



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00419**

Approval Code: 715112 6/15/2020 3:21 pm

E-mailed To: alma@badgerelectricinc.com

B2020.2059

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7215 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB00825	
DESCRIPTION OF WORK	
service change	
APPLICANT	
Name: Todd Gaber	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections Included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00422**

Approval Code: 026625 6/15/2020 4:25 pm

E-mailed To: acelectricalcontractorllc@yahoo.com

*B 2020-2061*

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13850 SW SCHOLLS FERRY RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 104	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133CA90842	
DESCRIPTION OF WORK	
to wire a whip to a/c unit	
APPLICANT	
Name: Roberto Gandarilla	
Phone: 503-910-3514	Fax: 503-845-2625
Email:	
CONTRACTOR	
Elec lic. no.: C301	CCB lic. no.: 176589
Business Name: AC ELECTRICAL CONTRACTOR LLC	
Contact:	
Address: PO BOX 427	
City/State/ZIP: TUALATIN, OR 97062	
Phone: 5039104738	Fax: 5038459633
Email: acelectricalcontractorllc@yahoo.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



# Electrical Permit Application

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

## OFFICE USE ONLY

Date Received: 4/20/2020	Permit No.: B2018-3169
Date Issued: 6-15-20	By: <i>HK</i>
Payment Type: <i>Check</i>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17011 SW Albatross Ln
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: SCMH
Cross street/directions to job site:	
Subdivision: South Cooper MTN HTS	Lot no.: 16
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethhomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethhomesnw.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgarner@garnerelectric.com	COB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4110
Supervising electrician signature, required: <i>Chuck Garner</i>	
Print name: Chuck Garner	Date: 4/17/20
Authorized signature: <i>MRS</i>	
Melissa Steak	4/17/20

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

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



# Electrical Permit Application

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

## OFFICE USE ONLY

Date Received: 4/20/2020	Permit No.: B2018-3152
Date Issued: 6-15-20	By: <i>JR</i>
Payment Type: <i>check</i>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17005 SW Albatross Ln
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: SCMH
Cross street/directions to job site:	
Subdivision: South Cooper MTN HTS	Lot no.: 17
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everetthomesnw.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgarner@garnerelectric.com	COB lic. no.: 121159
Electrical lic. no.: 34-3056	City or metro lic.: 4110
Supervising electrician signature, required: <i>Chuck Garner</i>	
Print name: Chuck Garner	Date: 4/17/20
Authorized signature: <i>MRS</i>	
Print name: Melissa Stock	Date: 4/17/20

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

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

\* Number of inspections allowed per permit.



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 4/20/2020	Permit No.: B2018-3168
Date Issued: 6-15-20	By: MK
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17001 SW Albatross Ln
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: SCMH
Cross street/directions to job site:	
Subdivision: South Cooper MTN HTS	Lot no.: 18
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethomesnw.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: 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@everethomesnw.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3056	City or metro lic.: 4110
Supervising electrician signature, required: <i>Chuck Garner</i>	
Print name: Chuck Garner	Date: 4/17/20
Authorized signature: <i>MRS</i>	
Mallory Stock	4/17/20

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2020-2033
Date Issued:	By: [Signature]
Payment Type:	

TYPE OF WORK:	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION:	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION:	
Job no.:	Job address: 13450 SW 2nd St
City/State/ZIP:	Beaverton OR 97005
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK:	
Inspection after shutdown over one year	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	KUMNITH PING
Address:	16635 NW YORKTOWN DR
City/State/ZIP:	Beaverton OR 97006
Phone:	971-226-4075
Fax:	
E-mail:	KUMNITH@YAHOO.COM
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	[Signature] Date: 6/12/20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR:	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

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

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



### Electrical Permit Application

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

### OFFICE USE ONLY

Date Received: 6/15/20  
 Permit No.: B 2020-2036  
 Date Issued: 6/15/20  
 Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 710290	Job address: 6055 SW Hall Blvd.
City/State/ZIP: Beaverton / OR / 97008	
Suite/bldg./apt. no.:	Project name: Public Safety Ctr.
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
2 new branch circuits, 1 alteration to existing st. lighting circuit, 1 circuit extension for plaza light poles.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: City of Beaverton	Address: 12725 Millikan Way
City/State/ZIP: Beaverton / OR / 97076	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Mill Plain Electric, Inc.	
Contact name: Taylor Asch	
Address: 6000 ne 88th Street, #B-105	
City/State/ZIP: Vancouver/WA 98665	
Phone: (360) 574-7265	Fax: (360) 574-0956
E-mail: taylora@mp-electric.com	
CONTRACTOR	
Business name: Mill Plain Electric, Inc.	
Address: 6000 ne 88th Street, #B-105	
City/State/ZIP: Vancouver/WA 98665	
Phone: (360) 574-7265	Fax: (360) 574-0956
E-mail: lorih@mp-electric.com	CCB lic. no.: 63021
Electrical lic. no.: 37-100C / 5997S	City or municipality:
Supervising electrician signature, required:	
Print name: Scott Kangas	Date: 6/12/20
Authorized signature:	
Print name: Taylor Asch	Date: 6/12/20

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit includes attached garage</b>				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
<b>Branch circuits -- new, alteration, or extension, per panel</b>				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	3	4.26	12.78	
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			93.92	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			11.27	
TOTAL PERMIT FEE			105.19	

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 4/20/2020	Permit No.: B2018-3151
Date Issued: 6/15/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17101 SW Albatross Ln
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: SCMH
Cross street/directions to job site:	
Subdivision: South Cooper MTN HTS	Lot no.: 14
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: 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@everethomesnw.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgamer@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3056	City or metro lic.: 4110
Supervising electrician signature, required: [Signature]	
Print name: Chuck Garner	Date: 4/17/20
Authorized signature: [Signature]	

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

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



# Electrical Permit Application

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

## OFFICE USE ONLY

Date Received: 4/20/2020	Permit No.: B2018-3174
Date issued: 10/15/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 17015 SW Albatross Ln
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: SCMH
Cross street/directions to job site:	
Subdivision: South Cooper MTN HTS	Lot no.: 15
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes INC	
Address: 3330 NW Yeon Ave, Suite 100	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethomesnw.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Jennifer Reilly	
Address: 3330 NW Yeon Ave	
City/State/ZIP: Portland, OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: jreilly@everethomesnw.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave	
City/State/ZIP: Hillsboro OR 97123	
Phone: 503-648-4552	Fax:
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4110
Supervising electrician signature, required: [Signature]	
Print name: Chuck Garner	Date: 4/17/20
Authorized signature: [Signature]	
Print name: Melissa Stook	Date: 4/17/20

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

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



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

B2020-2025

## Residential Electrical Authorization To Begin Work

05350-BEL-20-00409

Approval Code: 013213 6/11/2020 9:34 pm

E-mailed To: jrdeltaelectric@outlook.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17985 NW BRICKSTONE LN	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Bacon	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131BC05900	
DESCRIPTION OF WORK	
Main Breaker Change	
APPLICANT	
Name: Micheal Bacon	
Phone: 9255575617	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1428	CCB lic. no.: 223844
Business Name: JESS DANE ROBERTS	
Contact:	
Address: PO BOX 822457	
City/State/ZIP: VANCOUVER, WA 98682	
Phone: 3609218535	Fax:
Email: JRDELTAELECTRIC@OUTLOOK.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00408**

Approval Code: 04675J 6/11/2020 6:08 pm

E-mailed To: leonardelectricinc@gmail.com

32020-2024

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 18115 NW DUSTIN LN	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB04600	
DESCRIPTION OF WORK	
Added hot tub circuit, A/C and 3 GFCI	
APPLICANT	
Name: Keith Leonard	
Phone: 9715708103	Fax: 5039812343
Email:	
CONTRACTOR	
Elec lic. no.: C1348	CCB lic. no.: 218984
Business Name: LEONARD ELECTRIC INC	
Contact:	
Address: PO BOX 411	
City/State/ZIP: HUBBARD, OR 97032	
Phone: 9715708103	Fax: 5039812343
Email: leonardelectricinc@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 6-12-20	Permit No.: B2020-2019
Date Issued: 6-12-20	By: NL
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12760 SW SCOOT DR
City/State/ZIP: Beaverton, OR 97005	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Remodel Laundry & Bath	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	Address:
City/State/ZIP:	Phone:
E-mail:	Fax:
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Our House Contracting	Contact name: Steve Purves
Address: 11125 SW 106th Ave	City/State/ZIP: Tigard, OR 97223
Phone: 503-380-0008	E-mail: steve@ourhousecontracting.com
CONTRACTOR	
Business name: Affordable Electrical Inc	Address: 1820 NE Elliot Pl
City/State/ZIP: Gresham, OR 97030	Phone: 971-235-5900
E-mail: sparky69@yahoo.com	Fax:
Electrical lic. no.: C-432	CCB lic. no.: 183497
Supervising electrician signature, required: Carl Monicelli	City or metro lic.:
Print name: Carl Monicelli	Date: 6/10/2020
Authorized signature:	Date:
Print name:	Date:

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00407**

Approval Code: 831095 6/11/2020 10:47 am

E-mailed To: PERMITS@christenson.com

B2020-2008

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5505 SW WESTERN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: IP RECYCLING CONVEYOR	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CC00100	
DESCRIPTION OF WORK	
28122 WIRE TWO CONVEYOR MOTORS.	
APPLICANT	
Name: Christenson Electric	
Phone: 5034193300	Fax: 5034193333
Email:	
CONTRACTOR	
Elec lic. no.: 26-34C	CCB lic. no.: 458
Business Name: CHRISTENSON ELECTRIC INC	
Contact:	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR 97230	
Phone: 5034193300	Fax: 5034193333
Email: marjo.beckman@christenson.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

B2020-2009

## Residential Electrical Authorization To Begin Work

**05350-BEL-20-00405**

Approval Code: 650732 6/11/2020 9:35 am

E-mailed To: hello@youngelectricco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8775 SW SORRENTO RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Lania Flnk	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128AD05900	
DESCRIPTION OF WORK	
Install up to a 60 amp grounded copper wire circuit from the main electrical panel for hot tub.	
Run the circuit through the crawl space or along the side of the house to the back to	
APPLICANT	
Name: Young Electric Office	
Phone: 9718885081	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C353	CCB lic. no.: 178887
Business Name: YOUNG ELECTRIC LLC	
Contact:	
Address: 9999 SW WILSHIRE ST STE 221	
City/State/ZIP: PORTLAND, OR 97225	
Phone: 9718885081	Fax: 5036460960
Email: office@youngelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections Included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00406**

Approval Code: UW1EBD 6/11/2020 10:05 am

E-mailed To: katieh@psintegrated.com

*B2020-2011*

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16165 SW REGATTA LN	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 700	
Project Name: Bombay Pizza	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BA02000	
DESCRIPTION OF WORK	
Cleaning up wiring - remounting smoke detector	
APPLICANT	
Name: Katie Harbaugh	
Phone: 5036412222	Fax: 5036411464
Email:	
CONTRACTOR	
Elec lic. no.: CLE569	CCB lic. no.: 227526
Business Name: PERFORMANCE SYSTEMS INTEGRATION LLC	
Contact:	
Address: 7324 SW DURHAM RD	
City/State/ZIP: PORTLAND, OR 97224	
Phone: 5036412222	Fax: 5036411464
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



### Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No: <b>52020-1999</b>
Date Issued: <b>6/10/2020</b>	By: <i>[Signature]</i>
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: <b>2020 Master Electrical Permit</b>	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <b>within city limits/boundaries</b>
City/State/ZIP: <b>City of Beaverton, Beaverton, Oregon 97076</b>	
Suite/bldg./apt. no.:	Project name: <b>Master Electrical Permit</b>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<b>2020 Year Master Electrical Permit Program</b>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <b>City of Beaverton</b>	
Address: <b>PO Box 4755</b>	
City/State/ZIP: <b>Beaverton, Oregon 97076</b>	
Phone: <b>(503) 526-2493</b>	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <b>City of Beaverton-Public Works- Traffic/Streetlight Dept</b>	
Address: <b>9600 SW Allen Blvd</b>	
City/State/ZIP: <b>Beaverton Oregon 97076</b>	
Phone: <b>(503) 526-2222</b>	Fax:
E-mail: <b>citymail@beavertonoregon.gov</b>	CCB lic. no.:
Electrical lic. no.: <b>4676S</b>	City or metro lic.:
Supervising electrician signature, required: <i>David Slater</i>	
Print name: <b>David Slater</b>	Date: <b>6-9-2020</b>
Authorized signature:	
Print name:	Date:

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

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete  
 \* Number of inspections allowed per permit.  
 Form 879-1002 REV 10/17



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00402**

Approval Code: 309084 6/9/2020 6:28 pm

E-mailed To: RIVERCITYELECTRICINC@GMAIL.COM

B 2020-1988

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5552 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CC90006	
DESCRIPTION OF WORK	
Change Panel	
APPLICANT	
Name: Roman Mikhalets	
Phone: 5035083828	Fax: 5035083828
Email:	
CONTRACTOR	
Elec lic. no.: C1071	CCB lic. no.: 203604
Business Name: RIVER CITY ELECTRIC INC	
Contact:	
Address: 4733 N ADAMS ST	
City/State/ZIP: CAMAS, WA 98607	
Phone: 3609106296	Fax: 5035083828
Email: RIVERCITYELECTRICINC@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00404**

Approval Code: 05236G 6/10/2020 2:01 pm

E-mailed To: office@ericolsonelectricinc.com

B2020-1998

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5475 SW CHESTNUT AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA07200	
DESCRIPTION OF WORK	
Ac reconnect	
APPLICANT	
Name: Corie Swenson	
Phone: 3602581849	Fax: 3602581859
Email:	
CONTRACTOR	
Elec lic. no.: 37-1053C	CCB lic. no.: 179408
Business Name: ERIC OLSON ELECTRIC INC	
Contact:	
Address: 10013 NE HAZEL DELL AVE PMB#432	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 3602581849	Fax: 3602581859
Email: office@ericolsonelectricinc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



# Electrical Permit Application

Community Development  
 PO Box 4765, Beaverton, OR 97076  
 Phone: (503) 526-2403; Fax: (503) 526-2650  
 Internet address: www.BeavertonOregon.gov

RECEIVED

OFFICE USE ONLY	
Date Received: 2/16/2019	Permit No. B2019-5169
Date Issued: 6-10-20	By: Full
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master buldler
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15915 SW Thrush Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 103
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ave STE 200	
City/State/ZIP: Portland Oregon 97239	
Phone: 5037212393	Fax:
E-mail: kbthurston@drhorton.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SAME AS ABOVE	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3080	City or metro lic.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Charles Garner	Date:
Authorized signature: <i>[Signature]</i>	
Print name: Melissa Stock	Date:

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 6/16/2019	Permit No.: B2019-5172
Date Issued: 6-10-20	By: KUK
CITY OF BEAVERTON	
Payment Type: Check	

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

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

JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15903 SW Thrush Lane

City/State/ZIP:	Project name:
Suite/bldg./apt. no.:	Cross street/directions to job site:
Subdivision: Westmont	Lot no.: 104
Tax map/parcel no.:	

DESCRIPTION OF WORK	
NSFR	

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton	
Address: 4380 SW Macadam Ave STE 200	
City/State/ZIP: Portland Oregon 97239	
Phone: 5037212393	Fax:
E-mail: kbthurston@drhorton.com	

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

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

CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410

Supervising electrician signature, required:	Date:
Print name: Charles Garner	Date:
Authorized signature:	Date:
Print name: Melissa Stock	Date:

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

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

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.  
 \* Number of inspections allowed per permit.  
 Form B70-1002 REV 7/14



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00401**

Approval Code: 819004 6/9/2020 4:40 pm

E-mailed To: keith@boonesferryelectric.com

B2020-1991

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7575 SW WILSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 29764	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CA04400	
DESCRIPTION OF WORK	
29764 kitchen and bath remodel	
APPLICANT	
Name: Keith Fleschner	
Phone: 5036824936	Fax: 5036827946
Email:	
CONTRACTOR	
Elec lic. no.: 3-223C	CCB lic. no.: 88482
Business Name: BOONES FERRY ELECTRIC INC	
Contact:	
Address: PO BOX 628	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5036824936	Fax: 5036827946
Email: angle@boonesferryelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	9	\$4.26	\$38.34
<b>Electrical Permit Fees</b>			
Subtotal			\$119.48
State surcharge (12% of permit total)			\$14.34
<b>TOTAL PERMIT FEE</b>			<b>\$133.82</b>

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00400**

Approval Code: 012836 6/9/2020 3:55 pm

E-mailed To: adamc@ticeelectric.com

B2020-1990

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14825 SW FARMINGTON RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Water Heater	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S117AD00500	
DESCRIPTION OF WORK	
Reconnect new 200a water heater that customer changed out.	
APPLICANT	
Name: Jeff Emra	
Phone: 5033417350	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-126C	CCB lic. no.: 166
Business Name: TICE ELECTRIC COMPANY	
Contact:	
Address: 5405 N LAGOON AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5038728256	Fax: 9712303330
Email: sarac@ticeelec.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



**Electrical Permit Application**

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

OFFICE USE ONLY	
Date Received: <u>6-9-20</u>	Permit No.: <u>B2020-1992</u>
Date Issued: <u>6-10-20</u>	By: <u>HL</u>
Payment Type: <u>VISA</u>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.: 9382	Job address: Along Cedar Falls Drive and 117th Loop
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Kirkland Place Street Lighting
Cross street/directions to job site: Cedar Hills Drive and 117th Loop	
Subdivision:	Lot no.:
Tax map/parcel no.: R2200089 & R2200090	
DESCRIPTION OF WORK	
Install five new street light poles, conduit, and wiring. Extend existing circuit.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Team Electric	
Contact name: Scott Croteau	
Address: 9400 SE Clackamas Road	
City/State/ZIP: Clackamas, OR 97015	
Phone: (503) 557-7180	Fax:
E-mail: Scottc@teamelectricco.com	
CONTRACTOR	
Business name: Team Electric	
Address: 9400 SE Clackamas Road	
City/State/ZIP: Clackamas, OR 97015	
Phone: (503) 557-7180	Fax:
E-mail: Scottc@teamelectricco.com	CCB lic. no.: 173043
Electrical lic. no.: 4416S	City or metro lic.: 3-225C
Supervising electrician signature, required: <u>Michael Trushelm</u>	
Print name: Mike Trushelm	Date: 6/9/20
Authorized signature: <u>Michael Trushelm</u>	
Print name: Mike Trushelm	Date: 6/9/20

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 160 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
PER SCHEDULE				
Description	Qty.	Fee	Total	*
Residential: single- or multi-family dwelling unit includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders: installation, alteration, and/or relocation				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volta		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders: installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			81.14	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			9.74	
<b>TOTAL PERMIT FEE</b>			<b>90.88</b>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.  
 \* Number of inspections allowed per permit. REV 10/17  
 Form U70-1802



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00403**

Approval Code: 097108 6/10/2020 12:42 pm

E-mailed To: permits@stonergroup.com

32020-1996

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2755 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: ONPOINT CREDIT UNION	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109AD01503	
DESCRIPTION OF WORK	
WIRE FOR DRINKING FOUNTAIN	
APPLICANT	
Name: Sarabeth Dodd	
Phone: 5034626500	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2018-5820
Date Issued: 6-9-20	By: MW
	Payment Type: Check

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15905 SW Wren Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: Westmont
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 47
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR Contractor Change	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Same as below	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: DR Horton	
Contact name: Emerald Weeks	
Address: 3141 Horton Cir	
City/State/ZIP: Portland	
Phone: Oregon	Fax:
E-mail: esweeks@drhorton.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB llo. no.: 121159
Electrical llo. no.: 34-3050	City or metro llo.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Charles Garner	Date:

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

This permit application expires if permit is not received 180 days after it has been issued.



# Electrical Permit Application

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

## OFFICE USE ONLY

Date Received:	Permit No: <b>5209-01655</b>
Date Issued: <b>6-9-20</b>	By: <i>[Signature]</i>
	Payment Type: <b>Check</b>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <b>15905 SW Thrush Lane</b>
City/State/ZIP:	
Suite/bldg./apl. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: <b>72</b>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <b>Garner Electric</b>	
Address: <b>2920 SE Brookwood Ave. Ste#A</b>	
City/State/ZIP: <b>Hillsboro, OR 97123</b>	
Phone: <b>(503) 648-4552</b>	Fax: <b>(503) 642-7925</b>
E-mail: <b>melgarner@garnerelectric.coi</b>	CCB lic. no.: <b>121159</b>
Electrical lic. no.: <b>34-3050</b>	City or metro lic.: <b>4410</b>
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: <b>Charles Garner</b>	Date:
Authorized signature: <i>[Signature]</i>	
Print name: <b>Melissa Stock</b>	Date:

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

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



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

**Residential Electrical Authorization To Begin Work**

B2020-1983

05350-BEL-20-00399

Approval Code: 02782G 6/9/2020 9:57 am

E-mailed To: permits@ThreePhaseElectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6430 SW SPRUCE AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Serty	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123AB02223	
DESCRIPTION OF WORK	
(2) circuits for lighting and power to new den/powder room addition.	
APPLICANT	
Name: Gail Evans	
Phone: 5039088058	Fax: 5037621823
Email:	
CONTRACTOR	
Elec lic. no.: 3-332C	CCB lic. no.: 162368
Business Name: LANTIL LLC	
Contact:	
Address: 11490 SE JENNIFER ST	
City/State/ZIP: CLACKAMAS, OR 970159009	
Phone: 5037608522	Fax: 5037621823
Email: RLANE@WRIGHT1ELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00398**

Approval Code: 032026 6/8/2020 8:07 pm

E-mailed To: acelectricalcontractorllc@yahoo.com

B2020-1980

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 65 SW 171ST AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S106AB13500
DESCRIPTION OF WORK	
add one circuit for a/c unit	
APPLICANT	
Name: Roberto Gandarilla	
Phone: 503-910-3514	Fax: 503-845-2625
Email:	
CONTRACTOR	
Elec lic. no.: C301	CCB lic. no.: 176589
Business Name: AC ELECTRICAL CONTRACTOR LLC	
Contact:	
Address: PO BOX 427	
City/State/ZIP: TUALATIN, OR 97062	
Phone: 5039104738	Fax: 5038459633
Email: acelectricalcontractorllc@yahoo.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00396**

Approval Code: 04757G 6/8/2020 8:33 am

E-mailed To: office@ericolsonelectricinc.com

B2020-1978

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9450 SW 146TH TER	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Murrayhill Woods Conds office	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129D001200	
DESCRIPTION OF WORK	
ductless mini split	
APPLICANT	
Name: corie swenson	
Phone: 3602581849	Fax: 3602581859
Email:	
CONTRACTOR	
Elec lic. no.: 37-1053C	CCB lic. no.: 179408
Business Name: ERIC OLSON ELECTRIC INC	
Contact:	
Address: 10013 NE HAZEL DELL AVE PMB#432	
City/State/ZIP: VANCOUVER, WA 98685	
Phone: 3602581849	Fax: 3602581859
Email: office@ericolsonelectricinc.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 5-8-20	Permit No.: 32020-1597
Date Issued: 6-8-20	By: <i>MC</i>
	Payment Type: <i>MC</i>

**TYPE OF WORK**

New construction  
 Addition/alteration/replacement  
 Other:

**CATEGORY OF CONSTRUCTION**

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

**JOB SITE INFORMATION AND LOCATION**

Job no.:  
 Job address: 6930 SW 158th Ave

City/State/ZIP: Beaverton, OR, 97007

Units/bldg./apt. no.:  
 Project name: HENDRYX RESIDENCE TI

Cross street/directions to job site: SW BURNWOOD WAY

Subdivision: Burnwood Lot no.:

Tax map/parcel no.:

**DESCRIPTION OF WORK**

Add 1 circuit for exterior lighting with underground buried conduit.

PROPERTY OWNER  
 TENANT

Name: James and Sheila Hendryx  
 Address: 6930 SW 158th Ave  
 City/State/ZIP: Beaverton, OR, 97007  
 Phone: 971 570 5563 Fax:  
 Email: chris.hendryx63@gmail.com

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

Owner signature: *[Signature]* Date: 5/1/2020

APPLICANT  
 CONTACT PERSON

Business name:  
 Contact name:  
 Address:  
 City/State/ZIP:  
 Phone:  
 Fax:

**CONTRACTOR**

Business name:  
 Address:  
 City/State/ZIP:  
 Phone:  
 Fax:  
 License:  
 CCB lic. no.:  
 Electrical lic. no.:  
 City or metro lic.:

Authorizing signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLAN REVIEW**

Please check all that apply:

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

**FEE SCHEDULE**

Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit includes attached garage</b>				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit		4.26		
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
<b>SUBTOTAL</b>				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				9.00
<b>TOTAL PERMIT FEE</b>				<b>\$90.88</b>

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



**City Of Beaverton**  
 12725 SW Millikan Way  
 Beaverton, OR 97076  
 Phone: 503-626-2542  
 Email: cunderwood@beavertonoregon.gov

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00395**

Approval Code: 03283P 6/5/2020 11:04 am

E-mailed To: info@rkelectric.biz

B2020-1957

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6065 SW GLENBROOK RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: #11303 Weiner	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S117DC01500	
DESCRIPTION OF WORK	
New Panel & Lighting Upgrades	
APPLICANT	
Name: Carol Owens	
Phone: 503-640-1344	Fax: 503-356-0513
Email:	
CONTRACTOR	
Elec lic. no.: 34-375C	CCB lic. no.: 94275
Business Name: RK ELECTRIC INC	
Contact:	
Address: 24495 NW OAK DR	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036401344	Fax: 5033560513
Email: rkurtz@rkelectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00394**

Approval Code: 008832 6/5/2020 10:25 am

E-mailed To: PermitRequest@wachter.com

B 2020-1956

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3435 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: C	
Project Name: T-Mobile LV	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1090000200	
DESCRIPTION OF WORK	
reuse 30 cat5e cables	
APPLICANT	
Name: Wachter Inc	
Phone: 9135412500	Fax: 9135412529
Email:	
CONTRACTOR	
Elec lic. no.: C18	CCB lic. no.: 147808
Business Name: WACHTER INC	
Contact:	
Address: 16001 W 99TH ST	
City/State/ZIP: LENEXA, KS 66219	
Phone: 9135412500	Fax: 9135412529
Email: bbotteron@wachter.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



# Renewable Electrical Energy Permit Application

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

OFFICE USE ONLY	
Date Received: <u>06/05/2020</u>	Permit No.: <u>B2020-1949</u>
Date Issued: <u>6-5-20</u>	By: <u>MC</u>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <u>MC</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>15127 SW Ivy Glenn Ct.</u>
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Suite/bldg./apt. no.:	Project name: <u>KERNS</u>
Cross street/directions to job site: <u>NE of SW 152nd Ave and SW Ivy Glenn Ct.</u>	
Subdivision:	Lot no.:
Tax map/parcel no.: <u>1S120AB06600</u>	
DESCRIPTION OF WORK	
Rooftop expansion (3.75 DC kW) of existing photovoltaic system (8.03 DC kW) that includes battery back up.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Kathleen Kerns</u>	
Address: <u>15127 SW Ivy Glenn Ct</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Phone: <u>(415) 806-3579</u>	Fax:
E-mail: <u>kathleenkerns@gmail.com</u>	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: _____
CONTRACTOR	
Business name: <u>A &amp; R SOLAR SPC</u>	
Address: <u>6800 NE 59th PI</u>	
City/State/ZIP: <u>Portland, OR 97218</u>	
Phone: <u>(802) 857-8932</u>	Fax:
E-mail: <u>permits@a-rsolar.com</u>	CCB lic. no.: <u>207641</u>
Electrical lic. no.: <u>C1179</u>	City or metro lic.:
Supervising electrician signature, required: <u>[Signature]</u>	
Print name: <u>Robert Nieman</u>	Date: <u>6/4/2020</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>Lara Worcester</u>	Date: <u>6/4/2020</u>

FEE SCHEDULE			
Number of inspections per item ( ) Renewable energy installation per system total	No. of Items	Cost Each	Total
5 kva or less (2)	1	81.14	81.14
5.01 to 15 kva (2)		115.83	
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (OAR 918-309-0070)		81.14	
FEE TOTALS			Recalculate
Subtotal			0.00
<input type="checkbox"/> << Check box if plan review is required <input checked="" type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			<b>\$90.88</b>

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

**CITY OF BEAVERTON  
 AFFIDAVIT**  
 PERMIT #: B2020-1941  
 ISSUED BY: CL  
 DATE: 6/5/2020



### Electrical Permit Application

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

### OFFICE USE ONLY

Date Received: 6-5-20	Permit No.: B2020-1954
Date Issued: 6-5-20	By: <i>JH</i>
	Payment Type: <i>MC</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1280 NW 175th PL
City/State/ZIP: Beaverton, OR, 97006	
Suite/oldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Apollo Ridge	Lot no.: 32
Tax map/parcel no.: 1N131AC-09900	
DESCRIPTION OF WORK	
Adding three branches for: new heated floor, new plug in each bath and upgrading existing lines to baths exhaust fan.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Antonio Masello	
Address: 1280 NW 175th PL	
City/State/ZIP: Beaverton, OR, 97006	
Phone: (503) 209-2319	Fax:
E-mail: amasello@mail.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>Antonio Masello</i>	Date: 05/27/20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	
<input type="checkbox"/> Hazardous locations		<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit Includes attached garage</b>				
1,000 sq. ft. or less		194.64	194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	69.54	
Limited energy, residential (with above sq. ft.)	0	46.42		2
Limited energy, multi-family residential (with above sq. ft.)	0	91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less	0	115.83		2
201 amps to 400 amps	0	137.89		2
401 amps to 600 amps	0	229.34		2
601 amps to 1,000 amps	0	299.93		2
Over 1,000 amps or volts	0	690.22		2
Utility reconnect	0	91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less	0	91.72		2
201 amps to 400 amps	0	127.41		2
401 amps to 600 amps	0	184.11		2
601 amps to 1,000 amps	0	225.29		2
<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	0	4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	2	4.26	8.52	
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder	0	91.72		2
Pump or irrigation circle	0	91.72		2
Sign or outline lighting	0	91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	0	91.72		2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
<b>Electrical permit fees</b>				
<b>SUBTOTAL</b>				
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				42.46
<b>TOTAL PERMIT FEE</b>				<b>\$100.42</b>

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



### Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 06/04/2020	Permit No.: B2020-1914
Date Issued: 6-5-20	By: <i>W</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>VISC</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14550 SW AGATE CT
City/State/ZIP: BEAVERTON/OR/97007	
Suite/bldg./apt. no.:	Project name: ATTIC
Cross street/directions to job site: MURRAY and SEXTON MT	
Subdivision: SEXTON MOUNTAIN	Lot no.: 25
Tax map/parcel no.: R2000911 / 1S129AA-02500	
DESCRIPTION OF WORK	
Add two Quad Outlets to an existing Circuit. Add Two Lights and One Switch to existing Circuit	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Christopher Ross	
Address: 14550 SW AGATE CT	
City/State/ZIP: BEAVERTON/OR/97007	
Phone: (503) 998-4060	Fax:
E-mail: chris.rossx@gmail.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>[Signature]</i>	Date: 06/04/20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
<b>Residential single- or multi-family dwelling unit includes attached garage</b>			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
<b>Services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
<b>Branch circuits - new, alteration, or extension, per panel</b>			
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit		1	81.14
Each add'l branch circuit	1	4.26	4.26
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees			
<b>SUBTOTAL</b>		<b>85.40</b>	
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)		10.25	
<b>TOTAL PERMIT FEE</b>		<b>\$95.65</b>	

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



**Electrical Permit Application**  
 12725 SW Makamula Dr, Box 4751  
 Beaverton, OR 97006  
 Phone (503) 526-0111 Fax (503) 526-2553  
 General Information: 1021 12th Street  
 Beaverton, OR 97005

**OFFICE USE ONLY**  
 Date Received: **4/8/2020** Permit No: **B2020-1299**  
 Date issued: **4/8/2020**  
 Payment type:

**TYPE OF WORK**  
 New construction  Addition to existing structure  
 Alteration  Other

**CATEGORY OF CONSTRUCTION**  
 Single-family dwelling  Commercial/industrial  Feeder building  
 Multi-family  Mass transit  Other

**JOB SITE INFORMATION AND LOCATION**  
 Job No: \_\_\_\_\_  
 City/State/Zip: **Beaverton OR**  
 Subdivision: **SW Canyon Ln and SW 10th Terrace Subdivision**  
 Cross street at west end of job: **SW Canyon Ln and SW 10th Terrace**  
 Subdiv's or Lot No: **West Sylvan Estds 5**  
 Tax map No: \_\_\_\_\_

**DESCRIPTION OF WORK**  
**New SFR**

**PROPERTY OWNER**  **TENANT**  
 Name: **Sylvan West Estates LLC**  
 Address: **333 S State St Suite V-146**  
 City/State/Zip: **Lake Oswego OR**  
 Phone: **503-922-9055** Fax: \_\_\_\_\_  
 Email: **hilcrest\_homes@msn.com**

Owner installation: This installation is being made on property that is not intended for sale lease or exchange.  
 Owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT**  **CONTACT PERSON**  
 Business Name: **Sylvan West Estates LLC**  
 Contact Name: **Chris Boerste - Makana Homes and Consulting LLC**  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**CONTRACTOR**  
 Business Name: **Ross Electric Inc**  
 Address: **2870 SW 75th Ave Suite 203**  
 City/State/Zip: **Hillsboro OR**  
 Phone: **503-642-2800** Fax: \_\_\_\_\_  
 Email: **rosselectric@comcast.net** City/State/Zip: **97123**  
 Electrical No: **34-4360** City/State/Zip: **7867**  
 Supervisor's signature: **Stephen Ross** License No: **42325** Issue Date: **1/16/2019**  
 Permit No: \_\_\_\_\_  
 Applicant's signature: **Chris Boerste** Date: **4-8-2020**

**PLAN REVIEW**

Circle check all that apply

<input type="checkbox"/> Service over 400amps	<input type="checkbox"/> Service or feeder over 600 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Vitrins and bollards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Single phase residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Multi-phase facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Recreational facilities	<input type="checkbox"/> A, E, F, V3 occupancy
<input type="checkbox"/> Recreational facilities	<input type="checkbox"/> Recreational vehicle parks

**FEE SCHEDULE**

Description	Qty	Fee	Total
<b>Residential single- or multi-family dwelling unit (includes attached garage)</b>			
1,000 sq ft or less	1	194.64	194.64
Over 1,000 sq ft or portion thereof	5	34.77	173.85
Over 1,000 sq ft or portion thereof with 100 or more receptacles	1	46.42	46.42
Over 1,000 sq ft or portion thereof with 100 or more receptacles and multi-family residential with above sq ft		91.72	91.72
<b>Services or feeders installation, alteration, and/or relocation</b>			
700 amps or less		115.83	115.83
200 amps to 400 amps		137.89	137.89
400 amps to 600 amps		229.34	229.34
600 amps to 1,000 amps		299.93	299.93
Over 1,000 amps or more		590.22	590.22
Per receptacle		91.72	91.72
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		91.72	91.72
200 amps to 400 amps		127.41	127.41
400 amps to 600 amps		184.11	184.11
600 amps to 1,000 amps		225.29	225.29
<b>Branch circuits - new, alteration, or extension, per panel</b>			
Each branch circuit with above service or feeder fee		4.26	4.26
Each branch circuit with above service or feeder fee		81.14	81.14
Each additional branch circuit		4.26	4.26
<b>Miscellaneous (service or feeder not included)</b>			
Each receptacle or conductor		91.72	91.72
Each receptacle or conductor		91.72	91.72
Each receptacle or conductor		91.72	91.72
Each receptacle or conductor		91.72	91.72
Each receptacle or conductor		91.72	91.72
<b>Each additional inspection over allowable in any of the above</b>			
Each inspection		81.14	81.14
<b>Subtotal</b>			
			0.00
<b>Fee at large (25% of permit fee)</b>			
			0.00
<b>Share of charge (12% of permit fee)</b>			
			0.00
<b>TOTAL PERMIT FEE</b>			
			\$0.00

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: <u>6-4-20</u>	Permit No.: <u>B2020-1919</u>
Date Issued: <u>6-5-20</u>	By: <u>JUL</u>
	Payment Type: <u>Visa</u>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>15917 SW Wren Ln.</u>
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: <u>Westmont DRH</u>	Lot no.: <u>48</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Temporary Power Pole for New Construction.</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Garner Electric</u>	
Contact name: <u>Andrea Phillips</u>	
Address: <u>2890 SE Brookwood Ave.</u>	
City/State/ZIP: <u>Hillsboro, OR 97123</u>	
Phone: <u>(503) 648-4552</u>	Fax: <u>(503) 642-7925</u>
E-mail: <u>permits@garnerelectric.com</u>	
CONTRACTOR	
Business name: <u>Garner Electric</u>	
Address: <u>2890 SE Brookwood Ave.</u>	
City/State/ZIP: <u>Hillsboro, OR 97123</u>	
Phone: <u>(503) 648-4552</u>	Fax: <u>(503) 642-7925</u>
E-mail: <u>permits@garnerelectric.com</u>	CCB lic. no.: <u>121159</u>
Electrical lic. no.: <u>34-305C</u>	City or metro lic.: <u>4410</u>
Supervising electrician signature, required:	
Print name: <u>Charles Garner</u>	Date: <u>06/04/20</u>
Authorized signature:	
Print name: <u>Brittany Burian</u>	
Date: <u>06/04/20</u>	

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

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



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

OFFICE USE ONLY	
Date Received: 6-3-20	Permit No.: B2020-1873
Date Issued: 6/5/2020	BY: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.: 5,4850	Job address: 11100 SW Park Way
City/State/ZIP: Portland, OR 97225	
Suite/bldg./apt. no.:	Project name: Cedar Park Sump
Cross street/directions to job site: SW Berkshire & Cedar Creek Blvd	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Power to (3) new sump pumps. Fire Tamper to (1) vault that feeds building fire sprinkler water	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Beaverton School District	
Address: 2180 SW 170th Ave	
City/State/ZIP: Beaverton, OR 97003	
Phone: (503) 793-0278	Fax: (503) 356-4491
E-mail: sandy_galati@beaverton.k12.or.us	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Tice Electric	
Contact name: Kevin Shannon	
Address: 5405 N Lagon Ave	
City/State/ZIP: Portland, OR 97217	
Phone: (503) 341-7317	Fax:
E-mail: kevins@ticeelectric.com	
CONTRACTOR	
Business name: Tice Electric	
Address: 5405 N Lagoon Ave	
City/State/ZIP: Portland, Oregon 97217	
Phone: (503) 233-8801	Fax:
E-mail: permits@ticeelectric.com	CCB lic. no.: 166
Electrical lic. no.: 26-126	City or metro lic.: 2014
Supervising electrician signature, required:	
Print name: Bob Richardson	Date: 05/28/20
Authorized signature: <i>Bob Richardson</i> 39405	

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input checked="" type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit</b>				
<b>Includes attached garage</b>				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit	0	4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	1	4.26	4.26	
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:	1	91.72	91.72	2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
<b>SUBTOTAL</b>			177.12	
Plan review (25% of permit fee)			44.28	
State surcharge (12% of permit fee)			21.25	
<b>TOTAL PERMIT FEE</b>			<b>\$242.65</b>	

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00393**

Approval Code: 099784 6/4/2020 2:09 pm

E-mailed To: advantageelectricpdx@gmail.com

B2020-1948

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8645 SW MONTICELLO CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Hot Tub Circuit	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128AC02400	
DESCRIPTION OF WORK	
Hot Tub Circuit	
APPLICANT	
Name: Advantage Electric	
Phone: 5032355854	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1020	CCB lic. no.: 201635
Business Name: ADVANTAGE GROUP INC	
Contact:	
Address: 921 SE 47TH AVE	
City/State/ZIP: PORTLAND, OR 97215	
Phone: 5032355854	Fax:
Email: ADVANTAGE@BROUGHTON.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00391**

Approval Code: 07911G 6/4/2020 10:39 am

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

B 2020-1920

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4050 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: ERAC New Car Wash Equipment	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BB03000	
DESCRIPTION OF WORK	
Enterprise rent a car new car wash equipment wiring to controllers, pumps and sensors.	
APPLICANT	
Name: Adam Fox	
Phone: 5036455323	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 34-618C	CCB lic. no.: 153480
Business Name: MILESTONE INVESTMENT CO LLC	
Contact:	
Address: 1960 NE 25TH AVE STE 33	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5036455323	Fax: 5036904843
Email: adam.fox@melectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	6	\$4.26	\$25.56
<b>Electrical Permit Fees</b>			
Subtotal			\$106.70
State surcharge (12% of permit total)			\$12.80
<b>TOTAL PERMIT FEE</b>			<b>\$119.50</b>

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00389**

Approval Code: 050533 6/4/2020 10:02 am

E-mailed To: anitap@gbmanchester.com

B2020-1918

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16550 SW MERLO RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: ACMA	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S107AA00600	
DESCRIPTION OF WORK	
LIMITED ENERGY FOR STRUCTURED CABLING, DAS SYSTEM AND INTERCOM/PAGING.	
APPLICANT	
Name: ANITA PASO	
Phone: 360-816-0484	Fax: 360-573-9866
Email:	
CONTRACTOR	
Elec lic. no.: CLE368	CCB lic. no.: 202097
Business Name: GB MANCHESTER INC	
Contact:	
Address: A CORPORATION OF WASHINGTON	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 3608160484	Fax: 36081604
Email: BILL.H@GBMANCHESTER.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Miscellaneous</b>			
Signal circuit(s) or limited-energy panel, alteration, or extension	3	\$91.72	\$275.16
<b>Electrical Permit Fees</b>			
Subtotal			\$275.16
State surcharge (12% of permit total)			\$33.02
<b>TOTAL PERMIT FEE</b>			<b>\$308.18</b>

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00390**

Approval Code: 090158 6/4/2020 10:09 am

E-mailed To: DENNISW@STONERGROUP.COM

B2020-1917

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17885 NW EVERGREEN PKWY	
City/State/ZIP: BEAVERTON, OR 97229	
Suite/bldg./apt.no.:	
Project Name: PERMANENTE GT3 CLINIC	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N130CD00600	
DESCRIPTION OF WORK	
LV FOR TELECOM & ACCESS/SECURITY	
APPLICANT	
Name: DENNIS WHITCOMB	
Phone: 5034625214	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Limited Energy</b>			
Stand-alone limited energy, commercial	2	\$91.72	\$183.44
<b>Electrical Permit Fees</b>			
Subtotal			\$183.44
State surcharge (12% of permit total)			\$22.01
<b>TOTAL PERMIT FEE</b>			<b>\$205.45</b>

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00388**

Approval Code: 005595 6/4/2020 9:28 am

E-mailed To: DENNISW@STONERGROUP.COM

B2020-1916

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13840 NW CORNELL RD	
City/State/ZIP: BEAVERTON, OR 97229	
Suite/bldg./apt.no.:	
Project Name: SUNSET HIGH SCHOOL STADIUM	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N133BC01300	
DESCRIPTION OF WORK	
WIRE FOR STADIUM SITE IMPROVEMENTS	
APPLICANT	
Name: SAM NEWHALL	
Phone: 9712198157	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	5	\$4.26	\$21.30
<b>Electrical Permit Fees</b>			
Subtotal			\$102.44
State surcharge (12% of permit total)			\$12.29
<b>TOTAL PERMIT FEE</b>			<b>\$114.73</b>

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

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

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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00392**

Approval Code: 514052 6/4/2020 1:25 pm

E-mailed To: sarah@haskinelectric.com

**PLAN REVIEW**

Please check all that apply:

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

**FEE SCHEDULE**

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

**TYPE OF WORK**

- New Construction  Addition/alteration/replacement

**CATEGORY OF CONSTRUCTION**

- 1 or 2 family dwelling  Multi-family  Commercial  Accessory

**JOB SITE INFORMATION AND LOCATION**

Job Address: 7265 SW 158TH PL

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name: Paul Renslow

Cross Street/directions to job site: SW Hart Rd

Tax map/parcel no.: 1S120CA03100

**DESCRIPTION OF WORK**

Add a plug in the crawl space.

**APPLICANT**

Name: SARAH SHAFFER

Phone: 3607350898

Fax: 3607350898

Email:

**CONTRACTOR**

Elec lic. no.: 37-400C

CCB lic. no.: 64312

Business Name: HASKIN ELECTRIC INC

Contact:

Address: 6307-B NE ST JOHNS RD

City/State/ZIP: VANCOUVER, WA 98661

Phone: 3607350898

Fax: 3607351196

Email: sarah@haskinelectric.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

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

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

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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00387**

Approval Code: 040307 6/3/2020 8:49 am

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

B 2020-1898

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5825 SW LOMBARD AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 709003-207 Bell Residence	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CC12300	
DESCRIPTION OF WORK	
Replace service for PGE customer	
APPLICANT	
Name: Laurel Semprevivo	
Phone: 5035352604	Fax: 5032341001
Email:	
CONTRACTOR	
Elec lic. no.: 26-95C	CCB lic. no.: 203
Business Name: OEG INC	
Contact:	
Address: 1709 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: 5032349900	Fax: 5032341001
Email: webaccounting@oregon-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: <b>B2018-4974</b>
Date Issued: <i>6/14/2020</i>	By: <i>[Signature]</i>
Payment Type:	

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

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

JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <b>16102 SW Thrush Lane</b>

City/State/ZIP:	Project name: <b>Westmont</b>
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Cross street/directions to job site:
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Subdivision: <b>Westmont</b>	Lot no.: <b>61</b>
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Tax map/parcel no.:
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DESCRIPTION OF WORK	
<b>NSFR Contractor Change</b>	

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
--	---------------------------------

Name: <b>Same as below</b>
----------------------------

Address:
----------

City/State/ZIP:
-----------------

Phone:	Fax:
--------	------

E-mail:
---------

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

Owner signature: _____	Date: _____
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<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
------------------------------------	--

Business name: <b>DR Horton</b>
---------------------------------

Contact name: <b>Emerald Weeks</b>
------------------------------------

Address: <b>3141 Horton Cir</b>
---------------------------------

City/State/ZIP: <b>Portland</b>
---------------------------------

Phone: <b>Oregon</b>	Fax:
----------------------	------

E-mail: <b>esweeks@drhorton.com</b>
-------------------------------------

CONTRACTOR	
Business name: <b>Garner Electric</b>	

Address: <b>2920 SE Brookwood Ave. Ste#A</b>
--

City/State/ZIP: <b>Hillsboro, OR 97123</b>
--

Phone: <b>(503) 648-4552</b>	Fax: <b>(503) 642-7925</b>
------------------------------	----------------------------

E-mail: <b>melgarner@garnerelectric.coi</b>	CCB lic. no.: <b>121159</b>
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Electrical lic. no.: <b>34-3050</b>	City or metro lic.: <b>4410</b>
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Supervising electrician signature, required: <i>[Signature]</i>
---

Print name: <b>Charles Garner</b>	Date:
-----------------------------------	-------

Authorized signature: <i>[Signature]</i>
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PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 160 KVA or larger separately derived system
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> 'A,' 'E,' 'I-2,' 'I-3' occupancy
	<input type="checkbox"/> Recreational vehicle parks

FEE SCHEDULE				
Description	Qty.	Fee	Total	*

<b>Residential single- or multi-family dwelling unit includes attached garage</b>				
1,000 sq. ft. or less	1	160.49		4
Ea. add'l 500 sq. ft. or portion	6	28.67	0.00	
Limited energy, residential (with above sq. ft.)	1	38.28	0.00	2
Limited energy, multi-family residential (with above sq. ft.)		75.63	0.00	2

<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		95.50		2
201 amps to 400 amps		113.69	0.00	2
401 amps to 600 amps		189.10	0.00	2
601 amps to 1,000 amps		247.31	0.00	2
Over 1,000 amps or volts		569.13	0.00	2
Utility reconnect		75.63	0.00	1

<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		75.63		2
201 amps to 400 amps		105.06	0.00	2
401 amps to 600 amps		151.81	0.00	2
601 amps to 1,000 amps		185.76	0.00	2

<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	0.00	2
Each add'l branch circuit		3.51	0.00	

<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		75.63	0.00	2
Pump or irrigation circle		75.63	0.00	2
Sign or outline lighting		75.63	0.00	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		75.63	0.00	2

<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		66.90		
Investigation fee				
Other:				
Electrical permit fees				

<b>SUBTOTAL</b>		<b>0.00</b>
Plan review (25% of permit fee)		
State surcharge (12% of permit fee)		<b>0.00</b>
<b>TOTAL PERMIT FEE</b>		<b>\$0.00</b>

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00381**

Approval Code: 002048 6/2/2020 7:13 am

E-mailed To: license@rogerselectric.com

B2020-1869

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4037 SW 117TH AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: C	
Project Name: Fresh Pet Cooler Install	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S110CD00900	
DESCRIPTION OF WORK	
Tech will convert (1) 208V plug to (2) 120V outlets. Share the common and create individual circuits for each Fresh Pet Cooler	
APPLICANT	
Name: PAUL HOWELL	
Phone: 770-772-3473	Fax: 866-592-9161
Email:	
CONTRACTOR	
Elec lic. no.: 37-727C	CCB lic. no.: 118038
Business Name: LIN R ROGERS ELECTRICAL CONTRACTORS INC	
Contact:	
Address: 2050 MARCONI DR STE 200	
City/State/ZIP: ALPHARETTA, GA 30005	
Phone: 7707723400	Fax: 7705214960
Email: license@rogerselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00382**

Approval Code: 175935 6/2/2020 10:53 am

E-mailed To: JOSH@SMILEYELECTRIC.NET

B2020-1875

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6730 SW PEACH LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BD03631	
DESCRIPTION OF WORK	
Roughin work repairs	
APPLICANT	
Name: Josh Smiley	
Phone: 5034847556	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1479	CCB lic. no.: 227116
Business Name: SMILEY ELECTRIC INCORPORATED	
Contact:	
Address: 236 NE 55TH AVE	
City/State/ZIP: HILLSBORO, OR 97124	
Phone: 5034847556	Fax:
Email: JOSH@SMILEYELECTRIC.NET	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
<b>Please check all that apply:</b>		<input type="checkbox"/> Hazardous locations	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> A service or feeder rated at 600 amps or more	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys	<input type="checkbox"/> "A", "E", or "I-2" or "I-3"
<input type="checkbox"/> Health care facilities	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Services or feeders</b>			
Services 200 amps or less	1	\$115.83	\$115.83
<b>Branch circuits</b>			
Branch circuits with service or feeder each circult	2	\$4.26	\$8.52
<b>Electrical Permit Fees</b>			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
<b>TOTAL PERMIT FEE</b>			<b>\$139.27</b>

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00383**

Approval Code: 206576 6/2/2020 11:29 am

E-mailed To: Adrian@safeelectric.com

B2020-1878

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8610 SW MONTICELLO ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128AC00400	
DESCRIPTION OF WORK	
Replace Electrical panel	
APPLICANT	
Name: Adrian Buturoaga	
Phone: 5039988832	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C259	CCB lic. no.: 168856
Business Name: SAFE ELECTRIC INC	
Contact:	
Address: PO BOX 1677	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5039988832	Fax: 5034270605
Email: ABSAFEELECTRIC@HOTMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



**City Of Beaverton**  
 12725 SW Millikan Way  
 Beaverton, OR 97076  
 Phone: 503-526-2642  
 Email: cunderwood@beavertonoregon.gov

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00384**

Approval Code: 001858 6/2/2020 2:35 pm

E-mailed To: mail@dmbk.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15641 SW SORA CT	
City/State/ZIP: BEAVERTON, OR 97007	
Sulte/bldg./apt.no.:	
Project Name: EDWARDS KITCHEN	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105BD05200	
DESCRIPTION OF WORK	
KITCHEN REMODEL; RELOCATE SWITCHES AND OUTLETS, RELOCATE APPLIANCES, NEW LIGHTING	
APPLICANT	
Name: DreamMaker Bath & Kitchen	
Phone: 5032952284	Fax: 5033575768
Email:	
CONTRACTOR	
Elec lic. no.: C821	CCB lic. no.: 192876
Business Name: JM3 ELECTRICAL & CONSTRUCTION LLC	
Contact:	
Address: 10500 SW CLYDESDALE TER	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5039613537	Fax: 5037187268
Email: JM3ELECT@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	4	\$4.26	\$17.04
<b>Electrical Permit Fees</b>			
Subtotal			\$98.18
State surcharge (12% of permit total)			\$11.78
<b>TOTAL PERMIT FEE</b>			<b>\$109.96</b>

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00386**

Approval Code: 012163 6/2/2020 4:55 pm

E-mailed To: lkinnaman@conduitelectric.com

B2020-1892

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16399 SW HORSESHOE WAY	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Hot Tub	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129BC10200	
DESCRIPTION OF WORK	
Wire Hot Tub	
APPLICANT	
Name: Charles Parker	
Phone: 5036921428	Fax: 5036923652
Email:	
CONTRACTOR	
Elec lic. no.: 26-905C	CCB lic. no.: 109669
Business Name: DUIT LEVEL TOOL CO	
Contact:	
Address: 19461 SW 89TH AVE	
City/State/ZIP: TUALATIN, OR 97062	
Phone: 5036921428	Fax: 5036923652
Email: dmcclore@conduit-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00385**

Approval Code: 09593G 6/2/2020 4:01 pm

E-mailed To: info@rosecityelectricco.com

B2020-1891

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4150 SW HOCKEN AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 30	
Project Name: Unit 31 and Pump Room	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AB00300	
DESCRIPTION OF WORK	
alteration of 12, addition of 3	
APPLICANT	
Name: Kent Huffstutter	
Phone: 5038674810	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C729	CCB lic. no.: 193652
Business Name: ROSE CITY ELECTRIC CO	
Contact:	
Address: PO BOX 10004	
City/State/ZIP: PORTLAND, OR 97296	
Phone: 5032876164	Fax: 5032821060
Email: INFO@ROSECITYELECTRICCO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	14	\$4.26	\$59.64
<b>Electrical Permit Fees</b>			
Subtotal			\$140.78
State surcharge (12% of permit total)			\$16.89
<b>TOTAL PERMIT FEE</b>			<b>\$157.67</b>

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

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



### Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 12-24-2019	Permit No.: B2019-5298
Date Issued: 12/27/2019	BR
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 7983 SW Greenhouse Ln
City/State/ZIP: Portland OR, 97225	
Suite/dlg./apt. no.:	Project name: Olive Park
Cross street/directions to job site:	
Subdivision:	Lot no.: 2
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Westwood Homes LLC	
Address: 12700 NW Cornell Rd.	
City/State/ZIP: Portland OR 97229	
Phone: 503-713-6294 Fax	
E-mail: Allison@westwoodhomesllc.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Allison Mew	
Address: 12700 NW Cornell rd.	
City/State/ZIP: Portland OR 97229	
Phone: 503-713-6294 Fax	
E-mail: Allison@westwoodhomesllc.com	
CONTRACTOR	
Business name: Ross Electric Inc.	
Address: 2870 SE 75th Ave. Suite 203	
City/State/ZIP: Hillsboro, Oregon 97123	
Phone: (503) 642-2800	Fax (503) 642-5815
E-mail: rosselectric@comcast.net	CCB lic. no.: 157891
Electrical lic. no.: 34-436C	City or metro lic.: 7867
Supervising electrician signature, required:	
Print name: Stephen L Ross	Date: _____
Authorized signature: <i>[Signature]</i>	
Print name: _____	Date: 12/23/19

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 800 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
<b>Residential single- or multi-family dwelling units (includes attached garage)</b>			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion	5	34.77	
Limited energy, residential (with above sq. ft.)	1	46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
<b>Services or (panels) installation, alteration, and/or relocation</b>			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
<b>Branch circuits - new, alteration, or extension, per panel</b>			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		81.14	
Investigation fee			
Other:			
<b>Electrical permit fees</b>			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			<b>\$0.00</b>

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00375**

Approval Code: 032352 6/1/2020 10:05 am

E-mailed To: Roger.Reed@ecpowerslife.com

B2020-1851

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 1850 SW 170TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: TVWD - Office Remodel	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106DD01200	
DESCRIPTION OF WORK	
Install data cabling to front Lobby	
APPLICANT	
Name: Roger Reed	
Phone: 5032205334	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-45C	CCB lic. no.: 49737
Business Name: EC COMPANY	
Contact:	
Address: PO BOX 10286	
City/State/ZIP: PORTLAND, OR 97296	
Phone: 5032243511	Fax: 5032953012
Email: cindyb@e-c-co.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

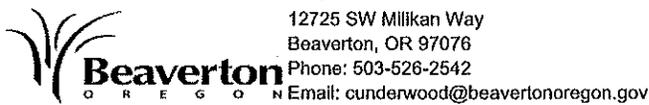
NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

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

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

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



B 2020-1855

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00377**

Approval Code: 05376G 6/1/2020 12:16 pm

E-mailed To: crystalr@westsideelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2870 SW WEST POINT AVE	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 6447-STAVLEY, CHAD	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BD02710	
DESCRIPTION OF WORK	
EXTERIOR OUTLETS.	
APPLICANT	
Name: CRYSTAL KREGER	
Phone: 5032311548	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-135C	CCB lic. no.: 13306
Business Name: WEST SIDE ELECTRIC COMPANY INC	
Contact:	
Address: 1834 SE 8TH AVE	
City/State/ZIP: PORTLAND, OR 972143532	
Phone: 5032311548	Fax: 5037360677
Email: DICKK@WESTSIDEELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00376**

Approval Code: 058765 6/1/2020 11:22 am

E-mailed To: permits@stonergroup.com

B2020-1854

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14750 SW HART RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: CANFIELD PLACE	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DD00500	
DESCRIPTION OF WORK	
ELEVATOR MODERNIZATION UPGRADE	
APPLICANT	
Name: Sarabeth Dodd	
Phone: 5034626500	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Limited Energy</b>			
Stand-alone limited energy, commercial	1	\$91.72	\$91.72
<b>Services or feeders</b>			
Services 200 amps or less	1	\$115.83	\$115.83
<b>Branch circuits</b>			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
<b>Electrical Permit Fees</b>			
Subtotal			\$216.07
State surcharge (12% of permit total)			\$25.93
<b>TOTAL PERMIT FEE</b>			<b>\$242.00</b>

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

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

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

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



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

B2020-1863

**Residential Electrical Authorization To Begin Work**  
**05350-BEL-20-00380**

Approval Code: 711061 6/1/2020 3:16 pm

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

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5170 SW CHESTNUT AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: 20-3603 PIKE	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA03001	
DESCRIPTION OF WORK	
Hot tub, lighting (hallway & living room), bedroom outlet	
APPLICANT	
Name: Kevin Poole	
Phone: 5032460361	Fax: 5032460406
Email:	
CONTRACTOR	
Elec lic. no.: 26-1099C	CCB lic. no.: 148108
Business Name: ALL PRO ELECTRIC INCORPORATED	
Contact:	
Address: 6312 SW CAPITOL HWY STE 262	
City/State/ZIP: PORTLAND, OR 97239	
Phone: 5032460361	Fax: 5032460406
Email: info@all-pro-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00379**

Approval Code: 611000 6/1/2020 2:00 pm

E-mailed To: keith@boonesferryelectric.com

B2020-1860

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14787 SW MILLIKAN WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: 331420	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S108DA01500	
DESCRIPTION OF WORK	
TI	
APPLICANT	
Name: Keith Fleschner	
Phone: 5036824936	Fax: 5036827946
Email:	
CONTRACTOR	
Elec lic. no.: 3-223C	CCB lic. no.: 88482
Business Name: BOONES FERRY ELECTRIC INC	
Contact:	
Address: PO BOX 628	
City/State/ZIP: WILSONVILLE, OR 97070	
Phone: 5036824936	Fax: 5036827946
Email: angie@boonesferryelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	7	\$4.26	\$29.82
<b>Electrical Permit Fees</b>			
Subtotal			\$110.96
State surcharge (12% of permit total)			\$13.32
<b>TOTAL PERMIT FEE</b>			<b>\$124.28</b>

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

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

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



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

B2020-1858

## Commercial Electrical Authorization To Begin Work

05350-BEL-20-00378

Approval Code: 014767 6/1/2020 1:50 pm

E-mailed To: gg@ggteleco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5075 SW GRIFFITH DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BD04200	
DESCRIPTION OF WORK	
Data wiring. 6 Drops.	
APPLICANT	
Name: Chas Ford	
Phone: 5032952922	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 34-248CLE	CCB lic. no.: 59692
Business Name: GG TELECOMMUNICATION CO	
Contact:	
Address: 121 SW SALMON P1	
City/State/ZIP: PORTLAND, OR 97204	
Phone: 5032952922	Fax: 5032950886
Email: GGTE4LECO@CALLATG.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of Inspections Included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00462**

Approval Code: 030916 6/30/2020 4:04 pm

E-mailed To: DELSBERRY@4SECURITY.ORG

B2020-2270

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5450 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DD02005	
DESCRIPTION OF WORK	
Low Voltage- CCTV	
APPLICANT	
Name: MICHAEL ELSBERRY	
Phone: 5032097303	Fax: 5034723570
Email:	
CONTRACTOR	
Elec lic. no.: 36-34CLE	CCB lic. no.: 65198
Business Name: A & E SAFE & ALARM CO	
Contact:	
Address: 835 NE HWY 99W	
City/State/ZIP: MCMINNVILLE, OR 97128	
Phone: 5034726439	Fax:
Email: MICHAEL@4SECURITY.ORG	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00461**

Approval Code: 006897 6/30/2020 3:06 pm

E-mailed To: DENNISW@STONERGROUP.COM

B2020-2269

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 3211 SW CEDAR HILLS BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: OSWEGO GRILL	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S1090000200	
DESCRIPTION OF WORK	
WIRE FOR NEW TENANT	
APPLICANT	
Name: JOSH WERSCH	
Phone: 5038054125	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	34	\$4.26	\$144.84
<b>Electrical Permit Fees</b>			
Subtotal			\$225.98
State surcharge (12% of permit total)			\$27.12
<b>TOTAL PERMIT FEE</b>			<b>\$253.10</b>

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00451**

Approval Code: 026833 6/26/2020 3:50 pm

E-mailed To: accounts@fastelectricpdx.com

32020-2212

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9260 SW DOWNING DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: panel change	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127CB06100	
DESCRIPTION OF WORK	
replaced panel and new grounding	
APPLICANT	
Name: karen Scarborough	
Phone: 5416606553	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1532	CCB lic. no.: 229097
Business Name: FAST ELECTRIC LLC	
Contact:	
Address: 26165 NW GRISTMILL DR	
City/State/ZIP: NORTH PLAINS, OR 97133	
Phone: 5037474389	Fax:
Email: ANDREW@FASTELECTRICPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Services or feeders</b>			
Services 200 amps or less	1	\$115.83	\$115.83
<b>Branch circuits</b>			
Branch circuits with service or feeder each circuit	13	\$4.26	\$55.38
<b>Electrical Permit Fees</b>			
Subtotal			\$171.21
State surcharge (12% of permit total)			\$20.55
<b>TOTAL PERMIT FEE</b>			<b>\$191.76</b>

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00455**

Approval Code: 119204 6/29/2020 9:40 am

E-mailed To: CDPermits@cepdx.com

B2020-2224

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6700 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 106	
Project Name: ComForCare C200463	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AD02100	
DESCRIPTION OF WORK	
Install new cabling	
APPLICANT	
Name: Peter Bledsoe	
Phone: 5032559488	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-1054CLE	CCB lic. no.: 142457
Business Name: CAPITOL DATA & COMMUNICATIONS INC	
Contact:	
Address: 11401 NE MARX	
City/State/ZIP: PORTLAND, OR 972201041	
Phone: 5032559488	Fax: 5032551966
Email: CDPERMITS@CEPDX.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00454**

Approval Code: 119240 6/29/2020 9:04 am

E-mailed To: reliantsandy@aol.com

B2020-2223

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15985 NW SCHENDEL AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 200	
Project Name: Voxel	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CC05300	
DESCRIPTION OF WORK	
Electrical for 2nd floor tenant improvement.	
APPLICANT	
Name: Reliant Electric of Oregon	
Phone: 5037014562	Fax: 5036684190
Email:	
CONTRACTOR	
Elec lic. no.: C558	CCB lic. no.: 188492
Business Name: RELIANT ELECTRIC OF OREGON	
Contact:	
Address: 20200 SE OLDENBURG LN	
City/State/ZIP: SANDY, OR 97055	
Phone: 5037014562	Fax: 5036684190
Email: reliantsandy@aol.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00453**

Approval Code: 019294 6/29/2020 8:49 am

E-mailed To: alma@badgerelectricinc.com

32020-2222

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6435 SW LOMBARD AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122BB02600	
DESCRIPTION OF WORK	
Service change.	
APPLICANT	
Name: TODD GABER	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00452**

Approval Code: 019254 6/29/2020 8:45 am

E-mailed To: karen@beck-electric.net

B2020-2221

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12905 SW THUNDERHEAD WAY	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DD10100	
DESCRIPTION OF WORK	
Panel Change	
APPLICANT	
Name: Beck Electric	
Phone: 5036567396	Fax: 5036564397
Email:	
CONTRACTOR	
Elec lic. no.: 3-5C	CCB lic. no.: 2629
Business Name: BECK ELECTRIC INC	
Contact:	
Address: 15687 SE HWY 212	
City/State/ZIP: DAMASCUS, OR 97089	
Phone: 5036567396	Fax: 5036564397
Email: BeckElectric@Comcast.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



### Electrical Permit Application

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: 6/29/2020	Permit No.: B2020-2216
Date Issued: 6/30/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14700 SW Rocket St,
City/State/ZIP: Beaverton OR 97005	
Suite/bldg./apt. no.:	Project name: West End District
Cross street/directions to job site: Murray and TV HWY	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK	
Wiring of new Swim Center/Club House	

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

<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Taylor Morrison	
Contact name: Cam Grieb	
Address: 703 Broadway St. Suite 510	
City/State/ZIP: Vancouver WA 98660	
Phone: 503-536-3486	Fax:
E-mail: CGrieb@taylormorrison.com	

CONTRACTOR	
Business name: Sunlight Electric Inc	
Address: 2804 NE 65th Ave Suite D	
City/State/ZIP: Vancouver WA 98661	
Phone: 971-222-5758	Fax: 360-326-9660
E-mail: sunlight.inc1@comcast.net	CCB lic. no.: 172549
Electrical lic. no.: C230	City or metro lic.: 11608

Supervising electrician signature, required: [Signature]	1793S
Print name: Chester Garrett	Date: 06/29/20
Authorized signature: [Signature]	

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

FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit</b>				
<b>Includes attached garage</b>				
1,000 sq. ft. or less		144.20		4
Ea. add'l 500 sq. ft. or portion		25.75		
Limited energy, residential (with above sq. ft.)		34.40		2
Limited energy, multi-family residential (with above sq. ft.)		67.95		2

Services or feeders installation, alteration, and/or relocation				
200 amps or less	1		115.03	
201 amps to 400 amps		102.15		2
401 amps to 600 amps		169.90		2
601 amps to 1,000 amps		222.20		2
Over 1,000 amps or volts		511.35		2

Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		67.95		2
201 amps to 400 amps		94.40		2
401 amps to 600 amps		136.40		2

Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	28		119.28	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		60.10		2
Each add'l branch circuit		3.15		

Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		67.95		2
Utility reconnect		67.95		1
Pump or irrigation circle		67.95		2
Sign or outline lighting		67.95		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		67.95		2

Each additional inspection over allowable in any of the above				
Per inspection		60.10		
Investigation fee				
Other:				

ELECTRICAL PERMIT FEES		
Subtotal	0.00	
Plan review (25% of permit fee)		
State surcharge (12% of permit fee)	0.00	
<b>TOTAL PERMIT FEE</b>	<b>263.32</b>	

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00460**

Approval Code: 072738 6/30/2020 8:02 am

E-mailed To: jim@apluselectricalpdx.com

B2020-2250

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8817 SW BRIGHTFIELD CIR	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.:	
Project Name: Gate Lighting	
Cross Street/directions to job site: Hall Blvd. & Brightfield	
Tax map/parcel no.: 1S126BC90000	
DESCRIPTION OF WORK	
Ditches and conduit to clean up existing wiring to gate entrance lighting	
APPLICANT	
Name: Jim Courtney	
Phone: 503-284-7300	Fax: 503-213-6087
Email:	
CONTRACTOR	
Elec lic. no.: C161	CCB lic. no.: 169689
Business Name: A+ ELECTRICAL SERVICES INC	
Contact:	
Address: PO BOX 446	
City/State/ZIP: SCAPPOOSE, OR 97056	
Phone: 5032847300	Fax: 5032136087
Email: JIMC@APLUSELECTRICAL.BIZ	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00459**

Approval Code: 02796G 6/30/2020 7:18 am

E-mailed To: davislectricpdx@gmail.com

B2020-2249

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7655 SW HYLAND WAY	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 20128	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DC01101	
DESCRIPTION OF WORK	
fire damage re wire	
APPLICANT	
Name: brian davis	
Phone: 503-508-9855	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C839	CCB lic. no.: 196274
Business Name: DAVIS ELECTRIC INC	
Contact:	
Address: PO BOX 933	
City/State/ZIP: SILVERTON, OR 97381	
Phone: 5038710174	Fax: 5038740174
Email: DAVISELECTRICPDX@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
<b>Please check all that apply:</b>			
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A service or feeder rated at 600 amps or more	
<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Buildings more than three stor	<input type="checkbox"/> Marinas and boat yards	
<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Addition of a new motor load of 100 HP or more	<input type="checkbox"/> Installation of a 150 KVA or larger separately derived sys	<input type="checkbox"/> "A", "E", or "L-2" or "L-3"	
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Recreational Vehicle Parks	<input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> Health care facilities			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Residential multi-family</b>			
1,000 sq. ft. or less	1	\$194.64	\$194.64
Each added 500 sq. ft. or portion	3	\$34.77	\$104.31
<b>Electrical Permit Fees</b>			
Subtotal			\$298.95
State surcharge (12% of permit total)			\$35.87
<b>TOTAL PERMIT FEE</b>			<b>\$334.82</b>

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00458**

Approval Code: 02950J 6/29/2020 5:20 pm

E-mailed To: justin@frahlerelectric.com

B2020-2228

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12030 SW GAULT CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Rouillard Res	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127CC02900	
DESCRIPTION OF WORK	
Replace electrical panel.	
APPLICANT	
Name: Justin Kau	
Phone: 5036394627	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C861	CCB lic. no.: 197172
Business Name: JRA INC	
Contact:	
Address: 11860 SW GREENBURG RD	
City/State/ZIP: TIGARD, OR 97223	
Phone: 5036394627	Fax: 5036394673
Email: SANDY@FRAHLERELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received:	Permit No.: B2020-2225
Date Issued: 6/30/2020	
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> Now construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other: Inspection for PGE start service	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 1130 SW 170th Ave., unit 202, Beaverton
City/State/ZIP: 97003	
Suite/bldg./apt. no.: unit 202	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
PGE is requesting a city tag before they can start service for new home owner	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Manny Obi	
Address: 1130 SW 170th avenue, Beaverton, OR.	
City/State/ZIP: 97003	
Phone: (503) 449-8334	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>Manny Obi</i>	Date: 06/29/20
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: same as property owner	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

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

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



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

B2020-2229

**Residential Electrical Authorization To Begin Work**  
**05350-BEL-20-00457**  
 Approval Code: 719285 6/29/2020 3:58 pm  
 E-mailed To: alma@badgerelectricinc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7560 SW ALPINE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CC01005	
DESCRIPTION OF WORK	
Panel change and (1) circuit for AC.	
APPLICANT	
Name: TODD GABER	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Services or feeders</b>			
Services 200 amps or less	1	\$115.83	\$115.83
<b>Branch circuits</b>			
Branch circuits with service or feeder each circuit	1	\$4.26	\$4.26
<b>Electrical Permit Fees</b>			
Subtotal			\$120.09
State surcharge (12% of permit total)			\$14.41
<b>TOTAL PERMIT FEE</b>			<b>\$134.50</b>

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00456**

Approval Code: 022782 6/29/2020 2:41 pm

E-mailed To: lmceachern@dyna-oregon.com

B2020-2226

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 1700 NW 167TH PL	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 220	
Project Name: JSR Micro New Equipment	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131AA00400	
DESCRIPTION OF WORK	
Installation of Circuits for new equipment-(3) Circuits	
APPLICANT	
Name: Joe Master	
Phone: 5032266771	Fax: 5032267720
Email:	
CONTRACTOR	
Elec lic. no.: 26-59C	CCB lic. no.: 66793
Business Name: DYNALECTRIC CO	
Contact:	
Address: 5805 SW HOOD AVE	
City/State/ZIP: PORTLAND, OR 97239	
Phone: 5032266771	Fax: 5032267818
Email: lmceachern@dyna-portland.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: <u>6/29/2020</u>	Permit No.: <u>152020-2217</u>
Date Issued: <u>6/29/2020</u>	
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <u>7275 SW 152nd Avenue</u>
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: <u>Daniel Langbehn</u>	
Address: <u>7275 SW 152nd Avenue</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Phone: <u>(208) 590-9868</u>	Fax:
E-mail: <u>langbehndan@gmail.com</u>	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____	Date: <u>06/27/20</u>
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Same as owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	

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

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



### Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 6/29/2020	Permit No: 2020-2219
Date Issued: 6/29/2020	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 6335 SW Lombard Ave.
City/State/ZIP: Beaverton, OR 97008	
Suite/bidg./apt. no.:	Project name: Lombard Plaza Apts.
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
(2) 100Amp feeders and (52) circuits for remodel due to fire (Unit #'s 100-108)	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Garner Electric	
Contact name: Brittany Burian	
Address: 2890 SE Brookwood Ave.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: permits@garnerelectric.com	
CONTRACTOR	
Business name: Garner Electric	
Address: 2890 SE Brookwood Ave.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: permits@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-305C	City or metro lic.: 4410
Supervising electrician signature, required:	
Print name: Charles Garner	Date: 06/29/20
Authorized signature:	
Print name: Brittany Burian	Date: 06/29/20

PLAN REVIEW				
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Floating buildings	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Recreational vehicle parks			
<input type="checkbox"/> Six or more residential units				
<input type="checkbox"/> Health-care facilities				
<input type="checkbox"/> Hazardous locations				
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit</b> Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less	2	115.83	231.66	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits with above service or feeder fee, each branch circuit	52	4.26	221.52	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
<b>SUBTOTAL</b>			<b>453.18</b>	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				54.38
<b>TOTAL PERMIT FEE</b>			<b>\$507.56</b>	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.  
 \* Number of inspections allowed per permit.  
 Form 820-1002 REV 10/17



# Renewable Electrical Energy Permit Application

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

Check Form

OFFICE USE ONLY	
Date Received: 6/25/2020	Permit No.: B2020-2185
Date Issued: 6-29-20	By: <i>MH</i>
	Payment Type: <i>AMK</i>

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
	<input checked="" type="checkbox"/> Other: Solar PV Array
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12935 Southwest Morgan Court
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Bachinger
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
11.715 kW Solar PV Array to be installed on Roof	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Hans Peter Bachinger	
Address: 12935 Southwest Morgan Court	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 626-9749	Fax:
E-mail: hanspeter.bachinger@gmail.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>Hans Peter Bachinger</i>	Date: 01/26/20
CONTRACTOR	
Business name: Tell Ventures LLC	
Address: 2391 S 1560 W C	
City/State/ZIP: Woods Cross, UT 84087	
Phone: (971) 285-5645	Fax:
E-mail: hank.prentice@1solar.com	OCB lic. no.: 231057
Electrical lic. no.: c1537	City or metro lic.:
Supervising electrician signature, required: <i>Mark Hugh</i>	
Print name: Mark Hugh	Date: 06/25/20
Authorized signature: <i>Hank Prentice</i>	
Print name: Hank Prentice	Date: 06/25/20

FEE SCHEDULE			
Number of inspections per item (1 Renewable energy installation per system total)	No. of Items	Cost Each	Total
5 kva or less (2)		81.14	
5.01 to 15 kva (2)	1	115.83	115.83
15.01 to 25 kva (2)		137.89	
25.01 kva and over (2)		229.34	
Miscellaneous fees, hourly rate		80.00	
Each additional inspection (1) (503) 526-300-0270		81.14	
FEE TOTALS			Subtotal
			115.83
<input checked="" type="checkbox"/> Plan review required for systems over 25 kva at 25% of Subtotal. No 12% surcharge on plan review fee. (25% of permit fee)			
State surcharge (12% of permit fee)			13.90
<b>TOTAL PERMIT FEE</b>			<b>\$129.73</b>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.  
 Form 870-1005 REV 10/17

B 2020-2208

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



**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00450**

Approval Code: 050109 6/26/2020 1:08 pm

E-mailed To: billing@ertellselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13820 SW STIRRUP ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Pamela Blikstad	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BD04817	
DESCRIPTION OF WORK	
Install new 200amp panel.	
APPLICANT	
Name: Dylan Wentworth	
Phone: 5038414511	Fax: 5033595652
Email:	
CONTRACTOR	
Elec lic. no.: C390	CCB lic. no.: 180540
Business Name: ERTELL ELECTRIC LLC	
Contact:	
Address: PO BOX 279	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5038495690	Fax: 5033595652
Email: billing@ertellselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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

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

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17520 NW CORNELL RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Birch Pointe Apartments	
Cross Street/directions to job site: Approximately 1/2 mile east from intersection of NW 185th Ave and Cornell rd.	
Tax map/parcel no.: 1N131BA00101	
DESCRIPTION OF WORK	
Low voltage - install access control equipment including card readers, cameras, keypads, motions sensors and door contacts along with the associated wiring.	
APPLICANT	
Name: Amy Riggs	
Phone: 503-595-4716	Fax: 503-285-1793
Email:	
CONTRACTOR	
Elec lic. no.: 26-1073CLE	CCB lic. no.: 46091
Business Name: METRO OVERHEAD DOOR INC	
Contact:	
Address: 2525 NE COLUMBIA BLVD	
City/State/ZIP: PORTLAND, OR 97211	
Phone: 5035954716	Fax: 5032851793
Email: amyr@metrogates.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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



**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00447**

Approval Code: 216201 6/26/2020 10:10 am

E-mailed To: Kandice@nwsteele.com

B2020-2202

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6445 SW FALLBROOK PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 100	
Project Name: 200517	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123BD02300	
DESCRIPTION OF WORK	
Installing a 200 amp service and 5 circuits	
APPLICANT	
Name: Kandice Brown	
Phone: 5032681311	Fax: 5033726448
Email:	
CONTRACTOR	
Elec lic. no.: C489	CCB lic. no.: 186140
Business Name: STEELE ELECTRIC LLC	
Contact:	
Address: 716 Roxe Drive	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5032681311	Fax: 5033726448
Email: dan@nwsteele.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Services or feeders</b>			
Services 200 amps or less	1	\$115.83	\$115.83
<b>Branch circuits</b>			
Branch circuits with service or feeder each circuit	5	\$4.26	\$21.30
<b>Electrical Permit Fees</b>			
Subtotal			\$137.13
State surcharge (12% of permit total)			\$16.46
<b>TOTAL PERMIT FEE</b>			<b>\$153.59</b>

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

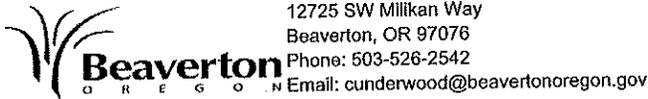
NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

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

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

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

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



**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00448**

Approval Code: 006419 6/26/2020 10:36 am

E-mailed To: nic@stumptownconstruction.com

B2020-2205

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 505 NW PACIFIC GROVE DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Lane	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131DA01200	
DESCRIPTION OF WORK	
Kitchen remodel	
APPLICANT	
Name: Nicolas Valentine	
Phone: 503-267-2081	Fax: 503-747-2306
Email:	
CONTRACTOR	
Elec lic. no.: C162	CCB lic. no.: 189013
Business Name: STUMPTOWN CONSTRUCTION INC	
Contact:	
Address: 4804 NE BETHANY BLVD STE 1-2 PMB #169	
City/State/ZIP: PORTLAND, OR 97229	
Phone: 5032672081	Fax: 503
Email: nic@portlandelectricco.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**  
**05350-BEL-20-00446**

Approval Code: 415280 6/25/2020 12:08 pm

E-mailed To: permits@wolfersheating.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15575 SW BRIDLE HILLS DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Dooley	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120CD07900	
DESCRIPTION OF WORK	
Add AC Circuit and Gas Furnace Reconnect	
APPLICANT	
Name: Kristi Loschiavo	
Phone: 5032201901	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1318	CCB lic. no.: 1911
Business Name: WOLFERS INC	
Contact:	
Address: 1365 N FRONT ST	
City/State/ZIP: WOODBURN, OR 97071	
Phone: 5039814511	Fax: 5039810801
Email: permits@wolfersheating.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

740378

CONTRACTOR TBD



Electrical Permit Application

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

RECEIVED

OFFICE USE ONLY

Date Received: 6/29/2020 Permit No.: B2020-0364
Date Issued: 6/25/2020
CITY OF BEAVERTON BUILDING DIVISION
Payment Type:

TYPE OF WORK
New construction
Addition/alteration/replacement
Other:
CATEGORY OF CONSTRUCTION
1- and 2-family dwelling
Commercial/industrial
Accessory building
Multi-family
Master builder
Other:
JOB SITE INFORMATION AND LOCATION
Job no.:
Job address: 13000 SW 2nd Street
City/State/ZIP: Beaverton, OR 97005
Suite/bldg./apt. no.:
Project name: Beaverton High School
Cross street/directions to job site: SW Erickson Ave., project in the auditorium
Subdivision:
Lot no.:
Tax map/parcel no.: 1S116AD10900

DESCRIPTION OF WORK
New connection for new motorized batten.

PROPERTY OWNER
Name: Beaverton School District
Address: 16550 SW Merlo Road
City/State/ZIP: Beaverton, OR 97003
Phone: (503) 356-4571 Fax: (503) 356-4484
E-mail: Jeffrey\_Hamman@beaverton.k12.or.us
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.
Owner signature: Date:

CONTACT PERSON
Business name: Opsis Architecture
Contact name: Lindsay Furlong
Address: 920 NW 17th Ave.
City/State/ZIP: Portland, OR 97209
Phone: (503) 525-9511 Fax: (503) 525-0440
E-mail: lindsayf@opsisarch.com

CONTRACTOR
Business name: Mill Plain Electric, Inc.
Address: 6000 NE 88th St. #B-105
City/State/ZIP: Vancouver, WA 98605
Phone: 360.574.7265 Fax: 360.574.0956
E-mail: taylor@mp-electric.com
City or metro lic. no.: 63021

Supervising electrician signature, required: Scott Mangas
Print name: Scott Mangas Date: 6/25/20
Authorized signature:

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

FEE SCHEDULE table with columns: Description, Qty, Fee, Total. Rows include Residential single- or multi-family dwelling unit, Services or feeders installation, Branch circuits, Miscellaneous, and SUBTOTAL 81.14. Plan review (25% of permit fee) 20.29. State surcharge (12% of permit fee) 9.74. TOTAL PERMIT FEE 90.88.

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00445**

Approval Code: 024442 6/24/2020 5:27 pm

E-mailed To: precisionnwelectrical@yahoo.com

B2020-2190

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14480 SW ARABIAN DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Parsons	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CB08600	
DESCRIPTION OF WORK	
Insta hot and disposal circuit 1- altered lighting circuit kitchen under cabinet lighting 1- circuit living room outlets	
APPLICANT	
Name: Kevin Riggs	
Phone: 503-880-2754	Fax: 503-594-2873
Email:	
CONTRACTOR	
Elec lic. no.: C47	CCB lic. no.: 163318
Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC	
Contact:	
Address: 14842 SE REGNER TERRACE	
City/State/ZIP: BORING, OR 97009	
Phone: 5038802754	Fax: 5036581615
Email: PRECISIONNWELECTRICAL@YAHOO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

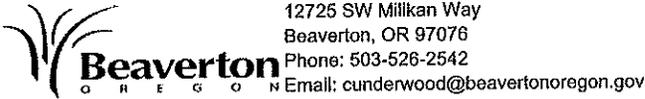
FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	3	\$4.26	\$12.78
<b>Electrical Permit Fees</b>			
Subtotal			\$93.92
State surcharge (12% of permit total)			\$11.27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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00443**

Approval Code: 06693D 6/23/2020 7:58 pm

E-mailed To: JAY@BENTLEYELECTRICINC.COM

B2020-2163

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11890 SW 9TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Rentz	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CD01300	
DESCRIPTION OF WORK	
Bedroom addition, 3 circuits.	
APPLICANT	
Name: Mr. Rentz	
Phone: 5037894229	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 2-20C	CCB lic. no.: 44467
Business Name: BENTLEY ELECTRIC INC	
Contact:	
Address: 41330 SW EDNA LN	
City/State/ZIP: GASTON, OR 971198625	
Phone: 5037894229	Fax: 5039859595
Email: JAY@BENTLEYELECTRICINC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00444**

Approval Code: 11427K 6/24/2020 9:57 am

E-mailed To: walto@firesystemswest.com

B2020-2169

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 1500 NW BETHANY BLVD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 285	
Project Name: Cornell West Suite 285	
Cross Street/directions to job site: NW Bethany and NW Cornell Rd	
Tax map/parcel no.: 1N132BB01500	
DESCRIPTION OF WORK	
Relocate 1 horn strobe ans remove 1 horn strobe.	
APPLICANT	
Name: Walter Ovenstone	
Phone: 3606939906	Fax: 2537350113
Email:	
CONTRACTOR	
Elec lic. no.: 37-655CLE	CCB lic. no.: 49732
Business Name: FIRE SYSTEMS WEST INC	
Contact:	
Address: 219 FRONTAGE RD N #B	
City/State/ZIP: PACIFIC, WA 98047	
Phone: 5032853006	Fax: 2538331248
Email: Teresal@firesystemswest.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00440**

Approval Code: 07995G 6/23/2020 9:59 am

E-mailed To: csepdx@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13765 SW HARNESS LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CA06800	
DESCRIPTION OF WORK	
200 Amp service change	
APPLICANT	
Name: Marius Simedru	
Phone: 5036621098	Fax: 5037756006
Email:	
CONTRACTOR	
Elec lic. no.: C748	CCB lic. no.: 193608
Business Name: RIGHT NOW HOME SERVICES INC	
Contact:	
Address: 12042 SE SUNNYSIDE RD STE 701	
City/State/ZIP: CLACKAMAS, OR 97015	
Phone: 5036621098	Fax: 5037756006
Email: csepdx@gmail.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2020-2155

**Residential Electrical Authorization To Begin Work**  
**05350-BEL-20-00439**  
 Approval Code: 022623 6/22/2020 4:10 pm  
 E-mailed To: precisionnwelectrical@yahoo.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7920 SW CAROL GLEN PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Whitehead	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DC02500	
DESCRIPTION OF WORK	
200 amp panel change 6- circuits kitchen	
APPLICANT	
Name: Kevin Riggs	
Phone: 503-880-2754	Fax: 503-594-2873
Email:	
CONTRACTOR	
Elec lic. no.: C47	CCB lic. no.: 163318
Business Name: PRECISION NW ELECTRICAL CONTRACTORS LLC	
Contact:	
Address: 14842 SE REGNER TERRACE	
City/State/ZIP: BORING, OR 97009	
Phone: 5038802754	Fax: 5036581615
Email: PRECISIONNWELECTRICAL@YAHOO.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

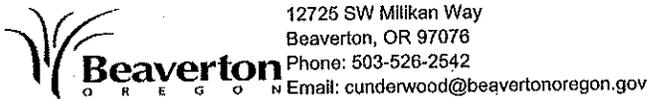
PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	6	\$4.26	\$25.56
Electrical Permit Fees			
Subtotal			\$141.39
State surcharge (12% of permit total)			\$16.97
<b>TOTAL PERMIT FEE</b>			<b>\$158.36</b>

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

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

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



32020-2154

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00441**

Approval Code: 635188 6/23/2020 2:33 pm

E-mailed To: Andrew@SquiresElectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8635 SW MAVERICK TER	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 8635 SW Maverick St. - Repair underground wiring	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BC08200	
DESCRIPTION OF WORK	
underground cover to repair light pole between two post lights.	
APPLICANT	
Name: Production Department	
Phone: 5032521609	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-1101C	CCB lic. no.: 135085
Business Name: SQUIRES ELECTRIC INC	
Contact:	
Address: 820 SE WASHINGTON ST	
City/State/ZIP: PORTLAND, OR 97214	
Phone: 5032521609	Fax: 5032535831
Email: office@squireselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

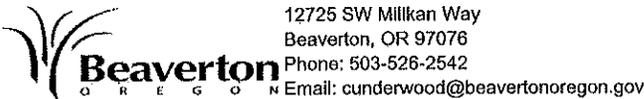
NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

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

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



B 2020-2152

**Residential Electrical Authorization To Begin Work**  
**05350-BEL-20-00442**  
Approval Code: 08336G 6/23/2020 3:58 pm  
E-mailed To: markselectricllc@icloud.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 16500 SW PENINSULA CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Back deck addation	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106AD10100	
DESCRIPTION OF WORK	
Adding 4 can lights and one ceiling fan in an attached outdoor porch	
APPLICANT	
Name: ANDREW MARKS	
Phone: 9715067018	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1238	CCB lic. no.: 212706
Business Name: MARKS ELECTRIC LLC	
Contact:	
Address: 9845 N SYRACUSE ST	
City/State/ZIP: PORTLAND, OR 97203	
Phone: 9715067015	Fax:
Email: MARKSELECTRICLLC@ICLOUD.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 6-22-20	Permit No.: B2020-2145
Date Issued: 6-23-20	By: <i>[Signature]</i>
	Payment Type: VISA

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input checked="" type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
	<input type="checkbox"/> Master builder
	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 14274 S.W. Farmington Rd.
City/State/ZIP: Beaverton, Oregon 97005	
Suite/bldg./apt. no.:	Project name: Holmgren
Cross street/directions to job site: Farmington Rd & Normandy Pl.	
Subdivision: Plantation Townhouses	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Service panel replacement (150 Amp) W/2 new circuits added: Microwave (20 Amp), and Lighting/outlets, 15 Amp. <span style="float:right">+</span>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Gary E. (Barbara K.) HOLMGREN	
Address: 14274 S.W. Farmington Rd.	
City/State/ZIP: Beaverton, Oregon 97005	
Phone: (503) 367-6640	Fax:
E-mail: gbholmgren@comcast.net	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <i>Gary E. Holmgren</i>	Date: 06/19/20
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Gary Holmgren	
Address: 14274 S.W. Farmington Rd.	
City/State/ZIP: Beaverton, Oregon 97005	
Phone: (503) 367-6640	Fax:
E-mail: gbholmgren@comcast.net	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps		
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories		
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings		
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system		
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy		
	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
<b>Residential single- or multi-family dwelling unit</b>			
Includes attached garage			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
<b>Services or feeders installation, alteration, and/or relocation</b>			
200 amps or less	1	115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
<b>Branch circuits - new, alteration, or extension, per panel</b>			
A. Fee for branch circuits with above service or feeder fee, each branch circuit	3	4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		81.14	
Investigation fee			
Other:			
<b>Electrical permit fees</b>			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			<b>\$139.27</b>

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00438**

Approval Code: 047874 6/22/2020 2:59 pm

E-mailed To: Inelson@dyna-oregon.com

*B2020-2146*

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15700 SW GREYSTONE CT	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: OCB rm 263 outlet add	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S105BD00101	
DESCRIPTION OF WORK	
OCB Room 263 Outlet addition	
APPLICANT	
Name: Brandon Muir	
Phone: 5032266771	Fax: 5032267818
Email:	
CONTRACTOR	
Elec lic. no.: 26-59C	CCB lic. no.: 66793
Business Name: DYNALECTRIC CO	
Contact:	
Address: 5805 SW HOOD AVE	
City/State/ZIP: PORTLAND, OR 97239	
Phone: 5032266771	Fax: 5032267818
Email: lmceachern@dyna-portland.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 6-22-20	Permit No.: B2020-2140
Date Issued: 6-22-20	By: JKL
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master builder	
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 12905 SW Thunderhead Way
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Shed Electricity
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installing three 15-amp, 125-volt GFCI outlets and four overhead lights to a shed on the property. The lines will be run from the house to the shed underground using rigid metal conduit piping.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lindsay Stone	
Address: 12905 SW Thunderhead Way	
City/State/ZIP: Beaverton, OR 97008	
Phone: 218-349-1028	Fax:
E-mail: Lindsay.stone594@gmail.com	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date: 6/21/2020
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Lindsay Stone	
Address: 12905 SW Thunderhead Way	
City/State/ZIP: Beaverton, OR 97008	
Phone: 218-349-1028	Fax:
E-mail: Lindsay.stone594@gmail.com	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	
Print name:	Date:

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "1-2," "1-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential: single- or multi-family dwelling unit</b>				
<b>Includes attached garage</b>				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14		2
Each add'l branch circuit		4.26		
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
<b>SUBTOTAL</b>				0.00
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				0.00
<b>TOTAL PERMIT FEE</b>				\$90.88

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00437**

Approval Code: 020763 6/20/2020 10:22 am

E-mailed To: Blake@NWNLE.COM

**PLAN REVIEW**

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

**FEE SCHEDULE**

Description	Qty.	Ea.	Total
<b>Branch circuits</b>			
Branch circuits without service or feeder	1	\$81.14	\$81.14
Branch circuits each additional circuit without service	11	\$4.26	\$46.86
<b>Electrical Permit Fees</b>			
Subtotal			\$128.00
State surcharge (12% of permit total)			\$15.36
<b>TOTAL PERMIT FEE</b>			<b>\$143.36</b>

**TYPE OF WORK**

- New Construction  Addition/alteration/replacement

**CATEGORY OF CONSTRUCTION**

- 1 or 2 family dwelling  Multi-family  Commercial  Accessory

**JOB SITE INFORMATION AND LOCATION**

Job Address: 1500 NW BETHANY BLVD

City/State/ZIP: BEAVERTON, OR 97006

Suite/bldg./apt.no.: 285

Project Name: Traffic safety

Cross Street/directions to job site:

Tax map/parcel no.: 1N132BB01500

**DESCRIPTION OF WORK**

Tenant Improvement, minor electrical changes for new tenant.

**APPLICANT**

Name: BLAKE STEVEN

Phone: 9713419466

Fax: 5039757285

Email:

**CONTRACTOR**

Elec lic. no.: C1461

CCB lic. no.: 226195

Business Name: NEXT LEVEL ELECTRIC LLC

Contact:

Address: 58775 LONE PINE RD

City/State/ZIP: VERNONIA, OR 97064

Phone: 5034291234

Fax: 9713419466

Email: BLAKESTEVEN226@GMAIL.COM

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

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

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

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

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00436**

Approval Code: 080897 6/19/2020 1:35 pm

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

B2020-2132

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15400 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Sulte/bldg./apt.no.:	
Project Name: 101815 Nike Clubhouse	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CA00800	
DESCRIPTION OF WORK	
Tenant improvement	
APPLICANT	
Name: Laurel Semprevivo	
Phone: 5035352604	Fax: 5032341001
Email:	
CONTRACTOR	
Elec lic. no.: 26-95C	CCB lic. no.: 203
Business Name: OEG INC	
Contact:	
Address: 1709 SE 3RD AVE	
City/State/ZIP: PORTLAND, OR 97214	
Phone: 5032349900	Fax: 5032341001
Email: webaccounting@oregon-electric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00435**

Approval Code: 008833 6/19/2020 12:10 pm

E-mailed To: lkinnaman@conduitelectric.com

**PLAN REVIEW**

Please check all that apply:

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

**TYPE OF WORK**

- New Construction       Addition/alteration/replacement

**CATEGORY OF CONSTRUCTION**

- 1 or 2 family dwelling     Multi-family     Commercial     Accessory

**JOB SITE INFORMATION AND LOCATION**

Job Address: 2654 SW CEDAR HILLS BLVD

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: dotty's

Cross Street/directions to job site:

Tax map/parcel no.: 1S109AD02600

**DESCRIPTION OF WORK**

Relocate lottery machine circuit for social distancing

**APPLICANT**

Name: Charles Parker

Phone: 5036921428

Fax: 5036923652

Email:

**CONTRACTOR**

Elec lic. no.: 26-905C

CCB lic. no.: 109669

Business Name: DUIT LEVEL TOOL CO

Contact:

Address: 19461 SW 89TH AVE

City/State/ZIP: TUALATIN, OR 97062

Phone: 5036921428

Fax: 5036923652

Email: dmoclure@conduit-electric.com

Metro lic. no.:

City lic. no.:

Supervising Electrician's lic. no.:

Supervising Electrician's Name:

Number of inspections included in paid services:

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

**FEE SCHEDULE**

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00434**

Approval Code: 31914G 6/19/2020 11:04 am

E-mailed To: omni\_electric@hotmail.com

B2020-2127

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11780 SW BURNETT LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127CA08900	
DESCRIPTION OF WORK	
Panel replacement	
APPLICANT	
Name: JOHN KELSO	
Phone: 5037933276	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C297	CCB lic. no.: 176615
Business Name: BROTHERS ELECTRIC INC	
Contact:	
Address: 16670 SW WRIGHT ST	
City/State/ZIP: BEAVERTON, OR 97007	
Phone: 5037470805	Fax: 5036492709
Email: OMNI_ELECTRIC@HOTMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2020-2176

## Residential Electrical Authorization To Begin Work

**05350-BEL-20-00433**

Approval Code: 019794 6/19/2020 10:37 am

E-mailed To: info@pdxelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7450 SW 101ST AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB04001	
DESCRIPTION OF WORK	
Panel and GFCI protection	
APPLICANT	
Name: Kelly Palmer	
Phone: 5036399708	Fax: 5032001362
Email:	
CONTRACTOR	
Elec lic. no.: C696	CCB lic. no.: 192731
Business Name: PDX ELECTRIC LLC	
Contact:	
Address: 15816 SW UPPER BOONES FERRY RD	
City/State/ZIP: LAKE OSWEGO, OR 97035	
Phone: 5036399708	Fax: 503-200-1362
Email: INFO@PDXELECTRIC.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



# Electrical Permit Application

Community Development  
 PO Box 4755, Beaverton, OR 97076  
 Phone: (503) 526-2503; Fax: (503) 526-2550  
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: <b>B2018-5203</b>
Date Issued: <b>6-19-2020</b>	By: <b>DJ</b>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <b>1914 SW Wren Lane</b>
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name: <b>Westmont</b>
Cross street/directions to job site:	
Subdivision: <b>Westmont</b>	Lot no.: <b>19</b>
Tax map/parcel no.:	
PROPERTY INFORMATION	
<b>NSFR Contractor Change</b>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <b>Same as below</b>	
Address:	
City/State/ZIP:	
Phone:	
E-mail:	
Owner installation: This installation is being performed by a party that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <b>DR Horton</b>	
Contact name: <b>Emerald Weeks</b>	
Address: <b>3141 Horton Cir</b>	
City/State/ZIP: <b>Portland</b>	
Phone: <b>Oregon</b>	
E-mail: <b>esweeks@drhorton.com</b>	
Business name: <b>Garner Electric</b>	
Address: <b>2920 SE Brookwood Ave</b>	
City/State/ZIP: <b>Hillsboro, OR</b>	
Phone: <b>(503) 648-4552</b>	
E-mail: <b>melgarner@garnerelectric.com</b>	
Electrical lic. no.: <b>34-3080</b>	Contract no.: <b>4410</b>
Supervising electrician signature, required: _____	
Print name: <b>Charles Garner</b>	Date: _____

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

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



# Electrical Permit Application

Community Development  
 PO Box 4765, Beaverton, OR 97076  
 Phone: (503) 526-2403; Fax: (503) 526-2550  
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 1/14/2019	Permit No.: B2019-0170
Date Issued: 6-19-2020	By: DJ
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15917 SW Wren Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: 48
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required:	
Print name: Charles Garner	Date:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A""E""1-2""1-3" occupancy
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total
<b>Residential single- or multi-family dwelling unit</b>			
Includes attached garage:			
1,000 sq. ft. or less	1	160.49	160.49
Ea. add'l 500 sq. ft. or portion	4	28.67	114.68
Limited energy, residential (with above sq. ft.)	1	38.28	38.28
Limited energy, multi-family residential (with above sq. ft.)		75.63	75.63
<b>Services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		95.50	95.50
201 amps to 400 amps		113.69	113.69
401 amps to 600 amps		189.10	189.10
601 amps to 1,000 amps		247.31	247.31
Over 1,000 amps or volts		569.13	569.13
Utility reconnect		75.63	75.63
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		75.63	75.63
201 amps to 400 amps		105.08	105.08
401 amps to 600 amps		151.81	151.81
601 amps to 1,000 amps		185.76	185.76
<b>Branch circuits - new, alteration, or extension, per panel:</b>			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	3.51
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	66.90
Each add'l branch circuit		3.51	3.51
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		75.63	75.63
Pump or irrigation circle		75.63	75.63
Sign or outline lighting		75.63	75.63
Signal circuit(s) or limited-energy panel, alteration, or extension, Describe:		75.63	75.63
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		66.90	66.90
Investigation fee			
Other:			
<b>Electrical permit fees</b>			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			<b>\$0.00</b>

This permit application expires if a permit is not obtained within 180 days of the date of issuance.



# Electrical Permit Application

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

## OFFICE USE ONLY

Date Received:	Permit No. <b>2020-0168</b>
Date Issued: <b>6-19-2020</b>	By: <b>DJ</b>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: <b>15916 SW Thrush Lane</b>
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: <b>71</b>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR:	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <b>Garner Electric</b>	
Address: <b>2920 SE Brookwood Ave. Ste#A</b>	
City/State/ZIP: <b>Hillsboro, OR 97123</b>	
Phone: <b>(503) 648-4552</b>	Fax: <b>(503) 642-7925</b>
E-mail: <b>melgarner@garnerelectric.com</b>	CCB lic. no.: <b>121159</b>
Electrical lic. no.: <b>34-3050</b>	City or metro lic.: <b>4410</b>
Supervising electrician signature, required:	
Print name: <b>Charles Garner</b>	Date:
Authorized signature:	

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

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



# Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 1/14/2019	Permit No. B2019-0163
Date Issued: 6-19-2020	By: DJ
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15551 SW Thrush Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: 121
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Owner Installation: This Installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required:	
Print name: Charles Garner	Date:
Authorized signature:	
Melissa Stock	

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service or feeder over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> Recreational vehicle parks		
FEE SCHEDULE			
Description	Qty.	Fee	Total *
<b>Residential single- or multi-family dwelling unit</b>			
<b>Includes attached garage</b>			
1,000 sq. ft. or less	1	160.49	160.49
Ea. add'l 500 sq. ft. or portion	4	28.67	114.68
Limited energy, residential (with above sq. ft.)	1	38.28	38.28
Limited energy, multi-family residential (with above sq. ft.)		75.63	75.63
<b>Services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		95.50	95.50
201 amps to 400 amps		113.69	113.69
401 amps to 600 amps		189.10	189.10
601 amps to 1,000 amps		247.31	247.31
Over 1,000 amps or volts		569.13	569.13
Utility reconnect		75.63	75.63
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		75.63	75.63
201 amps to 400 amps		105.06	105.06
401 amps to 600 amps		151.81	151.81
601 amps to 1,000 amps		185.76	185.76
<b>Branch circuits - new, alteration, or extension, per panel</b>			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		3.51	3.51
B. Fee for branch circuits without service or feeder fee, first branch circuit		66.90	66.90
Each add'l branch circuit		3.51	3.51
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		75.63	75.63
Pump or irrigation circle		75.63	75.63
Sign or outline lighting		75.63	75.63
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		75.63	75.63
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		66.90	66.90
Investigation fee			
Other:			
Electrical permit fees			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			<b>\$0.00</b>

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



# Electrical Permit Application

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

## OFFICE USE ONLY

Date Received: 11/4/2019	Permit No: B2019-0155
Date Issued: 8-19-2020	By: PS
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 15927 SW Thrush Lane
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: 102
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NSFR	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<b>Owner Installation:</b> This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. Owner signature: _____ Date: _____	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Garner Electric	
Address: 2920 SE Brookwood Ave. Ste#A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 648-4552	Fax: (503) 642-7925
E-mail: melgarner@garnerelectric.com	CCB lic. no.: 121159
Electrical lic. no.: 34-3050	City or metro lic.: 4410
Supervising electrician signature, required: <i>[Signature]</i>	
Print name: Charles Garner	Date:
Authorized signature: <i>[Signature]</i>	
Melissa Stock	

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00432**

Approval Code: 518102 6/18/2020 1:20 pm

E-mailed To: alma@badgerelectricinc.com

B2020-2111

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5155 SW CHESTNUT AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA01800	
DESCRIPTION OF WORK	
Service change	
APPLICANT	
Name: TODD GABER	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2020-2110

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00431**

Approval Code: 518141 6/18/2020 1:14 pm

E-mailed To: alma@badgerelectricinc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7425 SW CHERYL LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CA01800	
DESCRIPTION OF WORK	
Service change	
APPLICANT	
Name: Todd Gaber BADGER INC	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



**Beaverton**  
OREGON

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

B2020-2109

## Residential Electrical Authorization To Begin Work

**05350-BEL-20-00430**

Approval Code: 004491 6/18/2020 12:12 pm

E-mailed To: clcootselectric@gmail.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6900 SW 130TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Rod Lee	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DA07500	
DESCRIPTION OF WORK	
Panel change	
APPLICANT	
Name: Chris Coots	
Phone: 5039108828	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C529	CCB lic. no.: 187739
Business Name: CL COOTS ELECTRIC INC	
Contact:	
Address: 4909 DORRANCE ST NE	
City/State/ZIP: SALEM, OR 97305	
Phone: 5039108828	Fax: 5039108828
Email:	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

B2020-2108

## Residential Electrical Authorization To Begin Work

**05350-BEL-20-00429**

Approval Code: 418110 6/18/2020 12:01 pm

E-mailed To: alma@badgerelectricinc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9970 SW BONNIE BRAE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB05100	
DESCRIPTION OF WORK	
Service change	
APPLICANT	
Name: TODD GABER	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00426**

Approval Code: 082368 6/17/2020 8:25 am

E-mailed To: mglazner@adt.com

B2020-2088

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11200 SW MURRAY SCHOLLS PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 102	
Project Name: 999999518 16743 Beaverton Library	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DA00800	
DESCRIPTION OF WORK	
low voltage security - camera addition	
APPLICANT	
Name: Megan Glazner	
Phone: 5039366742	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-497CLE	CCB lic. no.: 185024
Business Name: ARONSON SECURITY GROUP INC	
Contact:	
Address: 9350 SW NIBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036399988	Fax: 5036844357
Email: ERIN.BUTRICO@ARONSON SECURITY.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**  
**05350-BEL-20-00426**

Approval Code: 082368 6/17/2020 8:25 am

E-mailed To: mglazner@adt.com

B2020-2088

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11200 SW MURRAY SCHOLLS PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 102	
Project Name: 999999518 16743 Beaverton Library	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DA00800	
DESCRIPTION OF WORK	
low voltage security - camera addition	
APPLICANT	
Name: Megan Glazner	
Phone: 5039366742	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-497CLE	CCB lic. no.: 185024
Business Name: ARONSON SECURITY GROUP INC	
Contact:	
Address: 9350 SW NIBUS AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036399988	Fax: 5036844357
Email: ERIN.BUTRICO@ARONSON SECURITY.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00427**

Approval Code: 417155 6/17/2020 12:55 pm

E-mailed To: mikeselectric@mikeselectric.biz

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6375 SW ALICE LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: TERRY HEWITT	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122BA03900	
DESCRIPTION OF WORK	
PANEL CHANGE	
APPLICANT	
Name: Darryl Mollenhauer	
Phone: 5036496991	Fax: 5036411902
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



# Electrical Permit Application

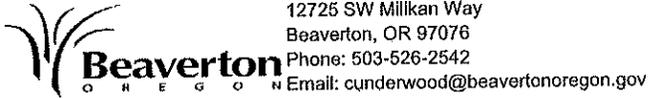
12725 SW Millikan Way / PO Box 4755  
 Beaverton, OR 97076  
 Phone: (503) 526-2493 Fax: (503) 526-2550  
 General Information (503) 526-2222  
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 4/17/2020	Permit No. B2020-2085
Date Issued: 4/18/2020	BY: [Signature]
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	
<input checked="" type="checkbox"/> Other: Garage Remodel	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job address: 7905 SW 135th Ave
City/State/ZIP: Beaverton/OR/97008	
Suite/bldg./apt. no.:	Project name: Garage Storage
Cross street/directions to job site: on 135th Ave at Barberrry Dr intersection	
Subdivision: Lantana Meadows No. 2	Lot no.: 59
Tax map/parcel no.: 1S121DC09000	
DESCRIPTION OF WORK	
Adding 2 branch circuits for lights and outlets in garage	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Scott Fortman	
Address: 7905 SW 135th Ave	
City/State/ZIP: Beaverton/OR/97008	
Phone: (503) 616-8913	Fax:
E-mail: sfortman91@gmail.com	
Owner Installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>Scott Fortman</u>	Date: 06/17/20
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Scott Fortman	
Address: 7905 SW 135th Ave	
City/State/ZIP: Beaverton/OR/97008	
Phone: (503) 616-8913	Fax:
E-mail: sfortman91@gmail.com	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	CCB lic. no.:
Electrical lic. no.:	City or metro lic.:
Supervising electrician signature, required:	
Print name:	Date:
Authorized signature:	

PLAN REVIEW				
Please check all that apply:				
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Service or feeder over 600 amps			
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Building over three stories			
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Marinas and boatyards			
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Floating buildings			
<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> Commercial-use agricultural buildings			
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system			
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy			
	<input type="checkbox"/> Recreational vehicle parks			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
<b>Residential single- or multi-family dwelling unit</b>				
<b>Includes attached garage</b>				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
<b>Services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		115.83		2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
<b>Branch circuits - new, alteration, or extension, per panel</b>				
A. Fee for branch circuits <i>with</i> above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits <i>without</i> service or feeder fee, first branch circuit	1	81.14	81.14	2
Each add'l branch circuit	1	4.26	4.26	
<b>Miscellaneous (service or feeder not included)</b>				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
<b>Each additional inspection over allowable in any of the above</b>				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
<b>SUBTOTAL</b>			85.40	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)			10.25	
<b>TOTAL PERMIT FEE</b>			<b>\$95.65</b>	

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



**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00428**

Approval Code: 01719G 6/17/2020 3:20 pm

E-mailed To: info@parkinelectric.com

B 2020-2096

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2505 SW 85TH CT	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 20-0339	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BB11600	
DESCRIPTION OF WORK	
1<200amp Feeder & 2 ckt for optional standby generator	
APPLICANT	
Name: Amanda OR Tonya	
Phone: 5036574958	Fax: 5035571059
Email:	
CONTRACTOR	
Elec lic. no.: 34-4C	CCB lic. no.: 35151
Business Name: PARKIN ELECTRIC INC	
Contact:	
Address: 14001 S FIR ST	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5036574958	Fax: 5035571059
Email: laura@parkinelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Hazardous locations <input type="checkbox"/> A service or feeder rated at 600 amps or more <input type="checkbox"/> Buildings more than three stor <input type="checkbox"/> Marinas and boat yards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of a 150 KVA or larger seperately derived sys <input type="checkbox"/> "A", "E", or "I-2" or "I-3" <input type="checkbox"/> Recreational Vehicle Parks <input type="checkbox"/> Supply voltage for more than 600 supply volts nominal	
<input type="checkbox"/> A service or feeder beginning at 400 Amps where the available fault current exceeds 10,000 Amps at 150 Volts or less to ground exceeds 14,000 Amps for all other	<input type="checkbox"/> Fire pumps	<input type="checkbox"/> Emergency systems	<input type="checkbox"/> Addition of a new motor load of 100 HP or more
<input type="checkbox"/> Six or more residential units in one structure	<input type="checkbox"/> Health care facilities		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Services or feeders			
Services 200 amps or less	1	\$115.83	\$115.83
Branch circuits			
Branch circuits with service or feeder each circuit	2	\$4.26	\$8.52
Electrical Permit Fees			
Subtotal			\$124.35
State surcharge (12% of permit total)			\$14.92
<b>TOTAL PERMIT FEE</b>			<b>\$139.27</b>

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00424**

Approval Code: 216182 6/16/2020 10:28 am

E-mailed To: mikeselectric@mikeselectric.biz

B2020-2075

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9475 SW NEW FOREST DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Mark Kretschmer	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128DB06100	
DESCRIPTION OF WORK	
PANEL CHANGE AND EVC CIRCUIT	
APPLICANT	
Name: Darryl Mollenhauer	
Phone: 5036496991	Fax: 5036411902
Email:	
CONTRACTOR	
Elec lic. no.: C643	CCB lic. no.: 191094
Business Name: MOLLENHAUER ENTERPRISES INC	
Contact:	
Address: 11070 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036496991	Fax: 5036411902
Email: mikeselectric@mikeselectric.biz	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

FEE SCHEDULE			
Description	Qty.	Ea.	Total
<b>Services or feeders</b>			
Services 200 amps or less	1	\$115.83	\$115.83
<b>Branch circuits</b>			
Branch circuits with service or feeder each circuit	1	\$4.26	\$4.26
<b>Electrical Permit Fees</b>			
Subtotal			\$120.09
State surcharge (12% of permit total)			\$14.41
<b>TOTAL PERMIT FEE</b>			<b>\$134.50</b>

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00425**

Approval Code: 716130 6/16/2020 3:03 pm

E-mailed To: myutzie@cherrycityelectric.com

B2020-2078

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12625 SW Crescent St	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Patricia Reser Center for the Arts	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116AA08700	
DESCRIPTION OF WORK	
Job Site Address: 12625 SW Crescent St	
Temporary power for project construction	
APPLICANT	
Name: Melinda Yutzie	
Phone: 5035665600	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 37-620C	CCB lic. no.: 91668
Business Name: MORROW MEADOWS CORP	
Contact:	
Address: 1596 22ND ST SE	
City/State/ZIP: SALEM, OR 97302	
Phone: 5035665600	Fax: 5035408147
Email: lthompson@cherrycityelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00423**

Approval Code: 09078G 6/15/2020 8:33 pm

E-mailed To: dalew@craftsmanelectricinc.com

B2020-2069

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6295 SW ELM AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Bathroom remodel	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123AB02313	
DESCRIPTION OF WORK	
Replaced two exhaust fans, added two Led can lights, and two receptacles for future Bidets.	
APPLICANT	
Name: Dale Welch	
Phone: 5038998401	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1239	CCB lic. no.: 212709
Business Name: CRAFTSMAN ELECTRIC INC	
Contact:	
Address: 14325 SE 242ND AVE	
City/State/ZIP: DAMASCUS, OR 97089	
Phone: 5035044122	Fax:
Email: DALEW65@GMAIL.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

Beaverton

**Electrical Permit Application**

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

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

General Information (503) 526-2222

BeavertonOregon.gov

**OFFICE USE ONLY**

Date Received: 6-16-20

Permit No: B2000-2062

Date Issued: 6-16-20

By: [Signature]

Payment Type: Visa

**TYPE OF WORK**

Addition/alteration/replacement

Other:

**CATEGORY OF CONSTRUCTION**

Commercial/Industrial

Accessory building

Master builder

Other:

**JOB SITE INFORMATION AND LOCATION**

Address: 7725 SW Canyon Ln

Portland Oregon 97225

Project name: 7725

Neighborhood: West Sylvan

Lot no:

**DESCRIPTION OF WORK**

Upgrade Main electrical

HOMEOWNER

TENANT

WALTER PAULING  
7725 SW Canyon Lane  
Portland Oregon

503-218-4161

Fax:

walter@pauling.com

Date: 6/16/20

APPLICANT

CONTACT PERSON

Same AS owner

**CONTRACTOR**

Same AS owner

Fax:

CEB no:

City of Beaverton

Date:

Date:

**PLAN REVIEW**

Please check all that apply:

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

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

**FEE SCHEDULE**

Description	Qty	Fee	Total
<b>Residential single- or multi-family dwelling unit</b> Includes attached garage			
1,000 sq. ft. or less		194.64	
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
<b>Services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		115.83	1 2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnect		91.72	1
<b>Temporary services or feeders installation, alteration, and/or relocation</b>			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		225.29	2
<b>Branch circuits - new, alteration, or extension, per panel</b>			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	1 2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outline lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe.		91.72	2
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		81.14	
Investigation fee			
Other			
Electrical permit fees			
<b>SUBTOTAL</b>			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			\$0.00

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

\* Number of inspections allowed per permit

Form BYC-002

REV 10/17



**Electrical Permit Application**

12725 SW Millikan Way / PO Box 4755  
 Beaverton, OR 97076  
 Phone: (503) 526-2493 Fax: (503) 526-2550  
 General Information (503) 526-2223  
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 6-15-20	Permit No.: 32020-2042
Date issued: 6-16-20	By: JOL
Payment Type: MC	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/repair/replace
<input type="checkbox"/> Other: <u>Sign Install</u>	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Accessory building
<input type="checkbox"/> Master build/ <input type="checkbox"/> Other:	
JOB SITE INFORMATION AND LOCATION	
Job no.:	Job: <u>4130 SW 117 Ave, Ste D</u>
City/State:	<u>Beaverton, OR 97005</u>
Subdiving rept. no.:	Project: <u>Happy Lemon</u>
Cross street/directions to job site:	<u>Canyon Rd</u>
Subdivision:	LOT NO.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Channel Lettering Mounted on Raceway</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	
Name:	<u>IN Palm Springs, LLC C/O Bluestone and Hockley Real Estate Services</u>
Address:	<u>9320 SW Barbur Blvd suite 300</u>
City/State/ZIP:	<u>Portland, OR 97219</u>
Phone:	<u>503.459.4325</u>
E-mail:	<u>jespinos@bluestonehockley.com</u>
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature: <u>Jeanne Espinosa</u>	AS agent For owner Date: <u>6/12/2020</u>
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	<u>Fast Signs - Tigard</u>
Contact name:	<u>Shelly Wells</u>
Address:	<u>12176 SW Garden Pl.</u>
City/State/ZIP:	<u>Tigard, OR 97223</u>
Phone:	<u>503-944-8813</u>
E-mail:	<u>Shelly.Wells@FastSigns.com</u>
CONTRACTOR	
Business name:	<u>HANNAH SIGN SYSTEMS</u>
Address:	<u>11660 SW BERTHA BLVD</u>
City/State/ZIP:	<u>POX OR 97219</u>
Phone:	<u>503 946 8373</u>
E-mail:	
Electrical Lic. no.:	<u>CLS 34</u>
Supervising electrician signature, required:	<u>[Signature]</u>
Print name:	<u>DAVID DEMAIT</u>
Authorized signature:	<u>[Signature]</u>
Print name:	<u>David Demait</u>

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Service to load over 600 amps	
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Building over three stories	<input type="checkbox"/> Marinas and boatyards	<input type="checkbox"/> Floating buildings
<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Commercial-use agricultural buildings	<input type="checkbox"/> Installation of 150 KVA or larger separately derived system
<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units	<input type="checkbox"/> "A" "B" "I-2" "I-3" occupancy	<input type="checkbox"/> Recreational vehicle parks
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations		
FEE SCHEDULE			
Description	Qty.	Fee	Total
<b>Residential single- or multi-family dwelling unit. Includes attached garage</b>			
1,000 sq. ft. or less		194.64	4
Ea. add'l 500 sq. ft. or portion		34.77	
Limited energy, residential (with above sq. ft.)		46.42	2
Limited energy, multi-family residential (with above sq. ft.)		91.72	2
<b>Services of feeders installation, alteration, and/or reconnection</b>			
200 amps or less		115.83	2
201 amps to 400 amps		137.89	2
401 amps to 600 amps		229.34	2
601 amps to 1,000 amps		299.93	2
Over 1,000 amps or volts		690.22	2
Utility reconnected		91.72	1
<b>Temporary services or feeders installation, alteration, and/or reconnection</b>			
200 amps or less		91.72	2
201 amps to 400 amps		127.41	2
401 amps to 600 amps		184.11	2
601 amps to 1,000 amps		226.20	2
<b>Branch circuits - new, alteration, or extension, per panel</b>			
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26	2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14	2
Each add'l branch circuit		4.26	
<b>Miscellaneous (service or feeder not included)</b>			
Each manufactured or modular dwelling, service, and/or feeder		91.72	2
Pump or irrigation circle		91.72	2
Sign or outdoor lighting		91.72	2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72	2
<b>Each additional inspection over allowable in any of the above</b>			
Per inspection		81.14	
Investigation fee			
Other:			
Electrical permit fees:			
SUBTOTAL			0.00
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			0.00
<b>TOTAL PERMIT FEE</b>			<b>\$162.73</b>

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

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



**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00411**

Approval Code: 517139 6/15/2020 12:04 pm

E-mailed To: rbachofner@bachelectric.com

B 2020:2043

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6700 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.: 106	
Project Name: Suite 106	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122AD02100	
DESCRIPTION OF WORK	
Lights and plugs	
APPLICANT	
Name: Rob Bachofner	
Phone: 503-327-8872	Fax: 503-327-8869
Email:	
CONTRACTOR	
Elec lic. no.: C514	CCB lic. no.: 187062
Business Name: BACHOFNER ELECTRIC LLC	
Contact:	
Address: 12031 NE MARX ST	
City/State/ZIP: PORTLAND, OR 97220	
Phone: 5033278872	Fax: 5033278869
Email: bbokma@bachelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00414**

Approval Code: 075166 6/15/2020 1:19 pm

E-mailed To: billing@ertellselectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13820 SW STIRRUP ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BD04817	
DESCRIPTION OF WORK	
New circuit for HVAC Unit	
APPLICANT	
Name: Dylan Wentworth	
Phone: 5035962199	Fax: 5033595652
Email:	
CONTRACTOR	
Elec lic. no.: C390	CCB lic. no.: 180540
Business Name: ERTELL ELECTRIC LLC	
Contact:	
Address: PO BOX 279	
City/State/ZIP: FOREST GROVE, OR 97116	
Phone: 5038495690	Fax: 5033595652
Email: billing@ertellselectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00413**

Approval Code: 03349G 6/15/2020 1:07 pm

E-mailed To: paul@timberlineelectric.com

B20202049

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4720 SW WASHINGTON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Mattson - Hellickson	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115BC07200	
DESCRIPTION OF WORK	
Connection for equipment to prewired circuits	
APPLICANT	
Name: Timberline Contractors	
Phone: 503-459-4089	Fax: 503-245-4227
Email:	
CONTRACTOR	
Elec lic. no.: 26-1211C	CCB lic. no.: 160037
Business Name: TIMBERLINE ELECTRICAL CONTRACTORS INC	
Contact:	
Address: PO BOX 918	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5034594089	Fax: 5032544227
Email: pat@timberlineelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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

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



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

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00412**

Approval Code: 046518 6/15/2020 12:34 pm

E-mailed To: DENNISW@STONERGROUP.COM

B2020-2048

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13895 SW STIRRUP ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: HYNES	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BD04809	
DESCRIPTION OF WORK	
UPGRADE EXISTING PANEL TO 200A	
APPLICANT	
Name: TODD CORRIE	
Phone: 5034625053	Fax: 5036594968
Email:	
CONTRACTOR	
Elec lic. no.: 26-122C	CCB lic. no.: 44823
Business Name: STONER ELECTRIC INC	
Contact:	
Address: 1904 SE OCHOCO	
City/State/ZIP: MILWAUKIE, OR 97222	
Phone: 5034626500	Fax: 5036594968
Email: DENNISW@STONERGROUP.COM	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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**This Authorization to Begin Work is not a permit, to schedule inspections you need a permit from City Of Beaverton**  
 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov

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



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

B2020-2054

**Commercial Electrical Authorization To Begin Work**

**05350-BEL-20-00421**

Approval Code: 01531G 6/15/2020 3:28 pm

E-mailed To: stephanie@parkinelectric.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13820 SW ELECTRIC ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.: 208	
Project Name: Space 208	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S109CD00600	
DESCRIPTION OF WORK	
Replace Service at Space 208	
APPLICANT	
Name: Stephanie Parkin	
Phone: 5036574958	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 34-4C	CCB lic. no.: 35151
Business Name: PARKIN ELECTRIC INC	
Contact:	
Address: 14001 S FIR ST	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5036574958	Fax: 5035571059
Email: laura@parkinelectric.com	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2020-2052

**Commercial Electrical Authorization To Begin Work**  
**05350-BEL-20-00416**

Approval Code: 670900 6/15/2020 2:17 pm

E-mailed To: a.bostic@americanheating.net

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 1500 NW BETHANY BLVD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 285	
Project Name: Cornell West	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132BB01500	
DESCRIPTION OF WORK	
low-voltage wiring for HVAC thermostats	
APPLICANT	
Name: Amanda Bostic	
Phone: 5032394600	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: 26-993CRE	CCB lic. no.: 33135
Business Name: AMERICAN HEATING INC	
Contact:	
Address: 1339 SE GIDEON ST	
City/State/ZIP: PORTLAND, OR 972022418	
Phone: 5032394600	Fax:
Email: joe@americanheating.net	
Metro lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Reconnect Only:	1
All Other Services:	2

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

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

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

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

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



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

B2020-2051

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00415**

Approval Code: 615140 6/15/2020 2:04 pm

E-mailed To: permits@wolfersheating.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14675 SW BEARD RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 202	
Project Name: Mckinney	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129DA91032	
DESCRIPTION OF WORK	
add 20 amp air conditioner circuit	
APPLICANT	
Name: Kristi Loschiavo	
Phone: 5032201901	Fax:
Email:	
CONTRACTOR	
Elec lic. no.: C1318	CCB lic. no.: 1911
Business Name: WOLFERS INC	
Contact:	
Address: 1365 N FRONT ST	
City/State/ZIP: WOODBURN, OR 97071	
Phone: 5039814511	Fax: 5039810801
Email: permits@wolfersheating.com	
State lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Residential Service:	4
Connect Only:	1
Other Services:	2

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

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

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

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov  
 This Authorization To Begin Work



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

B2020-2058

**Residential Electrical Authorization To Begin Work**

**05350-BEL-20-00418**

Approval Code: 715111 6/15/2020 3:11 pm

E-mailed To: badgerelectric@qwestoffice.net

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7245 SW 105TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB00824	
DESCRIPTION OF WORK	
Service change	
APPLICANT	
Name: Todd Gaber BADGER INC	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
State lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Identical Service:	4
Connect Only:	1
Other Services:	2

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

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

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

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

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 Inspections Phone: 503-526-2400 Inspections Email: cunderwood@beavertonoregon.gov  
 This Authorization To Begin Work



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

B 2020-2056

## Residential Electrical Authorization To Begin Work

**05350-BEL-20-00417**

Approval Code: 615175 6/15/2020 2:57 pm

E-mailed To: alma@badgerelectricinc.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7380 SW 102ND AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S123CB03400	
DESCRIPTION OF WORK	
Service change.	
APPLICANT	
Name: Todd Gaber BADGER INC	
Phone: 5032884756	Fax: 5034937173
Email:	
CONTRACTOR	
Elec lic. no.: 3-571C	CCB lic. no.: 156581
Business Name: BADGER ELECTRIC INC	
Contact:	
Address: PO BOX 55446	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5032884756	Fax: 5034937173
Email: badgerelectric@qwestoffice.net	
State lic. no.:	City lic. no.:
Supervising Electrician's lic. no.:	
Supervising Electrician's Name:	
Number of inspections included in paid services:	
Identical Service:	4
Connect Only:	1
Other Services:	2

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

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

**This Authorization To Begin Work must be obtained from the City of Beaverton**