



City Of Beaverton

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

Email: cunderwood@beavertonoregon.gov

32019-5200

Residential Electrical Authorization To Begin Work

05350-BEL-19-01086

Approval Code: 600857 12/18/2019 11:40 am

E-mailed To: kim@squireselectric.com

TYPE OF WORK

- New Construction
- Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling
- Multi-family
- Commercial
- Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 16300 SW ESTUARY DR

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.:

Project Name: 16300 SW Estuary Dr.

Cross Street/directions to job site:

Tax map/parcel no.: 1S105BC02900

DESCRIPTION OF WORK

Re-feed lighting circuit . Wire from pool house to bldg. 150' without power.

APPLICANT

Name: JOSEPH SQUIRES

Phone: 5032521609

Fax:

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:

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

FEE SCHEDULE

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

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
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. 37019-5198
Date Issued: 12/20/19	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 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.: 98916	Job address: 16165 NW Donin Ct
City/State/ZIP: Beaverton OR 97006	
Suite/bldg./apt. no.:	Project name: Gochenour
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: Virginia Gochenour	
Address: 16165 NW Donin Ct	
City/State/ZIP: Beaverton OR 97006	
Phone: (503) 539-3272	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: 12/18/19
Authorized signature: _____	
Print name: Michelle Taylor	Date: 12/18/19

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," "1-2," "1-3" occupancy	
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Six or more residential units			
<input type="checkbox"/> Health-care facilities			
<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		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)			
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 070-1002 REV 10/17



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

B209-5228

Commercial Electrical Authorization To Begin Work

05350-BEL-19-01095

Approval Code: 020638 12/20/2019 10:35 am

E-mailed To: melsberry@4security.org

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: 14831 SW TEAL BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AD00300	
DESCRIPTION OF WORK	
LV-Access-Intrusion-CCTV	
APPLICANT	
Name: Michael Elsberry	
Phone: 5034726439	Fax: 5034723570
Email:	
CONTRACTOR	
Elec lic. no.: 36-34CLE	CCB lic. no.: 65198
Business Name: A & E SAFE & ALARM CO	
Contact:	
Address: 835 NE HWY 99W	
City/State/ZIP: MCMINNVILLE, OR 97128	
Phone: 5034726439	Fax:
Email: MICHAEL@4SECURITY.ORG	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> 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
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.

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Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
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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-19-01096

B2009-5232

Approval Code: 164794 12/20/2019 12:49 pm

E-mailed To: tfisher@oakleyelec.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: 6250 SW KING BLVD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: King Blvd	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AB04700	
DESCRIPTION OF WORK	
Reconnect - Verify power is safe to turn on	
APPLICANT	
Name: Troy Fisher	
Phone: 5039080514	Fax: 5039081729
Email:	
CONTRACTOR	
Elec lic. no.: C456	CCB lic. no.: 184315
Business Name: OAKLEY ELECTRIC INC	
Contact:	
Address: 21953 S SALING RD	
City/State/ZIP: ESTACADA, OR 97023	
Phone: 5039136071	Fax: 5039081729
Email: TFISHER@OAKLEYELEC.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"/> 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"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
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

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

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00008

Ba020-003

Approval Code: 329750 1/3/2020 10:39 am

E-mailed To: leeann@aandj-electric.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: 11000 SW STRATUS ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Creekside	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AC00800	
DESCRIPTION OF WORK	
TI for common area	
APPLICANT	
Name: Leeann Greason	
Phone: 503-359-5891	Fax: 503-359-1981
Email:	
CONTRACTOR	
Elec lic. no.: 34-1C	CCB lic. no.: 959
Business Name: A & J ELECTRIC INC	
Contact:	
Address: PO BOX 330	
City/State/ZIP: FOREST GROVE, OR 971160330	
Phone: 5033595891	Fax:
Email: Leeann@aandj-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"/> 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
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

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

Residential Electrical Authorization To Begin Work

05350-BEL-20-00009

00000-00309 Approval Code: 04175G 1/3/2020 1:49 pm

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	
Hall bathroom remodel - can lights, exhaust fan, outlets	
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"/> 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	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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Electrical Permit Application

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 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 1-3-20	Permit No.: B2020-0032
Date issued: 1-3-20	By: MC
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: 8655 SW MAVERIC TERR

City/State/ZIP: Beaverton OR 97005

Suite/bldg./apt. no.: Project name: Sorrento Bluffs

Gross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

R & R Exterior Electrical for Siding Repair

PROPERTY OWNER TENANT

Name: Address: City/State/ZIP: Phone: Fax: E-mail:

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

APPLICANT CONTACT PERSON

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

CONTRACTOR

Business name: LITEN UP ELECTRIC
 Address: PO Box 2758
 City/State/ZIP: CLACKAMAS OR
 Phone: 503-224-4247 Fax: 503-224-4295
 E-mail: LITENUP@LITENUP.ELECTRIC.CO CCB lic. no.: 205641
 Electrical lic. no.: C1090 City or metro lic.: 11727
 Supervising electrician signature, required: *Byron Naylor*
 Print name: Byron Naylor Date: 3 Jan 2020
 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," "L-2," "L-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	7	4.26	29.82	
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			110.96	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			13.31	
TOTAL PERMIT FEE			124.27	

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: 1-3-20 Permit No.: B2020-0033
 Date issued: 1-3-20 By: JK
 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: 8695 SW MAVERICK TERRACE
 City/State/ZIP: BEAVERTON OR 97005
 Suite/bldg./apt. no.:
 Project name: SORZATO BLUFFS
 Cross street/directions to job site:
 Subdivision:
 Lot no.:
 Tax map/parcel no.:

DESCRIPTION OF WORK
R & R Exterior Electrical For Siding Repair

PROPERTY OWNER
 TENANT

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

APPLICANT
 CONTACT PERSON

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

CONTRACTOR

Business name: LITEN UP ELECTRIC
 Address: PO Box 2758
 City/State/ZIP: CLACKAMAS OR
 Phone: 971-224-4247 Fax: 971-224-4295
 E-mail: LITENUP@CLACKAMAS.ORG OCC lic. no.: 205641
 Electrical lic. no.: C1090 City or metro lic.: 11727
 Supervising electrician signature, required: Byron Mayberry
 Print name: Byron Mayberry Date: 3 JAN 2020
 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," "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		115.89		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	17	4.26	72.42	
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			153.56	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			18.42	
TOTAL PERMIT FEE			171.98	

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: 1-3-20	Permit No.: B2020-0035
Date Issued: 1-3-20	By: <i>ME</i>
Payment Type: <i>MC</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>8675 SW MAVERICK TERR</i>
City/State/ZIP: <i>BEAVERTON OR 97005</i>	Project name: <i>SORENTO BLUFFS</i>
Suite/bldg./apt. no.:	Gross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<i>R & R EXTERIOR ELECTRICAL FOR SIDING REPAIR</i>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <i>LITEN UP ELECTRIC</i>	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <i>LITEN UP ELECTRIC</i>	
Address: <i>PO BOX 2758</i>	
City/State/ZIP: <i>CLACKAMAS OR</i>	
Phone: <i>971-224-4247</i>	Fax: <i>971-224-4295</i>
E-mail: <i>LITENUP15@comcast.net</i>	CCB lic. no.: <i>205641</i>
Electrical lic. no.: <i>C1090</i>	City or metro lic.: <i>11727</i>
Supervising electrician signature, required: <i>Byron Naylor</i>	
Print name: <i>Byron Naylor</i>	Date: <i>3 JAN 2020</i>
Authorized signature:	

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14 2
Each add'l branch circuit	17	4.26	72.42
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		153.56	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		18.42	
TOTAL PERMIT FEE		171.98	

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



Electrical Permit Application

12721 SW Millikan Way, PO Box 4745
Beaverton, OR 97005
Phone: (503) 246-2400 FAX: (503) 246-2400
General Information: (503) 246-2234
beaverton@oregon.gov

OFFICE USE ONLY

Date Received	1/21/19	Permit No.	B2019-5239
Date Issued		Pay	
City of Beaverton		Permit Type	

TYPE OF WORK
 New Installation
 Alteration/Modification/Replacement
 Other

CATEGORY OF CONSTRUCTION
 Single-family dwelling
 Commercial/Industrial
 Accessory building
 Multi-family
 Master building
 Other

JOB SITE INFORMATION AND LOCATION
 Job address: 14206 SW Allen Blvd
 City/State/Zip: Beaverton/Oregon/97005
 Project name: SW Allen Blvd, Tr 1
 Cross street/intersections to job site: SW Allen Blvd and SW 141st Ave
 Subdivision: Lot no. R142591
 Tax map/parcel no. 1S116CC00604

DESCRIPTION OF WORK
BUILDING PERMIT FOR RECREATIONAL CANNABIS DISPENSARY. WORK INCLUDES DEMOLITION OF ALL INTERIOR WALLS. SOME
 PROPERTY OWNER
 TENANT
 Name: Dr. Richard Krokum
 Address: 12995 NW Jackson School Road
 City/State/Zip: North Plains OR 97133
 Phone: (503) 730-7732 Fax:
 Email: krokumr@msn.com
 Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
 Owner signature: _____ Date: _____
 APPLICANT
 CONTACT PERSON
 Business name: Bamia Architecture And Design
 Contact name: Dustin Gerhardt
 Address: 7350 SE Milwaukie Ave
 City/State/Zip: Portland/Oregon/97202
 Phone: (503) 253-4283 Fax:
 Email: dustin@bamadesign.com

CONTRACTOR
 Business name: *Genie Electric Construction, LLC*
 Address: *8701 SE 150th Ave*
 City/State/Zip: *Hamply Valley, OR 97086*
 Phone: *503 764 9246* Fax: *503 764 9280*
 Email: *Genie@LEDconstruction.com* CB Lic. no.: *5-0679*
 Electrical No.: *34-488C* City or metro: *41474*
 Supervising electrician: _____
 Signature required: _____
 Business name: *Genie Electric Construction, LLC* Date: *1/21/19*
 Authorized signature: _____
 Signature: *Leanne Gerhardt* Date: *1/21/19*

PERMIT PLAN REVIEW

Please check all that apply

<input checked="" 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"/> Marine and boatyards
<input type="checkbox"/> Addition of new motor load of 100 HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> 60 or more residential units	<input type="checkbox"/> Commercial/retail agricultural buildings
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger generator derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> 1A, 1E, 1F, 1G occupancy
	<input type="checkbox"/> Recreational vehicle parks

FEE SCHEDULE

Description	Qty	Fee	Total
Each additional single- or multi-family dwelling unit (includes attached garage)			
1,000 sq. ft. or less		194.64	1
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy residential (with above sq. ft.)		46.42	2
Limited energy multi-family residential (with above sq. ft.)		91.72	2
Service or feeder installation, alteration, and/or relocation			
200 amps or less		115.89	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		289.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnected		191.72	1
Temporary service or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		226.29	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	
B) Fee for branch circuits without service or feeder fee (first branch circuit)		61.14	
Each add'l branch circuit	1/5	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 outlet lighting	1	91.72	
Sign circuit(s) or limited energy panel, alteration, or extension. Describe	2	91.72	
Each additional inspection over allowable in any of the above			
Per inspection		61.14	
Investigation fee			
Other			
Electrical permit fees			
SUBTOTAL			
Plan review (25% of permit fee)			103.99
State surcharge (12% of permit fee)			49.91
TOTAL PERMIT FEE			569.84

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 Number of inspectors allowed per permit: _____
 Form BTD 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: 1/3/20	Permit No. 1520220-0017
Date issued: 1/3/20	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: 1905 N.W. 169th Place
City/State/ZIP: Beaverton Oregon	Project name: Twin Oaks
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Remove existing zone sensors & damper actuators and replace with new upgraded sensors & actuators.	
<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: Van Air & Controls LLC	
Contact name: David Van Damme	
Address: 13327 S. Glenn Dr.	
City/State/ZIP: Mulino Oregon 97042	
Phone: 503-849-6343	Fax: 503-632-8672
E-mail: vandon59@hotmail.com	
CONTRACTOR	
Business name: Van Air & Controls LLC	
Address: 13327 S. Glenn Dr.	
City/State/ZIP: Mulino Oregon 97042	
Phone: 503-632-5991	Fax: 503-632-8672
E-mail: vanairvac@bctonline.com	CCB lic. no.: 157864
Electrical lic. no.: LHR1167 (3-405CRE)	City or metro lic.: 7979
Supervising electrician signature, required: Greg G. Van Damme	
Print name: Greg G. Van Damme	Date:
Authorized signature: Greg G. Van Damme	
Print name: Greg G. Van Damme	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection investigation fee		81.14		
Other:				
Electrical permit fees				
SUBTOTAL			\$91.72	
Plan review (25% of permit fee)			0	
State surcharge (12% of permit fee)			\$11.00	
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



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-20-00007

Approval Code: 642270 1/2/2020 3:10 pm

E-mailed To: leeann@aandj-electric.com

B2020-0016

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2360 SW 170TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S107AA00800	
DESCRIPTION OF WORK	
bathroom remodel	
APPLICANT	
Name: Leeann Greason	
Phone: 503-359-5891	Fax: 503-359-1981
Email:	
CONTRACTOR	
Elec lic. no.: 34-1C	CCB lic. no.: 959
Business Name: A & J ELECTRIC INC	
Contact:	
Address: PO BOX 330	
City/State/ZIP: FOREST GROVE, OR 971160330	
Phone: 5033595891	Fax:
Email: Leeann@aandj-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00005

Approval Code: 091974 1/2/2020 12:58 pm

E-mailed To: DENNISW@STONERGROUP.COM

B2020-0014

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: 4145 SW WATSON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: ARM INSIGHT	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA80011	
DESCRIPTION OF WORK	
L/V FOR ACCESS CONTROL	
APPLICANT	
Name: ALLAN GUERRERO	
Phone: 9714010871	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"/> 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00004

Approval Code: 212091 1/2/2020 10:19 am

E-mailed To: padmin@deltaav.com

B 2020-0013

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: 12500 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 19-0001 Beaverton Public Safety Center	
Cross Street/directions to job site: SW Main Avenue and SW Hall Blvd	
Tax map/parcel no.: 1S121AA00200	
DESCRIPTION OF WORK	
Limited energy audio visual systems integration	
APPLICANT	
Name: Mickey Bartle	
Phone: 5039070137	Fax: 5039070065
Email:	
CONTRACTOR	
Elec lic. no.: 26-923CLE	CCB lic. no.: 113213
Business Name: DELTA SYSTEMS INTEGRATION INC	
Contact:	
Address: 2450 NW ELEVEN MILE AVE	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5039070137	Fax: 5039070065
Email: jroche@deltasl.us	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: <u>1/2/20</u>	Permit No.: <u>B2019-3885</u>
Date issued: <u>9/16/2019</u>	By: <u>[Signature]</u>
Payment Type:	

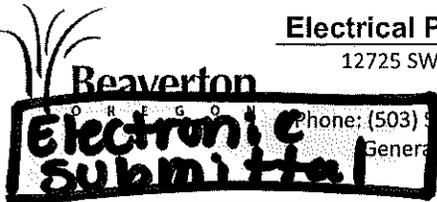
TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> 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>17344 SW Dotterel Lane</u>
City/State/ZIP: <u>BEAVERTON, OR 97007</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>175TH AVE AND SW BARROWS RD</u>	
Subdivision: <u>SOUTH COOPER MT</u>	Lot no.: <u>165</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>SK HOFF CONSTRUCTION</u>	
Address: <u>735 SW 158TH AVE</u>	
City/State/ZIP: <u>BEAVERTON, OR 97006</u>	
Phone: <u>(503) 641-7342</u>	Fax: <u>(503) 641-7661</u>
E-mail: <u>sguerrero@arborhomes.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: <u>01/29/19</u>
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>SK HOFF CONSTRUCTION</u>	
Contact name: <u>SANDRO GUERRERO</u>	
Address: <u>735 SW 158TH AVE</u>	
City/State/ZIP: <u>BEAVERTON, OR 97006</u>	
Phone: <u>(503) 319-6963</u>	Fax: <u>(503) 641-7661</u>
E-mail: <u>sguerrero@arborhomes.com</u>	
CONTRACTOR	
Business name: <u>Garner Electric</u>	
Address: <u>2920 SE BROOKWOOD AVE STE A</u>	
City/State/ZIP: <u>HILLSBORO, OR 97123</u>	
Phone: <u>(503) 648-4552</u>	Fax:
E-mail: <u>melgarner@garnerelectric.com</u>	CCB lic. no.: <u>121159</u>
Electrical lic. no.: <u>34-305C</u>	City or metro lic.: <u>4410</u>
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: <u>Chuck Garner</u>	Date: <u>01/29/19</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>Melissa Stock</u>	Date: <u>01/29/19</u>

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	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	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

Electrical Permit Application

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



OFFICE USE ONLY	
Date Received: <u>6/14/2019</u>	Permit No. <u>B2019-2211</u>
Date Issued: <u>1/21/2020</u>	BY: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>13400 NW Cornell Rd</u>
City/State/ZIP: <u>Beaverton Oregon 97229</u>	
Suite/bldg./apt. no.:	Project name: <u>Cedar Grove</u>
Cross street/directions to job site: <u>NW Cornell RD</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>44 Units Multi Family</u> <u>1140P</u>	
<u>Associated with Building Permit # 2019-2211</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Porter Electric Inc</u>	
Address: <u>7320 NE ST Johns RD</u>	
City/State/ZIP: <u>Vancouver WA 98665</u>	
Phone: <u>(360) 574-1366</u>	Fax: <u>(360) 573-3723</u>
E-mail: <u>jmtaul@porterelectricinc.com</u>	CCB lic. no.: <u>46678</u>
Electrical lic. no.: <u>37-334C</u>	City or metro lic.:
Supervising electrician signature, required:	
Print name: <u>Kenneth D Boal</u>	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input checked="" type="checkbox"/> Service or feeder over 600 amps		
<input checked="" type="checkbox"/> Service or feeder 400amps or more	<input checked="" 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 checked="" 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	194.64	194.64	4
Ea. add'l 500 sq. ft. or portion	1	34.77	34.77	
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)	1	91.72	91.72	2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	2	115.83	231.66	2
201 amps to 400 amps	1	137.89	137.89	2
401 amps to 600 amps	1	229.34	229.34	2
601 amps to 1,000 amps	1	299.93	299.93	2
Over 1,000 amps or volts	1	690.22	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	1	4.26	4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit	91	4.26	387.66	
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:	8	91.72	733.76	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other: 1/2 FEE UNITS	43	160.57	6904.51	
Electrical permit fees				
9940.36	SUBTOTAL		3,035.85	
2485.09	Plan review (25% of permit fee)		758.96	
1192.84	State surcharge (12% of permit fee)		364.30	
13,618.29	TOTAL PERMIT FEE		\$4,136.18	

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. 11 988.33
 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: 12/30/2019	Permit No.: B2019-5314
Date Issued: 1/2/2020	BY: [Signature]
CITY OF BEAVERTON BUILDING DIVISION	
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: 10750 SW Denney Rd
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Denney Rd Bldg 5
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of sprinkler monitoring system	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Denney Rd Industrial Park LLC	
Address: 1121 SW Salmon St, Ste #500	
City/State/ZIP: Portland, OR 97205	
Phone: (503) 242-2900	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: sam@current-electrical.com	
CONTRACTOR	
Business name: Current Electrical Construction	
Address: PO Box 19652	
City/State/ZIP: Portland, OR 97280	
Phone: (503) 245-5997	Fax: (503) 245-2919
E-mail: sam@current-electrical.com	CCB lic. no.: 46994
Electrical lic. no.: 26-471C	City or metro lic.: 6226
Supervising electrician signature, required: [Signature]	5732S
Print name: Jason Jacobucci	Date: 12/27/20
Authorized signature:	
Print name: Sam Pfeiffer	Date: 12/27/20

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 checked="" 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)			22.93	
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

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00003

Approval Code: 957540 1/2/2020 9:54 am

E-mailed To: paul@winnerelectric.com

B2020-0010

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: 8817 SW BRIGHTFIELD CIR	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name: Don Joyce	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126BC90000	
DESCRIPTION OF WORK	
Repair 1 underground UF wire	
APPLICANT	
Name: Paul Nelson	
Phone: 5039808585	Fax: 8662376472
Email:	
CONTRACTOR	
Elec lic. no.: 34-150C	CCB lic. no.: 14794
Business Name: WINNER ELECTRIC CONSTRUCTION INC	
Contact:	
Address: 17087 SE WILEY WAY	
City/State/ZIP: MILWAUKIE, OR 97267	
Phone: 5036385028	Fax: 8662376472
Email: jnwinnerelectric@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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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 2020-0009

Residential Electrical Authorization To Begin Work

05350-BEL-20-00001

Approval Code: 065096 1/2/2020 9:02 am

E-mailed To: gary@atempheating.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: 16280 SW MELINDA ST	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: HORTON	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120CB07900	
DESCRIPTION OF WORK	
INSTALLING FURNACE & A/C.	
APPLICANT	
Name: GARY TRAN	
Phone: 5036505014	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C55	CCB lic. no.: 71878
Business Name: A-TEMP HEATING & COOLING INC	
Contact:	
Address: 15927 SE 122ND AVE	
City/State/ZIP: CLACKAMAS, OR 97015	
Phone: 5036505014	Fax: 5035572990
Email: corey@atempheating.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00002

Approval Code: 002608 1/2/2020 9:12 am

E-mailed To: license@irogersselectric.com

B2020-0006

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9055 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 2019 Walmart Propane Tank Install	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129DA06400	
DESCRIPTION OF WORK	
Install a GFCI receptacle and in use weather cover for the new propane tank dispensers. Propane tanks pull 6 amps; will tap off of nearest 120V/24hr power.	
APPLICANT	
Name: Lin Rogers	
Phone: 7707727921	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 37-727C	CCB lic. no.: 118038
Business Name: LIN R ROGERS ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 2050 MARCONI DR STE 200	
City/State/ZIP: ALPHARETTA, GA 30005	
Phone: 7707723400	Fax: 7705214960
Email: license@irogersselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-19-01112

Approval Code: 101679 12/31/2019 1:17 pm

E-mailed To: tfisher@oakleyelec.com

B2020-0003

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: 6795 SW 167TH PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: SW 165th Place	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S119AD04800	
DESCRIPTION OF WORK	
Hot Tub Hook up	
APPLICANT	
Name: Troy Fisher	
Phone: 5039080514	Fax: 5039081729
Email:	
CONTRACTOR	
Elec lic. no.: C456	CCB lic. no.: 184315
Business Name: OAKLEY ELECTRIC INC	
Contact:	
Address: 21953 S SALING RD	
City/State/ZIP: ESTACADA, OR 97023	
Phone: 5039136071	Fax: 5039081729
Email: TFISHER@OAKLEYELEC.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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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: 1/22/20	Permit No.: B2020-0243
Date Issued: 1/22/20	By:
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input 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: 7050 S.W. 125 th place
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Juniper	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New 220 breaker for hot tap	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Curt Storch	
Address: 7050 S.W. 125 th place	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503.453-6401	Fax:
E-mail: Curt.storch@schweg.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>[Signature]</i>	Date: 1-22-20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> 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	<input checked="" type="checkbox"/>	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	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 870-1062 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.: 152020-0226
Date Issued: 1/21/2020	<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"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	0110 SW Vale Ct
City/State/ZIP:	Beaverton OR 97008
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
reground electrical Box to copper rods in ground	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Don M. Polney	
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: <i>Don M. Polney</i> Date: 1-21-2020	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Same as owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		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 <i>grounding</i>		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits -- new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$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: 11/15/2020	Permit No.: B2020-0155
Date Issued: 11/15/2020	BA
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: 6075 SW MAIN AVE
City/State/ZIP: BEAVERTON OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: ALLEN	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: PERRY & CYNDI JOHNSTON	
Address: 6275 SW MAIN AVE	
City/State/ZIP: BEAVERTON OR 97008	
Phone: 503 880-6019	Fax:
E-mail: PERRYXNJOHNSTON@AOL.COM	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: PNJ CONSTRUCTION LLC	
Address: SAME AS OWNER	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.: 156233
Electrical lic. no.: 26911J	City or metro lic.:
Supervising electrician signature, required:	
Print name: BRYCE TIMMEN	Date: 11-15-20
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"/> 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	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	17	4.26	72.42	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.

428.84



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

B2020-0216

Residential Electrical Authorization To Begin Work

05350-BEL-20-00052

Approval Code: 017910 1/17/2020 12:24 pm

E-mailed To: byelec@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: 9980 SW CITATION PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 4569 OR	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CD12700	
DESCRIPTION OF WORK	
WIRE GENERATOR AND ATS SYSTEM	
APPLICANT	
Name: JOHN BOYLES	
Phone: 5036632628	Fax: 5036639048
Email:	
CONTRACTOR	
Elec lic. no.: 3-465C	CCB lic. no.: 137002
Business Name: BOYLES ELECTRIC INC	
Contact:	
Address: PO BOX 1227	
City/State/ZIP: BORING, OR 97009	
Phone: 5036632628	Fax: 5036639048
Email: byelec@frontier.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

B2020-0217

Residential Electrical Authorization To Begin Work

05350-BEL-20-00053

Approval Code: 384668 1/17/2020 12:50 pm

E-mailed To: olgagi@msn.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: 6615 SW DOVER ST	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA02100	
DESCRIPTION OF WORK	
Kitchen remodel	
APPLICANT	
Name: Robert Grigoryan	
Phone: 360-907-7882	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C804	CCB lic. no.: 195474
Business Name: ALPHA ELECTRIC CORP	
Contact:	
Address: 23920 NE 28TH ST	
City/State/ZIP: CAMAS, WA 98607	
Phone: 3609077882	Fax:
Email: OLGAGI@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 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	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.

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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



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

B2020-0206

Residential Electrical Authorization To Begin Work

05350-BEL-20-00048

Approval Code: 01610J 1/16/2020 1:55 pm

E-mailed To: justin@frahlerelectric.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: 6205 SW WILSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Tenison Res	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BA00803	
DESCRIPTION OF WORK	
Replace electrical panel.	
APPLICANT	
Name: Justin Kau	
Phone: 5036394627	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C861	CCB lic. no.: 197172
Business Name: JRA INC	
Contact:	
Address: 11860 SW GREENBURG RD	
City/State/ZIP: TIGARD, OR 97223	
Phone: 5036394627	Fax: 5036394673
Email: SANDY@FRAHLERELECTRIC.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.

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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



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-20-00051

Approval Code: 014197 1/16/2020 3:44 pm

E-mailed To: dorear@globalelectricusa.com

B2020-0211

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: 1815 NW 173RD AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Sulte/bldg./apt.no.:	
Project Name: Emerald Place Apts Unit 809 Repairs	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131AB01800	
DESCRIPTION OF WORK	
Need (1) 200 A Or Less Service & (12) Branch Circuits For Rewire For Fire Damage	
APPLICANT	
Name: Dustin O'Rear	
Phone: 5036806890	Fax: 5036475649
Email:	
CONTRACTOR	
Elec lic. no.: 34-855C	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 beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	12	\$4.26	\$51.12
Electrical Permit Fees			
Subtotal			\$166.95
State surcharge (12% of permit total)			\$20.03
TOTAL PERMIT FEE			\$186.98

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

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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



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-20-00050

Approval Code: 01366G 1/16/2020 3:40 pm

E-mailed To: Scottc@teamelectricco.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: 17520 NW CORNELL RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 14781 Birch Point Apts	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131BA00101	
DESCRIPTION OF WORK	
Building#730 Unit#8 replace panel.	
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 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

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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



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-20-00049

Approval Code: 016639 1/16/2020 3:37 pm

E-mailed To: office@coxelectricoregon.com

B2020-0209

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: 4655 SW WATSON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Cedar House Media	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AD04000	
DESCRIPTION OF WORK	
one for one LED lighting upgrades	
APPLICANT	
Name: Cory Burden	
Phone: 5036413320	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"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

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

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

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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



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-20-00047

Approval Code: 014319 1/16/2020 8:45 am

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

B2020-093

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: 3300 SW HOCKEN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 108	
Project Name: 80537 Strong Spine Chiropractic	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109DB00200	
DESCRIPTION OF WORK	
Connect power to new sign	
APPLICANT	
Name: Corey Baysinger	
Phone: 5036481900	Fax: 5036709572
Email:	
CONTRACTOR	
Elec lic. no.: C448	CCB lic. no.: 182452
Business Name: IES COMMERCIAL INC	
Contact:	
Address: 16135 SW 74TH AVE	
City/State/ZIP: PORTLAND, OR 97224	
Phone: 5036481900	Fax: 5036709572
Email: cathy.herinckx@ies-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> 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"/> 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"/> Health care facilities		
<input type="checkbox"/> Six or more residential units in one structure			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Sign or outline lighting	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.

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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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/27/2020	Permit No: 152020 0189
Date Issued: [Signature]	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.: 9109	Job address: 11350 sw denney road
City/State/ZIP: beaverton, or 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: denney between king and denney frontage	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
new street lights on denney between king blvd and denney frontage road	
<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:	
Address: NorthStar Electrical Contractors 11055 S.W. Clay Street	
City/State/ZIP: Sherwood, OR 97140	
Phone: 503-612-0840 FAX: 503-612-0891	
Lic #34-359C CCB#90454 Metro #1911	
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name: [Signature]	Date: 1-11-20
Authorized signature: [Signature]	
Print name: JESSE CUP	Date: 1-14-20

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

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



Electrical Permit Application

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

RECEIVED

OFFICE USE ONLY	
Date Received: 03/28/2019	Permit No.: B2019-1254
Date Issued: 11/17/2020	By: <i>[Signature]</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"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17336 SW Dotterel Lane
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.: 166
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.co	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Chuck Garner	Date: 01/29/19
Authorized signature: <i>[Signature]</i>	
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"/> 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," "1-2," "1-3" 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.)	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-20-00045

Approval Code: 203644 1/15/2020 6:36 pm

E-mailed To: snapelectric503@gmail.com

B2020-0184

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10175 SW 155TH AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Evergreen bathroom	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AB07700	
DESCRIPTION OF WORK	
remodel of Master bathroom lights, plugs, and closet light altering two circuits but adding none	
APPLICANT	
Name: Jeremy Smith	
Phone: 5038623561	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1327	CCB lic. no.: 217036
Business Name: SNAP ELECTRIC INC	
Contact:	
Address: 1511 WILLAMINA AVE	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5038623561	Fax:
Email: SNAPELECTRIC503@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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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: 1/17/2020	Permit No. 52020-0187
Date Issued: 1/17/2020	By: [Signature]
Payment Type:	

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"/> 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: 11796 SW Boones Bend Dr.
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.: Bldg. 41	Project name: Condos on the Green
Cross street/directions to job site: Scholls Ferry and Conastoga	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Need to have electrical box inspected for a reconnect.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Jennifer Smith	
Address: 7115 SE Rhone Street	
City/State/ZIP: Portland, OR 7206	
Phone: (503) 853-5273	Fax:
E-mail: jmsmith@drhorton.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent or exchange.	
Owner signature: [Signature]	Date: 1/16/20
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Jennifer Smith	
Address: 7115 SE Rhone Street	
City/State/ZIP: Portland, OR 7206	
Phone: (503) 853-5273	Fax:
E-mail: jmsmith@drhorton.com	
CONTRACTOR	
Business name: N/A	
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"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect	1	91.72	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			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.



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/14/2020	Permit No: 52020-0181
Date Issued: 1/14/2020	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: 4950 SW 141 ST Ave
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace 200A service and panel and new circuits	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Jessie Buchman	
Address: 4950 SW 141 ST Ave	
City/State/ZIP: Beaverton OR 97005	
Phone: 503 862-2123	Fax:
E-mail:	
CONTRACTOR	
Business name: Electric Norm Inc	
Address: 6775 SW 111 TH Ave	
City/State/ZIP: Beaverton OR 97008	
Phone: 503 643 3500	Fax:
E-mail: phil@electricnorm.com	CCB lic. no.: 30615
Electrical lic. no.: 4-1c	City or metro lic.:
Supervising electrician signature, required: Maggie Howes 4/1165	
Print name: Maggie Howes	Date: 1-15-2020
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> 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		152.85		4
Ea. add'l 500 sq. ft. or portion		27.30		
Limited energy, residential (with above sq. ft.)		36.46		2
Limited energy, multi-family residential (with above sq. ft.)		72.03		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	90.95		2
201 amps to 400 amps		108.28		2
401 amps to 600 amps		180.09		2
601 amps to 1,000 amps		235.53		2
Over 1,000 amps or volts		542.03		2
Utility reconnect		72.03		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		72.03		2
201 amps to 400 amps		100.06		2
401 amps to 600 amps		144.58		2
601 amps to 1,000 amps		144.58		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	6	3.34		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		63.71		2
Each add'l branch circuit		3.34		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		72.03		2
Pump or irrigation circle		72.03		2
Sign or outline lighting		72.03		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		72.03		2
Each additional inspection over allowable in any of the above				
Per inspection		63.71		
Investigation fee				
Other:				
Electrical permit fee				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			50.00	

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

Residential Electrical Authorization To Begin Work

05350-BEL-20-00044

Approval Code: 07456G 1/15/2020 3:14 pm

E-mailed To: info@rosecityelectricco.com

B2020-0173

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: 4150 SW HOCKEN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 14	
Project Name: Timberwood Apartments	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AB00300	
DESCRIPTION OF WORK	
200 amp service/feeder	
APPLICANT	
Name: Jerry Schlechter	
Phone: 503-287-6164	Fax: 503-282-1060
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"/> 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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00043

Approval Code: 01522J 1/15/2020 3:10 pm

E-mailed To: justin@frahlerelectric.com

B2020-0172

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: 8725 SW CURRY CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Sixkiller Res	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128AD02800	
DESCRIPTION OF WORK	
Replace electrical panel.	
APPLICANT	
Name: Justin Kau	
Phone: 5036394627	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C861	CCB lic. no.: 197172
Business Name: JRA INC	
Contact:	
Address: 11860 SW GREENBURG RD	
City/State/ZIP: TIGARD, OR 97223	
Phone: 5036394627	Fax: 5036394673
Email: SANDY@FRAHLERELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00040

Approval Code: 113544 1/14/2020 6:18 pm

E-mailed To: jaylene@integritysignsoregon.com

PLAN REVIEW

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

FEE SCHEDULE

Description	Qty.	Ea.	Total
Miscellaneous			
Sign or outline lighting	2	\$91.72	\$183.44
Electrical Permit Fees			
Subtotal			\$183.44
State surcharge (12% of permit total)			\$22.01
TOTAL PERMIT FEE			\$205.45

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: 11360 SW Canyon Rd

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: Monkey Subs

Cross Street/directions to job site: Fred Meyer shopping Center

Tax map/parcel no.: 1S115AB01100

DESCRIPTION OF WORK

2 connections for 2 new wall signs at 11360 SW Canyon Rd - Monkey Subs suite next to Wing stops in new building behind Burger King.

APPLICANT

Name: Jaylene Paulus

Phone: 503-981-3743

Fax: 503-982-8153

Email:

CONTRACTOR

Elec lic. no.: CLS20

CCB lic. no.: 194155

Business Name: INTEGRITY SIGNS OREGON

Contact:

Address: PO BOX 88

City/State/ZIP: HUBBARD, OR 97032

Phone: 5039813743

Fax: 5039828153

Email: DAVE@INTEGRITYSIGNSOREGON.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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-20-00042

Approval Code: 047482 1/15/2020 10:09 am

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

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15350 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 3114200062 - Parkside B	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CA00800	
DESCRIPTION OF WORK	
Parkside B Equipment - Relocate equipment power for equipment.	
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"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

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

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

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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



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-20-00041

Approval Code: 05528G 1/15/2020 9:04 am

E-mailed To: chris.petersen@tempesttech.net

B2020-0166

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: Apple Beaverton	
Cross Street/directions to job site: SW	
Tax map/parcel no.: 1S108DC00600	
DESCRIPTION OF WORK	
pull & terminate low voltage cables for Audio & Video systems.	
APPLICANT	
Name: Chris Petersen	
Phone: 9713367106	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: CLE365	CCB lic. no.: 198016
Business Name: TEMPEST TECHNOLOGIES LLC	
Contact:	
Address: 1045 12TH AVE NW F8	
City/State/ZIP: ISSAQUAH, WA 98027	
Phone: 4259960228	Fax: 4253928284
Email: JEFF.LARSON@TEMPESTTECH.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"/> 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"/> "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.

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

Clear Form

OFFICE USE ONLY	
Date Received:	Permit No. 152020-0159
Date Issued: 1/15/2020	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input 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.: 200049	Job address: 9000 SW Gemini Dr
City/State/ZIP: Beaverton, OR, 97008	
Suite/bldg./apt. no.:	Project name: Paychex
Gross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install of 31 new speakers.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: JH Kelly, LLC	
Contact name: Kellie Peterson for Clarence Martin	
Address: 821 - 3rd Avenue	
City/State/ZIP: Longview, WA 98632	
Phone: 360-423-5510	Fax:
E-mail: kpeterso@jhkelly.com	
CONTRACTOR	
Business name: JH Kelly, LLC	
Address: 821 - 3rd Ave	
City/State/ZIP: Longview, WA 98632	
Phone: 360-423-5510	Fax: 360-423-9170
E-mail: kpeterso@jhkelly.com	CCB lic. no.: 117544
Electrical lic. no.: 37-983C	City or metro lic.: 6313
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Gabe Gourde	Date: 01-14-20
Authorized signature: <i>[Signature]</i>	
Print name: Gabe Gourde	Date: 01-14-20

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		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension, Describe: 1 set of 31	1	91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/15/20	Permit No: B2020-0160
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: 14275 SW Burlwood Ln
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	
Adding NEMA 14-50 outlet on an individual branch circuit to interior of garage with dedicated 50amp breaker	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Chad Johnson	
Address: 14275 SW Burlwood Ln	
City/State/ZIP: Beaverton OR 97005	
Phone: (503) 901-9167	Fax:
E-mail: chadjnsn@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 type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Mr. Electric of Hillsboro	
Address: 2705 SE 39th Loop #G	
City/State/ZIP: Hillsboro OR 97123	
Phone: (503) 506-2508	Fax:
E-mail:	CCB lic. no.: 208614
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name: Joey Doray	Date: 06/15/18
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> 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	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.



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-20-00037

Approval Code: 014772 1/14/2020 9:49 am

E-mailed To: office@coxelectricoregon.com

B2020-0150

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: 11170 SW 5TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name: Steve L. Bronson	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115DA01500	
DESCRIPTION OF WORK	
one for one LED lighting upgrades interior and exterior	
APPLICANT	
Name: Steve Bronson	
Phone: 5033345978	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"/> 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	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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City of Beaverton
 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: 1/15/2020	Permit No.: B2020-0152
Date Issued: 1/15/2020	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: 4021 SW 117th Ave. Suite E
City/State/ZIP: Beaverton OR	Project name: Chinatown Restaurant
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
13 branch circuits for kitchen equipments & W.A. Cooker	
<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: Trinity Electric	
Address: 13422 SW 128th PL	
City/State/ZIP: Tigard OR 97223	
Phone: 971-235-6481	Fax:
E-mail: y82kang@yahoo.com	CCB lic. no.: 156637
Electrical lic. no.: 42825	City or metro lic.: 34-653C
Supervising electrician signature, required: <i>J. Sun Kang</i>	
Print name: Jn Sun Kang	Date: 1/15/2020
Authorized signature: <i>J. Sun Kang</i>	
Print name: JN SUN Kang	Date: 1/15/2020

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	84.14
Each add'l branch circuit	12	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. 148.13
 Form 870-1002 REV 10/17



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

B2020-0146

Residential Electrical Authorization To Begin Work

05350-BEL-20-00039

Approval Code: 014245 1/14/2020 2:08 pm

E-mailed To: byelec@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: 7090 SW 68TH AVE	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name: 4562 OR	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S124DA00901	
DESCRIPTION OF WORK	
Wire home renovation	
APPLICANT	
Name: JOHN BOYLES	
Phone: 5036632628	Fax: 5036689048
Email:	
CONTRACTOR	
Elec lic. no.: 3-465C	CCB lic. no.: 137002
Business Name: BOYLES ELECTRIC INC	
Contact:	
Address: PO BOX 1227	
City/State/ZIP: BORING, OR 97009	
Phone: 5036632628	Fax: 5036639048
Email: byelec@frontier.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

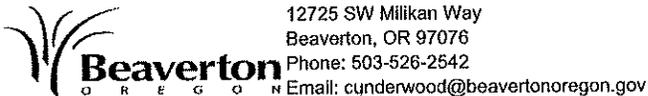
PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Residential multi-family			
1,000 sq. ft. or less	1	\$194.64	\$194.64
Each added 500 sq. ft. or portion	3	\$34.77	\$104.31
Limited energy, residential (with above sq ft)	1	\$46.42	\$46.42
Electrical Permit Fees			
Subtotal			\$345.37
State surcharge (12% of permit total)			\$41.44
TOTAL PERMIT FEE			\$386.81

Upon review and approval 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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



B2020-0145

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00038

Approval Code: 014305 1/14/2020 1:48 pm

E-mailed To: byelec@frontier.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: 16130 SW MERLO RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: TRI-MET	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108BB00900	
DESCRIPTION OF WORK	
Re-pull diesel tank monitoring wire in existing conduit	
APPLICANT	
Name: JOHN BOYLES	
Phone: 5036632628	Fax: 5036639048
Email:	
CONTRACTOR	
Elec lic. no.: 3-465C	CCB lic. no.: 137002
Business Name: BOYLES ELECTRIC INC	
Contact:	
Address: PO BOX 1227	
City/State/ZIP: BORING, OR 97009	
Phone: 5036632628	Fax: 5036639048
Email: byelec@frontier.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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: 1/13/2020	Permit No.: 2020-0138
Date Issued: 1/13/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12345 SW Horizon BLVD
City/State/ZIP: Beaverton, OR, 97007	
Suite/bldg./apt. no.: 231	Project name: <i>AME</i>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Add new circuits for new equipment at vendor area	
<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: Big M Electric, Inc	
Contact name: Michael Pemberton	
Address: 1135 268th Way Se	
City/State/ZIP: Sammamish/WA/98075	
Phone: (206) 550-6569	Fax:
E-mail: mike@bigmelec.com	
CONTRACTOR	
Business name: Big M Electric, Inc	
Address: 1135 268th Way Se	
City/State/ZIP: Sammamish/WA/98075	
Phone: (206) 550-6569	Fax:
E-mail: mike@bigmelec.com	CCB lic. no.: 189620
Electrical lic. no.: C584	City or metro lic.:
Supervising electrician signature, required: <i>Jay Marsh</i>	
Print name: Jay Marsh	Date: 01/14/20
Authorized signature: <i>Jay Marsh</i>	
Print name: Jay Marsh	Date: 01/14/20

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	3	4.26	
Miscellaneous (service or feeder not included)			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			<\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form 870-1002 REV 10/17 105119



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-20-00091

Approval Code: 901314 1/31/2020 7:41 am

E-mailed To: hec@hugheselectrical.com

B2020-0409

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: 12600 SW CRESCENT ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 126	
Project Name: 20A115 - CMI THE LOFTS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA91021	
DESCRIPTION OF WORK	
20A115 - NO SUITE - REPAIR (1) 800 AND (1) 1200 AMP DAMAGED SERVICE.	
APPLICANT	
Name: Brandy Smith	
Phone: 5036472221	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 seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities		<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Reconnect only	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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00092

Approval Code: 058946 1/31/2020 9:35 am

E-mailed To: dorear@globalelectricusa.com

B2020-0411

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: 5180 SW OLESON RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: George Ramirez Panel Change	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA03000	
DESCRIPTION OF WORK	
Need (1) 200 A Service for panel and service and (16) Branch Circuits For rewiring	
APPLICANT	
Name: Dustin O'Rear	
Phone: 5036806890	Fax: 5036475649
Email:	
CONTRACTOR	
Elec lic. no.: 34-655C	CCB lic. no.: 156838
Business Name: GLOBAL ELECTRIC INC	
Contact:	
Address: PO BOX 162	
City/State/ZIP: NORTH PLAINS, OR 97133	
Phone: 5036475650	Fax: 5036475649
Email: globalelectric@globalelectricusa.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> 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	16	\$4.26	\$68.16
Electrical Permit Fees			
Subtotal			\$183.99
State surcharge (12% of permit total)			\$22.08
TOTAL PERMIT FEE			\$206.07

Upon review and approval 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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. <u>52020-0404</u>
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"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>14240 SW Yearling Way</u>
City/State/ZIP: <u>Beaverton OR 97008</u>	Project name:
Suite/bldg./apt. no.:	
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>I am adding a total of 13 ¹³ LED can lights to existing lines - 3 rooms total. [One sauna heater, 3 led lights in sauna room]</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Lucas A. Klein</u>	
Address: <u>14240 SW Yearling Way</u>	
City/State/ZIP: <u>Beaverton OR 97008</u>	
Phone: <u>760-889-0118</u>	Fax:
E-mail: <u>lucasandmayak@gmail.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>1/31/20</u>
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Lights</u>	
Address: <u>Have owner - Lucas A Klein</u>	
City/State/ZIP: <u>Sauna heater completed by electrician</u>	
Phone: <u>503-939-4686</u>	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> 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		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-20-00089

Approval Code: 03698G 1/30/2020 9:21 am

E-mailed To: office@pmtelectric.com

B2020-0397

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: 4875 SW GRIFFITH DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 100	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BD03800	
DESCRIPTION OF WORK	
Alt. 10 ckts. for new TL	
APPLICANT	
Name: Vitaliy Berezin	
Phone: 5037032571	Fax: 5036221277
Email:	
CONTRACTOR	
Elec lic. no.: C818	CCB lic. no.: 195783
Business Name: PARAMOUNT ELECTRIC CO	
Contact:	
Address: 9053 SE JANNSEN ROAD	
City/State/ZIP: CLACKAMAS, OR 97015	
Phone: 5036221305	Fax: 5036221277
Email: office@pmtelectric.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	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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00088

Approval Code: 800365 1/30/2020 6:56 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: 15070 SW 150TH CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Geller	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S117DD09400	
DESCRIPTION OF WORK	
Kitchen and bath 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 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00090

Approval Code: 558284 1/30/2020 1:43 pm

E-mailed To: office@youngelectricco.com

B2020-0400

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: 8400 SW CANYON LN	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.: 6	
Project Name: Panel Change	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BC80161	
DESCRIPTION OF WORK	
Panel change and gfci treatment	
APPLICANT	
Name: Young Electric Office	
Phone: 9718885081	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder 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"/> "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"/> Health care facilities		
<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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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

Clear Form

OFFICE USE ONLY

Date Received: 1/29/2020	Permit No.: B2020-0368
Date Issued: 1/30/2020	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.:	Job address: 12577 SW 1st Ave
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name: Afuri Ramen
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Upgrading current security system and adding cameras.	
<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: Willamette Valley Security	
Contact name: Kaysha Isom	
Address: P.O. Box 1563	
City/State/ZIP: Sherwood OR 97140	
Phone: 503-244-5273	Fax:
E-mail: Kaysha@wvs1.com	
CONTRACTOR	
Business name: Willamette Valley Security	
Address: P.O. Box 1563	
City/State/ZIP: Sherwood OR 97140	
Phone: 503-244-5273	Fax:
E-mail: kaysha@wvs1.com	CCB lic. no.: 96932
Electrical lic. no.: 3370CLE	City or metro lic.:
Supervising electrician signature, required: <i>Ryan Jacobsen</i>	
Print name: Ryan Jacobsen	Date: 01/29/20
Authorized signature: <i>Kaysha Isom</i>	Date: 01/29/20

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks	
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64	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 with above service or feeder fee, each branch circuit		4.26	0.00	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		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:	1	91.72	91.72	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			91.72	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.01	
0.12			TOTAL PERMIT FEE	
			\$102.73	

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



Electrical Permit Application

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

OFFICE USE ONLY

Date Received: 1-3-2020	Permit No.: 2020-0023
Date Issued: 1/29/2020	<i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12695 SW Crescent St.
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Creekside Garage
Cross street/directions to job site: Crescent & Rose Biggi	
Subdivision: Round at Beaverton	Lot no.: 2 & 3
Tax map/parcel no.: 1S109DD03300	
DESCRIPTION OF WORK	
Temporary power	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: City of Beaverton	
Address: 12725 Millikan Way	
City/State/ZIP: Beaverton, OR 97076	
Phone: (503) 526-2550	Fax:
E-mail: tryerson@beavertonoregon.gov	
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: Rosendin Electric	
Contact name: Gino Tomala	
Address: 5579 NE Huffman St. Suite A	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 314-9881	Fax:
E-mail: gtomala@rosendin.com	
CONTRACTOR	
Business name: Rosendin Electric	
Address: 5579 NE Huffman St. Suite A	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 314-9881	Fax:
E-mail: gtomala@rosendin.com	CCB lic. no.: 103939
Electrical lic. no.: 37-692C	City or metro lic.:
Supervising electrician signature, required:	
Print name: Steven W. Hogberg	Date:
Authorized signature:	

PLAN REVIEW				
Please check all that apply:		<input checked="" type="checkbox"/> Service or feeder over 600 amps <input checked="" 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 checked="" 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	4	91.72	366.88	2
201 amps to 400 amps	3	127.41	382.23	2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps	1	225.29	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	11	4.26	46.86	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			1,021.26	
Plan review (25% of permit fee)			255.32	
State surcharge (12% of permit fee)			122.55	
TOTAL PERMIT FEE			\$1,399.13	

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



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-20-00087

Approval Code: 08284G 1/29/2020 3:19 pm

E-mailed To: shawn@procomnw.com

B2020-384

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8285 SW NIMBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 113	
Project Name: Tualatin Parks & Rec	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AA00600	
DESCRIPTION OF WORK	
Data	
APPLICANT	
Name: Clint Bollinger	
Phone: 5036196373	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: CLE282	CCB lic. no.: 194272
Business Name: PROCOM TECHNOLOGIES LLC	
Contact:	
Address: PO BOX 22288	
City/State/ZIP: PORTLAND, OR 97269	
Phone: 5037970000	Fax: 5032338052
Email: brian@procomnw.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
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.

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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-20-00086

Approval Code: 029540 1/29/2020 2:44 pm

E-mailed To: office@coxelectricoregon.com

B2020-0382

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: 16755 SW BASELINE RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 102	
Project Name: Hayat Restuarant	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106DA00700	
DESCRIPTION OF WORK	
one for one LED lighting upgrade on dinning area, and kitchen prep area.	
APPLICANT	
Name: erica scoggins	
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"/> 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	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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 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

B2020.0375

Residential Electrical Authorization To Begin Work

05350-BEL-20-00084

Approval Code: 526409 1/29/2020 9:44 am

E-mailed To: leeann@aandj-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: 8145 SW 152ND AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S129AB00200
DESCRIPTION OF WORK	
Remodel	
APPLICANT	
Name: Leeann Greason	
Phone: 503-359-5891	Fax: 503-359-1981
Email:	
CONTRACTOR	
Elec lic. no.: 34-1C	CCB lic. no.: 959
Business Name: A & J ELECTRIC INC	
Contact:	
Address: PO BOX 330	
City/State/ZIP: FOREST GROVE, OR 971160330	
Phone: 5033595891	Fax:
Email: Leeann@aandj-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 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
Electrical Permit Fees			
Subtotal			\$140.78
State surcharge (12% of permit total)			\$16.89
TOTAL PERMIT FEE			\$157.67

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

Commercial Electrical Authorization To Begin Work

B2020-0377

05350-BEL-20-00085

Approval Code: 493421 1/29/2020 11:39 am

E-mailed To: MERRILLELECTRICLLC@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: 3831 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Mamancy Tea	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
Install light and power for tenant.	
APPLICANT	
Name: Jeremy Baxter	
Phone: 5038049787	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1140	CCB lic. no.: 207278
Business Name: MERRILL ELECTRIC LLC	
Contact:	
Address: PO BOX 753	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5038049787	Fax:
Email: MERRILLELECTRICLLC@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	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.

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
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City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Electrical Authorization To Begin Work

B2020-0371

05350-BEL-20-00083

Approval Code: 90920G 1/29/2020 7:50 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 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: 13850 SW HARNESS LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CD02400	
DESCRIPTION OF WORK	
Kitchen / laundry remodel	
APPLICANT	
Name: JOHN KELSO	
Phone: 5037933276	Fax:
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"/> 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"/> "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"/> Recreational Vehicle Parks
<input type="checkbox"/> Six or more residential units in one structure	<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	7	\$4.26	\$29.82
Electrical Permit Fees			
Subtotal			\$110.96
State surcharge (12% of permit total)			\$13.32
TOTAL PERMIT FEE			\$124.28

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
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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-20-00081

Approval Code: 518242 1/28/2020 1:24 pm

E-mailed To: hec@hugheselectrical.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: 9825 SW SUNSHINE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 20A109 - GRAPHIC PRODUCTS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123BA01100	
DESCRIPTION OF WORK	
20A109 - ADD OUTLETS TO THE PRODUCTION FLOOR AREA.	
APPLICANT	
Name: Brandy Smith	
Phone: 5036472221	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 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	4	\$4.26	\$17.04
Electrical Permit Fees			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
TOTAL PERMIT FEE			\$109.96

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
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City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Commercial Electrical Authorization To Begin Work

B2020-0360

05350-BEL-20-00082

Approval Code: 618243 1/28/2020 2:34 pm

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: 9590 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 110	
Project Name: C200100 - Sedia Offices	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DB00201	
DESCRIPTION OF WORK	
CAT6 Cabling, full, T1 - C200100	
APPLICANT	
Name: CAPITOL DATA	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMIT@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"/> 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.

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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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/27/2020	Permit No.: 153020.0315
Date Issued: [Signature]	[Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input 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: 6155 SW ENCKSON
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	
Branch outlets & switches pig tails ALUMINUM COVER	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Star Electric Services	
Address: 10700 SW BH Hwy	
City/State/ZIP: Beaverton OR 97005	
Phone: 503-579-9201	Fax:
E-mail:	CCB lic. no.: 153627
Electrical lic. no.: 26943C	City or metro lic.:
Supervising electrician signature, required: [Signature]	Date: 1/27/20
Print name: Ghazan Gharjani	Date:
Authorized signature:	Date:
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "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	12	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



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-20-00075

Approval Code: 217252 1/27/2020 10:25 am

E-mailed To: CDPPermits@cepdx.com

B2020-0324

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: C200150 - Paychex C86653	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DA00800	
DESCRIPTION OF WORK	
Install voice data cables for Comcast service - C200150.	
APPLICANT	
Name: CAPITOL DATA	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMITTS@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"/> 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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

B2020.0323

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00074

Approval Code: 217201 1/27/2020 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: 2785 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: C200132 - Fidelity 2785 CC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109AD01503	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service	
APPLICANT	
Name: CAPITOL DATA	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMIT@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"/> 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
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.

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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



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

B2020-0322
Commercial Electrical Authorization To Begin Work
05350-BEL-20-00073
 Approval Code: 217270 1/27/2020 10:07 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: 9000 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: C200125 - Paychex MT15862	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DA00800	
DESCRIPTION OF WORK	
Install 2 Cat6 cables for circuit extensions - C200158	
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: CDPERMIT@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"/> 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"/> "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
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

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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



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-20-00072

Approval Code: 117205 1/27/2020 9:50 am

E-mailed To: CDPpermits@cepdx.com

B2020-0321

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: 15005 SW TUALATIN VALLEY HWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: C190838-DUNK SECURITY FENCE	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108DD00500	
DESCRIPTION OF WORK	
Provide, install, terminate and test door complement cable bundles. (C190838)	
APPLICANT	
Name: CAPITOL DATA	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMIT@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"/> 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"/> "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"/> Recreational Vehicle Parks
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Health care facilities	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

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

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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



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

B2020-0320

Residential Electrical Authorization To Begin Work
05350-BEL-20-00071
 Approval Code: 026667 1/26/2020 5:02 pm
 E-mailed To: pi.electric@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: 9320 SW PINE ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: StevenVA	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114DC07700	
DESCRIPTION OF WORK	
Upgrade electrical service to 200 A and re-wire kitchen area	
APPLICANT	
Name: Petrica Isai	
Phone: 503-453-9786	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C684	CCB lic. no.: 178790
Business Name: PI ELECTRIC LLC	
Contact:	
Address: 2250 SE & 87TH AVE	
City/State/ZIP: PORTLAND, OR 97216	
Phone: 5034539786	Fax:
Email: DANA7PETRICA@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"/> 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"/> 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	9	\$4.26	\$38.34
Electrical Permit Fees			
Subtotal			\$154.17
State surcharge (12% of permit total)			\$18.50
TOTAL PERMIT FEE			\$172.67

Upon review and approval 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00077

Approval Code: 643443 1/27/2020 12:34 pm

E-mailed To: Andrew@SquiresElectric.com

B2020-0327

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: 13000 SW 2ND ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Beaverton High school temp power	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AD10900	
DESCRIPTION OF WORK	
3 circuits for temp power after fire	
APPLICANT	
Name: Joe Squires	
Phone: 5032521609	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 820 SE WASHINGTON ST	
City/State/ZIP: PORTLAND, OR 97214	
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
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.

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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



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-20-00078

Approval Code: 332139 1/27/2020 3:15 pm

E-mailed To: dave@portlandmetroelectric.com

B2020-0329

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: 1430 NW TREMAINE CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Service Upgrade, Panel Replacement	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131BC05800	
DESCRIPTION OF WORK	
Upgrading service to 200-amps, replacing panel in garage and installing some garage outlets.	
APPLICANT	
Name: David Tkach	
Phone: 5038637733	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1338	CCB lic. no.: 218489
Business Name: PORTLAND METRO ELECTRIC LLC	
Contact:	
Address: 13203 SE 172ND AVE STE 166 #180	
City/State/ZIP: HAPPY VALLEY, OR 97086	
Phone: 5038637733	Fax:
Email: dave@portlandmetroelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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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



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-20-00076

Approval Code: 417223 1/27/2020 12:32 pm

E-mailed To: debbiec@atlas-electrical.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: 7550 SW VERMONT ST	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 30106	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DC03900	
DESCRIPTION OF WORK	
PROVIDING ELECTRICAL FOR 2 GOLF CART CHARGERS AND 1 GARAGE DOOR OPENER.	
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@atlas-electrical.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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-20-00079

Approval Code: 027668 1/27/2020 3:58 pm

E-mailed To: oleg.p@primeelectricalco.com

B2020-0330

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: 2155 NW 173RD PL	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Smart Brain	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N130DC00500	
DESCRIPTION OF WORK	
Provide subpanel for 1st and 2nd floors. New tenant improvement.	
APPLICANT	
Name: Oleg Primachenko	
Phone: 5033185170	Fax: 3608599989
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 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	2	\$115.83	\$231.66
Branch circuits			
Branch circuits with service or feeder each circuit	10	\$4.26	\$42.60
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$365.98
State surcharge (12% of permit total)			\$43.92
TOTAL PERMIT FEE			\$409.90

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00080

Approval Code: 074370 1/27/2020 4:21 pm

E-mailed To: DENNISW@STONERGROUP.COM

B2020-0331

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: 11000 SW STRATUS ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: CREEKSIDE 4	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127AC00800	
DESCRIPTION OF WORK	
WIRE FOR ELEVATOR MODERNIZATION	
APPLICANT	
Name: BEN BISORCA	
Phone: 5033180991	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"/> 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
Branch circuits			
Branch circuits with service or feeder each circuit	4	\$4.26	\$17.04
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$340.42
State surcharge (12% of permit total)			\$40.85
TOTAL PERMIT FEE			\$381.27

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: <u>1/28/2020</u>	Permit No. <u>152020-0250</u>
Date Issued: <u>1/28/2020</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: <u>11028.1</u>	Job address: <u>2725 SW CEDAR HILLS BLVD</u>
City/State/ZIP: <u>BEAVERTON, OR 97005</u>	
Suite/bldg./apt. no.:	Project name: <u>CEDAR HILLS CROSS</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
RELOCATE POWER FOR JOB TRAILERS - PHASE IV	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>STONER ELECTRIC, INC.</u>	
Contact name: <u>DENNIS WHITCOMB</u>	
Address: <u>1904 SE OCHOCO</u>	
City/State/ZIP: <u>MILWAUKIE, OR 97222</u>	
Phone: <u>(503) 462-5214</u>	Fax: <u>(503) 659-4968</u>
E-mail: <u>PERMITS@STONERGROUP.COM</u>	
CONTRACTOR	
Business name: <u>STONER ELECTRIC, INC.</u>	
Address: <u>1904 SE OCHOCO</u>	
City/State/ZIP: <u>MILWAUKIE, OR 97222</u>	
Phone: <u>(503) 462-6500</u>	Fax: <u>(503) 659-4968</u>
E-mail: <u>permits@stonergroup.com</u>	CCB lic. no.: <u>44823</u>
Electrical lic. no.: <u>26-122C</u>	City or metro lic.: <u>4416</u>
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: <u>BRIAN ALEXANDER, 6431S</u>	Date: <u>01/27/20</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>DENNIS WHITCOMB</u>	Date: <u>01/27/20</u>

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marine and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Recreational vehicle parks	
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	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)				
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 B70-1002 REV 10/17



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: <u>1/28/2020</u>	Permit No.: <u>B7020-0335</u>
Date Issued: <u>1/28/2020</u>	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input 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: <u>6730 SW Peach Ln</u>
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: <u>24th St</u>	
Subdivision: <u>Wilson Park No. 3</u>	Lot no.: <u>79</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>relocation of meter, circuit panel box</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Mesay T Keltu</u>	
Address: <u>6730 SW Peach Ln</u>	
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Phone: <u>(678) 431-3219</u>	Fax: <u>(503) 474-5229</u>
E-mail: <u>mesayte@gmail.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>[Signature]</u>	Date: <u>01/27/20</u>
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Same as owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder 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	1	194.64	194.64	4
Ea. add'l 500 sq. ft. or portion	1	34.77	34.77	
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less	1	91.72	91.72	2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	1	4.26	4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			325.39	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				39.05
TOTAL PERMIT FEE				\$364.44

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

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

134.50



Beaverton
OREGON

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

2020-0253

Residential Electrical Authorization To Begin Work

05350-BEL-20-00064

Approval Code: 08631G 1/22/2020 12:36 pm

E-mailed To: bjpelster@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: 16136 NW MISSION OAKS DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Generator install	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CB06000	
DESCRIPTION OF WORK	
Generator install and natural gas piping install	
APPLICANT	
Name: BENJAMIN PELSTER	
Phone: 5036809141	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1168	CCB lic. no.: 208614
Business Name: SB ELECTRIC INC	
Contact:	
Address: 58569 PEBBLE CREEK RD	
City/State/ZIP: VERNONIA, OR 97064	
Phone: 5035062290	Fax:
Email: mrelectricofhillsboro@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> 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 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	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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
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-20-00063

Approval Code: 911263 1/21/2020 5:36 pm

E-mailed To: SUSAN@AEINC.WS

20020-0070

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: 14845 SW MURRAY SCHOLLS DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 109	
Project Name: SO-20025	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DA00800	
DESCRIPTION OF WORK	
ADD/MODIFY 1 CIRCUIT TO INSTALL A PLUG & SWITCH	
APPLICANT	
Name: DEAN STEWART	
Phone: 3602546864	Fax: 3602546864
Email:	
CONTRACTOR	
Elec lic. no.: 37-873C	CCB lic. no.: 117052
Business Name: ADVANCED ELECTRIC INC	
Contact:	
Address: 21811 NE 58 ST	
City/State/ZIP: VANCOUVER, WA 98682	
Phone: 3602546864	Fax: 3602546864
Email: KEN@ADVANCEDELECTRIC.WS	
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"/> Health care facilities	<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"/> Floating buildings			
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
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

82020-0275

Residential Electrical Authorization To Begin Work

05350-BEL-20-00065

Approval Code: 04066G 1/22/2020 2:51 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: 10705 SW HERON CIR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: MW-Inda-20789	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AC08500	
DESCRIPTION OF WORK	
Main floor remodel. Adding cans , New kitchen layout.	
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"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 800 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00066

Approval Code: 023628 1/23/2020 1:10 pm

E-mailed To: office@coxelectricoregon.com

B2020-0272

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: 14370 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Uppercuts Barbershop	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BB16800	
DESCRIPTION OF WORK	
one for one LED lighting upgrade interior	
APPLICANT	
Name: Erica Scoggins	
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"/> 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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:	Permit No. 2020-0267
Date Issued:	1/23/2020
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.: 5375	Job address: 9155 SW Canyon RD.
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Lithia Motors
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Circuit for Equipment	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date: 11/11/11
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: West Side Electric	
Address: 1834 SE 8th Ave.	
City/State/ZIP: Portland/OR/97214	
Phone: (503) 231-1548	Fax: (503) 736-0656
E-mail: Crystal@westsideelectric.com	CCB lic. no.: 13306
Electrical lic. no.: 26-135C	City or metro lic.:
Supervising electrician signature, required: Randall F Roberts	
Print name: Randall F Roberts	Date: 11/11/11
Authorized signature:	
Print name:	Date: 11/11/11

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		144.20	4
Ea. add'l 500 sq. ft. or portion		25.75	
Limited energy, residential (with above sq. ft.)		34.40	2
Limited energy, multi-family residential (with above sq. ft.)		67.95	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		85.80	2
201 amps to 400 amps		102.15	2
401 amps to 600 amps		169.90	2
601 amps to 1,000 amps		222.20	2
Over 1,000 amps or volts		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	1	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
Reconnect only		67.95	1
Pump or irrigation circle		67.95	2
Sign or outline lighting		67.95	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95	2
Each additional inspection over allowable in any of the above			
Per inspection		60.10	
Investigation fee			
Other:			
ELECTRICAL PERMIT FEES			
	Subtotal	60	10
	Plan review (25% of permit fee)		
	State surcharge (12% of permit fee)	7	21
	TOTAL PERMIT FEE	67.81	

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.: 22020-0281
Date Issued: 1/24/20	By:
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input 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: 8285 S.W. Nimbus
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.: STE 113	Project name: THPRD
Cross street/directions to job site: Hall Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
4 Extension Circuits For outlets - Partitions	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Parkside Properties	
Address: 8285 S.W. Nimbus Suite 113	
City/State/ZIP: Beaverton OR 97008	
Phone: 503-645-6433	Fax:
E-mail: X 2744 DLoeck@thprd.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 checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: THPRD	
Contact name: 1	
Address: 15707 SW Walker Rd	
City/State/ZIP: Beaverton OR 97006	
Phone: 971-317-6624	Fax:
E-mail: SORMER@THPRD.ORG	
CONTRACTOR	
Business name: THPRD	
Address: 15707 S.W. Walker Rd	
City/State/ZIP: Beaverton OR 97006	
Phone: 971 317 6624	Fax:
E-mail: SORMER@THPRD.ORG	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name: John B Bjork	Date: 1/24/20
Authorized signature: John B Bjork	38165
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"/> Floating buildings	<input checked="" 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"/> Emergency system	<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		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
Each add'l branch circuit	3	4.26	12.78
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		93.92	0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE		112.70	\$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>B2000-0059</u>
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: 15900 SW Raven Ct.
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Home
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S132CA0530	
DESCRIPTION OF WORK	
remodling existing master bathroom, kids bathroom and kitchen	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Joshua Reiser	
Address: 15900 SW Raven ct.	
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: 01/22/20
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Marin Vip Builders LLC	
Contact name: Issac Marin	
Address: 685 SE Belmont st. suite 311	
City/State/ZIP: Portland Oregon 97214	
Phone: (503) 732-6734	Fax:
E-mail: info@marinvipbuilders.com	
CONTRACTOR	
Business name: Issac Marin	
Address: 685 SE Belmont st. 311	
City/State/ZIP: Portland Oregon	
Phone: (503) 732-6734	Fax:
E-mail: Info@marinvipbuilders.com	CCB lic. no.: 227668
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name: _____	Date: _____
Authorized signature:	
Print name: _____	Date: _____

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	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			25.56	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			3.07	
TOTAL PERMIT FEE			\$28.63	

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

* Number of inspections allowed per permit.
 Form B70-1002

REV 10/17



Electrical Permit Application

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

OFFICE USE ONLY

Date Received: <u>1/22/20</u>	Permit No.: <u>B2020-0247</u>
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 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: <u>12100 SW SPUR CT #E</u>
City/State/ZIP: <u>Beaverton OR 97008</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replace FPE Electrical Panel</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>SORS INVESTMENT</u>	
Address: <u>12100 SW SPUR CT.</u>	
City/State/ZIP: <u>Beaverton OR 97008</u>	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Star Electric</u>	
Contact name: <u>GHOLAM SARPAAK</u>	
Address: <u>P.O. BOX 1784</u>	
City/State/ZIP: <u>Beaverton OR 97075</u>	
Phone: <u>503-849-1427</u>	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Star Electrical Service</u>	
Address: <u>P.O. BOX 1784</u>	
City/State/ZIP: <u>Beaverton OR 97075</u>	
Phone: <u>503-849-1427</u>	Fax: <u>503 579-4581</u>
E-mail:	CCB lic. no.: <u>2153627</u>
Electrical lic. no.: <u>26-963 C</u>	City or metro lic.:
Supervising electrician signature, required: <u>GHOLAM SARPAAK</u>	
Print name: <u>GHOLAM SARPAAK</u>	Date: <u>1/22/20</u>
Authorized signature: _____	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "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	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		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection, over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
TOTAL PERMIT FEE				\$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-20-00055

Approval Code: 08029D 1/20/2020 1:01 pm

E-mailed To: mphillips@atsdata.com

B 2020-0223

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: 2625 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Fidelity	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109AD01503	
DESCRIPTION OF WORK	
Add data cable	
APPLICANT	
Name: Matt Phillips	
Phone: 503-684-9611	Fax: 503-598-0498
Email:	
CONTRACTOR	
Elec lic. no.: 2-71CLE	CCB lic. no.: 89511
Business Name: APPLIED TECHNICAL SYSTEMS INC	
Contact:	
Address: 7015 SW MCEWAN RD	
City/State/ZIP: LAKE OSWEGO, OR 97035	
Phone: 5036849611	Fax: 5036849611
Email: mphillips@atsdata.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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00054

Approval Code: 524166 1/20/2020 10:10 am

E-mailed To: rbachofner@bachelectric.com

B 2020-0222

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: 6700 SW 106TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Suite 305	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AD02100	
DESCRIPTION OF WORK	
Lights and power	
APPLICANT	
Name: Rob Bachofner	
Phone: 503-327-8872	Fax: 503-327-8869
Email:	
CONTRACTOR	
Elec lic. no.: C514	CCB lic. no.: 187062
Business Name: BACHOFNER ELECTRIC LLC	
Contact:	
Address: 12031 NE MARX ST	
City/State/ZIP: PORTLAND, OR 97220	
Phone: 5033278872	Fax: 5033278869
Email: bbokma@bachelectric.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.

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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



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-20-00059

Approval Code: 07618G 1/20/2020 10:02 pm

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

B20200228

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: 13975 SW BONNIE BRAE ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 20-9265	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CD00615	
DESCRIPTION OF WORK	
Panel change on existing feeder grounding rods circuit for ductless system circuit for convenience power and fireplace	
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"/> 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
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.

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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



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-20-00056

Approval Code: 020779 1/20/2020 2:13 pm

E-mailed To: sabrina@coxelectricoregon.com

B2020-0230

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: 10825 SW AVOCET CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132BC04700	
DESCRIPTION OF WORK	
Lighting Upgrade	
APPLICANT	
Name: Sabrina Lipanovich	
Phone: 5039813320	Fax: 5039809920
Email:	
CONTRACTOR	
Elec lic. no.: C1098	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"/> 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.

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00057

Approval Code: 020760 1/20/2020 2:32 pm

E-mailed To: sabrina@coxelectricoregon.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
Electrical Permit Fees			
Subtotal			\$81.14
State surcharge (12% of permit total)			\$9.74
TOTAL PERMIT FEE			\$90.88

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: 12536 SW SHELDRAKE WAY

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 2S105BD03100

DESCRIPTION OF WORK

Installing (4) Lights . (2) Existing (2) New

APPLICANT

Name: Sabrina Lipanovich

Phone: 5039813320

Fax: 5039809920

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

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

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

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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-20-00060

Approval Code: 615398 1/21/2020 10:51 am

E-mailed To: kclassen@sonitrolpacific.com

B 2020-0234

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: 33680-1 Washington Green Building	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126CA01200	
DESCRIPTION OF WORK	
This permit is for the whole building address 9140, not just a suite. We are separating building address 9120 and 9140 fire alarm systems (currently they have a combined system). Installing a new fire panel and adding devices to the existing system layout.	
APPLICANT	
Name: Kendra Classen	
Phone: 5032235822	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: CLE467	CCB lic. no.: 185850
Business Name: SECURE PACIFIC CORPORATION	
Contact:	
Address: 8220 N INTERSTATE AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5032737233	Fax: 5034737773
Email: lbuckner@securepacific.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.

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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



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-20-00058

Approval Code: 710234 1/20/2020 3:43 pm

E-mailed To: CEPermits@cepdx.com

B 2020-0233

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3905 SW 117TH AVE	4021
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: B	
Project Name: Police HVAC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
J# 200315 - Police HVAC . COonnect power to HVAC RTU that was replaced with new. Extend circuit and provide new Disconnect.	
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: CEPERMIT@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 seperately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

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

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
 This Authorization To Begin Work must be posted at the job site until replaced by a Permit



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/22/2020	Permit No: 2020-1244
Date Issued: 1/22/2020	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.: 170910	Job address: 7791 SW Cirrus
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	
Parkside Business center 2b-m Panel change	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Harach	
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:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Steele Electric	
Address: 716 Rose Drive	
City/State/ZIP: Forest Grove OR 97116	
Phone: 503-268-1311	Fax: 503-372-6448
E-mail: Service@nwsteele.com	CCB lic. no.: 186140
Electrical lic. no.: 2489	City or metro lic.: 10034
Supervising electrician signature, required: Dan Steele	
Print name: Dan Steele	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "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		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	1	110.31	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		77.28		2
Each add'l branch circuit		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		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			110.31	
Plan review (25% of permit fee)			13.23	
State surcharge (12% of permit fee)				
TOTAL PERMIT FEE			123.54	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete
 * Number of inspections allowed per permit.
 Form B70-1002 REV 10/16



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-20-00062

Approval Code: 511224 1/21/2020 1:42 pm

E-mailed To: chad@ohmsys.com

B2020-0240

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: 12577 SW 1ST ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Afuri Beaverton	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AD00500	
DESCRIPTION OF WORK	
low voltage cabling for audio system	
APPLICANT	
Name: Chad Baldwin	
Phone: 503-484-5700	Fax: 503-258-0382
Email:	
CONTRACTOR	
Elec lic. no.: CLE6	CCB lic. no.: 166819
Business Name: OHM SYSTEMS LLC	
Contact:	
Address: PO BOX 86833	
City/State/ZIP: PORTLAND, OR 972860833	
Phone: 5034845700	Fax:
Email: CHAD@OHMSYS.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
Miscellaneous			
Signal circuil(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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00061

Approval Code: 384870 1/21/2020 1:10 pm

E-mailed To: office@youngelectricco.com

B2020-0239

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: 14595 SW OSPREY DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Hot tub	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AD00100	
DESCRIPTION OF WORK	
emergency shut off switch for hot tub jets	
APPLICANT	
Name: Young Electric Office	
Phone: 9718885081	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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: B 2020-0123
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: 11175 sw clifford st
City/State/ZIP: Beaverton OR 97 008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER	
<input type="checkbox"/> TENANT	
Name:	
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:	
Contact name: Russ Tkachenko	
Address:	
City/State/ZIP:	
Phone: 9712636696	Fax:
E-mail:	
CONTRACTOR	
Business name: S&R Electric LLC	
Address: 12178 se bluff dr	
City/State/ZIP: Clackamas Or 97015	
Phone:	Fax:
E-mail: sandrelectricllc@gmail.com	CCB lic. no.: 225425
Electrical lic. no.: C1468	City or metro lic.:
Supervising electrician signature, required:	
Print name: Ryan Martin	Date: 1/13/20
Authorized signature:	
Print name: Ruslan Tkachenko	Date: 1/13/20

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

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-20-00034

Approval Code: 05047B 1/13/2020 12:48 pm

E-mailed To: mikeselectric@mikeselectric.biz

B2020-0128

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: 5341 SW DOVER CT	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: DODD	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA04000	
DESCRIPTION OF WORK	
SUB-PANEL, BASEMENT OUTLETS & LIGHTS, BATHROOM OUTLETS & LIGHTS, FRIDGE OUTLET, 7X STUDIO OUTLETS	
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
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	10	\$4.26	\$42.60
Electrical Permit Fees			
Subtotal			\$158.43
State surcharge (12% of permit total)			\$19.01
TOTAL PERMIT FEE			\$177.44

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

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: 14350 SW ROCHESTER DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: ZIMMERMAN	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC06700	
DESCRIPTION OF WORK	
INSTALLING FURNACE.	
APPLICANT	
Name: GARY TRAN	
Phone: 5036505014	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C55	CCB lic. no.: 71878
Business Name: A-TEMP HEATING & COOLING INC	
Contact:	
Address: 15927 SE 122ND AVE	
City/State/ZIP: CLACKAMAS, OR 97015	
Phone: 5036505014	Fax: 5035572990
Email: corey@atempheating.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 wthin 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
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

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: 16100 NW CORNELL RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 140	
Project Name: Willow Creek Suite 140	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132BC05200	
DESCRIPTION OF WORK	
Need (4) Branch Circuits For Outlets In Conference Room & New Offices	
APPLICANT	
Name: Dustin O'Rear	
Phone: 5036808890	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 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"/> Fire pumps	<input type="checkbox"/> Marinas and boat yards	<input type="checkbox"/> Floating buildings	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	
<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"/> Recreational Vehicle Parks	
<input type="checkbox"/> Six or more residential units in one structure	<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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

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: 14705 SW FOREST DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 20-0020	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DA07000	
DESCRIPTION OF WORK	
New electric furnace, electric water heater	
APPLICANT	
Name: eric olson	
Phone: 3602581849	Fax: 3602581859
Email:	
CONTRACTOR	
Elec lic. no.: 37-1053C	CCB lic. no.: 179408
Business Name: ERIC OLSON ELECTRIC INC	
Contact:	
Address: 10013 NE HAZEL DELL AVE PMB#432	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 3602581849	Fax: 3602581859
Email: office@ericolsonelectricinc.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"/> Health care facilities	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<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"/> 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"/> 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
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

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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

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: 4955 SW WESTERN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: A	
Project Name: Montavilla Sewing Center	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115AD02400	
DESCRIPTION OF WORK	
Additional receptacles in repair area. Additional lighting in showroom area.	
APPLICANT	
Name: ROBERT LANE	
Phone: 5039088058	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 3-332C	CCB lic. no.: 162368
Business Name: LANTIL LLC	
Contact:	
Address: 11490 SE JENNIFER ST	
City/State/ZIP: CLACKAMAS, OR 970159009	
Phone: 5037608522	Fax: 5037621823
Email: RLANE@WRIGHT1ELECTRIC.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.

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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



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

OFFICE USE ONLY	
Date Received: 1/23/20	Permit No.: 19079-0127
Date Issued: 1/23/20	By: CEM
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 buidler <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 4955 SW WESTERN AVE
City/State/ZIP: BEAVERTON OR 97005	Project name: MONTAUILLA
Suite/bldg./apt. no.:	Cross street/directions to job site: NEXT TO MICHEALS
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
MOVE 3 DATA LINES FROM OLD WALL TO NEW WALL	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: MONTAUILLA SEWING CENTER	
Address: 4955 SW WESTERN AVE	
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: WARNEKING CONSTRUCTION	
Contact name: DAVE	
Address: 4900 NW 140th AVE	
City/State/ZIP: PORTLAND OR 97229	
Phone: 503-805-1500	Fax:
E-mail: dave.warneking@gmail.com	
CONTRACTOR	
Business name: WARNEKING CONSTRUCTION	
Address: 4900 NW 140th AVE	
City/State/ZIP: PORTLAND OR 97229	
Phone: 503-805-1500	Fax:
E-mail: dave.warneking@gmail.com	PCB lic. no.: 89285
Electrical lic. no.: gmail.com	City or metro lic.:
Supervising electrician signature: David Warneking	
Print name: DAVID WARNEKING	Date: 1-9-20
Authorized signature: David Warneking	
Print name: DAVID WARNEKING	Date: 1-9-20

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:		91.72	2
Each additional inspection over allowable in any of the above			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			0.00
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
TOTAL PERMIT FEE			\$0.00

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * 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:	Permit No.: B2020-0118
Date Issued: 1/13/20	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement <input checked="" type="checkbox"/> Other: inspection to turn PGE on
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: 6775 SW Rollingwood Drive
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	
<input checked="" type="checkbox"/> PROPERTY OWNER	
Name: AAV TWO LLC	
Address: 8733 SE Division St. Suite 201	
City/State/ZIP: Portland OR 97266	
Phone: (503) 257-6674	Fax: (507) 257-6675
E-mail: ChaletHomes6@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: 1/10/2020
<input type="checkbox"/> APPLICANT	
<input checked="" type="checkbox"/> CONTACT PERSON	
Business name: Peace of Mind	
Contact name: Natalya Lebedev	
Address: 8733 SE Division St. Suite 201	
City/State/ZIP: Portland OR 97266	
Phone: (503) 257-6674	Fax: (503) 257-6675
E-mail: peaceofmindnw@gmail.com	
CONTRACTOR	
Business name: Chalet Homes	
Address: 8733 SE Division St. Suite 201	
City/State/ZIP: Portland OR 97266	
Phone: (503) 257-6674	Fax: (503) 257-6675
E-mail: chaletHomes7@gmail.com	CCB lic. no.: 196324
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> 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	1	91.72	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			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

Residential Electrical Authorization To Begin Work

05350-BEL-20-00006

Approval Code: 047491 1/2/2020 1:47 pm

E-mailed To: tina@redselectric.com

B2020-0015

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: 9805 SW HEATHER LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: walker	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CA00900	
DESCRIPTION OF WORK	
panel rotation, wiring throughout home	
APPLICANT	
Name: Tina Muro	
Phone: 5032336467	Fax: 5032331281
Email:	
CONTRACTOR	
Elec lic. no.: 26-152C	CCB lic. no.: 4443
Business Name: REDS ELECTRIC CO INC	
Contact:	
Address: PO BOX 68999	
City/State/ZIP: PORTLAND, OR 97268	
Phone: 5032336467	Fax: 5032331281
Email: brandl@redselectric.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"/> Fire pumps	<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"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings	
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> Commercial-use agricultural buildings	
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"	<input type="checkbox"/> Recreational Vehicle Parks	
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	6	\$4.26	\$25.56
Electrical Permit Fees			
Subtotal			\$141.39
State surcharge (12% of permit total)			\$16.97
TOTAL PERMIT FEE			\$158.36

Upon review and approval 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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Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/13/20	Permit No: B2020-0115
Date Issued: 1/13/20	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: 17780 NW Cambray St
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	
6.82 kW AC Solar PV installation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Ted and Mary Wright	
Address: 17780 NW Cambray St	
City/State/ZIP: Beaverton, OR 97006	
Phone: (814) 450-3590	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: Elemental Energy	
Contact name: Christine Stamper	
Address: 1339 SE 8th Ave Suite B	
City/State/ZIP: Portland, OR 97215	
Phone: (503) 967-5786	Fax:
E-mail: permits@elementalenergy.net	
CONTRACTOR	
Business name: Elemental Energy	
Address: 1339 SE 8th Ave Suite B	
City/State/ZIP: Portland, OR 97214	
Phone: (503) 967-5786	Fax:
E-mail: permits@elementalenergy.net	CCB lic. no.: 195141
Electrical lic. no.: C1228	City or metro lic.:
Supervising electrician signature, required: <i>Nathan Miller</i>	
Print name: Nathan Miller	Date:
Authorized signature: <i>John Grieser</i>	
Print name: John Grieser	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"/> 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 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 Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>1/13/20</u>	Permit No.: <u>B2020-0121</u>
Date Issued:	By: <u>clay</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>14523 SW Millikan Way</u>
City/State/ZIP: <u>Beaverton Oregon 97005</u>	Project name: <u>Mr. Cooper</u>
Suite/bldg./apt. no.: <u>Copper</u>	
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Pulling 200 new Data Cables.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Avid Technologies</u>	
Contact name: <u>David Lillie</u>	
Address: <u>6804 Se Henry Street</u>	
City/State/ZIP: <u>SE Portland Oregon 97206</u>	
Phone: <u>503-516-8394</u>	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Avid Technology</u>	
Address: <u>6804 Se Henry Street</u>	
City/State/ZIP: <u>SE Portland Oregon 97206</u>	
Phone: <u>503-516-8394</u>	Fax:
E-mail:	CCB lic. no.: <u>199602</u>
Electrical lic. no.: <u>5429LEA</u>	City or metro lic.:
Supervising electrician signature, required: <u>David Lillie</u>	
Print name: <u>David Lillie</u>	Date: <u>1/13/20</u>
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> 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 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	1	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			0.00	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			0.00	
TOTAL PERMIT FEE			\$0.00	

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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/13/20	Permit No.: 2000120
Date Issued:	By: <i>[Signature]</i>
	Payment Type:

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input 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: 2785 SW Cedar Hills Blvd.
City/State/ZIP: Beaverton, OR.	Project name: Fidelity Investments
Suite/bldg./apt. no.:	Cross street/directions to job site: Cedar Hills Blvd.
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Security 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 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: Limited Energy Electricians	
Address: P.O. Box 55275	
City/State/ZIP: Portland OR 97238	
Phone: 503 519 2345	Fax:
E-mail:	CCB lic. no.: 136677
Electrical lic. no.: 26-1114CE	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i> 1119LEA	
Print name: Russ James	Date: 1/13/20
Authorized signature: <i>[Signature]</i>	
Print name: Russ James	Date: 1/13/20

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"/> 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		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



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-20-00019

Approval Code: 016150 1/8/2020 1:42 pm

E-mailed To: donwilsue4@aol.com

30020-0079

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: 12053 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#16	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood All new devices and LED lighting New wall heaters and T-stats	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> 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
Limited Energy			
Stand-alone limited energy, residential	2	\$46.42	\$92.84
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	95	\$4.26	\$404.70
Electrical Permit Fees			
Subtotal			\$578.68
State surcharge (12% of permit total)			\$69.44
TOTAL PERMIT FEE			\$648.12

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
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

B2020-0078

Residential Electrical Authorization To Begin Work

05350-BEL-20-00018

Approval Code: 00567G 1/8/2020 1:40 pm

E-mailed To: haley@sunbridgesolar.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: 2350 SW 81ST AVE	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: Hayes Solar System	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BB00401	
DESCRIPTION OF WORK	
9.75kW rooftop solar pv system	
APPLICANT	
Name: Haley Polk	
Phone: 9713254164	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1123	CCB lic. no.: 189787
Business Name: SUNBRIDGE SOLAR LLC	
Contact:	
Address: 706 W 17TH ST	
City/State/ZIP: VANCOUVER, WA 98660	
Phone: 5034076820	Fax:
Email: jordan@sunbridgesolar.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
Renewable Energy			
5.01 to 15 kva - pv	1	\$115.83	\$115.83
Electrical Permit Fees			
Subtotal			\$115.83
State surcharge (12% of permit total)			\$13.90
TOTAL PERMIT FEE			\$129.73

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

0000-0577

Residential Electrical Authorization To Begin Work

05350-BEL-20-00017

Approval Code: 015564 1/8/2020 1:39 pm

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12081 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#14	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood All new devices and LED lighting New wall heaters and T-stats	
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"/> 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, residential	2	\$46.42	\$92.84
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	95	\$4.26	\$404.70
Electrical Permit Fees			
Subtotal			\$578.68
State surcharge (12% of permit total)			\$69.44
TOTAL PERMIT FEE			\$648.12

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

B2020-0074p

Residential Electrical Authorization To Begin Work

05350-BEL-20-00016

Approval Code: 030711 · 1/8/2020 1:35 pm

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12125 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#13	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood All new devices and LED lighting New wall heaters and T-stats	
APPLICANT	
Name: Chris Riehle	
Phone: 5034770704	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C427	CCB lic. no.: 95163
Business Name: QUALITY PLUS FRAMING & ELECTRICAL INC	
Contact:	
Address: 16037 SW BOWMAN LN	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037991639	Fax:
Email: donwilsue4@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder 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, residential	2	\$46.42	\$92.84
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	143	\$4.26	\$609.18
Electrical Permit Fees			
Subtotal			\$783.16
State surcharge (12% of permit total)			\$93.98
TOTAL PERMIT FEE			\$877.14

Upon review and approval 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

B2020-0081

Residential Electrical Authorization To Begin Work

05350-BEL-20-00020

Approval Code: 010127 1/8/2020 1:45 pm

E-mailed To: donwilsue4@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12113 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#12	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
New circuits for washer, dryer and micro hood All new devices and LED lighting New wall heaters and T-stats	
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 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, residential	2	\$46.42	\$92.84
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	143	\$4.26	\$609.18
Electrical Permit Fees			
Subtotal			\$783.16
State surcharge (12% of permit total)			\$93.98
TOTAL PERMIT FEE			\$877.14

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

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

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
This Authorization To Begin Work must be posted at the job site until replaced by a Permit



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

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00015

Approval Code: 008264 1/8/2020 1:22 pm

E-mailed To: office@coxelectricoregon.com

B2020-0073

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: 8630 SW SCHOLLS FERRY RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Ups Store	
Cross Street/directions to job site: SW Scholls Ferry Rd	
Tax map/parcel no.: 1S126BC00300	
DESCRIPTION OF WORK	
one for one LED Lighting upgrades to main floor, back area, office and restroom.	
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"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> A service or feeder rated at 600 amps or more
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Buildings more than three stor
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Commercial-use agricultural buildings
	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys
	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
	<input type="checkbox"/> Recreational Vehicle Parks
	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal

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

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

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

B2020-0114

Residential Electrical Authorization To Begin Work

05350-BEL-20-00031

Approval Code: 01162G 1/10/2020 1:27 pm

E-mailed To: office@ericolsonelectricinc.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: 13750 SW BERTHOLD ST	
City/State/ZIP: BEAVERTON, OR 97005	
Sulte/bldg./apt.no.:	
Project Name: 20-0024	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CD03100	
DESCRIPTION OF WORK	
gas furnace reconnect	
APPLICANT	
Name: eric olson	
Phone: 3602581849	Fax: 3602581859
Email:	
CONTRACTOR	
Elec lic. no.: 37-1053C	CCB lic. no.: 179408
Business Name: ERIC OLSON ELECTRIC INC	
Contact:	
Address: 10013 NE HAZEL DELL AVE PMB#432	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 3602581849	Fax: 3602581859
Email: office@ericolsonelectricinc.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
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.

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton

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-20-00028

Approval Code: 619044 1/9/2020 2:44 pm

E-mailed To: CDPermits@cepdx.com

B2020-0100

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: 11439 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: C190981	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115AB01100	
DESCRIPTION OF WORK	
Install voice data cable for Comcast service - C190981	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMIT@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"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards	<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 separately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Emergency systems	<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"/> Addition of a new motor load of 100 HP or more	<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.

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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

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: 10125 SW 153RD AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: McCauley	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AB02400	
DESCRIPTION OF WORK	
Kitchen remodel - lighting, outlets, appliances	
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"/> 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	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.

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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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1-10-20	Permit No.: B2020-0109
Date Issued: 1-10-20	By: <i>TW</i>
Payment Type: <i>Visa</i>	

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: 8400 SW Nimbus Ave Ste 100
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Panda Express
Cross street/directions to job site: Hall Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
3 Sign Circuits	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Panda Express	
Address: 8400 SW Nimbus Ave Ste100	
City/State/ZIP: Beaverton, OR 97008	
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	CCB lic. no.: 203638
Electrical lic. no.: CLS34	City or metro lic.: 11533
Supervising electrician signature, required:	
Print name: Dave Demuth	Date: 12/20/19
Authorized signature:	
Print name: Dave Lanphere	Date: 12/20/19

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"/> 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
Eq. add'l 600 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			0.00
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 876-1002 REV 10/17



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

B2020-0112

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00030

Approval Code: 010788 1/10/2020 12:10 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: 10120 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Crossfit Iliad	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115AD00200	
DESCRIPTION OF WORK	
one for one LED lighting upgrades	
APPLICANT	
Name: Zachary Holden	
Phone: 5036861838	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"/> 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	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.

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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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1-10-20	Permit No.: B2020-0103
Date Issued: 1-10-20	By: <i>MW</i>
	Payment Type: <i>AMX</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input checked="" type="checkbox"/> Other: Public
JOB SITE INFORMATION AND LOCATION	
Job no.: E8204	Job address: 1850 SW 170th Ave
City/State/ZIP: Beaverton, OR 97003	
Suite/bldg./apt. no.:	Project name: TVWD Lobby Upgrade
Cross street/directions to job site: Merlo Rd.	
Subdivision:	Lot no.: 1200
Tax map/parcel no.: 1S1-0600	
DESCRIPTION OF WORK	
Add power and data for interior remodel: service counter, access controls, upgrade lighting, A/V equipment.	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Tualatin Valley Water District	
Address: 1850 SW 170th Ave	
City/State/ZIP: Beaverton, OR 97003	
Phone: (503) 848-3000	Fax:
E-mail: collin.fleming@tvwd.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: <i>[Signature]</i>	Date: 12-19-19
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: MWA Architects	
Contact name: Casey Hagerman	
Address: 70 NW Couch St, Suite 401	
City/State/ZIP: Portland, OR 97209	
Phone: (503) 973-5151	Fax:
E-mail: chagerman@mwaarchitects.com	
CONTRACTOR	
Business name: ALRa Electric	
Address: 7146 SW 158 AVE	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 844-2090	Fax:
E-mail: alraelectric@plb.com	CCB lic. no.: R1111
Electrical lic. no.: 43205	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Riad Nasry	Date: 12/20/19
Authorized signature: <i>[Signature]</i>	
Print name: Eli Kimmel	Date: 12/20/19

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 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	18	4.26	76.68	
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				157.82
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				18.94
TOTAL PERMIT FEE				\$176.76

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



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

B 2020-0088

Residential Electrical Authorization To Begin Work

05350-BEL-20-00023

Approval Code: 98722G 1/8/2020 10:26 pm

E-mailed To: barlowelectricinc@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: 8700 SW CORTEZ CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: E20-100	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BD06500	
DESCRIPTION OF WORK	
kitchen remodel	
APPLICANT	
Name: Tyler Bartow	
Phone: 5037533290	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C926	CCB lic. no.: 199250
Business Name: BARLOW ELECTRIC INCORPORATED	
Contact:	
Address: PO BOX 2507	
City/State/ZIP: CORVALLIS, OR 97330	
Phone: 5037533290	Fax:
Email: BARLOWELECTRICINC@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	5	\$4.26	\$21.30
Electrical Permit Fees			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
TOTAL PERMIT FEE			\$114.73

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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



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-20-00022

Approval Code: 001737 1/8/2020 5:16 pm

E-mailed To: donwilsue4@aol.com

B2020-0086

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: 12021 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 #15 unit # 12025	
Tax map/parcel no.: 1S1270000208	
DESCRIPTION OF WORK	
Service reconnect only	
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"/> 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
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.

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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-20-00027

Approval Code: 009359 1/9/2020 10:20 am

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: 9755 SW BARNES RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 41849 Atwell	
Cross Street/directions to job site: Suite 150	
Tax map/parcel no.: 1S102CA00400	
DESCRIPTION OF WORK	
Low Voltage Data Cabling Install	
APPLICANT	
Name: Toryn Grubbe	
Phone: 5034316600	Fax: 5036241436
Email:	
CONTRACTOR	
Elec lic. no.: 37-976C	CCB lic. no.: 148222
Business Name: CACHE VALLEY ELECTRIC COMPANY	
Contact:	
Address: PO BOX 405	
City/State/ZIP: LOGAN, UT 843230405	
Phone: 4357526405	Fax: 5034316600
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations
<input type="checkbox"/> 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	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$91.72
State surcharge (12% of permit total)			\$11.01
TOTAL PERMIT FEE			\$102.73

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
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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-20-00026

Approval Code: 009636 1/9/2020 10:04 am

E-mailed To: office@coxelectricoregon.com

B2020-0093

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: 11170 SW 5TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 150	
Project Name: Granite Transformations Inc	
Cross Street/directions to Job site:	
Tax map/parcel no.: 1S115DA01500	
DESCRIPTION OF WORK	
one for one LED lighting upgrades to main showroom, offices and bathroom only	
APPLICANT	
Name: Steve Bronson	
Phone: 50333345978	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 rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other <input type="checkbox"/> Fire pumps <input type="checkbox"/> Emergency systems <input type="checkbox"/> Addition of a new motor load of 100 HP or more <input type="checkbox"/> Six or more residential units in one structure <input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Branch circuits			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$89.66
State surcharge (12% of permit total)			\$10.76
TOTAL PERMIT FEE			\$100.42

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov
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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-20-00025

Approval Code: 132384 1/9/2020 9:28 am

E-mailed To: tfisher@oakleyelec.com

32020-0091

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: 11520 SW TIMBERLINE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: SW Timberline Drive	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CD00110	
DESCRIPTION OF WORK	
Car Charger	
APPLICANT	
Name: Troy Fisher	
Phone: 5039080514	Fax: 5039081729
Email:	
CONTRACTOR	
Elec lic. no.: C456	CCB lic. no.: 184315
Business Name: OAKLEY ELECTRIC INC	
Contact:	
Address: 21953 S SALING RD	
City/State/ZIP: ESTACADA, OR 97023	
Phone: 5039136071	Fax: 5039081729
Email: TFISHER@OAKLEYELEC.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
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.

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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



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-20-00024

Approval Code: 009100 1/9/2020 9:24 am

E-mailed To: rick.apolloelectric@gmail.com

B 2020-0090

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: 8397 SW SUNSTONE LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AB13100	
DESCRIPTION OF WORK	
Wire new sunroom with 2 circuits	
APPLICANT	
Name: Rick Taylor-Streff	
Phone: 5034211691	Fax: 5032444410
Email:	
CONTRACTOR	
Elec lic. no.: 34-394C	CCB lic. no.: 183120
Business Name: APOLLO ELECTRIC LLC	
Contact:	
Address: 4545 BLACK FORREST CT	
City/State/ZIP: PORTLAND, OR 972800783	
Phone: 5032444410	Fax:
Email: ZZAPOLLO@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	1	\$4.26	\$4.26
Miscellaneous			
Signal circuit(s) or limited-energy panel, alteration, or extension	1	\$91.72	\$91.72
Electrical Permit Fees			
Subtotal			\$177.12
State surcharge (12% of permit total)			\$21.25
TOTAL PERMIT FEE			\$198.37

Upon review and approval 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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

82020-0083

05350-BEL-20-00021

Approval Code: 120682 1/8/2020 4:08 pm

E-mailed To: ghsarkygary@aol.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2145 SW 79TH AVE	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BA05600	
DESCRIPTION OF WORK	
garage conversion	
APPLICANT	
Name: GARY HATTON	
Phone: 503-465-8145	Fax: 503-465-8517
Email:	
CONTRACTOR	
Elec lic. no.: C1010	CCB lic. no.: 202034
Business Name: GARYS ELECTRIC CO LLC	
Contact:	
Address: 1401 SW WALLULA DR	
City/State/ZIP: GRESHAM, OR 97080	
Phone: 5034658145	Fax: 5034658517
Email: ghsarkygary@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"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards	<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"/> 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"/> Addition of a new motor load of 100 HP or more	<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	10	\$4.26	\$42.60
Electrical Permit Fees			
Subtotal			\$158.43
State surcharge (12% of permit total)			\$19.01
TOTAL PERMIT FEE			\$177.44

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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: 1-8-20	Permit No.: B2020-0080
Date Issued: 1-8-20	By: <i>[Signature]</i>
	Payment Type: VISA

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: 8980 SW Ivory St
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	
connect gas insert blower to existing connection	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Tonya Surprise	
Address: 8980 SW Ivory St	
City/State/ZIP: Beaverton OR 97007	
Phone: (503) 702-5083	Fax:
E-mail: tonya0946@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: <i>Tonya Surprise</i>	Date: 01/08/20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		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



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1-7-20	Permit No.: B2020-0067
Date Issued: 1-8-20	By: MK
Payment Type: VISA	

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: Cedar Hill & WB Hwy 26
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Replace Meter
Cross street/directions to job site: Barnes	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace Meter Base	
<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: Oregon Department of Transportation, Electrical	
Address: 9200 SE Lawnfield Rd	
City/State/ZIP: Clackamas, OR 97015	
Phone: (971) 673-6201	Fax: (971) 673-6202
E-mail: duc.v.phan@odot.state.or.us	CCB lic. no.:
Electrical lic. no.: 24-186C	City or metro lic.:
Supervising electrician signature, required: <i>[Signature]</i>	# 58015
Print name: Johnny Sapp	Date: 01/07/20
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> 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," "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 600 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 reconnected		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			115.83	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				13.90
TOTAL PERMIT FEE			\$129.73	

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00013

Approval Code: 717014 1/7/2020 3:41 pm

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: 9000 SW GEMINI DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: C200039 - Paychex	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127DA00800	
DESCRIPTION OF WORK	
Install data cabling - C200039	
APPLICANT	
Name: CAPITOL DATA	
Phone: 5032559488	Fax: 5032577121
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMIT@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 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
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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00014

Approval Code: 817042 1/7/2020 4:24 pm

E-mailed To: permits@bearelectric.com

B2020-0066

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: 10575 SW 136TH PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BD02700	
DESCRIPTION OF WORK	
Kitchen Remodel.	
APPLICANT	
Name: Bear Electric	
Phone: 503-678-1355	Fax: 503-678-1108
Email:	
CONTRACTOR	
Elec lic. no.: 24-107C	CCB lic. no.: 20919
Business Name: BEAR ELECTRIC INC	
Contact:	
Address: PO BOX 389	
City/State/ZIP: DONALD, OR 97020	
Phone: 5036781355	Fax: 5036781108
Email: sshpherd@bearelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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: 12/18/2019	Permit No.: B2019-4856
Date Issued: 1-7-20	By: <i>[Signature]</i>
	Payment Type: <i>visa</i>

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: 3400 SW 125th Ave

City/State/ZIP: Beaverton, Or 97005

Suite/bldg./apt. no.: Project name: 125th Ave

Cross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

5 plex with house panel, 936 sqft per unit, 400 Amp Service

PROPERTY OWNER TENANT

Name: CTH Investments

Address:

City/State/ZIP:

Phone: Fax:

E-mail:

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

Owner signature: _____ Date: _____

APPLICANT CONTACT PERSON

Business name: Ross Electric, Inc

Contact name: Stephen Ross

Address: 2870 SE 75th Ave

City/State/ZIP: Hillsboro, Or 97123

Phone: (503) 642-2800 Fax: (503) 642-5815

E-mail: rosselectric@comcast.net

CONTRACTOR

Business name: Ross Electric, Inc

Address: 2870 SE 75th Ave

City/State/ZIP: Hillsboro, Or 97123

Phone: (503) 642-2800 Fax: (503) 642-5815

E-mail: rosselectric@comcast.net CCB lic. no.: 157891

Electrical lic. no.: 34-436C City or metro lic.: 7867

Supervising electrician signature, required: *[Signature]*

Print name: Stephen Ross Date: 12/17/20

Authorized signature: _____ Date: _____

PLAN REVIEW

Please check all that apply:

Service or feeder 400amps or more
 Fire pump
 Emergency system
 Addition of new motor load of 100HP or more
 Six or more residential units
 Health-care facilities
 Hazardous locations

Service or feeder over 600 amps
 Building over three stories
 Marinas and boatyards
 Floating buildings
 Commercial-use agricultural buildings
 Installation of 150 KVA or larger separately derived system
 "A," "E," "1-2," "1-3" occupancy
 Recreational vehicle parks

FEE SCHEDULE

Description	Qty.	Fee	Total	*
Residential (single or multi-family) dwelling units (includes attached garage)				
1,000 sq. ft. or less	1	194.64	194.64	4
Ea. add'l 500 sq. ft. or portion	4	34.77	139.08	
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Service or feeder installation, alteration and/or relocation				
200 amps or less	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 feeder 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 on 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:	1	91.72	91.72	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Subtotal				
			602.43	
Plan review (25% of permit fee)			150.61	
State surcharge (12% of permit fee)			72.29	
TOTAL PERMIT FEE			\$825.33	

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



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

Commercial Electrical Authorization To Begin Work

05350-BEL-20-00012

Approval Code: 995870 1/7/2020 11:38 am

E-mailed To: solidrockelectric@live.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: 10201 SW BEAVERTON HILLSDALE HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114BC03501	
DESCRIPTION OF WORK	
Beautify Me Lashes and Spa Tenant Improvement 8 circuits	
APPLICANT	
Name: Nathan Parks	
Phone: 5039316306	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C759	CCB lic. no.: 194408
Business Name: SOLID ROCK ELECTRIC LLC	
Contact:	
Address: PO BOX 4266	
City/State/ZIP: SALEM, OR 97302	
Phone: 5039316306	Fax:
Email: solidrockelectric@LIVE.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 "L-2" or "L-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	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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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-20-00011

Approval Code: 05305D 1/6/2020 2:47 pm

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

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2405 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Smiles NW	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110BB10100	
DESCRIPTION OF WORK	
Add lighting and outlets in basement including wet bar circuits, bathroom outlet, and sub panel	
APPLICANT	
Name: Peter Kozarez	
Phone: 9712225758	Fax: 3606949728
Email:	
CONTRACTOR	
Elec lic. no.: C230	CCB lic. no.: 172549
Business Name: SUNLIGHT ELECTRIC INC	
Contact:	
Address: 2804 NE 65TH AVE #D	
City/State/ZIP: VANCOUVER, WA 98661	
Phone: 3607723877	Fax: 3606949728
Email: sunlightinc2@comcast.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> 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
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	7	\$4.26	\$29.82
Electrical Permit Fees			
Subtotal			\$146.65
State surcharge (12% of permit total)			\$17.48
TOTAL PERMIT FEE			\$163.13

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.

This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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

Clear Form

OFFICE USE ONLY	
Date Received: 1-7-20	Permit No.: B2020-0052
Date Issued: 1-7-20	By: HLE
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 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: 11820 SW 7th St
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name: Kitchen Remodel
Cross street/directions to job site: Lombard	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
move outlets on bumped out East wall move/add lights, add meter outlet	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Dylan Miller Moylan	
Address: 11820 SW 7th St	
City/State/ZIP: Beaverton OR 97005	
Phone: 503 880 9339	Fax:
E-mail: dylan.millermoylan@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: D. Miller Moylan	Date: 1/7/20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit	2	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	Calculate 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 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-20-00010

Approval Code: 00795G 1/6/2020 6:40 am

E-mailed To: Sergej@eliteelectricpdx.com

B2020-0045

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: 14325 SW KIMBERLY DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Beaverton remodel(sergej)	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S121CC09100
DESCRIPTION OF WORK	
Circuit re-wiring	
APPLICANT	
Name: Serge Panfilov	
Phone: 5039568013	Fax:
Email:	
CONTRACTOR	
Elec lic. no.:	CCB lic. no.:
C639	191274
Business Name: ELITE ELECTRIC GROUP LLC	
Contact:	
Address: 4226 NE 161ST AVE STE B	
City/State/ZIP: PORTLAND, OR 97230	
Phone: 5034328845	Fax: 8889017914
Email: Office@eliteelectricpdx.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	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.

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This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton
 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: 12/20/2020	Permit No: 50020-0024
Date Issued: 1/31/2020	
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.: 44OP- 91000 : SW Gemini Drive	
City/State/ZIP: Beaverton/OR/97008	
Suite/bldg./apt. no.: Nimbus BLDNG 8	Project name: Paychex
Cross street/directions to Job site: SW Nimbus Ave	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of low voltage access control system and IP cameras.	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Rick Tetro	
Address: 300 Canal View Road	
City/State/ZIP: Rochester/NY/14623	
Phone: (585) 387-6568	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: Siemens	
Contact name: Jeremy Horne	
Address: 15201 NW Greenbrier Parkway Suite A-4	
City/State/ZIP: Beaverton/OR/97006	
Phone: (971) 770-5706	Fax:
E-mail: jeremy.horne@siemens.com	
CONTRACTOR	
Business name: Siemens	
Address: 5201 NW Greenbrier Parkway Suite A-4	
City/State/ZIP: Beaverton/OR/97006	
Phone: (971) 329-6059	Fax:
E-mail: gary.youngberg@siemens.com	CCB lic. no.: 133041
Electrical lic. no.: 648LEA	City or metro lic.:
Supervising electrician signature, required: <i>Garrick Youngberg</i>	
Print name: Garrick Youngberg	Date: 01/03/20
Authorized signature: <i>Jeremy Horne</i>	
Print name: Jeremy Horne	Date: 01/03/20

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:	2	91.72	183.44	2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			183.44	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				22.01
TOTAL PERMIT FEE				\$205.45

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

* Number of inspections allowed per permit.



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: 12/15/19 Permit No.: 8209-5190
 Date Issued: 12/15/19 By: new
 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.: <u>4317M</u>	Job address: <u>14661 SW TEAL BLVD</u>
City/State/ZIP: <u>BEAVERTON OR 97007</u>	Project name: <u>WHITE OAK TAPHOUSE</u>
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.: <u>1S132AD00300</u>	
DESCRIPTION OF WORK	
<u>MOUNT ILLUMINATED WALL SIGN</u>	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: <u>6 WHITE OAK TAPHOUSE</u>	
Address: <u>14661 SW TEAL BLVD</u>	
City/State/ZIP: <u>PORTLAND OR 97007</u>	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>N/A</u>	Date:
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>SECURITY SIGNS, INC</u>	
Contact name: <u>CYNDI STOCKS</u>	
Address: <u>2424 SE HOLGATE BLVD</u>	
City/State/ZIP: <u>PORTLAND, OR 97202</u>	
Phone: <u>(503) 546-7102</u>	Fax: <u>(503) 230-1861</u>
E-mail: <u>permits@securitysigns.com</u>	
CONTRACTOR	
Business name: <u>SECURITY SIGNS, INC</u>	
Address: <u>2424 SE HOLGATE BLVD</u>	
City/State/ZIP: <u>PORTLAND, OR 97202</u>	
Phone: <u>(503) 546-7102</u>	Fax: <u>(503) 230-1861</u>
E-mail: <u>permits@securitysigns.com</u>	CCB lic. no.: <u>122809</u>
Electrical lic. no.: <u>26-560CLS</u>	City or metro lic.: <u>2561</u>
Supervising electrician signature, required: <u>MOP</u>	
Print name: <u>MARC LINDQUIST, 383 SIG</u>	Date: <u>12/12/19</u>
Authorized signature: <u>Cyndi Stocks</u>	
Print name: <u>CYNDI STOCKS</u>	Date: <u>12/12/19</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"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting	/	91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL				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.: 52019-5191
Date issued: 12/12/19	By: [Signature]
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.: 4316M	Job address: 3831 SW 117th AVE
City/State/ZIP: BEAVERTON OR 97005	Project name: MAMANCY TEA COMPANY
Suite/bldg./apt. no.: E	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.: 15110CD00900	
DESCRIPTION OF WORK	
MOUNT ILLUMINATED WALL SIGNS	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: MAMANCY TEA COMPANY	
Address: 3831 SW 117th AVE # E	
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: N/A	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: [Signature]	
Print name: MARC LINDQUIST 383 SIG	Date: 12/12/19
Authorized signature: [Signature]	
Print name: CYNDI STOCKS	Date: 12/12/19

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"/> Health-care facilities	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
Residential single- or multi-family dwelling unit			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
Services or feeders installation, alteration, and/or relocation			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
Temporary services or feeders installation, alteration, and/or relocation			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
Branch circuits - new, alteration, or extension, per panel			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		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

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