Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/12/2020	Permit No B2020-0546
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 11350 SW Canyon Rd.	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Barbers TI
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
Add 1 new sprinkler head drop in new restroom off of existing wet system.

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

☑ APPLICANT	☐ CONTACT PERSON
Business name: AFP Systems	
Contact name: Breanna Ripple	
Address: 19435 SW 129th Ave.	
City/State/ZIP: Tualatin,OR 97062	
Phone: (503) 692-9284	Fax: (503) 692-1186
E-mail: breanna@afpsys.com	

CONTRACTOR	
Business name: AFP Systems	
Address: 19435 SW 129th Ave.	
City/State/ZIP: Tualatin,OR 97062	
Phone: (503) 692-9284	Fax: (503) 692-1186
CCB lic.: 67534	

Authorized signature:

Print name:	Date:
Steve Frost	02/10/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		$500.00
Existing building area:	square feet	TI 1,009
New building area:	square feet	
Number of stories:		2
Type of construction:		VB
Occupancy groups:		B
Existing:		
New:		

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$92.00
Amount received	
Date received:	

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

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

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

6/3

Building Permit Application

SCMHAnts Bldg 1

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

Beaverton OREGON

OFFICE USE ONLY	
Date Received: 06/03/2019	Permit No.: B2019-2327
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 12635 172nd Avenue
City/State/ZIP: Beaverton, OR 97007
Suite/bldg./apt. no.: | Project name: South Cooper Mountain H
Cross street/directions to job site: NE Corner of 175th Ave & SW Scholls Ferry Rd
Subdivision: | Lot no.:
Tax map/parcel no.: 2S106AC00200

DESCRIPTION OF WORK

BUILDING 1 - NEW APARTMENT BUILDING
87 UNITS

☑ PROPERTY OWNER	☐ TENANT
Name: AG Spanos Companies	
Address: 10220 SW Greenburg Rd. Tower 2, Suite 530	
City/State/ZIP: Portland/ Oregon/ 97223	
Phone: (503) 272-8833	Fax:
E-mail: jmauch@agspanos.com	

☐ APPLICANT	☑ CONTACT PERSON
Business name: KEPHART	
Contact name: Jon Webb Chais AmT	
Address: 2555 Walnut Street	
City/State/ZIP: Denver/ Colorado/ 80205	
Phone: (303) 832-4474	Fax: (303) 832-4476
E-mail: jonw@kephart.com	

CONTRACTOR

Business name: AG Spanos Companies
Address: 10220 SW Greenburg Rd. Tower 2, Suite 530
City/State/ZIP: Portland/ Oregon/ 97223
Phone: (503) 272-8833 | Fax:
CCB lic.: 209809

Authorized signature:

Print name:	Date:
Jared Mauch	05/30/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		13,875,391
Existing building area:	square feet	NA
New building area:	square feet	
Number of stories:		4
Type of construction:		V-A
Occupancy groups:		R-2, A-3, U
Existing:		
New: 4 Story Apartments w/ attached Club		

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Approved Garden Home Central Lot 3

RECEIVED

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 1/15/2020	Permit No.: B2020-0162
Date Issued: 2/19/20	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 7395 SW 77 th Ave

City/State/ZIP: Beaverton OR

Suite/bldg./apt. no.: Lot#3 | Project name:

Cross street/directions to job site: Garden Home Road

Subdivision: Garden Home Central | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

construction of a single family dwelling, 2606 square foot home, 2 car garage

☑ PROPERTY OWNER	☐ TENANT
Name: Advanced Custom Homes LLC	
Address: 6430 SW Orchid St	
City/State/ZIP: Portland , OR 97219	
Phone: 503-9016426	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Advanced Custom Homes LLC	
Contact name: Marsha Rakhlin	
Address: 6430 SW Orchid St	
City/State/ZIP: Portland OR 97219	
Phone: 503 9016426	Fax:
E-mail: mrakhlin@yahoo.com	

CONTRACTOR

Business name: Advanced Custom Homes LLC

Address: same as above

City/State/ZIP:

Phone: (503) 901- 6426 | Fax:

CCB lic.: CCB #167026

Authorized signature: MRakhlin

Print name: Marsha Rakhlin Date: 1/10/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$296,596.02 ~~$400,000~~
Number. of bedrooms:	4 ~~3~~
Number of bathrooms:	3.2
Total number of floors:	2
New dwelling area:	2212 square feet
Garage/carport area:	450 square feet
Covered porch area:	180 square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Approved

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/24/2020	Permit No.: B2020-0288
Date Issued: 2/18/20	By: Clery
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 7405 SW 77th Ave	
City/State/ZIP: Beaverton OR	
Suite/bldg./apt. no.: Lot #4	Project name:
Cross street/directions to job site: Garden Home Road	
Subdivision: Garden Home Central	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

construction of a single family dwelling, 2606 square foot home, 2 car garage

☑ PROPERTY OWNER	☐ TENANT
Name: Advanced Custom Homes LLC	
Address: 6430 SW Orchid St	
City/State/ZIP: Portland , OR 97219	
Phone: 503-9016426	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Advanced Custom Homes LLC	
Contact name: Marsha Rakhlin	
Address: 6430 SW Orchid St	
City/State/ZIP: Portland OR 97219	
Phone: 503 9016426	Fax:
E-mail: mrakhlin@yahoo.com	

CONTRACTOR	
Business name: Advanced Custom Homes LLC	
Address: same as above	
City/State/ZIP:	
Phone: (503) 901- 6426	Fax:
CCB lic.: CCB #167026	

Authorized signature:

Print name:	Date:

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$296,590.02
Number. of bedrooms:	3
Number of bathrooms:	2
Total number of floors:	2
New dwelling area:	~~2212~~ square feet 2110
Garage/carport area:	~~450~~ square feet 577
Covered porch area:	180 square feet
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	1270.22
Amount received	
Date received:	

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

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

Approved

RECEIVED

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 1/31/2020	Permit No.: B2020-0413
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK

- [ ] New construction
- [ ] Demolition
- [x] Addition/alteration/replacement
- [ ] Other:

CATEGORY OF CONSTRUCTION

- [ ] 1- and 2-family dwelling
- [x] Commercial/industrial
- [ ] Accessory building
- [ ] Multi-family
- [ ] Master builder
- [ ] Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 12570 SW 1st. St.
City/State/ZIP: Butn., OR. 97005
Suite/bldg./apt. no.:
Project name: Koya sushi
Cross street/directions to job site:
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

6Ft x 5Ft x 7Ft, 3 5/8" Tall walk-in cooler box.

[x] PROPERTY OWNER

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

[x] TENANT

[x] APPLICANT

Business name:
Contact name:
Address:
City/State/ZIP:
Phone:
Fax:
E-mail: Bulldogmech@gmail.com

[x] CONTACT PERSON

CONTRACTOR

Business name: Bulldog mech., INC.
Address: 3307 NE 39th St.
City/State/ZIP: Vanc., WA. 98661
Phone: 360.901.2610
Fax:
CCB lic.: 152993 metro #: 8027
Authorized signature:
Print name: Rolland E. Walters
Date: 01-28-20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation: $5,000 —
Number. of bedrooms:
Number of bathrooms:
Total number of floors:
New dwelling area: square feet
Garage/carport area: square feet
Covered porch area: square feet
Deck area: square feet
Other structure area: square feet

REQUIRED DATA: COMMERCIAL USE CHECKLIST

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

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

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form 870-1001 REV 2/14

ARCHIVES FAN FA

RECEIVED

Building Permit Application

Beaverton OREGON
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: 1/22/2020	Permit No.: B2020-0242
Date Issued:	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 10975 SW 11th Street	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Archives Fan
Cross street/directions to job site:	217 Distribution CTR Bldg A Loading Ramp
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install fire alarm device for HVLS fan shut down on water flow in suite per plans.

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

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

CONTRACTOR	
Business name: Capitol Electric Company, Inc.	
Address: 11401 NE Marx Street	
City/State/ZIP: Portland, OR 97220	
Phone: (503) 255-9488	Fax: (503) 255-1966
CCB lic.: 48748	

Authorized signature: Shane Tercek

Print name:	Date:
Shane Tercek NICET Level III, Fire Alarms	01/15/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$600
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	B/S-1
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

rev 07/13

DENNEY #5 FIRE ALARM MONITORING

RECEIVED

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 12/30/2019	Permit No.: B2019-5313
Date Issued: 2-4-2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 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: HWY 217 & Denney Rd	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Installation of sprinkler monitoring system

☑ PROPERTY OWNER	☐ TENANT
Name: Denney Rd Industrial Park LLC	
Address: 1121 SW Salmon St Ste #500	
City/State/ZIP: Portland, OR 97008	
Phone: (503) 242-2900	Fax:
E-mail:	

☐ APPLICANT	☐ 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
CCB lic.: 46994	

Authorized signature:

Print name:	Date:
Sam Pfeiffer	12/27/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$5,000
Existing building area:	48000 square feet
New building area:	square feet
Number of stories:	1
Type of construction:	Industrial
Occupancy groups:	Industrial
Existing:	Industrial
New:	Industrial

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$164.74
Amount received	
Date received:	

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

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

Approved

Miller NSFR Lot 2

RECEIVED

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 1/13/2020	Permit No.: B2020-0119
Date Issued: 2-4-2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 5755 SW Lombard

City/State/ZIP:

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

Cross street/directions to job site: LOMBARD TO 12TH

Subdivision: STEELE PARTITION | Lot no.: 2

Tax map/parcel no.: PARTITION PLAT NO. 2018-036

DESCRIPTION OF WORK

NSFR

☑ PROPERTY OWNER	☐ TENANT
Name: BRADLEY MILLER	
Address: 18025 SW BROOKMAN ROAD	
City/State/ZIP: SHERWOOD OR 97140	
Phone: (503) 544-6783	Fax:
E-mail: BRADLEGACY@GMAIL.COM	

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

CONTRACTOR

Business name: LEGACY HOMES INC

Address: 18025 SW BROOKMAN ROAD

City/State/ZIP: SHERWOOD OR 97140

Phone: (503) 544-6783 | Fax:

CCB lic.: 163208

Authorized signature:

Print name: Brad Miller | Date: 1/10/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	
Number of bedrooms:	3
Number of bathrooms:	2
Total number of floors:	1
New dwelling area:	2110 square feet
Garage/carport area:	672 square feet
Covered porch area:	112 square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/06/2020	Permit No.: B2020-0467
Date Issued: 2/12/2020	
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 16055 SW Regatta Ln	
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Waterhouse Retail Cntr
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install Radio for Monitoring

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

☑ APPLICANT	☑ CONTACT PERSON
Business name: Performance Systems Integrated	
Contact name: Katie Harbaugh	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 641-2222	Fax: (503) 641-1464
E-mail: katieh@psintegrated.com	

CONTRACTOR	
Business name: Performance Systems Integrated	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 641-2222	Fax: (503) 641-1464
CCB lic.: 227526	

Authorized signature: [signature]

Print name:	Date:
Katie Harbaugh	02/06/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$1068.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$127.14
Amount received	
Date received:	

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/06/2020	Permit No.: B2020-0466
Date Issued: 2/12/2020	
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 16165 SW Regatta Ln	
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.:	Project name: Waterhouse Commons
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Installation of Radio for Monitoring

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

☑ APPLICANT	☑ CONTACT PERSON
Business name: Performance Systems Integrated	
Contact name: Katie Harbaugh	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 641-2222	Fax: (503) 641-1464
E-mail: katieh@psintegrated.com	

CONTRACTOR	
Business name: Performance Systems Integrated	
Address: 7324 SW Durham Rd	
City/State/ZIP: Portland, OR 97224	
Phone: (503) 641-2222	Fax: (503) 641-1464
CCB lic.: 227526	

Authorized signature: [signature]

Print name:	Date:
Katie Harbaugh	02/06/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$1068.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$127.14
Amount received	
Date received:	

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

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

WALK IN COOLER
CENTRAL STATION TAPHOUSE

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 12/4/2019	Permit No. B2019-4988
Date Issued: 2/12/2020	Fee: CM
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 3925 SW ROSE BIGGI AVE
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.: | Project name: Central Station Taproom
Cross street/directions to job site:
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Installing pre-fab, walk-in cooler

☐ PROPERTY OWNER	☑ TENANT
Name: Central Station Taproom	
Address: 12875 SW Crescent St.	
City/State/ZIP: Beaverton, OR 97005	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Royal Mechanical LLC	
Contact name: Jeff Brown	
Address: PO Box 86	
City/State/ZIP: Sherwood, OR 97140	
Phone: (503) 625-2562	Fax:
E-mail: royalmechanicalpdx@gmail.com	

CONTRACTOR

Business name: Royal Mechanical LLC
Address: PO Box 86
City/State/ZIP: Sherwood, OR 97140
Phone: (503) 625-2562 | Fax:
CCB lic.: 197385

Authorized signature:

Print name:	Date:
Jeff Brown	12/02/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	1500.00
Existing building area:	78 square feet
New building area:	square feet
Number of stories:	1
Type of construction:	Pre-Fab, insulated panels
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$110.29
Amount received	
Date received:	

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

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

Building Permit Application

ELECTRONIC SUBMITTAL
SEE I:/BLDG DIV WG 8

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 05/22/2019	Permit No.: B2019-2176
Date Issued: 2/13/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☑ Other: Fire Sprinkler System
CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12625 SW Crescent Street	
City/State/ZIP: Beaverton / OR / 97005	
Suite/bldg./apt. no.:	Project name: Reser Ctr. For The Arts
Cross street/directions to job site: SW Hall Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S109DD03400	
DESCRIPTION OF WORK	
Fire Suppression System (underground fire service line for NFPA 13 compliant system) to be installed in the Patricia Reser Center for the Arts (permit # B2019-1955)	
☐ **PROPERTY OWNER**	☐ **TENANT**
Name: City of Beaverton	
Address: 12725 SW Millikan Way 4th Floor	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 350-4082	Fax:
E-mail: ljones@beavertonoregon.gov	
☐ **APPLICANT**	☑ **CONTACT PERSON**
Business name: Opsis Architecture	
Contact name: David Suttle	
Address: 920 NW 17th Ave.	
City/State/ZIP: Portland / OR / 97209	
Phone: (503) 525-9511	Fax:
E-mail: davids@opsisarch.com	
CONTRACTOR	
Business name: Skanska USA Bldg	
Address: 389 Interpace Pkwy 5th FLR	
City/State/ZIP:	
Phone: 973-753-3579	Fax:
CCB lic.: 153980	

Authorized signature:

Print name:	Date:
David Suttle AIA	05/17/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$275,609
Existing building area:	square feet
New building area:	square feet 44,744
Number of stories:	2
Type of construction:	IIB
Occupancy groups:	A-1,A-2, A-3, B, S1
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$1,073.24
Amount received	
Date received:	

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

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

VALLEY CATHOLIC FIRE SUPPRESSION

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/18/2020	Permit No. B2020-0219
Date Issued: 2/10/2020	By
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK	
☑ New construction	☐ Demolition
☐ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 4275 SW 148th Ave	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Valley Catholic
Cross street/directions to job site: SSMO Mothers House	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Hook up Ansul R-102 UL300 Kitchen Fire suppression system into Type 1 exhaust hood.	
☐ PROPERTY OWNER	☐ TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
☑ APPLICANT	☑ CONTACT PERSON
Business name: SANDERSON FIRE PROTECTION	
Contact name: GEOFF SPAHR	
Address: 1101 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: (503) 889-3110	Fax:
E-mail: GEOFF@SANDERSONFIRE.COM	
CONTRACTOR	
Business name: SEE ABOVE	
Address:	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 208652	

Authorized signature: [signature]

Print name:	Date:
GEOFF SPAHR	01/17/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$900.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$115.42
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

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TWIN OAKS REPOSITION TI

Building Permit Application

Beaverton OREGON

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 10/31/2019	Permit No.: B2019-4515
Date Issued: 2/14/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 16365 NW Twin Oaks Dr	
City/State/ZIP: Beaverton Oregon 97006	
Suite/bldg./apt. no.:	Project name: Twin Oaks Reposition
Cross street/directions to job site: Twin Oaks Dr and Cornell Rd	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Tenant Improvemnts. Adding Mezzanine, Cafe Kitchen and installing a play structure. Play structure information included with building detains under Base Clamp Details.

☑ PROPERTY OWNER	☐ TENANT
Name: Shaowen Yu	
Address: PO Box 2373	
City/State/ZIP: Portland Oreogn 97208	
Phone: (503) 309-3957	Fax: (503) 618-1001
E-mail: yushaowen@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Twin Oaks & Cornell LLC	
Contact name: Shaowen Yu	
Address: Po Box 2373	
City/State/ZIP: Portland Oregon 97208	
Phone: (503) 309-3957	Fax: (503) 618-1001
E-mail: yushaowen@gmail.com	

CONTRACTOR	
Business name: Affordable Restaurant Hoods	
Address: 2121 SE Ochoco ST	
City/State/ZIP: Portland Oregon 97222	
Phone: (503) 805-1463	Fax: (503) 232-1461
CCB lic.: 199914	

Authorized signature:

Print name:	Date:
Shaowen Yu	10/30/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		150,000.00
Existing building area:	square feet	20,000
New building area:	square feet	20,000
Number of stories:		2
Type of construction:		Tenant Improvment
Occupancy groups:		4
Existing:		0
New:		4

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Evansandt@LRSA... Approved

Creekside IV Remodel

4361

Beaverton
OREGON

Building Permit Application

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

OFFICE USE ONLY	
Date Received 12/17/2019	Permit No. B2019-5185
Date Issued: 2/18/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 11000 SW Stratus St	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Creekside IV Remodel
Cross street/directions to job site: SW Nimbus Ave & SW Stratus St	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Add and relocate sprinklers to conform to new layout as necessary

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

☑ APPLICANT	☐ CONTACT PERSON
Business name: Wyatt Fire Protection	
Contact name: Tam Holland	
Address: 9095 SW Burnham St	
City/State/ZIP: Tigard, OR 97223	
Phone: (503) 684-2928	Fax:
E-mail: t.holland@wyattfire.com	

CONTRACTOR	
Business name: Same	
Address:	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 64077	

Authorized signature:

Print name:	Date:
Tam Holland	12/17/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	4,090
Existing building area:	square feet
New building area:	0 square feet
Number of stories:	3
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$258.64
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/18/2020	Permit No.: B2020-0584
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 8060 SW Brentwood Street	
City/State/ZIP: Portland, OR 97225	
Suite/bldg./apt. no.:	Project name: Stained Glass Protection
Cross street/directions to job site: SW Laurelwood Street	
Subdivision: Broadmoor	Lot no.: 15 113BA 07600
Tax map/parcel no.:	

DESCRIPTION OF WORK

Replace compromised exterior wood-framed glass coverings with new aluminum-framed single pane laminated glass coverings to protect our permanent stained glass windows. Existing coverings have five crossbars. New coverings have one. Stained glass windows will not be removed.

☑ PROPERTY OWNER	☐ TENANT
Name: Valley Community Presbyterian Church	
Address: 8060 SW Brentwood Street	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 292-3537	Fax: (503) 292-4272
E-mail: mail@valleycommunity.org	

☐ APPLICANT	☐ CONTACT PERSON
Business name: Valley Community Presbyterian Church	
Contact name: David Marquis, Facilities Elder	
Address: 8060 SW Brentwood Street	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 260-9055	Fax: (503) 292-4272
E-mail: facilities@valleycommunity.org	

CONTRACTOR	
Business name: Bovard Studios, Inc.	
Address: 2281 Business Highway 34	
City/State/ZIP: Fairfield, IA 52556-8560	
Phone: (800) 452-7796	Fax: (640) 472-0974
CCB lic.: 229460	

Authorized signature:

Print name:	Date:
Reid S. (Sam) Connell, President	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$42,350
Existing building area:	12,004 square feet
New building area:	12,004 square feet
Number of stories:	3
Type of construction:	Replace window coverings
Occupancy groups:	
Existing:	A-3 (places of religious worship)
New:	no change

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	1126.48
Amount received	
Date received:	

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

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

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2020-0696
Date Issued: 2/25/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 12600 SW Crescent st Unit 213	
City/State/ZIP: Beaverton, OR 97076	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Bath Room / Remodel / Fire wall

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

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

CONTRACTOR	
Business name: Bradford Const	
Address: 840 NW Towle Ave	
City/State/ZIP: Gresham, OR 97030	
Phone: 541-913-6640	Fax:
CCB lic.: 213149	

Authorized signature:

Print name: Dennis Bradford	Date: 2/25/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	258.64
Amount received	
Date received:	

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

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

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 12/9/2019	Permit No.: B2019-5072
Date Issued: 2/28/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 4500 SW Watson Ave
City/State/ZIP: Beaverton , OR 97201
Suite/bldg./apt. no.:
Project name: Bank of Beaverton Build
Cross street/directions to job site: SW Watson & SW Farmington
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Core & Shell modifications to accommodate a future restaurant / bar tenant

☑ PROPERTY OWNER	☐ TENANT
Name: Travis Henry	
Address: 2584 SW Montgomery Dr.	
City/State/ZIP: Portland, OR 97201	
Phone: (503) 926-4613	Fax:
E-mail: travis@henrypointdevelopment.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Henry Point Development LLC	
Contact name: Travis Henry	
Address: 2584 SW Montgomery Dr.	
City/State/ZIP: Portland, OR 97201	
Phone: (503) 926-4613	Fax:
E-mail: Travis@henrypointdevelopment.com	

CONTRACTOR

Business name: Owen Gabbert LLC
Address: 1235 N Prescott St
City/State/ZIP: Portland OR 97217
Phone: (503) 701-1407
Fax:
CCB lic.: 199369

Authorized signature:

Print name:	Date:
Travis Henry	12/06/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$300,000
Existing building area:	5,000 square feet
New building area:	0 square feet
Number of stories:	1
Type of construction:	Masonry
Occupancy groups:	A3
Existing:	Former Dance Studio / Vacant
New:	Restaurant Bar

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

BEST BUY

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/10/2020	Permit No.: B2020-0108
Date Issued: 2/28/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 3055 SW Cedar Hills Blvd.	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Best Buy #451
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S1090000200	

DESCRIPTION OF WORK

Interior remodel of sales floor for existing Best Buy. Carpet patch and overhead electrical drop relocation at the relocated fixtures. Approximate area of remodel area: 2,150 SF.

☐ PROPERTY OWNER	☑ TENANT
Name: Rhonda Dehler - Best Buy	
Address: 7601 Penn Avenue South, B-6	
City/State/ZIP: Richfield, MN 55423	
Phone: (612) 291-8930	Fax:
E-mail: rhonda.delher@bestbuy.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: CASCO + R|5	
Contact name: Angie Seguin	
Address: 12 Sunnen Drive, Suite 100	
City/State/ZIP: St. Louis, MO 63143	
Phone: (314) 238-2028	Fax:
E-mail: angie.seguin@cascocorp.com	

CONTRACTOR	
Business name: ~~TBD~~	
Address:	
City/State/ZIP:	
Phone: 770-442-2534	Fax:
CCB lic.: 206457	

Authorized signature: Angie Seguin

Print name:	Date:
Angie Seguin	01/08/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$10,000
Existing building area:	48923 square feet
New building area:	48923 square feet
Number of stories:	1
Type of construction:	II-B
Occupancy groups:	M
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$285.65
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

CSW

Building Permit Application

Beaverton OREGON

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

RECEIVED
2/11/2020
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received:	Permit No.: B2020-0520
Date Issued:	By:
	Payment Type:

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 15655 NW Blueridge Rd

City/State/ZIP: Beaverton OR 97006

Suite/bldg./apt. no.: | Project name: AC Hotels /Element Hotels

Cross street/directions to job site:

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Install (2) illuminated Monument Sign

☐ PROPERTY OWNER	☑ TENANT
Name: AC Hotels /Element Hotels	
Address: 15655 NW Blueridge Rd	
City/State/ZIP: Beaverton OR 97006	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Ramsay Signs	
Contact name: Chris Brown	
Address: 9160 SE 74th Ave	
City/State/ZIP: Portland OR 97206	
Phone: (503) 777-4555	Fax: (503) 777-0220
E-mail: CBrown@ramsaysigns.com	

CONTRACTOR

Business name: Ramsay Signs

Address: 9160 SE 74th Ave

City/State/ZIP: Portland OR 97206

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

CCB lic.: 63482

Authorized signature:

Print name:	Date:
Chris Brown	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL USE CHECKLIST

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

Valuation	10,000
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Approved Rollingwood Garage Conversion ADI

RECEIVED

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 1/30/2020	Permit No.: B2020-0385
Date Issued: 2/27/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 6775 SW ROLLINGWOOD DR.	
City/State/ZIP: BEAVERTON OR. 97228	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

. CONVERT EXISTING GARAGE TO THREE BEDROOMS, ADD ONE BEDROOM AND ONE FULL BATHROOM TO EXISTING AREA.
. REMODEL EXISTING BATHROOM
. RELATED PLUMBING, ELECTRICAL AND MECHANICAL WORKS

☑ PROPERTY OWNER	☐ TENANT
Name: AAV ONE LLC	
Address: 8733 SE DIVISION ST	
City/State/ZIP: PORTLAND OR. 97266	
Phone: (503) 257-6674	Fax:
E-mail: samson32168@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: SWEET HOME DESIGN LLC.	
Contact name: CUONG NGUYEN	
Address: 16125 SE HAWTHORNE CT	
City/State/ZIP: PORTLAND OR. 97233	
Phone: (503) 442-7535	Fax:
E-mail: pdxsweethomedesign@gmail.com	

CONTRACTOR	
Business name: CHALET HOME LLC	
Address: 8733 SE DIVISION ST	
City/State/ZIP: PORTLAND OR. 97266	
Phone: (503) 257-6674	Fax:
CCB lic.: 196324	

Authorized signature:

Print name:	Date:
CUONG NGUYEN	01/29/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$60,000
Number. of bedrooms:	7
Number of bathrooms:	3
Total number of floors:	1
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	479 square feet

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

NOTICE

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

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

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

Form B70-1001 REV 11/19

Approved

RECEIVED

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 2/14/2020	Permit No.: B2020-0567
Date Issued: 2/26/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 11850 SW Clifford St.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Clifford Kitchen
Cross street/directions to job site: Anne	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Removing dividing wall between living and dining/kitchen. Replacing with beam. New cripple wall will be built on top of beam to support rafters. Add 2 skylights to vaulted cieling.

☑ PROPERTY OWNER	☐ TENANT
Name: Tyler Basta	
Address: Same as above	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

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

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

Authorized signature:

Print name:	Date:
Tyler Basta	02/12/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	3000
Number of bedrooms:	4
Number of bathrooms:	2
Total number of floors:	3
New dwelling area:	0 square feet
Garage/carport area:	400 square feet
Covered porch area:	200 square feet
Deck area:	0 square feet
Other structure area:	0 square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	87.89
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

Sound Start Daycare FA

Building Permit Application

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

OFFICE USE ONLY

Date Received: 12/17/2019	Permit No.: B2019-5179
Date Issued: 12/26/2019	By:
	Payment Type:

CITY OF BEAVERTON
BUILDING DIVISION

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 9955 SW B-H Highway
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.: 115 | Project name: ~~Diamond Park~~
Cross street/directions to job site: SOUND START

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

DESCRIPTION OF WORK

Add fire alarm devices

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

☒ APPLICANT	☒ CONTACT PERSON
Business name: HSI Security Systems, Inc.	
Contact name: Barney O'Donnell	
Address: 3424 NE 35th Ave.	
City/State/ZIP: Portland, OR 97212	
Phone: 503-287-4604	Fax:
E-mail: barney@hsi-security.com	

CONTRACTOR

Business name: Same
Address:
City/State/ZIP:
Phone: | Fax:
CCB lic.: 42140

Authorized signature:

Print name: Wm. B. O'Donnell | Date: 12-15-19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $7624.50
Existing building area: square feet
New building area: square feet
Number of stories:
Type of construction:
Occupancy groups:
Existing:
New:

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$96.72
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 2/25/2020	Permit No: 2020-0684
Date Issued: 2/26/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 11900 SW Canyon Rd

City/State/ZIP: Beaverton, OR 97005

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

Cross street/directions to job site: Canyon Rd/SW Broadway

Subdivision: Steel's Addition to beaverto | Lot no.: 52

Tax map/parcel no.: 1S115BA00901

DESCRIPTION OF WORK

Interior finishes, Installation of equipment & fixtures

☐ PROPERTY OWNER	☑ TENANT
Name: Basics LLC	
Address: 18555 SW Teton Ave	
City/State/ZIP: Tualitan, OR 97062	
Phone: (503) 307-4369	Fax:
E-mail: gabriel.vizireanu@keystone-pacific.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: AC Schommer & Sons	
Contact name: Chris McGhie	
Address: 6421 NE Colwood Way	
City/State/ZIP: Portland, OR 97218	
Phone: (503) 849-0625	Fax: (503) 287-4499
E-mail: cmcghie@schommer-sons.com	

CONTRACTOR

Business name: AC Schommer & Sons

Address: 6421 NE Colwood Way

City/State/ZIP: Portland, OR 97218

Phone: (503) 849-0625 | Fax: (503) 287-4499

CCB lic.: 4937

Authorized signature:

Print name:	Date:
Chris McGhie	02/24/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	79,851
Existing building area:	1720 square feet
New building area:	1720 square feet
Number of stories:	1
Type of construction:	V
Occupancy groups:	B
Existing:	B
New:	B

NOTICE

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

DEMO PERMIT # B2020-0186

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	804.74
Amount received	
Date received:	2,305.18

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No: B2020-0405
Date Issued: 2/26/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 14523 SW Millikan Way

City/State/ZIP: Beaverton, OR 97005

Suite/bldg./apt. no.: | Project name: Tenant Demising Wall

Cross street/directions to job site: SW Murray Blvd and SW Millikan Way

Subdivision: | Lot no.:

Tax map/parcel no.: 1S109CB00100

DESCRIPTION OF WORK

Building a demising wall on second floor of tenant space. Drawings include demo plan of tenant space. Tenant SF = 113,807.

☐ PROPERTY OWNER	☑ TENANT
Name: Kevin Smith	
Address: 13900 NW Science Park Drive	
City/State/ZIP: Portland, OR 97229-5497	
Phone: (503) 671-5551	Fax:
E-mail: kevin.smith@mksinst.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Mackenzie	
Contact name: Bill Bezio	
Address: 1515 SE Water Ave., Suite 100	
City/State/ZIP: Portland, OR 97214	
Phone: (503) 224-9560	Fax:
E-mail: wbezio@mcknze.com	

CONTRACTOR

Business name: ~~TBD~~ DPR

Address:

City/State/ZIP:

Phone: | Fax:

CCB lic.: 212973

Authorized signature:

Print name: | Date:

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$55,000 ~~75,000~~
Existing building area:	385192 square feet
New building area:	0 square feet
Number of stories:	2
Type of construction:	VB
Occupancy groups:	B
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	1,915.29
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2020-0725
Date Issued: 2/25/2020	By:
	Payment Type: 1623

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 12600 SW Crescent St. #180	
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.: 180	Project name: PrideStaff T.I.
Cross street/directions to job site: Hall & Crescent St.	
Subdivision: The Ranch	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
- Devide conference room into two smaller rooms - Remove One bathroom - Add wall & Door for reception

☐ PROPERTY OWNER	☒ TENANT
Name: Robert Cohen	
Address: 12600 SW Crescent Street	
City/State/ZIP: Beaverton OR 97005	
Phone: 971.371.4028	Fax:
E-mail: rcohen@pridestaff.com	

☒ APPLICANT	☐ CONTACT PERSON
Business name: PrideStaff	
Contact name: Robert Cohen	
Address: 12600 SW Crescent Street	
City/State/ZIP: Beaverton OR 97005	
Phone: 971.371.4028	Fax:
E-mail: rcohen@pridestaff.com	

CONTRACTOR	
Business name: Seabold Construction	
Address: 9965 SW Arctic Drive	
City/State/ZIP: Beaverton OR 97005	
Phone: 503.626.8060	Fax:
CCB lic.: 48023	
Authorized signature: R H Cohen	
Print name: Robert Cohen	Date:

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation $70,000	
Existing building area: 1881	square feet
New building area: 1881	square feet
Number of stories: 1	
Type of construction: Office	
Occupancy groups:	
Existing: PrideStaff	
New: PrideStaff	

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	2,550.58
Amount received	
Date received:	

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

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

BB# 855-132-142

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 09/24/2019	Permit No.: B2019-4010
Date Issued: 2/24/2020	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 9590 SE Gemini Drive	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: Sedia Tenant Improvement
Cross street/directions to job site: SW Nimbus Ave	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S127DB00201	

DESCRIPTION OF WORK

Interior demolition, new walls, doors, relites, casework, plumbing. New mechanical roof top unit with structural support.

☑ PROPERTY OWNER	☐ TENANT
Name: Rob Fabian	
Address: 5335 Meadows Road Suite 275	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 412-4844	Fax:
E-mail: rfabian@shorenstein.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Mackenzie	
Contact name: Christine Mack	
Address: 1515 SE Water Ave Suite 100	
City/State/ZIP: Portland, OR 97214	
Phone: (503) 224-9560	Fax:
E-mail: cmack@mcknze.com	

CONTRACTOR	
Business name: Russell Construction	
Address: 20915 SW 105th Ave	
City/State/ZIP: Tualatin, OR 97062	
Phone: (503) 692-9002	Fax:
CCB lic.: 58918	

Authorized signature: Christine Mack

Print name:	Date:
Christine Mack	09/27/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	878,808	~~687,896.05~~
Existing building area:	square feet	23,573
New building area:	square feet	23573
Number of stories:		1
Type of construction:		III-B
Occupancy groups:		B, S-1
Existing:		B
New:		S-1

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$5,663.91
Amount received	
Date received:	

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

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

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 12/23/2019	Permit No.: B2019-5240
Date Issued: 2/24/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 14200 SW Brigadoon CT

City/State/ZIP: Beaverton, OR 97005

Suite/bldg./apt. no.: | Project name: AT&T PR39 Beaverton

Cross street/directions to job site: SW 141st Ave. Turn left on SW Crescent S. Left on Rose Biggi Ave. Rt onto Millikan. R

Subdivision: | Lot no.:

Tax map/parcel no.: R1262813 / 1S109CC03701

DESCRIPTION OF WORK

The scope of work is to replace (2) existing antennas, replace (6) RRH units, add (2) RRH units, and (1) Surge Suppression unit and associated cables on the existing wireless facility.

☐ PROPERTY OWNER	☑ TENANT
Name: New Cingular Wireless PCS, LLC (AT&T)	
Address: 5628 Airport Way South, Suite 112	
City/State/ZIP: Seattle, WA 98108	
Phone: (206) 523-1941	Fax:
E-mail: ccontreras@rykaconsulting.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: New Cingular Wireless PCS, LLC (AT&T), Ryka Consulting	
Contact name: Christine Contreras	
Address: 5628 Airport Way South, Suite 112	
City/State/ZIP: Seattle, WA 98108	
Phone: (206) 523-1941	Fax:
E-mail: ccontreras@rykaconsulting.com	

CONTRACTOR

Business name: ~~TBD - OUT TO BID~~

Address:

City/State/ZIP:

Phone: | Fax:

CCB lic.: 150432 Tbailey@Legacy-Wireless.com

Authorized signature:

Print name:	Date:
Christine Contreras	12/20/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation		0
Number. of bedrooms:		N/A
Number of bathrooms:		N/A
Total number of floors:		N/A
New dwelling area:	square feet	N/A
Garage/carport area:	square feet	N/A
Covered porch area:	square feet	N/A
Deck area:	square feet	N/A
Other structure area:	square feet	N/A

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		20,000
Existing building area:	square feet	318
New building area:	square feet	N/A
Number of stories:		N/A
Type of construction:		V-B
Occupancy groups:		U
Existing:		U
New:		N/A

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$290.98
Amount received	
Date received:	

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2020-0615
Date Issued: 2/20/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15~~825~~ 530 SW Beaverton Creek Ct	
City/State/ZIP: Beaverton Oregon 97006	
Suite/bldg./apt. no.:	Project name: Apollo
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
Shutdown HVLS fans during fire event

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

☐ APPLICANT	☐ CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: liam@current electrical.com	

CONTRACTOR	
Business name: Current Electrical Construction Company	
Address: PO Box 19652	
City/State/ZIP: Portland OR 97280	
Phone: (503) 245-5997	Fax:
CCB lic.: 0046994	

Authorized signature: 2/17/2020

Print name:	Date:
Liam O'Brien	02/17/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$1,500
Existing building area:	11,717 square feet
New building area:	N/A square feet
Number of stories:	1
Type of construction:	II-B
Occupancy groups:	S1
Existing:	
New:	

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	150.57
Amount received	
Date received:	

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

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

Cedar Grove FS

Building Permit Application

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

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 05/28/2019	Permit No.: B2019-2273
Date Issued: 2/18/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 812 NW Murray Blvd.
City/State/ZIP: Beaverton, OR 97229
Suite/bldg./apt. no.: | Project name: Cedar Grove Apartments
Cross street/directions to job: NW Cornell Road
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Ref # B2019-2211 - Install complete automatic Fire Sprinklers in new Apartment building per NFPA 13 (2013)

☑ PROPERTY OWNER	☐ TENANT
Name: Community Partners for Affordable Housing - Jilan Saurage Felton	
Address: 6380 SW Capitol Highway #151	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 293-4038	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Patriot Fire Protection	
Contact name: Pattie Wenholz	
Address: 4708 NE Minnehaha Street	
City/State/ZIP: Vancouver, WA 98661	
Phone: (360) 635-2560	Fax: (360) 699-4485
E-mail: pattie.wenholz@patriotfire.com	

CONTRACTOR

Business name: Patriot Fire Protection
Address: 4708 NE Minnehaha Street
City/State/ZIP: Vancouver, WA 98661
Phone: (360) 635-2560 | Fax: (360) 699-4485
CCB lic.: 70822

Authorized signature: Pattie Wenholz

Print name:	Date:
Pattie Wenholz	05/28/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		121,017
Existing building area:	square feet	
New building area:	square feet	39,304
Number of stories:		4
Type of construction:		V-A
Occupancy groups:		R-2
Existing:		
New:		R-2 (Light Hazard)

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$613.09
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Approved

RECEIVED

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 1/17/2020	Permit No.: B2020-0195
Date Issued: 2/19/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 9800 SW NIMBUS	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt. no.:	Project name: STORAGE RACKS
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

40 BAYS OF STORAGE RACKS FOR WAREHOUSE AREA-MIXED SIZES 24-42-48X192 WITH 96" BEAMS AND WIRE DECKING

CUSTOMER ALSO HAS PERMIT B2019-1788 FOR REFERENCE ONLY

☐ PROPERTY OWNER	☑ TENANT
Name: PRECISION AIRCRAFT-CURTIS SALAZAR	
Address: 1900 NE 25th Ave Suite 5	
City/State/ZIP: Hillsboro, Oregon 97124	
Phone: (971) 330-8750	Fax:
E-mail: Curtis.Salazar@precisionaircraft.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: SPEEDRACK WEST-DBA STORAGE AND HANDLING	
Contact name: BILL LOFTIS	
Address: 11100 NW GORDON ROAD	
City/State/ZIP: NORTH PLAINS, OR 97133	
Phone: (503) 640-5666	Fax:
E-mail: BILL@SPEEDRACKWEST.COM	

CONTRACTOR	
Business name: SUPERIOR QUALITY INSTALLATIONS-JIM DRAKE	
Address: 15021 ST ANDREWS DRIVE	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: (503) 572-6379	Fax:
CCB lic.: 202189	

Authorized signature:

Print name:	Date:
WILLIAM BRYAN LOFTIS JR	01/16/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	41063.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 1/15/2020	Permit No.: B2020-0157
Date Issued: 2/10/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 7475 SW Oleson Road	
City/State/ZIP: Beaverton, OR 97223	
Suite/bldg./apt. no.:	Project name: Verizon Garden Home
Cross street/directions to job site: see sheet T-1	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S124DB01800	

DESCRIPTION OF WORK

Modifications to an existing wireless communication facility: remove (3) panel antennas, (3) RRUs, (3) TMAs, (6) coax, and (3) sector mounts; add (6) panel antennas, (6) RRHs, and (1) sector fame mount; relocate (3) panel antennas and (1) OVP

☐ PROPERTY OWNER	☑ TENANT
Name: Tualatin Hills Parks and Recreation	
Address: 15707 SW Walker Road	
City/State/ZIP: Bellevue, WA 98006	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Crown Castle on behalf of Verizon	
Contact name: Amanda Nations	
Address: 1505 Westlake Ave N, Suite 800	
City/State/ZIP: Seattle, WA 98109	
Phone: (206) 336-2889	Fax:
E-mail: amanda.nations.contractor@crowncastle.com	

CONTRACTOR	
Business name: Crown Castle USA Inc	
Address: 2055 S STEARMAN DR	
City/State/ZIP: CHANDLR AZ 85286	
Phone:	Fax:
CCB lic.: 203500	

Authorized signature: *Amanda Nations*

Print name:	Date:
Amanda Nations	01/13/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		20,000
Existing building area:	square feet	120
New building area:	square feet	120
Number of stories:		N/A
Type of construction:		II-B
Occupancy groups:		
Existing:		U
New:		U

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 1/30/2020	Permit No.: B2020-0387
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 5320 SW Lombard Ave
City/State/ZIP: Beaverton OR 97005
Suite/bldg./apt. no.: | Project name: 5320 SW Lombard Ave
Cross street/directions to job site: Located between SW 7th St and SW 9th St
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Voluntary repair to existing foundation

☒ PROPERTY OWNER	☐ TENANT
Name: Scott McLincy	
Address: 5320 SW Lombard Ave	
City/State/ZIP: Beaverton OR 97005	
Phone: 503 781 9372	Fax:
E-mail: N/A	

☒ APPLICANT	☒ CONTACT PERSON
Business name: Ram Jack West	
Contact name: Kelsea Rossow	
Address: PO Box 11701	
City/State/ZIP: Eugene OR 97440	
Phone: 541 359 2646	Fax:
E-mail: kelsea@ramjackwest.com	

CONTRACTOR

Business name: Ram Jack West
Address: PO Box 11701
City/State/ZIP: Eugene OR 97440
Phone: 503 781 9372 | Fax: 541 688 4991
CCB lic.: 146906

Authorized signature:

Print name: Kelsea Rossow | Date: 1/30/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation 33550	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received: due	$681.43

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

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

Form B70-1001 REV 11/19

Walmart TI

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 9/18/2019	Permit No.: B2019-3916
Date Issued: 12/14/2019	
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☐ 1- and 2-family dwelling	☑ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9055 SW Murray Blvd.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Walmart #3050 OGP
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Adding 3 refrigerated cases. Re-striping 3 parking stalls.	
☑ **PROPERTY OWNER**	☐ **TENANT**
Name: Walmart	
Address: 2001 SE 10th Street	
City/State/ZIP: Bentonville, AR 72712	
Phone: (479) 273-4000	Fax:
E-mail:	
☑ **APPLICANT**	☐ **CONTACT PERSON**
Business name: pb2 Architecture + Engineering	
Contact name: Michele Sprain	
Address: 2809 Ajax Ave., Suite 100	
City/State/ZIP: Rogers, AR 72758	
Phone: (479) 878-3512	Fax: (479) 636-3545
E-mail: michele.sprain@pb2ae.com	
CONTRACTOR	
Business name: ~~tbd~~	
Address:	
City/State/ZIP:	
Phone: 817-705-9227	Fax:
CCB lic.: 191066	
Authorized signature: Michele Sprain	
Print name: MICHELE SPRAIN	Date: 9/17/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		
Number of bedrooms:		
Number of bathrooms:		
Total number of floors:		
New dwelling area:	square feet	
Garage/carport area:	square feet	
Covered porch area:	square feet	
Deck area:	square feet	
Other structure area:	square feet	
REQUIRED DATA: COMMERCIAL-USE CHECKLIST		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		30,000
Existing building area:	square feet	61,158
New building area:	square feet	61,158
Number of stories:		1
Type of construction:		VB
Occupancy groups:		M - Mercantile
Existing:		M - Mercantile
New:		M-Mercantile
NOTICE		
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:		
BUILDING PERMIT FEES*		
Please refer to fee schedule		
Fees due upon application		
Amount received		
Date received:		

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

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

Form B70-1001 REV 2/14

Permitting@powerhouse now.com

New Subaru Carwash Bldg

Building Permit Application

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

RECEIVED

OFFICE USE ONLY	
Date Received: ~~09/13/2019~~	Permit No.: B2019-3867
Date Issued: 10/10/19	
2/14/2020	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 11635 SW CANYON RD.	
City/State/ZIP: BEAVERTON, OREGON	
Suite/bldg./apt. no.:	Project name: SUBARU CARWASH
Cross street/directions to job site: 116TH	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

NEW CAR WASH / CONCRETE FOOTINGS

☑ PROPERTY OWNER	☐ TENANT
Name: CARR AUTO GROUP	
Address: 15005 SW TV HWY	
City/State/ZIP: BEAVERTON, OR. 97006	
Phone: (888) 673-3830	Fax:
E-mail: mhanken@mhanken.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: G HANKEN INC.	
Contact name: GREG HANKEN	
Address: 1470 NW 116TH AV.	
City/State/ZIP: PORT., OR. 97229	
Phone: (503) 641-5723	Fax:
E-mail: ghanken@ghanken.com	

CONTRACTOR	
Business name: DUTTON CONST.	
Address: 36780 SE DUNN RD.	
City/State/ZIP: SANDY, OREGON 97055	
Phone: (503) 803-0599	Fax:
CCB lic.: 127006	

Authorized signature:

Print name:	Date:
MIKE DUTTON	09/10/20

1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation: $75,000.00	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 10/31/2019	Permit No.: B2019-4515
Date Issued: 2/14/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 16365 NW Twin Oaks Dr	
City/State/ZIP: Beaverton Oregon 97006	
Suite/bldg./apt. no.:	Project name: Twin Oaks Reposition
Cross street/directions to job site: Twin Oaks Dr and Cornell Rd	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Tenant Improvemnts. Adding Mezzanine, Cafe Kitchen and installing a play structure. Play structure information included with building detains under Base Clamp Details.

☑ PROPERTY OWNER	☐ TENANT
Name: Shaowen Yu	
Address: PO Box 2373	
City/State/ZIP: Portland Oreogn 97208	
Phone: (503) 309-3957	Fax: (503) 618-1001
E-mail: yushaowen@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Twin Oaks & Cornell LLC	
Contact name: Shaowen Yu	
Address: Po Box 2373	
City/State/ZIP: Portland Oregon 97208	
Phone: (503) 309-3957	Fax: (503) 618-1001
E-mail: yushaowen@gmail.com	

CONTRACTOR	
Business name: Affordable Restaurant Hoods	
Address: 2121 SE Ochoco ST	
City/State/ZIP: Portland Oregon 97222	
Phone: (503) 805-1463	Fax: (503) 232-1461
CCB lic.: 199914	

Authorized signature:

Print name:	Date:
Shaowen Yu	10/30/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		150,000.00
Existing building area:	square feet	20,000
New building area:	square feet	20,000
Number of stories:		2
Type of construction:		Tenant Improvment
Occupancy groups:		4
Existing:		0
New:		4

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

LW

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/06/2020	Permit No.: B2020-0463
Date Issued: 2/28/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 1600 NW. 173rd Ave.	
City/State/ZIP: Beaverton, Or. 97006	
Suite/bldg./apt. no.:	Project name: Five Oaks Middle School
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1N1310000500	

DESCRIPTION OF WORK

Remodel fire alarm system in phase 6 of the project. Add beam detectors in the commons.

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

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

CONTRACTOR	
Business name: AC&E Electric	
Address: 3535 Del Webb Ave. Suite 100	
City/State/ZIP: Salem, Or. 97301	
Phone: (503) 363-2301	Fax:
CCB lic.: 591	

Authorized signature:

Print name:	Date:

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$5,000.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	2
Type of construction:	TYPE:II-B
Occupancy groups:	GROUP E
Existing:	8,000sqft
New:	

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$258.64
Amount received	
Date received:	

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

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

Approved

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 01/23/2020	Permit No.: B2020-0268
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 9970 SW 160th Ave	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.: N/A	Project name: UpstairsDemo
Cross street/directions to job site: SW 160th Ave and SW Weir Rd	
Subdivision: Bishops Ridge	Lot no.: 8
Tax map/parcel no.: 1S129CC01300	

DESCRIPTION OF WORK

Removal of framing, plumbing and electrical in existing floor space in preparation for remodel. Structural integrity maintained.

☑ PROPERTY OWNER	☐ TENANT
Name: Yong Samander	
Address: 9970 SW 160th Ave	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 459-1658	Fax:
E-mail: yong712@gmail.com	

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

CONTRACTOR	
Business name: N/A	
Address:	
City/State/ZIP:	
Phone:	Fax:
CCB lic.:	

Authorized signature:

Print name:	Date:
Yong Samander	01/22/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	100
Number. of bedrooms:	3
Number of bathrooms:	2
Total number of floors:	1
New dwelling area:	0 square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

Homeowner renovating primary residence

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$113.66
Amount received	
Date received:	

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

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

B2020-0005 Kaiser Sculpture

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 01/02/2020	Permit No.: B2020-0005
Date Issued:	By:
	Payment Type:

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 4855 SW Western Ave
City/State/ZIP: Beaverton OR 97005
Suite/bldg./apt. no.:
Project name: Kaiser Sculpture
Cross street/directions to job site:
Subdivision:
Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Install Kaiser Dandelion Sculpture

☐ PROPERTY OWNER

☑ TENANT

Name: Kaiser
Address: 4855 SW Western Ave
City/State/ZIP: Beaverton OR 97005
Phone:
Fax:
E-mail:

☑ APPLICANT

☑ CONTACT PERSON

Business name: Ramsay Signs
Contact name: Chris Brown
Address: 9160 SE 74th Ave
City/State/ZIP: Portland OR 97206
Phone: (503) 777-4555
Fax: (503) 777-0220
E-mail: CBrown@ramsaysigns.com

CONTRACTOR

Business name: Ramsay Signs
Address: 9160 SE 74th Ave
City/State/ZIP: Portland OR 97206
Phone: (503) 777-4555
Fax: (503) 777-0220
CCB lic.: 63422

Authorized signature:

Print name: Chris Brown
Date:

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL USE CHECKLIST

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

Valuation 8000
Existing building area: square feet
New building area: square feet
Number of stories:
Type of construction:
Occupancy groups:
Existing:
New:

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$150.45
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2020 02604
Date Issued:	By:
	Payment Type:

TYPE OF WORK	
☐ New construction	☐ Demolition
☐ Addition/alteration/replacement	☑ Other: Walk-in cooler Installation

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 11360 SW Canyon Road	
City/State/ZIP: Beaverton, OR 94005	
Suite/bldg./apt. no.:	Project name: Wingstop
Cross street/directions to job site: SW Canyon Road & 217 Frontage Road	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S1-15AB, TRAX LOT 500	

DESCRIPTION OF WORK
127 sq. ft. Walk-in cooler/freezer installation

☐ PROPERTY OWNER	☑ TENANT
Name: Brett Wiles	
Address: 23 Via Andaremos	
City/State/ZIP: San Clemente, CA 92673	
Phone: (949) 521-3438	Fax:
E-mail:	

☐ APPLICANT	☑ CONTACT PERSON
Business name: Michael J Wilkus, Architect	
Contact name: Jim Sultany	
Address: 15 Ninth Avenue N.	
City/State/ZIP: Hopkins, MN 55343	
Phone: (952) 843-5053	Fax:
E-mail: jss@wilkusarch.com	

CONTRACTOR	
Business name: Alegis Construction, Inc.	
Address: 12909 SW 68th Parkway, Suite 170	
City/State/ZIP: Portland, OR 97223	
Phone: (206) 681-7975	Fax:
CCB lic.: 191668	

Authorized signature:

Print name:	Date:
Jim Sultany	01/15/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	15,000
Existing building area:	1785 square feet
New building area:	square feet
Number of stories:	1
Type of construction:	II-B
Occupancy groups:	A-2
Existing:	
New:	

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

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

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

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

Form B70-1001 REV 11/19

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/27/2020	Permit No.: B2020-0294
Date Issued: 2/3/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 3612 SW Innovation Court	
City/State/ZIP: Beaverton/ Oregon/ 97006	
Suite/bldg./apt. no.:	Project name: Dovetail Point Townhome
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Replacing Sheathing due to Dryrot, includes all three units 3612 - 3628 BLDG 1

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

☐ APPLICANT	☐ CONTACT PERSON
Business name: I&E Construction	
Contact name: Nick Piatkoff	
Address: 9550 SE CLackamas Rd	
City/State/ZIP: Clackamas/ Oregon/ 97015	
Phone: (503) 951-1459	Fax:
E-mail: Nick@iecon.us	

CONTRACTOR	
Business name: I&E Construction	
Address: 9550 SE CLackamas Rd	
City/State/ZIP: Clackamas/ Oregon/ 97015	
Phone: (503) 951-1459	Fax:
CCB lic.: 185061	

Authorized signature: Nick Piatkoff

Print name:	Date:
Nick Piatkoff	01/22/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	73,000
Existing building area:	square feet
New building area:	square feet
Number of stories:	3
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	694.95
Amount received	
Date received:	

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/27/2020	Permit No.: B2020-0298
Date Issued: 2/13/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 3627 SW Innovation Court	
City/State/ZIP: Beaverton/ Oregon/ 97006	
Suite/bldg./apt. no.:	Project name: Dovetail Point Townhome
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Replacing Sheathing due to Dryrot. Includes all 4 units 3627 - 3645 BLDG 3

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

☐ APPLICANT	☐ CONTACT PERSON
Business name: I&E Construction	
Contact name: Nick Piatkoff	
Address: 9550 SE CLackamas Rd	
City/State/ZIP: Clackamas/ Oregon/ 97015	
Phone: (503) 951-1459	Fax:
E-mail: Nick@iecon.us	

CONTRACTOR	
Business name: I&E Construction	
Address: 9550 SE CLackamas Rd	
City/State/ZIP: Clackamas/ Oregon/ 97015	
Phone: (503) 951-1459	Fax:
CCB lic.: 185061	

Authorized signature: Nick Piatkoff

Print name:	Date:
Nick Piatkoff	01/22/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	73,000
Existing building area:	square feet
New building area:	square feet
Number of stories:	3
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

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

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/27/2020	Permit No.: B2020-0296
Date Issued: 2/3/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 3601 SW Innovation Court	
City/State/ZIP: Beaverton/ Oregon/ 97006	
Suite/bldg./apt. no.:	Project name: Dovetail Point Townhome
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Replacing Sheathing due to Dryrot. Includes all 4 units 3601 - 3621 BLDG 2

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

☐ APPLICANT	☐ CONTACT PERSON
Business name: I&E Construction	
Contact name: Nick Piatkoff	
Address: 9550 SE CLackamas Rd	
City/State/ZIP: Clackamas/ Oregon/ 97015	
Phone: (503) 951-1459	Fax:
E-mail: Nick@iecon.us	

CONTRACTOR	
Business name: I&E Construction	
Address: 9550 SE CLackamas Rd	
City/State/ZIP: Clackamas/ Oregon/ 97015	
Phone: (503) 951-1459	Fax:
CCB lic.: 185061	

Authorized signature: Nick Piatkoff

Print name:	Date:
Nick Piatkoff	01/22/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	73,000
Existing building area:	square feet
New building area:	square feet
Number of stories:	3
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

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

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

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

Approved

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 1/27/2020	Permit No.: B2020-0314
Date Issued: 2/4/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 13450 SW Cougar Court	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name: Donaldson
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
PV Solar - Roof Mounted

☑ PROPERTY OWNER	☐ TENANT
Name: Dan Donaldson	
Address: 13450 SW Cougar Court	
City/State/ZIP: Beaverton OR 97008	
Phone: (503) 747-9454	Fax:
E-mail: galspanic@hotmail.com	

☐ APPLICANT	☑ CONTACT PERSON
Business name: Blue Sky Solar, LLC	
Contact name: Felisha Abbott	
Address: 1550 W Gordon Ave., Suite 3	
City/State/ZIP: Layton, UT 84041	
Phone: (801) 603-2242	Fax:
E-mail: felisha@myblueskysolar.com	

CONTRACTOR	
Business name: Blue Sky Solar, LLC	
Address: 1550 W Gordon Ave., Suite 3	
City/State/ZIP: Layton, UT 84041	
Phone: (801) 603-2242	Fax:
CCB lic.: 223739	

Authorized signature: Felisha Abbott

Print name:	Date:
Felisha Abbott	07/09/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	24,420 .00
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

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

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

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

Clear Form

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 02/04/2020	Permit No. B2020-0439
Date Issued: 2/4/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 13000 SW 2nd Street	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg /apt. no.:	Project name: Beaverton HS Fire Roof R
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Structural repairs to portion of high school roof saw-cut by fire fighters as a result of an interior building fire.

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

☑ APPLICANT	☐ CONTACT PERSON
Business name: Advanced Structural Forensics	
Contact name: Ken Oliphant	
Address: 1500 NW Bethany Blvd, Ste 200	
City/State/ZIP: Beaverton, OR 97006	
Phone: 971.645.7559	Fax:
E-mail: ko@asf.expert	

CONTRACTOR	
Business name: BELFOR Property Restoration	
Address: 12823 NE Airport Way	
City/State/ZIP: Portland, OR 97230	
Phone: 503.408.8880	Fax:
CCB lic.: 146973	

Authorized signature:

Print name: Ken Oliphant	Date: 2/3/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation:	15,000
Existing building area:	N/A square feet
New building area:	N/A square feet
Number of stories:	2
Type of construction:	V-B
Occupancy groups:	E
Existing:	E
New:	E

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$604.31
Amount received	
Date received:	

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

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

Approved

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 1/28/2020	Permit No: B2020-03415
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 10105 SW. Shearwater Loop	
City/State/ZIP: Beaverton, OR. 97007	
Suite/bldg./apt. no.:	Project name: Shearwater
Cross street/directions to job site: Weir Rd.	
Subdivision:	Lot no.: 542
Tax map/parcel no.: 1S132BA04300	

DESCRIPTION OF WORK

Replacing current deck, same foot print.

☒ PROPERTY OWNER	☐ TENANT
Name: Kevin Anderson	
Address: 10105 SW. Shearwater Loop	
City/State/ZIP: Beaverton, OR. 97007	
Phone: 503-432-0103	Fax:
E-mail: allseasonshome@comcast.net	

☒ APPLICANT	☐ CONTACT PERSON
Business name: All Seasons	
Contact name: Kevin Anderson	
Address: 10105 SW. Shearwater Loop	
City/State/ZIP: Beaverton, OR. 97007	
Phone: 503-432-0103	Fax:
E-mail: Allseasonshome@comcast.net	

CONTRACTOR	
Business name: All Seasons, Kevin Anderson	
Address: 10105 SW. Shearwater Loop	
City/State/ZIP: Beaverton, OR. 97007	
Phone: 503-432-0103	Fax:
CCB lic.: LCB# 9458	

Authorized signature:

Print name: Kevin Anderson	Date: 1/28/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation $13,000	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area: 330	square feet
Other structure area:	square feet

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

NOTICE

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

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

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

RECEIVED

OFFICE USE ONLY	
Date Received: 01/23/2020	Permit No: B2020-0266
Date Issued: 2/4/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 11350 SW CANYON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt. no.:	Project name: WINGSTOP
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

HOOK UP ANSUL R-102 UL300 KITCHEN FIRE SUPPRESSION SYSTEM INTO TYPE 1 EXHAUST HOOD

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

☑ APPLICANT	☑ CONTACT PERSON
Business name: SANDERSON FIRE PROTECTION	
Contact name: GEOFF SPAHR	
Address: 1101 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: (503) 889-3110	Fax:
E-mail: GEOFF@SANDERSONFIRE.COM	

CONTRACTOR	
Business name: SANDERSON FIRE PROTECTION	
Address: SEE ABOVE	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 208652	

Authorized signature:

Print name:	Date:
GEOFF SPAHR	01/22/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$1000.00
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$121.28
Amount received	
Date received:	

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

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

Beaverton
OREGON

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 2/3/20	Permit No: B2020-0450
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 2155 NW 173rd Ave
City/State/ZIP: Beaverton OR 97006
Suite/bldg./apt. no.: | Project name: Shell - Toilet Room
Cross street/directions to job site:
Subdivision: | Lot no.:
Tax map/parcel no.:

DESCRIPTION OF WORK

Add new, ADA Toilet Room, Second Floor

☐ PROPERTY OWNER	☐ TENANT
Name: Mehdi Mirtorabi	
Address: 2155 NW 173rd Ave	
City/State/ZIP: Beaverton OR 97006	
Phone: 503-531-9990	Fax:
E-mail: seidmm@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: NW Precision Design	
Contact name: Darin Bouska	
Address: 17407 SW Inkster Dr.	
City/State/ZIP: Sherwood OR 97006	
Phone: 503-680-6444	Fax:
E-mail: Darin@NW-Precision.com	

CONTRACTOR

Business name: Robert Hakes Construction
Address: PO BOX 821757
City/State/ZIP: VANCOUVER WA 98682
Phone: 360-836-8622 | Fax:
CCB lic.: 200289

Authorized signature:

Print name:	Date:
Darin Bouska	2/3/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	18,000
Existing building area:	square feet
New building area:	square feet
Number of stories:	2
Type of construction:	VB
Occupancy groups:	
Existing:	N/A
New:	N/A

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Building Permit Application

City of Beaverton
PO Box 4755, Beaverton, OR 97076
Phone (503) 526-2403; Fax: (503) 526-2550
Internet address: www.ci.beaverton.or.us

OFFICE USE ONLY	
Date Received: 2/7/20	Permit No. B2020-0483
Date Issued:	By:
	Payment Type:
1&2 family: Simple	Complex:

TYPE OF WORK	
☐ New construction	☐ Demolition
☑ Addition/alteration/replacement	☐ Other:
CATEGORY OF CONSTRUCTION	
☑ 1- and 2-family dwelling	☐ Commercial/industrial
☐ Accessory building	☐ Multi-family
☐ Master builder	☐ Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 5255 SW TUCKER AVE	
City/State/ZIP: BEAVERTON OR 97005	
Suite/bldg./apt. no.:	Project name: MATTHEW ANDREWS
Cross street/directions to job site:	
Subdivision: W294480	Lot no.:
Tax map/parcel no.: 1S115CB07600	
DESCRIPTION OF WORK	
DEMO EXISTING CARPORT AND FRONT COVERED PORCH. NEW FRONT COVERED PORCH	
☑ **PROPERTY OWNER**	☐ **TENANT**
Name: MATTHEW ANDREWS	
Address: 1115 Madison St. NE #220	
City/State/ZIP: Salem OR 97301	
Phone: (503) 290-6958	Fax: ( )
☑ **APPLICANT**	☐ **CONTACT PERSON**
Business name: MIKE MONTGOMERY	
Contact name: SIMPL HOME DESIGNS	
Address: 4931 SW 76TH AVE., PMB 211	
City/State/ZIP: PORTLAND OR 97225	
Phone: (503) 515-6495	Fax: : (503) 719-4825
E-mail: mikem@ezpermits.biz	
CONTRACTOR	
Business name: RODNEY VAUGHN YOUNG	
Address: 10119 SE REEDWAY	
City/State/ZIP: PORTLAND OR 97266	
Phone: (503) 646-5376	Fax: ( )
CCB lic.: 125034	
Authorized signature:	
Print name: Mike Montgomery	Date: 01/27/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation ~~15,000.00~~ 10,000	
Number. of bedrooms: 3	
Number of bathrooms: 2	
Total number of floors: 1	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet
REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	
Amount received	
Date received:	

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

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

Building Permit Application

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

elopment Department
Building Division
n Way / PO Box 4755
Beaverton, OR 97076
Phone: (503) 526-2493 Fax: (503) 526-2550
General Information (503) 526-2222 V/TDD
BeavertonOregon.gov

Beaverton OREGON

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 07/22/2019	Permit No.: B2019-3110
Date Issued: 2/10/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 16275 SW JADE VIEW WAY	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name: JV4
Cross street/directions to job site:	
Subdivision:	Lot no.: 4
Tax map/parcel no.:	

DESCRIPTION OF WORK

NFPA 13D New fire sprinkler system for a newly-constructed residence.

☑ PROPERTY OWNER	☐ TENANT
Name: Gertz Fine Homes	
Address: 19200 SW 46th Ave.	
City/State/ZIP: Tualatin, OR 97062	
Phone: (503) 692-3390	Fax:
E-mail: Ken@gertzco.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Triad Fire Protection	
Contact name: Todd Sexton	
Address: 1927 NE Rodney Ave	
City/State/ZIP: Portland, OR 97212	
Phone: (503) 856-6333	Fax:
E-mail: office@triad-fire.com	

CONTRACTOR	
Business name: Triad Fire Protection	
Address: 1927 NE Rodney Ave	
City/State/ZIP: Portland, OR 97212	
Phone: (503) 856-6333	Fax:
CCB lic.: 199988	

Authorized signature: Allana Corrigan

Print name:	Date:
Allana Corrigan	07/21/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	4283
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$258.64
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

RECEIVED

OFFICE USE ONLY	
Date Received: 02/06/2020	Permit No.: B2020-0465
Date Issued: 2/10/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 12655 SW Center St	
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.: 470	Project name: Canopy Mortgage
Cross street/directions to job site: Center and Hall Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Construct 5 partition walls to create 4 interior offices.

☑ PROPERTY OWNER	☐ TENANT
Name: Weston Investment	
Address: 2154 NE Broadway Ave. #200	
City/State/ZIP: Portland OR 97232	
Phone: (503) 284-2147	Fax:
E-mail:	

☑ APPLICANT	☑ CONTACT PERSON
Business name: American Property Management	
Contact name: Mark Wolfe	
Address: 2510 NE Multnomah Ave	
City/State/ZIP: Portland OR 97232	
Phone: (503) 969-2703	Fax:
E-mail: mwolfe@apmportland.com	

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

Authorized signature:

Print name:	Date:

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	$10,000.00
Existing building area:	2608 square feet
New building area:	2608 square feet
Number of stories:	5
Type of construction:	2A
Occupancy groups:	
Existing:	B
New:	B

NOTICE

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

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

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

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

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 2/10/2020	Permit No.: B2020-0507
Date Issued: 2/11/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 9755 SW Barnes Rd	
City/State/ZIP: Portland, OR 97225	
Suite/bldg./apt. no.: #595	Project name: Vista Capital TI
Cross street/directions to job site: Peterkort Centre Campus	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
Interior Remodel

☑ PROPERTY OWNER	☐ TENANT
Name: Tina Beavers (Property Manager)	
Address: 9755 SW Barnes Rd #620	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 546-5632	Fax:
E-mail: tbeavers@peterkort.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Ankrom Moisan Architects	
Contact name: Avery Asato	
Address: 38 NW Davis St #300	
City/State/ZIP: Portland, OR 97209	
Phone: (503) 952-1317	Fax:
E-mail: averya@ankrommoisan.com	

CONTRACTOR	
Business name: Denali Construction	
Address: PO Box 69	
City/State/ZIP: Canby, OR 97013	
Phone: (503) 849-4435	Fax:
CCB lic.: 208947	

Authorized signature:

Print name:	Date:
Avery Asato	02/07/20

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		10,825
Existing building area:	square feet	1974
New building area:	square feet	1974
Number of stories:		6
Type of construction:		Type II-A, Sprinklered
Occupancy groups:		B
Existing:		B
New:		B

NOTICE

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BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	965.17
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Approved

Building Permit Application

Westmont Lot 17

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 12/13/2019	Permit No.: B2019-5151
Date Issued: 02/11/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15812 SW Wren Lane	
City/State/ZIP: Beaverton Oregon 97007	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 17
Tax map/parcel no.:	

DESCRIPTION OF WORK

NSFR - 2730 AR

☑ PROPERTY OWNER	☐ TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ave STE 200	
City/State/ZIP: Portland Oregon 97239	
Phone: (503) 721-2393	Fax:
E-mail: esweeks@drhorton.com	

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

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

Authorized signature:

Print name:	Date:
Kristin Thurston	11/11/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation		375,120.00
Number. of bedrooms:		5 ~~4~~
Number of bathrooms:		3
Total number of floors:		2
New dwelling area:	square feet	2501 ~~2661~~
Garage/carport area:	square feet	368 ~~465~~
Covered porch area:	square feet	144
Deck area:	square feet	
Other structure area:	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/03/2020	Permit No. B2020-0422
Date Issued: 2/11/2020	
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address 2865 SW CEDAR HILLS	
City/State/ZIP: Beaverton, Oregon 97005	
Suite/bldg./apt. no.:	Project name: Cedarhills Crossing 14
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install NFPA 13 Fire Sprinkler System in New Shell building

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

☑ APPLICANT	☑ CONTACT PERSON
Business name: Jet Fire Protection	
Contact name: Murray Friesen	
Address: 1935 Silverton RD NE	
City/State/ZIP: Salem, Oregon 97301	
Phone: 503-798-4480	Fax: 503-364-2204
E-mail: murray.f@jetindustries.net	

CONTRACTOR	
Business name: Jet Fire Protection	
Address: 1935 Silverton RD NE	
City/State/ZIP: Salem, Oregon 97301	
Phone: 503-363-2334	Fax: 503-364-2204
CCB lic.: 3944	

Authorized signature:

Print name:	Date:
Murray Friesen	1/31/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$8,888.00
Existing building area:	square feet
New building area:	4,349 square feet
Number of stories:	1
Type of construction:	V-B
Occupancy groups:	A-2
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$363.71
Amount received	
Date received:	

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

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

Building Permit Application

Beaverton OREGON

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: 02/04/2020	Permit No.: B2020-0434
Date Issued: 2/12/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 15901 Sw Jenkins Road

City/State/ZIP: Aloha, Oregon 97006

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

Cross street/directions to job site:

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Demolish existing food prep area sprinklers and re-install new sprinklers in new food prep area in same location

■ PROPERTY OWNER	■ TENANT
Name: Costco Wholesale	
Address: 999 Lake Drive	
City/State/ZIP: Issaquah, Wa 98027	
Phone: (425) 416-5703	Fax:

■ APPLICANT	■ CONTACT PERSON
Business name: Fire Systems West	
Contact name: Jason Sampson	
Address: 600 Se Maritime Ave #300	
City/State/ZIP: Vancouver, Wa 98661	
Phone: (360) 693-9906	Fax:
E-mail: jasons@firesystemswest.com	

CONTRACTOR

Business name: Fire Systems West

Address: 600 Se Maritime Ave #300

City/State/ZIP: Vancouver, Wa 98661

Phone: (360) 693-9906 | Fax:

CCB lic.: 49732

Authorized signature: Jason Sampson

Print name: JASON SAMPSON | Date: 01/31/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation $12,500.00	
Existing building area: 138,686.00	square feet
New building area:	square feet
Number of stories: 1.00	
Type of construction: V-b	
Occupancy groups: M	
Existing: B, F, M, or S	
New: M	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$468.77
Amount received	
Date received:	

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

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

rev 06/11

Approved

Building Permit Application

Beaverton OREGON

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 1/15/2020	Permit No.: B2020-0149
Date Issued: 2/11/2020	
	Payment Type:

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

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

14661 JOB SITE INFORMATION AND LOCATION	
Job site address: ~~14609~~ SW Teal Blvd. Ste. 6661	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: White Oak Taphouse
Cross street/directions to job site: Murrayhill Marketplace	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install pre-fab, walk in cooler

☐ PROPERTY OWNER	☑ TENANT
Name: Dave Connor	
Address: 14609 SW Teal	
City/State/ZIP: Beaverton, OR 97007	
Phone: (630) 363-1092	Fax:
E-mail: david.adam.connor@gmail.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Royal Mechanical	
Contact name: Jeff Brown	
Address: PO Box 86	
City/State/ZIP: Sherwood, OR 97140	
Phone: (503) 625-2562	Fax:
E-mail: royalmechanicalpdx@gmail.com	

CONTRACTOR	
Business name: Royal Mechanical	
Address: PO Box 86	
City/State/ZIP: Sherwood, OR 97140	
Phone: (503) 625-2562	Fax:
CCB lic.: 197385	

Authorized signature:

Print name:	Date:
Jeff Brown	01/13/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	1500.00
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 11/19

Approved

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 02/03/2020	Permit No.: B2020-0425
Date Issued: 2/12/2020	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 7883 SW Barnard Dr	
City/State/ZIP: Beaverton Oregon 97007	
Suite/bldg./apt. no.:	Project name: Matar Deck
Cross street/directions to job site: Hart Rd and 155	
Subdivision: Bridle Hills	Lot no.: 60
Tax map/parcel no.: 1S120CD-04900	

DESCRIPTION OF WORK

Demolish old deck and build like kind deck

☑ PROPERTY OWNER	☐ TENANT
Name: Riad Matar	
Address: 7883 SW Barnard Dr	
City/State/ZIP: Beaverton OR 97007	
Phone: 5033147499	Fax: 5036102684
E-mail: matar@frontier.com	

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

CONTRACTOR	
Business name: A Better Handyman	
Address: 22336 Skyview Dr	
City/State/ZIP: West Linn OR 97068	
Phone: 503-670-8503	Fax:
CCB lic.: # 213643	

Authorized signature:

Print name: Riad Matar	Date: JAN 28/2020
RIAD MATAR	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$5,100
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$127.03
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

ITEM 1

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 2/11/2020	Permit No: B2020-0528
Date Issued: 2/12/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15145 SW Gibraltar Ct	
City/State/ZIP: Beaverton OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK
replace existing Deck

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

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

CONTRACTOR	
Business name: Walter Bros Const. LLC DBA PDX Deck and Fence	
Address: 20006 Homestead Dr	
City/State/ZIP: Oregon City OR 97045	
Phone: 503-332-5076	Fax:
CCB lic.: 178555	Metro 12117
Authorized signature:	
Print name: Jeff Walter	Date: 2/11/20

PDX Deck and Fence@comcast.net

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation:	$16,110
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet 708
Other structure area:	square feet

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	1645.21
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

Beaverton OREGON

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

OFFICE USE ONLY	
Date Received: 2/12/2020	Permit No.: B2020-531
Date Issued:	Fee:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 10010 SW 135th Ave	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

- replace existing deck.

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

☐ APPLICANT	☐ CONTACT PERSON
Business name: ADRIAN'S QUALITY Fencing & Decks	
Contact name: ADRIAN PETRISOR	
Address: 3115 SW 211th Ave	
City/State/ZIP: Beaverton OR	
Phone: (503) 209-9216.	Fax: (503) 848-8721
E-mail: adrian@adrians.com.	

CONTRACTOR	
Business name: same as above	
Address:	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 64660	

Authorized signature: Adrian Petrisor

Print name: ADRIAN PETRISOR	Date: 2/12/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation $ 6800	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet 192 SF
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

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

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

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

Approved

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 01/31/2020	Permit No.: B2020-0415
Date Issued: 2/4/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 6635 SW Hickman Ln	
City/State/ZIP: Portland, OR 97223	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW 67th & SW Miles	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Removing load bearing wall, Installing post and beam w/ ftgs, installing new kitchen. remove&replace window and door

☑ PROPERTY OWNER	☐ TENANT
Name: Jennifer Sloan & Mitch Lurie	
Address: 6635 SW Hickman Ln.	
City/State/ZIP: Portland, OR 97223	
Phone:	Fax:
E-mail:	

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

CONTRACTOR	
Business name: Straight Line Design and Remodeling LLC.	
Address: 9645 SW Beaverton Hillsdale Hwy	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 244-5463	Fax:
CCB lic.: 195218	

Authorized signature:

Print name:	Date:
Steven Griffin	01/31/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	$15,000
Number. of bedrooms:	3
Number of bathrooms:	1
Total number of floors:	1
New dwelling area:	square feet
Garage/carport area:	400 square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Approved

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/05/2020	Permit No.: B2020-0459
Date Issued: 2/18/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 1815 NW 173RD AVE	
City/State/ZIP: BEAVERTON, OR	
Suite/bldg./apt. no.: #809	Project name: EMERALD APTS
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

SMOKE/WATER RESTORATION OF GYP WALL ASS'YS. NO STRUCTURAL WORK.

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

☒ APPLICANT	☐ CONTACT PERSON
Business name: EDWARD CRABAUGH ENGINEERING CONSULTING	
Contact name: ED CRABAUGH	
Address: 1100 NE 28TH AVE #212	
City/State/ZIP: PORTLAND, OR	
Phone: (503) 706.7380	Fax:
E-mail: ed@edcrabaugh.com	

CONTRACTOR

Business name: JR JOHNSON, LLC	
Address: 9425 N. BURRAGE AVE	
City/State/ZIP: PORTLAND, OR	
Phone: (503) 240.3388	Fax:
CCB lic.: 221561	

Authorized signature:

Print name: Ed Crabaugh	Date: 2-4-20

RESIDENTIAL 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL USE CHECKLIST

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

Valuation	$35,000
Existing building area:	(NO CHANGE) square feet
New building area:	square feet
Number of stories:	2
Type of construction:	VB
Occupancy groups:	R-2
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$713.62
Amount received	
Date received:	

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/18/2020	Permit No.: B2020-0584
Date Issued: 2/19/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 8060 SW Brentwood Street	
City/State/ZIP: Portland, OR 97225	
Suite/bldg./apt. no.:	Project name: Stained Glass Protection
Cross street/directions to job site: SW Laurelwood Street	
Subdivision: Broadmoor	Lot no.: 15 113BA 07600
Tax map/parcel no.:	

DESCRIPTION OF WORK

Replace compromised exterior wood-framed glass coverings with new aluminum-framed single pane laminated glass coverings to protect our permanent stained glass windows. Existing coverings have five crossbars. New coverings have one. Stained glass windows will not be removed.

☑ PROPERTY OWNER	☐ TENANT
Name: Valley Community Presbyterian Church	
Address: 8060 SW Brentwood Street	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 292-3537	Fax: (503) 292-4272
E-mail: mail@valleycommunity.org	

☐ APPLICANT	☐ CONTACT PERSON
Business name: Valley Community Presbyterian Church	
Contact name: David Marquis, Facilities Elder	
Address: 8060 SW Brentwood Street	
City/State/ZIP: Portland, OR 97225	
Phone: (503) 260-9055	Fax: (503) 292-4272
E-mail: facilities@valleycommunity.org	

CONTRACTOR	
Business name: Bovard Studios, Inc.	
Address: 2281 Business Highway 34	
City/State/ZIP: Fairfield, IA 52556-8560	
Phone: (800) 452-7796	Fax: (640) 472-0974
CCB lic.: 229460	

Authorized signature:

Print name:	Date:
Reid S. (Sam) Connell, President	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$42,350
Existing building area:	12,004 square feet
New building area:	12,004 square feet
Number of stories:	
Type of construction:	Replace window covering
Occupancy groups:	
Existing:	A-3 (places of religious worship)
New:	no change

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	1126.48
Amount received	
Date received:	

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

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

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 2-20-2020	Permit No.: B2020-06360
Date Issued: 2-25/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15220 NW Greenbrier Pkwy	
City/State/ZIP: Beaverton, OR 97006	
Suite/bldg./apt. no.: 380	Project name: Elcon Associates
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Fire Alarm Devices

☐ PROPERTY OWNER	☑ TENANT
Name: Elcon Associates	
Address: 15220 NW Greenbrier Pkwy Suite 380	
City/State/ZIP: Beaverton, OR 97006	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Point Monitor Corp.	
Contact name: Brooke Williams	
Address: 5863 Lakeview Blvd. #100	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 627-0100	Fax:
E-mail: bwilliams@pointmonitor.com	

CONTRACTOR	
Business name: Point Monitor Corp.	
Address: 5863 Lakeview Blvd. #100	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: (503) 627-0100	Fax:
CCB lic.: 135901	

Authorized signature:

Print name:	Date:
Ben Breit	02/17/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	$1,889
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Building Permit Application

ADI (C.O.B.)

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

OFFICE USE ONLY	
Date Received: 2/10/20	Permit No.: B2020-0634
Date Issued: 2/27/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 9290 Southwest Jamieson Court, Beaverton, Oregon, 97005, United States	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Residential Rooftop Solar PV System 6.62 kW

☑ PROPERTY OWNER	☐ TENANT
Name: Ross Burdick	
Address: 9290 Southwest Jamieson Court, Beaverton, Oregon, 97005, Unite	
City/State/ZIP:	
Phone: 503-962-9160	Fax:
E-mail: karin@calde.us	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Blue Raven Solar LLC	
Contact name: Hannah Webb	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
E-mail: permitting.department@blueravensolar.com	

CONTRACTOR	
Business name: Blue Raven Solar LLC	
Address: 1403 North Research Way	
City/State/ZIP: Orem, UT 84097	
Phone: 385-482-0045	Fax:
CCB lic.: 210112	

Authorized signature: Jeffrey Lee

Print name:	Date:
Jeff Lee	02/13/2020

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation $15,315	
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

(Approved) ROUTED 11-16 2672 BL

Building Permit Application

Beaverton OREGON

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

RECEIVED
NOV 15 2018
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received:	Permit No: B2018-5455
Date Issued: 1/24/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15807 SW Wren Ln	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 44
Tax map/parcel no.:	

DESCRIPTION OF WORK

NSFR - 2 Car Garage

☑ PROPERTY OWNER	☐ TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave Suite 200	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: plancheck@drhorton.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Amanda Loveridge	
Address: SAME AS ABOVE	
City/State/ZIP:	
Phone:	Fax:
E-mail: plancheck@drhorton.com	

CONTRACTOR	
Business name: DR Horton, Inc	
Address: SAME AS ABOVE	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 130859	

Authorized signature: Amanda Loveridge

Print name: Amanda Loveridge	Date: 10/22/18
Amanda Loveridge	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	345,796.10
Number. of bedrooms:	3
Number of bathrooms:	2.5
Total number of floors:	3
New dwelling area:	2672 square feet
Garage/carport area:	588 square feet
Covered porch area:	55 square feet
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	710.23
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

Beaverton OREGON

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 11/19/2019	Permit No.: B2018-4994
Date Issued: 12/18/19	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 17312 SW Kite Lane

City/State/ZIP: Beaverton, Or 97007

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

Cross street/directions to job site:

Subdivision: South Cooper Mountain Hts | Lot no.: 99

Tax map/parcel no.:

DESCRIPTION OF WORK

NEW SFR

☐ PROPERTY OWNER	☐ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR

Business name: Everett Custom Homes

Address: 3330 NW Yeon Ave

City/State/ZIP: Portland, Oregon 97210

Phone: jreilly@everetthomesnw.com | Fax:

CCB lic.: 189447

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly	Date: 11/15/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	257,516		
Number of bedrooms:	3		
Number of bathrooms:	2.5		
Total number of floors:	3		
New dwelling area:	1873.37	square feet	
Garage/carport area:	453.14	square feet	
Covered porch area:	107.93	square feet	
Deck area:	29.31	square feet	0
Other structure area:	0	square feet	

REQUIRED DATA: COMMERCIAL USE CHECKLIST

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

Valuation		
Existing building area:		square feet
New building area:		square feet
Number of stories:		
Type of construction:		
Occupancy groups:		R2
Existing:		
New:		Townhome

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

Approved 2555 BL
Reissue B2018-0293

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

OFFICE USE ONLY	
Date Received: 11-1-18	Permit No.: B2018-5140
Date Issued: 1/24/2020	BL
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15767 SW Wren Ln	
City/State/ZIP: Beaverton, OR	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 43
Tax map/parcel no.:	

Rounded 11/8

DESCRIPTION OF WORK
NSFR

☑ PROPERTY OWNER	☐ TENANT
Name: DR Horton, Inc	
Address: 4380 SW Macadam Ave Suite 200	
City/State/ZIP: Portland, OR 97239	
Phone: (503) 222-4151	Fax:
E-mail: plancheck@drhorton.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: DR Horton, Inc	
Contact name: Amanda Loveridge	
Address: SAME AS ABOVE	
City/State/ZIP:	
Phone:	Fax:
E-mail: plancheck@drhorton.com	

CONTRACTOR	
Business name: DR Horton, Inc	
Address: SAME AS ABOVE	
City/State/ZIP:	
Phone:	Fax:
CCB lic.: 130859	

Authorized signature: Amanda Loveridge

Print name: Amanda Loveridge	Date: 10/22/18
Amanda Loveridge	

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation $327,023.27	
Number. of bedrooms: 4	
Number of bathrooms: 2.5	
Total number of floors: 3	
New dwelling area: 2555	square feet
Garage/carport area: 487	square feet
Covered porch area: 51	square feet
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$1,365.27
Amount received	$1,365.27
Date received: 11-7-18	

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

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

Building Permit Application

Beaverton OREGON

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 11/19/2019	Permit No.: B2018-4996
Date Issued: 1/21/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 17302 SW Kite Lane	
City/State/ZIP: Beaverton, Or 97007	
Suite/bldg./apt. no.:	Project name: SCHM
Cross street/directions to job site:	
Subdivision: South Cooper Mountain Hts	Lot no.: 101
Tax map/parcel no.:	

DESCRIPTION OF WORK
NEW SFR

☐ PROPERTY OWNER	☐ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR	
Business name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, Oregon 97210	
Phone: jreilly@everetthomesnw.com	Fax:
CCB lic.: 189447	

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly	Date: 11/15/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING			
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.			
Valuation 257,516			
Number. of bedrooms: 3			
Number of bathrooms: 2.5			
Total number of floors: 3			
New dwelling area: 1873.37		square feet	
Garage/carport area: 453.14		square feet	
Covered porch area: 107.93		square feet	
Deck area:	29.31	square feet	0
Other structure area: 0		square feet	

REQUIRED DATA: COMMERCIAL USE CHECKLIST		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		
Existing building area:		square feet
New building area:		square feet
Number of stories:		
Type of construction:		
Occupancy groups:		R2
Existing:		
New:		Townhome

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

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

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 11/19/2019	Permit No.: B2018-4995
Date Issued: 1/21/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 17306 SW Kite Lane	
City/State/ZIP: Beaverton, Or 97007	
Suite/bldg./apt. no.:	Project name: SCHM
Cross street/directions to job site:	
Subdivision: South Cooper Mountain Hts	Lot no.: 100
Tax map/parcel no.:	

DESCRIPTION OF WORK
NEW SFR

☐ PROPERTY OWNER	☑ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR	
Business name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, Oregon 97210	
Phone: jreilly@everetthomesnw.com	Fax:
CCB lic.: 189447	

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly	Date: 11/15/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation 199,501		
Number. of bedrooms: 2		
Number of bathrooms: 2.5		
Total number of floors: 3		
New dwelling area: 1542.34	square feet	
Garage/carport area: 368.94	square feet	
Covered porch area: 103.8	square feet	
Deck area: 0	square feet	0
Other structure area: 0	square feet	

REQUIRED DATA: COMMERCIAL USE CHECKLIST		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		
Existing building area:	square feet	
New building area:	square feet	
Number of stories:		
Type of construction:		
Occupancy groups:		R2
Existing:		
New:		Townhome

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

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

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

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

Form B70-1001 REV 2/14

Building Permit Application

COB Revision/Tracking #: REV X

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

OFFICE USE ONLY

Date Received: 05/17/2019	Permit No.: B2018-3718
Date Issued: 2/14/2020	By:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 12504 SW 171st Ter

City/State/ZIP: Beaverton, Or 97007

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

Cross street/directions to job site:

Subdivision: South Cooper Mountain Hts | Lot no.: 55

Tax map/parcel no.:

DESCRIPTION OF WORK

NEW SFR

☐ PROPERTY OWNER	☐ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR

Business name: Everett Custom Homes

Address: 3330 NW Yeon Ave

City/State/ZIP: Portland, Oregon 97210

Phone: jreilly@everetthomesnw.com | Fax:

CCB lic.: 189447

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly | Date: 5/16/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	221,277		
Number. of bedrooms:	3		
Number of bathrooms:	2.5		
Total number of floors:	3		
New dwelling area:	1795.78	square feet	
Garage/carport area:	608.62	square feet	
Covered porch area:	36	square feet	
Deck area:	108	square feet	0
Other structure area:	0	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		
Existing building area:		square feet
New building area:		square feet
Number of stories:		
Type of construction:		
Occupancy groups:		R2
Existing:		
New:		Townhome

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Approved Westmont Lot 16

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 12/16/2019	Permit No. B2019-5160
Date Issued: 1/27/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15804 SW Wren Lane	
City/State/ZIP: Beaverton Oregon 97007	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 16
Tax map/parcel no.:	

DESCRIPTION OF WORK
NSFR - 2730 AR

☑ PROPERTY OWNER	☐ TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ave STE 200	
City/State/ZIP: Portland Oregon 97239	
Phone: (503) 721-2393	Fax:
E-mail: esweeks@drhorton.com	

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

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

Authorized signature:

Print name:	Date:
Kristin Thurston	11/11/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		375,120.00
Number. of bedrooms:		5 ~~4~~
Number of bathrooms:		3
Total number of floors:		2
New dwelling area:	2740 square feet	~~2661~~
Garage/carport area:	369 square feet	~~465~~
Covered porch area:	115 square feet	~~144~~
Deck area:	square feet	
Other structure area:	square feet	

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	1512.43
Amount received	
Date received:	

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

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

Approved

Westmont Lot 74

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 12/16/2019	Permit No.: B2019-5163
Date Issued: 2/11/2020	
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15828 SW Thrush Lane	
City/State/ZIP: Beaverton Oregon 97007	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 74
Tax map/parcel no.:	

DESCRIPTION OF WORK
NSFR - 2730 AR

☑ PROPERTY OWNER	☐ TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ave STE 200	
City/State/ZIP: Portland Oregon 97239	
Phone: (503) 721-2393	Fax:
E-mail: esweeks@drhorton.com	

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

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

Authorized signature:

Print name:	Date:
Kristin Thurston	11/11/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	375,120.00
Number. of bedrooms:	~~4~~ 5
Number of bathrooms:	3
Total number of floors:	2
New dwelling area:	square feet ~~2661~~ 2740
Garage/carport area:	square feet ~~465~~ 367
Covered porch area:	square feet ~~144~~ 90
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$1,512.43
Amount received	
Date received:	

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

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

Approved

Building Permit Application

Tara Westmont Lot 45

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 12/18/2019	Permit No.: B2019-5195
Date Issued: 2/21/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 15815 SW Wren Lane	
City/State/ZIP: Beaverton Oregon 97007	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 45
Tax map/parcel no.:	

DESCRIPTION OF WORK
NSFR - 3729 AL

☑ PROPERTY OWNER	☐ TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ave STE 200	
City/State/ZIP: Portland Oregon 97239	
Phone: (503) 721-2393	Fax:
E-mail: esweeks@drhorton.com	

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

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

Authorized signature:

Print name:	Date:
Kristin Thurston	11/11/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	375,120.00
Number. of bedrooms:	5 ~~4~~
Number of bathrooms:	3
Total number of floors:	2
New dwelling area:	square feet 2596 ~~2661~~
Garage/carport area:	square feet 318 ~~465~~
Covered porch area:	square feet 66 ~~144~~
Deck area:	square feet
Other structure area:	square feet

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

NOTICE

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

BUILDING PERMIT FEES*	
Please refer to fee schedule	
Fees due upon application	$1512.43
Amount received	
Date received:	

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

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

Approved

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 11/20/2019	Permit No.: B2019-4845
Date Issued: 2/12/2020	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 12140SW 173rd Terrace	
City/State/ZIP: BEAVERTON, OR	
Suite/bldg./apt. no.:	Project name: SOUTH COOPER MT.
Cross street/directions to job site:	
Subdivision: SOUHT COOPER MT	Lot no.: 173
Tax map/parcel no.:	

DESCRIPTION OF WORK
NEW HOME

☑ PROPERTY OWNER	☐ TENANT
Name: SK HOFF CONSTRUCTIO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON ,OR, 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	

☐ APPLICANT	☑ 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:	

CONTRACTOR	
Business name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON , OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
CCB lic.: 121987	

Authorized signature:

Print name:	Date:
Sandro Guerrero	11/18/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation	439,750	
Number. of bedrooms:		4
Number of bathrooms:		3-1/2
Total number of floors:		3
New dwelling area:	square feet	3354
Garage/carport area:	square feet	419
Covered porch area:	square feet	170
Deck area:	square feet	227
Other structure area:	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation		
Existing building area:	square feet	
New building area:	square feet	
Number of stories:		2
Type of construction:		SINGLE FAMILY
Occupancy groups:		
Existing:		
New:		

NOTICE

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

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

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

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

Form B70-1001 REV 2/14

Approved

Building Permit Application

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

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 08/01/2019	Permit No.: B2019-3280
Date Issued: 2/14/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 2415 SW 75TH TERRACE
City/State/ZIP: Beaverton, Oregon, 97007
Suite/bldg./apt. no.: | Project name: Sylvan West Estates
Cross street/directions to job site: Canyon Lane/ 75th
Subdivision: Sylvan West Estates | Lot no.: lot-8
Tax map/parcel no.: Map no. 1s112AB Tax lot 04703

DESCRIPTION OF WORK

Demo home down to Foundation rebuild Using foundation

☑ PROPERTY OWNER	☐ TENANT
Name: Sylvan West Estates, LLC	
Address: 333 S. State St, Ste. V-146	
City/State/ZIP: Lake Oswego Oregon 97034	
Phone: 503-320-7280	Fax:
E-mail: johng@roundstoneproperties.com	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Sylvan West Estates,LLC	
Contact name: John M. Gerritz	
Address: 333 S. State St., Ste. V-146	
City/State/ZIP: Lake Oswego Oregon 97034	
Phone: 5032-320-7280	Fax:
E-mail: johng@roundstoneproperties.com	

CONTRACTOR

Business name: Sylvan West Estates, LLC
Address: 333 S. State St. Ste. V-146
City/State/ZIP: Lake Oswego Oregon 97034
Phone: 503-320-7280 | Fax:
CCB lic.: 218005

Authorized signature:

Print name: John M. Gerritz	Date: 7/26/2019

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation		
Number of bedrooms:		5
Number of bathrooms:		4
Total number of floors:		3
New dwelling area:	square feet	4550
Garage/carport area:	square feet	665
Covered porch area:	square feet	425
Deck area:	square feet	
Other structure area:	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		
Existing building area:	square feet	3000
New building area:	square feet	1550
Number of stories:		3
Type of construction:		
Occupancy groups:		
Existing:		
New:		

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$2,009.80
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

REV X

19-024

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

OFFICE USE ONLY

Date Received: 05/17/2019	Permit No.: B2018-3717
Date Issued: 2/14/2020	Fee:
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 12508 SW 171st Ter

City/State/ZIP: Beaverton, Or 97007

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

Cross street/directions to job site:

Subdivision: South Cooper Mountain Hts | Lot no.: 54

Tax map/parcel no.:

DESCRIPTION OF WORK

NEW SFR

☐ PROPERTY OWNER	☑ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR

Business name: Everett Custom Homes

Address: 3330 NW Yeon Ave

City/State/ZIP: Portland, Oregon 97210

Phone: jreilly@everetthomesnw.com | Fax:

CCB lic.: 189447

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly | Date: 5/16/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	215,363		
Number. of bedrooms:	2		
Number of bathrooms:	2.5		
Total number of floors:	3		
New dwelling area:	1570.1	square feet	
Garage/carport area:	474.82	square feet	
Covered porch area:	36	square feet	
Deck area:	96	square feet	0
Other structure area:	0	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		
Existing building area:		square feet
New building area:		square feet
Number of stories:		
Type of construction:		
Occupancy groups:		R2
Existing:		
New:		Townhome

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Building Permit Application

REV X

T-19-023

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

Beaverton OREGON

OFFICE USE ONLY	
Date Received: 05/17/2019	Permit No.: B2018-3716
Date Issued: 2/20/2020	
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION

Job site address: 12510 SW 171st Ter

City/State/ZIP: Beaverton, Or 97007

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

Cross street/directions to job site:

Subdivision: South Cooper Mountain Hts | Lot no.: 53

Tax map/parcel no.:

DESCRIPTION OF WORK

NEW SFR

☐ PROPERTY OWNER	☐ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR

Business name: Everett Custom Homes

Address: 3330 NW Yeon Ave

City/State/ZIP: Portland, Oregon 97210

Phone: jreilly@everetthomesnw.com | Fax:

CCB lic.: 189447

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly | Date: 5/16/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

Valuation	215,363		
Number. of bedrooms:	2		
Number of bathrooms:	2.5		
Total number of floors:	3		
New dwelling area:	1570.1	square feet	
Garage/carport area:	474.82	square feet	
Covered porch area:	36	square feet	
Deck area:	96	square feet	0
Other structure area:	0	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation		
Existing building area:		square feet
New building area:		square feet
Number of stories:		
Type of construction:		
Occupancy groups:		R2
Existing:		
New:		Townhome

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Form B70-1001 REV 2/14

Building Permit Application

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

REV X
T 19-020

OFFICE USE ONLY	
Date Received 05/17/2019	Permit No.: B2018-3715
Date Issued: 2/14/2020	
CITY OF BEAVERTON BUILDING DIVISION	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 12514 SW 171st Ter	
City/State/ZIP: Beaverton, Or 97007	
Suite/bldg./apt. no.:	Project name: SCHM
Cross street/directions to job site:	
Subdivision: South Cooper Mountain Hts	Lot no.: 52
Tax map/parcel no.:	

DESCRIPTION OF WORK
NEW SFR

☐ PROPERTY OWNER	☑ TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

☑ APPLICANT	☑ CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	

CONTRACTOR	
Business name: Everett Custom Homes	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, Oregon 97210	
Phone: jreilly@everetthomesnw.com	Fax:
CCB lic.: 189447	

Authorized signature: Jennifer Reilly

Print name: Jennifer Reilly	Date: 5/16/19

REQUIRED DATA: 1- AND 2-FAMILY DWELLING		
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.		
Valuation 221,277		
Number. of bedrooms: 3		
Number of bathrooms: 2.5		
Total number of floors: 3		
New dwelling area: 1795.78	square feet	
Garage/carport area: 608.62	square feet	
Covered porch area: 36	square feet	
Deck area: 108	square feet	0
Other structure area: 0	square feet	

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	R2
Existing:	
New:	Townhome

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

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

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

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

Form B70-1001 REV 2/14

FIRE SYSTEM
CHINA TOWN

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

Beaverton OREGON

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 12/10/2019	Permit No.: B2019-5099
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 4021 SW 117th AVE STE E.	
City/State/ZIP: Beaverton, OR 97076	
Suite/bldg./apt. no.:	Project name: China town
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Install Pyro Chem PCI-460 double Fire System
Install 2 Pyro Chem PCI-300 Single Fire Systems

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

☒ APPLICANT	☒ CONTACT PERSON
Business name: Universal Fire Equipment	
Contact name: Rebecca Bailey	
Address: 18260 SW 100th Ct	
City/State/ZIP: Tualatin OR 97062	
Phone: 503-691-9000	Fax: 503-691-9004
E-mail: universalfireequipment@Hotmail.com	

CONTRACTOR	
Business name: Universal Fire Equipment	
Address: 18260 SW 100th Ct.	
City/State/ZIP: Tualatin OR 97062	
Phone: 503-691-9000	Fax: 503-691-9004
CCB lic.: 86723	

Authorized signature: RBailey

Print name: Rebecca Bailey	Date: 12-10-2019

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation 14,500 –	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received: due	$147.03

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

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

Form B70-1001 REV 11/19

Building Permit Application

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

OFFICE USE ONLY	
Date Received: 02/03/2020	Permit No: B2020-0419
Date Issued:	By:
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 4905 SW Griffith Drive	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.: 2nd floor	Project name: Griffith Park TI
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

relocate sprinkler head / add

☑ PROPERTY OWNER	☐ TENANT
Name: Alfa Griffith, LLC	
Address: 4905 Griffith Dr., Suite 205	
City/State/ZIP: Beaverton, OR	
Phone:	Fax:
E-mail:	

☑ APPLICANT	☐ CONTACT PERSON
Business name: Delta Fire, Inc.	
Contact name: Melissa Boughton	
Address: 14795 SW 72nd Ave.	
City/State/ZIP: Portland, Oregon 97224	
Phone: (503) 620-4020	Fax: (503) 620-1058
E-mail:	

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

Authorized signature: Melissa Boughton

Print name:	Date:
Melissa Boughton	01/29/20

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

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

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	$92.00
Amount received	
Date received:	

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

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

Building Permit Application

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

RECEIVED
CITY OF BEAVERTON
BUILDING DIVISION

OFFICE USE ONLY	
Date Received: 8/14/2019	Permit No.: B2019-3467
Date Issued: 2/13/2020	
	Payment Type:

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 6125 SW Hall Blvd	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Beaverton Public Safety
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK

Fire Alarm for the new City of Beaverton Public Safety Building - payment internal via City of Beaverton.

☐ PROPERTY OWNER	☐ TENANT
Name: City of Beaverton	
Address: 12725 SW Millikan Way	
City/State/ZIP: Beaverton, OR 97076	
Phone:	Fax:
E-mail:	

☐ APPLICANT	☑ CONTACT PERSON
Business name: OEG, Inc.	
Contact name: Rob Wernli	
Address: 3200 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 849-2588	Fax: (503) 234-1001
E-mail: rob.wernli@oeg.us.com	

CONTRACTOR	
Business name: OEG, Inc.	
Address: 3200 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 234-9900	Fax: (503) 234-1001
CCB lic.: 203	

Authorized signature:

Print name:	Date:

REQUIRED DATA: 1- AND 2-FAMILY DWELLING

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

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

REQUIRED DATA: COMMERCIAL-USE CHECKLIST

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

Valuation	13,299.00
Existing building area:	square feet 74,790
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

NOTICE

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

BUILDING PERMIT FEES*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received:	

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

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

Monkey Subs RTY

RECEIVED

Mechanical Permit Application

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

OFFICE USE ONLY	
Date Received: 12/11/2019	Permit No.: B2019-5103
Date Issued:	By: CLEVY
CITY OF BEAVERTON BUILDING DIVISION	Payment Type: 2/3/2020

TYPE OF WORK

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

CATEGORY OF CONSTRUCTION

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

JOB SITE INFORMATION AND LOCATION

Job site address: 11350 SW Canyon Rd, SPACE 101

City/State/ZIP: Beaverton, OR

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

Cross street/directions to job site:

BEAVERTON COMMERCIAL BUILING
BUILDING PERMIT - b2019-3654

Subdivision: | Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Install 4Ton Mini VRF Unit

☒ PROPERTY OWNER ☐ TENANT

Name: ELLIOTT PROPERTIES INC

Address: 735 SW 20TH PLACE #220

City/State/ZIP: PORTLAND, OR 97205

Phone: (503) 292-7733 | Fax:

E-mail:

APPLICANT

Business name: VIKING HEATING & SHEETMETAL

Contact name: MILO COY

Address: PO BOX 2610

City/State/ZIP: ESTACADA, OR 97023

Phone: (503) 888-1692 | Fax: (888) 422-9677

E-mail: MILO@VIKING1SHEETMETAL.COM

CONTRACTOR

Business name: SAME

Address:

City/State/ZIP:

Phone: (503) 679-8096 | Fax:

E-mail:

CCB lic.: 190282 | City or metro lic.: 10360

Authorized signature:

Print name: DEBBIE BLAKE | Date: 12/10/19

COMMERCIAL FEES

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

Value: $ 8,900.00

RESIDENTIAL EQUIPMENT / SYSTEMS FEES

For special information use checklist.

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

MECHANICAL PERMIT FEES

Subtotal	316.80
Minimum permit fee	
☒ Check for Plan Review (25% of permit fee)	79.20
State surcharge (12% of permit fee)	38.02
TOTAL PERMIT FEE	$434.02

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

1 - Site plan required for an outdoor unit.

2 - Requires approval from Building Codes Division.