214	City or metro lic.: 5869S
Supervising electrician signature, required: <i>Samuel Collier</i>	
Print name: Samuel Collier	Date: 08/20/2019
Authorized signature: <i>Jeff Lee</i>	
Print name: Jeff Lee	Date: 08/20/2019

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

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

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REV 10/17

\$90.88

PV SOLAR (STD)



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received: 9-27-19	Permit No.: B2019-4061
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Solar	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 13890 SW Bonnie Brae 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	
Installation and hook up of <input checked="" type="checkbox"/> roof-mount 4.5kW solar system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Robert Cherry	
Address: 13890 SW Bonnie Brae St.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 709-5997	Fax:
E-mail: goldencherrys@comcast.net	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: Green Ridge Solar	
Address: 19450 SW Mohave Ct.	
City/State/ZIP: Tualatin, OR 97062	
Phone: (503) 395-1943	Fax:
E-mail: operations@greenridgepower.c	CCB lic. no.: 210450
Electrical lic. no.: C1490	City or metro lic.: 12831
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: George Buliga	Date: 09/10/19
Authorized signature: <i>[Signature]</i>	
Print name: Hilary Conway	Date: 09/10/19

FEE SCHEDULE			
Number of Inspections per Item (1) Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	81.14
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (GAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> <small>See Check Box if plan review is required</small> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$90.88

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

Form B70-1005

REV 10/17



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2019-3201
Date Issued:	By:
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 16039 SW Waxwing Way,
City/State/ZIP:	Beaverton, OR 97007
Suite/bldg./apt. no.:	Project name: Robert Wood
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
PV ROOF MOUNT	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Robert Wood	
Address: 16039 SW Waxwing Way,	
City/State/ZIP: Beaverton, OR 97007	
Phone: 503 579 2444	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: SolarCity Corp. dba TESLA	
Address: 6132 NE 112th Ave	
City/State/ZIP: Portland OR 97220	
Phone: 503-894-6903	Fax: 1-866-445-7459
E-mail: Melissa.Farias@SolarCity.com	CCB lic. no.: 180498
Electrical lic. no.: C562	City or metro lic.: 10324
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Nicholas Armstrong - 58735	Date: 07.22.19
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Farias	Date: 07.22.19

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

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

rev 7/13

129,73



Beaverton
OREGON

City Of Beaverton
12726 SW Millkan Way
Beaverton, OR 97076
Phone: 503-526-2542
Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00867

Approval Code: 011880 10/4/2019 10:36 am

E-mailed To: donwilsue4@aol.com

B2019-4102

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: 11921 SW STEAMBOAT DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek Apt	
Cross Street/directions to job site: Bld #19	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood. All new devices and LED lighting New T-stats and heaters	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	167	\$4.26	\$711.42
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$976.00
State surcharge (12% of permit total)			\$117.12
TOTAL PERMIT FEE			\$1,093.12

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

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

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

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



City Of Beaverton

12725 SW Millikan Way
Beaverton, OR 97076
Phone: 503-526-2542

Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00868

Approval Code: 026640 10/4/2019 10:40 am

E-mailed To: donwilsue4@aol.com

B2019-4163

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: 11925 SW STEAMBOAT DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek Apt	
Cross Street/directions to job site: Bld # 18	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood. All new devices and LED lighting New T-stats and heaters	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations		
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more		
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor		
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards		
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings		
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys		
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"		
	<input type="checkbox"/> Recreational Vehicle Parks		
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	111	\$4.26	\$472.86
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$737.44
State surcharge (12% of permit total)			\$88.49
TOTAL PERMIT FEE			\$825.93

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

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

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

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00870

BZ09-4105

Approval Code: 019632 10/4/2019 10:44 am

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12017 SW STEAMBOAT DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Redwood Creek Apt	
Cross Street/directions to job site: Bld # 17	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood. All new devices and LED lighting New T-stats and heaters	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-8-19	Permit No.: B209-4154
Date Issued: 10-9-19	By: <i>clm</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14870 SW Davis Rd
City/State/ZIP: Beaverton/OR/97007	
Suite/bldg./apt. no.:	Project name: LUX ADDITION
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: R2089952	
DESCRIPTION OF WORK	
Addition under 1100 sqft addition to our home. Demo'd addition was serviced by existing panel. Addition to use same panel. No additional	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Jeff Lux	
Address: See above	
City/State/ZIP:	
Phone: 503-267-5312	Fax:
E-mail: jeff.lux01@gmail.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Home owner	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	6	4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0	
TOTAL PERMIT FEE			0	

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00884

Approval Code: 509181 10/10/2019 12:48 pm

E-mailed To: permits@christenson.com

B2019-4254

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: 16201 NW SCHENDEL AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 94736 Hunters Run	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BB00700	
DESCRIPTION OF WORK	
disconnect-reconnect	
APPLICANT	
Name: Christenson Electric	
Phone: 5034193300	Fax: 5034193333
Email:	
CONTRACTOR	
Elec lic. no.: 26-34C	CCB lic. no.: 458
Business Name: CHRISTENSON ELECTRIC INC	
Contact:	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR 97230	
Phone: 5034193300	Fax: 5034193333
Email: marijo.beckman@christenson.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No. B2019-4249
Date Issued: 10/10/2019	BN
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 108966	Job address: 13979 SW Millikan Way
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Vernier Software
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install AES Radio	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Performance Systems Integrated	
Contact name: Katie Harbaugh	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 641-2222	Fax: (503) 641-1464
E-mail: katieh@psintegrated.com	
CONTRACTOR	
Business name: Performance Systems Integrated	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 641-2222	Fax: (503) 641-1464
E-mail: katieh@psintegrated.com	CCB lic. no.: 227526
Electrical lic. no.: CLE569	City or metro lic.: 11810
Supervising electrician signature, required: <i>Michael Brooks</i>	
Print name: Michael Brooks	Date: 10/10/19
Authorized signature: <i>Katie Harbaugh</i>	
Print name: Katie Harbaugh	Date: 10/10/19

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10/10/2019	Permit No: B2019-0144
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 5725 SW Lombard
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	
Add to permit # B2019-0144 to rewire home	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: A&J Electric, Inc	
Address: PO Box 330	
City/State/ZIP: Forest Grove, OR 97116	
Phone: 503-359-5891	Fax:
E-mail: Leeann@aandj-electric.com	OSB lic. no.: 959
Electrical lic. no.: 34-1C	City or metro lic.: 10477
Supervising electrician signature: <i>Richard McElliott</i>	
Print name: Richard McElliott	Date: 10/08/2019
Authorized signature:	
Print name:	Date:

ADD TO EXISTING PERMIT

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit	12	4.26	51.12
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			51.12 0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			57.25 \$0.00

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



Electrical Permit Application

Community Development
 PO Box 4765, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2650
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY

Date Received:	Permit No: B2019-4232
Date Issued: 10-9-18	By: <i>ME</i>
	Payment Type: VRSC

TYPE OF WORK:

New construction Addition/alteration/replacement
 Other:

CATEGORY OF CONSTRUCTION:

1- and 2-family dwelling Commercial/Industrial Accessory building
 Multi-family Master builder Other:

JOB SITE INFORMATION AND LOCATION:

Job no.: Job address: **4545 SW Angel Ave**

City/State/ZIP: **Beaverton OR**

Suite/bldg./apt. no.: Project name: **Raindrop Taphouse**

Cross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK:

Install (1) sign circuit

PROPERTY OWNER TENANT

Name:

Address:

City/State/ZIP:

Phone: Fax:

E-mail: **Cbrown@ramsaysigns.com**

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: _____ Date: _____

APPLICANT CONTACT PERSON

Business name: **Ramsay Signs**

Contact name: **Chris Brown**

Address: **9160 SE 74th Ave**

City/State/ZIP: **Portland OR 97208**

Phone: **(503) 777-4555** Fax: **(503) 777-0220**

E-mail: **Cbrown@ramsaysigns.com**

CONTRACTOR:

Business name: **Ramsay Signs**

Address: **9160 SE 74th Ave**

City/State/ZIP: **Portland OR 97208**

Phone: **(503) 777-4555** Fax: **(503) 777-0220**

E-mail: **Cbrown@ramsaysigns.com** CCB Ito. no.: **63422**

Electrical Ito. no.: **26-106CLS** City or metro Ito.: **9036**

Supervising electrician signature, required: *Phil Steiger*

Print name: **Phil Steiger** Date:

Authorized signature: *Chris Brown*

Print name: **Chris Brown** Date:

PLAN REVIEW

Please check all that apply:

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

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		160.49	0.00	4
Ea. add'l 500 sq. ft. or portion		28.67	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		85.60	0.00	2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		689.13	0.00	2
Utility reconnect		75.63	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		75.63	0.00	2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		161.81	0.00	2
601 amps to 1,000 amps		185.78	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		86.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting	(1)	75.63	75.63	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: Install (1) sign circuit		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			75.63	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.08	
TOTAL PERMIT FEE			\$84.71	

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

* Number of inspections allowed per permit.



Electrical Permit Application

Community Development
 PO Box 4765, Beaverton, OR 97076
 Phone: (503) 626-2403; Fax: (503) 626-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No: B2019-4231
Date Issued: 10-9-19	By: me
	Payment Type: VISL

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

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

JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12750 SW Farmington Rd

City/State/ZIP: Beaverton OR	
Suite/bldg./apt. no.:	Project name: Global Art of Dance
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install (1) sign circuit

<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
---	--

Name:

Address:

City/State/ZIP:

Phone: Fax:

E-mail: Cbrown@ramsaysigns.com

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: _____ Date: _____

<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
---	--

Business name: Ramsay Signs

Contact name: Chris Brown

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

Phone: (503) 777-4555 Fax: (503) 777-0220

E-mail: Cbrown@ramsaysigns.com

CONTRACTOR

Business name: Ramsay Signs

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

Phone: (503) 777-4555 Fax: (503) 777-0220

E-mail: Cbrown@ramsaysigns.com CCB lic. no.: 63422

Electrical lic. no.: 26-106CLS City or metro lic.: 9036

Supervising electrician signature, required: *Phil Stelger*

Print name: Phil Stelger Date:

Authorized signature: *Chris B*

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

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		160.49	0.00	4
Ea. add'l 500 sq. ft. or portion		28.67	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		95.60	0.00	2
201 amps to 400 amps		119.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		569.13	0.00	2
Utility reconnect		76.63	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		76.63	0.00	2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		161.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.61	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.61	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		76.63	0.00	2
Pump or irrigation circle		76.63	0.00	2
Sign or outline lighting	(1)	76.63	76.63	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: Install (1) sign circuit		75.63	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			75.63	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.08	
TOTAL PERMIT FEE			\$84.71	

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



Electrical Permit Application

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: B2019-4230
Date Issued: 10-11-19	By: JK
	Payment Type: Visa

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

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

JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4570 SW Watson Ave

City/State/ZIP: Beaverton OR

Suite/bldg./apt. no.:	Project name: Blgs Chicken
-----------------------	----------------------------

Cross street/directions to job site:

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

DESCRIPTION OF WORK

Install (1) sign circuit

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
--	---------------------------------

Name:

Address:

City/State/ZIP:

Phone:	Fax:
--------	------

E-mail: Cbrown@ramsaysigns.com

Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: _____ Date: _____

<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
---	--

Business name: Ramsay Signs

Contact name: Chris Brown

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

Phone: (503) 777-4555	Fax: (503) 777-0220
-----------------------	---------------------

E-mail: Cbrown@ramsaysigns.com

CONTRACTOR

Business name: Ramsay Signs

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

Phone: (503) 777-4555	Fax: (503) 777-0220
-----------------------	---------------------

E-mail: Cbrown@ramsaysigns.com	COB lic. no.: 63422
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Electrical lic. no.: 26-1066LS	City or metro lic.: 9036
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Supervising electrician signature, required:
--

Print name: Phil Stelger	Date:
--------------------------	-------

Authorized signature:

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

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		160.49	0.00	4
Ea. add'l 500 sq. ft. or portion		28.87	0.00	
Limited energy, residential (with above sq. ft.)		38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.83	0.00	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		95.80	0.00	2
201 amps to 400 amps		113.89	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		589.13	0.00	2
Utility reconnect		75.83	0.00	1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		75.83	0.00	2
201 amps to 400 amps		105.08	0.00	2
401 amps to 600 amps		161.81	0.00	2
601 amps to 1,000 amps		185.78	0.00	2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		86.90	0.00	2
Each add'l branch circuit		3.51	0.00	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		75.83	0.00	2
Pump or irrigation circle		75.83	0.00	2
Sign or outline lighting	(1)	75.83	75.83	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: Install (1) sign circuit		75.83	0.00	2
Each additional inspection over allowable in any of the above				
Per inspection		86.80		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

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



Electrical Permit Application

Community Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2650
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No: 152019-4229
Date Issued: 10-9-19	By: MZ
	Payment Type: VUS

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4590 SW Watson Ave
City/State/ZIP: Beaverton OR	
Suite/bldg./apt. no.:	Project name: Lionheart Coffee
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install (1) sign circuit	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: Cbrown@ramsaysigns.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Ramsay Signs	
Contact name: Chris Brown	
Address: 9160 SE 74th Ave	
City/State/ZIP: Portland OR 97206	
Phone: (503) 777-4555	Fax: (503) 777-0220
E-mail: Cbrown@ramsaysigns.com	
CONTRACTOR	
Business name: Ramsay Signs	
Address: 9160 SE 74th Ave	
City/State/ZIP: Portland OR 97206	
Phone: (503) 777-4555	Fax: (503) 777-0220
E-mail: Cbrown@ramsaysigns.com	
Electrical lic. no.: 26-106CLS	City or metro lic. no.: 9036
Supervising electrician signature, required:	
Print name: Phil Steiger	Date:
Authorized signature: <i>[Signature]</i>	

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit (includes attached garage)			
1,000 sq. ft. or less		160.49	0.00 4
Ea. add'l 500 sq. ft. or portion		28.67	0.00
Limited energy, residential (with above sq. ft.)		38.28	0.00 2
Limited energy, multi-family residential (with above sq. ft.)		75.83	0.00 2
Services or feeders (installation, alteration, and/or relocation)			
200 amps or less		95.60	0.00 2
201 amps to 400 amps		113.69	0.00 2
401 amps to 600 amps		189.10	0.00 2
601 amps to 1,000 amps		247.31	0.00 2
Over 1,000 amps or volts		669.13	0.00 2
Utility reconnect		75.83	0.00 1
Temporary services or feeders (installation, alteration, and/or relocation)			
200 amps or less		75.83	0.00 2
201 amps to 400 amps		105.08	0.00 2
401 amps to 600 amps		181.81	0.00 2
601 amps to 1,000 amps		186.76	0.00 2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.61	0.00 2
B. Fee for branch circuits without service or feeder fee, first branch circuit		68.90	0.00 2
Each add'l branch circuit		3.51	0.00
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		75.83	0.00 2
Pump or irrigation circle		75.83	0.00 2
Sign or outline lighting	(1)	75.83	75.83 2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe: Install (1) sign circuit		75.83	0.00 2
Each additional inspection over allowable in any of the above			
Per inspection		66.90	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			75.83
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			9.06
TOTAL PERMIT FEE			\$84.71

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



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00877

Approval Code: 00585G 10/8/2019 3:18 pm

E-mailed To: info@rosecityelectricco.com

32019-4220

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: 4550 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC09800	
DESCRIPTION OF WORK	
6 circuits for yard lighting	
APPLICANT	
Name: Scott Busch	
Phone: 5036417902	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C729	CCB lic. no.: 193652
Business Name: ROSE CITY ELECTRIC CO	
Contact:	
Address: PO BOX 10004	
City/State/ZIP: PORTLAND, OR 97296	
Phone: 5032876164	Fax: 5032821060
Email: INFO@ROSECITYELECTRICCO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97006
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00878

Approval Code: 007001 10/8/2019 3:25 pm

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

B2019-4221

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: 15350 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 311490205 - Parkside Cutting Room	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CA00800	
DESCRIPTION OF WORK	
Unit B - Provide branch power for relocated equipment. Room PA2-2153	
APPLICANT	
Name: Nick Badger	
Phone: 5037530781	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C448	CCB lic. no.: 182452
Business Name: IES COMMERCIAL INC	
Contact:	
Address: 16135 SW 74TH AVE	
City/State/ZIP: PORTLAND, OR 97224	
Phone: 5036481900	Fax: 5036709572
Email: cathy.herinckx@ies-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



City Of Beaverton
 12726 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

05350-BEL-19-00876

Approval Code: 06277G 10/8/2019 12:42 pm

E-mailed To: Dreamhouseelectric@gmail.com

PLAN REVIEW

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

FEE SCHEDULE

Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	1	\$4.26	\$4.26
Electrical Permit Fees			
Subtotal			\$85.40
State surcharge (12% of permit total)			\$10.25
TOTAL PERMIT FEE			\$95.65

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 12120 SW FIRWOOD CT

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name: Firwood

Cross Street/directions to job site:

Tax map/parcel no.: 1S127BC00300

DESCRIPTION OF WORK

Rewire 2 bathrooms

APPLICANT

Name: Chris Mahoney

Phone: 5035196711

Fax:

Email:

CONTRACTOR

Elec lic. no.: C848

CCB lic. no.: 196726

Business Name: DREAMHOUSE ELECTRIC LLC

Contact:

Address: 221 SW MOONRIDGE PL

City/State/ZIP: PORTLAND, OR 97225

Phone: 5035196711

Fax:

Email: Dreamhouseelectric@gmail.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

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

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

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

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

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



Electrical Permit Application

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

OFFICE USE ONLY

Date Received: 10/8/2019	Permit No. 52019-4199
Date Issued: 10/8/2019	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 98774	Job address: 11350 SW Cardinal Terr
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: Mejia
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
reconnect gas furnace and air conditioner	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Oscar Mejia	
Address: 11350 SW Cardinal Terr	
City/State/ZIP: Beaverton OR 97008	
Phone: 503-442-7357	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Jacobs Heating and Air Conditioning	
Contact name: Michelle Taylor	
Address: 4474 SE Milwaukie Ave	
City/State/ZIP: Portland OR 97202	
Phone: 503-234-7331	Fax: 503-808-9108
E-mail: michellet@jacobsheating.com	
CONTRACTOR	
Business name: Jacobs Heating and Air Conditioning	
Address: 4474 SE Milwaukie Ave	
City/State/ZIP: Portland OR 97202	
Phone: 503-234-7331	Fax: 503-808-9108
E-mail: michellet@jacobsheating.com	CCB lic. no.: 1441
Electrical lic. no.: 704LHR	City or metro lic.: 1265
Supervising electrician signature, required: _____	
Print name: Robert A Kozell	Date: 10/4/19
Authorized signature: _____	
Print name: Michelle Taylor	Date: 10/4/19

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

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form 876-1002 REV 10-17



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 10-8-19	Permit No.: B2019-4206
Date Issued: 10-8-19	By: <i>ME</i>
Payment Type: Reimbursement	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: near 12705 SW Beaverdam Rd
City/State/ZIP: Beaverton, Oregon 97007	
Suite/bldg./apt. no.:	Project name: Temp Parking Lot Electric
Cross street/directions to job site: Canyon	
Subdivision:	Lot no.:
Tax map/parcel no.: 3516	
DESCRIPTION OF WORK	
Install electrical power for vehicle gate controller and car charger receptacle	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: City of Beaverton	
Address: PO Box 4755	
City/State/ZIP: Beaverton, Oregon 97076	
Phone: (503) 526-2493	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: City of Beaverton- Public Works- Traffic Department	
Address: 9600 SW Allen Blvd	
City/State/ZIP: Beaverton, Oregon	
Phone: (503) 526-2222	Fax:
E-mail: citymail@beavertonoregon.og	CCB lic. no.:
Electrical lic. no.: 4676S	City or metro lic.:
Supervising electrician signature, required:	
Print name: David Slater	Date: 10-8-19
Authorized signature: <i>David Slater</i>	
Print name: DAVID SLATER	Date: 10-8-19

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		185.37		4
Ea. add'l 500 sq. ft. or portion		33.11		
Limited energy, residential (with above sq. ft.)		44.21		2
Limited energy, multi-family residential (with above sq. ft.)		87.35		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		110.31		2
201 amps to 400 amps		131.32		2
401 amps to 600 amps		218.42		2
601 amps to 1,000 amps		285.65		2
Over 1,000 amps or volts		657.35		2
Utility reconnect		87.35		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		87.35		2
201 amps to 400 amps		121.34		2
401 amps to 600 amps		175.34		2
601 amps to 1,000 amps		214.56		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.06		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	77.28	77.28	2
Each add'l branch circuit	1	4.06	4.06	
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		87.35		2
Pump or irrigation circle		87.35		2
Sign or outline lighting		87.35	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		87.35		2
Each additional inspection over allowable in any of the above				
Per inspection		77.28		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.34	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.76	
TOTAL PERMIT FEE			\$95.65	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/16



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

Residential Electrical Authorization To Begin Work

05350-BEL-19-00871

Approval Code: 807015 10/7/2019 6:51 am

E-mailed To: drew@protechpdx.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: 8800 SW OXBOW TER	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Bradley	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BC12200	
DESCRIPTION OF WORK	
New panel	
APPLICANT	
Name: Drew Anderson	
Phone: 5037806207	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C916	CCB lic. no.: 198878
Business Name: PRO TECH POWER CORP	
Contact:	
Address: PO BOX 988	
City/State/ZIP: DALLAS, OR 97338	
Phone: 5037806207	Fax: 5036236023
Email: ba_acct@msn.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

B2019-4195

05350-BEL-19-00874

Approval Code: 114712 10/7/2019 9:47 am

E-mailed To: jfoti@advcomserv.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: 4905 SW GRIFFITH DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 107	
Project Name: Casso Consulting	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BD03900	
DESCRIPTION OF WORK	
Dual cable drops.	
APPLICANT	
Name: Joseph Foti	
Phone: 503-598-7082	Fax: 503-598-7320
Email:	
CONTRACTOR	
Elec lic. no.: CLE139	CCB lic. no.: 179445
Business Name: ADVANCED COMMUNICATIONS SERVICES INC	
Contact:	
Address: PO BOX 231196	
City/State/ZIP: PORTLAND, OR 97281	
Phone: 5035987082	Fax: 5035987320
Email: JFOTI@ADVCOMSERV.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00873

Approval Code: 056603 10/7/2019 9:42 am

E-mailed To: dorear@globalelectricusa.com

B2019-4194

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: 16305 NW BETHANY CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 109	
Project Name: Oregon Gymnastics Acadamy	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132BC04900	
DESCRIPTION OF WORK	
Install (1) 50 Amp 208 V Circuit & (1) 20A 120V Circuit To RTU & General Use Outlet	
APPLICANT	
Name: Dustin O'Rear	
Phone: 5036806890	Fax: 5036475649
Email:	
CONTRACTOR	
Elec lic. no.: 34-655C	CCB lic. no.: 156838
Business Name: GLOBAL ELECTRIC INC	
Contact:	
Address: PO BOX 162	
City/State/ZIP: NORTH PLAINS, OR 97133	
Phone: 5036475650	Fax: 5036475649
Email: globalelectric@globalelectricusa.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-19-00872

Approval Code: 04754G 10/7/2019 9:14 am

E-mailed To: info@tritonnw.com

B2019-4193

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: 8625 SW CASCADE AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 500	
Project Name: 6253 Anitian	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AD00102	
DESCRIPTION OF WORK	
Install data cabling, cameras, TVs, and security/access system	
APPLICANT	
Name: Aaron Van Fleet	
Phone: 5036155800	Fax: 5036285689
Email:	
CONTRACTOR	
Elec lic. no.: 34-648CLE	CCB lic. no.: 154665
Business Name: TRITON COMMUNICATIONS LLC	
Contact:	
Address: PO BOX 1091	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036155800	Fax: 5036285689
Email: info@tritonnw.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	4	\$91.72	\$366.88
Electrical Permit Fees			
Subtotal			\$366.88
State surcharge (12% of permit total)			\$44.03
TOTAL PERMIT FEE			\$410.91

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

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

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

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



Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY

Date Received:	Permit No.: B2019-4184
Date Issued: 10/07/2019	By: <i>WPK</i>
Payment Type: <i>VISC</i>	

CITY OF BEAVERTON
BUILDING DIVISION

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

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

JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17340 NW Bernard Place

City/State/ZIP: Beaverton, OR 97006

Suite/bldg./apt. no.:	Project name: Gaddis, Karen
-----------------------	-----------------------------

Cross street/directions to job site:
173rd St and Walker Road

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

DESCRIPTION OF WORK

Prescriptive new Solar Array Installation 4.38kW

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
--	---------------------------------

Name: Karen Gaddis

Address: 17340 NW Bernard Place

City/State/ZIP: Beaverton, OR 97006

Phone: 503-645-0659	Fax:
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E-mail: alangaddis@comcast.net

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: _____ Date: _____

CONTRACTOR

Business name: Dynamic Power Innvation

Address: 20345 SW Pacific HWY Suite #103

City/State/ZIP: Sherwood, OR 97140

Phone: 503-857-0099	Fax:
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E-mail: permits@dpsolar.com	CCB lic. no.: 185494
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Electrical lic. no.: 22895J	City or metro lic.: 00012816
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Supervising electrician signature, required:

Print name: Josh Kopczynski	Date: 09-27-2019
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Authorized signature: *Josh Kopczynski*

Print name:	Date:
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FEE SCHEDULE

Number of inspections per item () Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	81.14
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	

FEE TOTALS

Subtotal	\$ 81.14
Plan review required for systems over 25 kva at 26% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)	
State surcharge (12% of permit fee)	\$ 9.73
TOTAL PERMIT FEE	\$ 90.88

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