



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

Residential Plumbing Authorization To Begin Work

PERMIT # B2020-3159

05350-BPB-20-00410

Approval Code: 51135E 8/31/2020 1:55 pm

E-mailed To: jessadvancedplumbing@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: 4900 SW WEMBLEY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01432	
DESCRIPTION OF WORK	
REPLACE 60 FEET OF DRAIN PIPE IN CRAWL SPACE	
APPLICANT	
Name: CHUCK McALLISTER	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jessadvancedplumbing@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

PERMIT # B2020-3143 05350-BPB-20-00405

Approval Code: 03706G 8/31/2020 7:39 am

E-mailed To: Permits@3mountainsplumbing.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: 11170 SW BLAKENEY ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DB02337	
DESCRIPTION OF WORK	
Replacement of 50' water service via bore	
APPLICANT	
Name: Ashley Foss	
Phone: 5034558838	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: P899	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 5304 N ALBINA AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5036701342	Fax: 5038280515
Email: permits@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

PERMIT # B2020-3145

05350-BPB-20-00406

Approval Code: 05311G 8/31/2020 8:52 am

E-mailed To: Permits@3mountainsplumbing.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: 7825 SW GEARHART DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DC04700	
DESCRIPTION OF WORK	
Replace 60 feet of water service via bore	
APPLICANT	
Name: Raelynn Erhardt	
Phone: 5034558838	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 5304 N ALBINA AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5036701342	Fax: 5038280515
Email: permits@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

PERMIT # B2020-3155

05350-BPB-20-00407

Approval Code: 09681G 8/31/2020 11:43 am

E-mailed To: growler@aracnet.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: 8468 SW DURANT PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BA05000	
DESCRIPTION OF WORK	
Remodel Bathroom	
APPLICANT	
Name: Jeff Gillespie	
Phone: 5037503449	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1050	CCB lic. no.: 186828
Business Name: GILLESPIE PLUMBING LLC	
Contact:	
Address: PO BOX 3175	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5037503449	Fax:
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	2	\$20.31	\$40.62
Minimum Fees			
Balance of permit fees			\$15.40
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

PERMIT # B2020-3158

05350-BPB-20-00409

Approval Code: 51132E 8/31/2020 1:52 pm

E-mailed To: jessadvancedplumbing@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: 4898 SW WEMBLEY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01431	
DESCRIPTION OF WORK	
REPLACE 60 FEET OF DRAIN LINE IN CRAWL SPACE	
APPLICANT	
Name: chuck McAllister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jessadvancedplumbing@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

PERMIT # B2020-3157 05350-BPB-20-00408

Approval Code: 51132E 8/31/2020 1:42 pm

E-mailed To: jessadvancedplumbing@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: 4896 SW WEMBLEY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01430	
DESCRIPTION OF WORK	
Replace 60 feet drain pipe in crawl space	
APPLICANT	
Name: chuck mcAllister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jessadvancedplumbing@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN/REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

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

Date Received:	Permit No.: 62020-0255
Date Issued: 8/28/2020	By: BLW
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8051 SW Greenhouse Ln	
City/State/ZIP: Portland OR 97225	
Suite/bldg./apt. no.:	Project name: Orem Park
Cross street/directions to job site:	
Subdivision:	Lot no.: 4
Tax map/parcel no.:	
DESCRIPTION OF WORK	
need to add Sump Pump	
<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: Alison@westwoodhomesllc.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC.	
Contact name: Alison man	
Address: 12700 NW Cornell rd	
City/State/ZIP: Portland OR 97229	
Phone: 503 713-6294 Fax:	
E-mail: Alison@westwoodhomesllc.com	
CONTRACTOR	
Business name: Strauss Excavating, Inc.	
Address: 23483 SW Rosedale Rd.	
City/State/ZIP: Beaverton, OR 97078	
Phone: (503) 649-8117 Fax: (503) 649-8117	
CGB Lic.: 32575	
Authorized signature:	Date:
Print name: Zack Strauss	06/18/20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee.			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

OFFICE USE ONLY

Date Received:	Permit No.: B2020-0255
Date Issued: 8/28/2020	BY: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8031 SW Greenhouse Ln.	
City/State/ZIP: Portland OR 97225	
Suite/bldg./apt. no.:	Project name: OLIVEM PARK
Cross street/directions to job site:	
Subdivision:	Lot no.: 2
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New sfa	
<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	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Allison May	
Address: 12700 NW Cornell Rd	
City/State/ZIP: Portland, OR 97229	
Phone: 503-713-6294 Fax:	
E-mail: Allison@westwoodhomesllc.com	
CONTRACTOR	
Business name: H & H Mechanical	
Address: 8757 SE Willow Lane	
City/State/ZIP: Milwaukie, OR 97267	
Phone: (503) 975-9787	Fax: (503) 659-2979
E-mail:	Plumbing lic.:
CCB lic.: 178122	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		292.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath	1	380.67	0.00
Each additional bath/kitchen		35.18	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		15.25	0.00
Backflow preventer	1	32.79	0.00
Backwater valve		15.25	0.00
Clothes washer	1	15.25	0.00
Dishwasher	1	15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/door sink/hub/ primer		15.25	0.00
Garbage disposal	1	15.25	0.00
Hose bib	2	15.25	0.00
Ice maker	1	15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/avatory	4	15.25	0.00
Tub/shower/shower pan	3	15.25	0.00
Urinal		15.25	0.00
Water closet	3	15.25	0.00
Water heater/expansion tank	1	15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.80	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.28	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.60
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			\$81.31

Authorized signature: [Signature]
 Print name: DUSTIN HAUGUE Date: 1/20/20

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



Plumbing Permit Application

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

Date Received: 8/27/2020	Permit No.: B2020-3119
Date Issued: 8/27/2020	BY: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11820 SW Clifford Steet	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Sewer Replacement
Cross street/directions to job site: Anne and Clifford	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace orangeburg sewer line in front yard only.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Kristi Gonzalez	
Address: 11820 SW Clifford Street	
City/State/ZIP: Beaverton, OR 97008	
Phone: (541) 281-7050	Fax:
E-mail: kristilynngonzalez@yahoo.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Kristi Gonzalez	
Address: 11820 SW Clifford Street	
City/State/ZIP: Beaverton, OR 97008	
Phone: (541) 281-7050	Fax:
E-mail: kristilynngonzalez@yahoo.com	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 50)		*	52.99
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		24.16
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$132.40

Authorized signature: **Kristi Gonzalez**

Digitally signed by Kristi Gonzalez
 DN: cn=Kristi Gonzalez, o=Ericksen Incorporated, ou=eng3-k.gonzalez@ericksen.com, c=US
 Date: 2020.08.27 09:29:57 -0700

Print name: Kristi Gonzalez Date: 08/27/20

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



Residential Plumbing Authorization To Begin Work

PERMIT # B2020-3123 **05350-BPB-20-00404**

Approval Code: 848424 8/27/2020 2:10 pm

E-mailed To: truebluepdx@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: 12479 SW CANVASBACK WAY	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105BD10500	
DESCRIPTION OF WORK	
Re-pipe water throughout house to each fixture.	
APPLICANT	
Name: jayson rowley	
Phone: 5037479989	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1259	CCB lic. no.: 197990
Business Name: TRUE BLUE PLUMBING LLC	
Contact:	
Address: 3300 NW 185TH AVE #311	
City/State/ZIP: PORTLAND, OR 97229	
Phone: 5037479989	Fax:
Email: TRUEBLUEPDX@GMAIL.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00401

Approval Code: 01647G 8/27/2020 10:47 am

E-mailed To: office@apollodrain.com

B2020-3121

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: 8410 SW PARKVIEW LOOP	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BA00200	
DESCRIPTION OF WORK	
Install up to 69' of 3MM CIPP LINER through exterior clean out in front yard replacing sewer line with cured in place pipe. Liner installation will start in base of clean out at abs/cast iron transition and end approximately 69' downline within one foot of city main.	
APPLICANT	
Name: MARQUITA MARTIN	
Phone: 5032398801	Fax: 5039699568
Email:	
CONTRACTOR	
Plumb lic. no.: 26-533PB	CCB lic. no.: 49418
Business Name: APOLLO DRAIN & ROOTER SERVICE INC	
Contact:	
Address: 853 NE HARLOW RD	
City/State/ZIP: TROUTDALE, OR 97060	
Phone: 5032398801	Fax: 5039699568
Email: darlene@apollodrain.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00402

Approval Code: 07775Q 8/27/2020 11:58 am

E-mailed To: Permits@Lovettservices.com

B2020-3125

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: 11601 SW TEAL BLVD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132DC02100	
DESCRIPTION OF WORK	
Install new water service via directional drill from meter to building 59. Licensed plumber to make connections.	
APPLICANT	
Name: John Fowler	
Phone: 5037528544	Fax: 5032881630
Email:	
CONTRACTOR	
Plumb lic. no.: 26-773PB	CCB lic. no.: 125507
Business Name: LOVETT INC	
Contact:	
Address: PO BOX 55580	
City/State/ZIP: PORTLAND, OR 97238	
Phone: 5037378423	Fax: 5032881630
Email: LINDA.P@LOVETTSERVICES.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Water Service - Each additional 100 feet	1	\$43.68	\$43.68
Plumbing Permit Fees			
Subtotal			\$96.67
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.27

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

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

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

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



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

B 2020-3129

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00403

Approval Code: 33093Z 8/27/2020 1:04 pm

E-mailed To: EKlabenes@pacificbath.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: 10199 SW CRESTWOOD CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: PJT #14943	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126BB02000	
DESCRIPTION OF WORK	
Replacing old shower with new walk in shower.	
APPLICANT	
Name: Elizabeth Klabenes	
Phone: 9712048134	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB2132	CCB lic. no.: 213202
Business Name: SPECIALTY CONTRACTORS NORTHWEST LLC	
Contact:	
Address: 6521 SE CROSSWHITE WAY STE A	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5032781400	Fax: 9712048111
Email: RBLETHO@PACIFICBATCH.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

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

Date Received:	Permit No.: B2020-0250
Date Issued: 8/29/2020	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8011 SW Greenhouse Ln.	
City/State/ZIP: Portland OR 97225	
Suite/bldg./apt. no.:	Project name: Orem Park
Cross street/directions to job site:	
Subdivision:	Lot no.: 3
Tax map/parcel no.:	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/savatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter prv		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

DESCRIPTION OF WORK
 need to add sump pump

<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: Alison@westwoodhomesllc.com	

<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC.	
Contact name: Alison man	
Address: 12700 NW Cornell rd	
City/State/ZIP: Portland OR 97229	
Phone: 503 713-6294 Fax:	
E-mail: Alison@westwoodhomesllc.com	

CONTRACTOR	
Business name: Strauss Excavating, Inc.	
Address: 23483 SW Rosedale Rd.	
City/State/ZIP: Beaverton, OR 97078	
Phone: (503) 649-8117	Fax: (503) 649-8117
CGB No.: 32575	

Authorized signature: <i>Zack Strauss</i>	Date: 06/18/20
Print name: Zack Strauss	

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

* See Fee Schedule



Plumbing Permit Application

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

OFFICE USE ONLY

Date Received: 8/20/20
 Permit No.: B2020-0256
 Date Issued: By: [Signature]
 Payment Type:

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8011 SW Greenhouse Ln.	
City/State/ZIP: Portland OR 97225	
Suite/bldg./apt. no.:	Project name: OLIVEM PARK
Cross street/directions to job site:	
Subdivision:	Lot no.: 3
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New sfa	
<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	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Allison may	
Address: 12700 NW Cornell Rd	
City/State/ZIP: Portland, OR 97229	
Phone: 503-713-6294 Fax:	
E-mail: Allison@westwoodhomesllc.com	
CONTRACTOR	
Business name: H & H Mechanical	
Address: 5767 SE Wilow Lane	
City/State/ZIP: Milwaukie, OR 97267	
Phone: (503) 875-0787	Fax: (503) 659-2979
E-mail:	Plumbing, lic.:
CCB lic.: 178122	City or metro lic. no.:
Authorized signature: [Signature]	
Print name: DUSTINE HAUGUE	Date: 1/20/20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		202.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath	1	380.67	0.00
Each additional bath/kitchen		35.16	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		15.25	0.00
Backflow preventer	1	32.79	0.00
Backwater valve		15.25	0.00
Clothes washer	1	15.25	0.00
Dishwasher	1	15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/floor sink/hub/ primer		15.25	0.00
Garbage disposat	1	15.25	0.00
Hose bib	2	15.25	0.00
Ice maker	1	15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/tavatory	4	15.25	0.00
Tub/shower/shower pan	3	15.25	0.00
Urinal		15.25	0.00
Water closet	3	15.25	0.00
Water heater/expansion tank	1	15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.90	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.26	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.60
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			\$81.31

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



Plumbing Permit Application

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

Date Received:	Permit No. 13 2020-3091
Date Issued: 8/26/2020	By
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other: 13 2020-1424
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12685 SW 27th ST	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Hart	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Additional living space	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Farzad Moradian	
Address: 16620 SW Red Rock Way	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 805-1111	Fax:
E-mail: techmotorz@yahoo.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Farzad Moradian	
Address: 16620 SW rec Rock Way	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 805-1111	Fax:
E-mail: techmotorz@yahoo.com	
CONTRACTOR	
Business name: Empire Plumbing	
Address: 19572 SW Treehouse lane	
City/State/ZIP: Beaverton OR 97078	
Phone: (971) 506-6354	Fax:
E-mail:	Plumbing lic.: pb1204
CCB lic.: 197241	City or metro lic. no.:
Authorized signature:	Date: 08/25/20
Print name: Valer Dancu	Date: 08/25/20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	20.31
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker	1	20.31	20.31
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	2	20.31	40.62
Tub/shower/shower pan	1	20.31	20.31
Urinal		20.31	
Water closet	1	20.31	20.31
Water heater/expansion tank		20.31	
Water meter pvl		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			121.86
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			14.62
TOTAL PERMIT FEE			\$136.48

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

* See Fee Schedule



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00399

Approval Code: 058656 8/25/2020 2:57 pm

E-mailed To: blake.woody@rrsc.com

B2020-3103

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: 5270 SW HALL CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Chris	
Cross Street/directions to job site: Hall blvd	
Tax map/parcel no.: 1S115CB07400	
DESCRIPTION OF WORK	
Bursting up to 40' of sewer	
APPLICANT	
Name: Blake Woody	
Phone: 9712868452	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB2271	CCB lic. no.: 228058
Business Name: ROTO ROOTER SERVICES COMPANY	
Contact:	
Address: 255 E 5TH ST SUITE 2600	
City/State/ZIP: CINCINNATI, OH 45202	
Phone: 5035829476	Fax:
Email: michael.dauenhauer@rrsc.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00398

Approval Code: 00303G 8/25/2020 1:08 pm

E-mailed To: permits@fastwaterheater.com

B 2020-3102

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: 7841 SW RAINTREE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: TOVES	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DD15600	
DESCRIPTION OF WORK	
Remove/replace electric water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

PERMIT # B2020-3109 **05350-BPB-20-00400**

Approval Code: 716232 8/26/2020 3:24 pm

E-mailed To: jackie@beavertonplumbing.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: 1267 NW WEYBRIDGE WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Sulte/bldg./apt.no.:	
Project Name: IWASAKI WATER SERVICE	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131AC14800	
DESCRIPTION OF WORK	
PROVIDE APPRXOMIATELY 85 FEET OF NEW 1" WIRSBO WATER SERVICE PIPING. MAKE CONNECTIONS AT METER AND 1" COPPER AT EXISTING YARD BOX ON EXTERIOR OF THE HOME. ELIMINATE IRRIGATION CONNECTION. PROVIDE NEW BALL VALVE AT CONNECTION POINT	
APPLICANT	
Name: Jacqueline Stewart	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

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

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 07/06/2020	Permit No.: B2020-2329
Date Issued: 8-25-20	By: HL
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: Check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP: 9835 SW Denney Rd	
Suite/bldg./apt. no.: Beaverton, OR 97008	Project name: Building 4
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 11
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: - Same -	
Contact name: Mike Wille	
Address:	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	
CONTRACTOR	
Business name: Northwest Plumbing Co dba Local Plumbing Co	
Address: 2870 SE 75th Ave Ste. 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 601-3717	Fax:
E-mail: haleys@localplumbingco.c	Plumbing. lic.: 34-197PB
CCB lic.: 72263	City or metro lic. no.: 1690

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath	X	448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		*	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: *Haley Shannon*

Print name: **Haley Shannon** Date: **03/06/19**

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

* See Fee Schedule



Plumbing Permit Application

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

RECEIVED

Date Received: <u>07/06/2020</u>	Permit No.: <u>B2020-2325</u>
Date Issued: <u>8-25-20</u>	By: <u>[Signature]</u>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <u>Cheek</u>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master buidler	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP: <u>9833 SW Denney Rd</u>	
Suite/bldg./apt. no.: <u>Beaverton, OR 97008</u>	Project name: <u>Building 4</u>
Cross street/directions to job site: <u>SW Scholls Ferry Rd</u>	
Subdivision: <u>Denney Gardens</u>	Lot no.: <u>10</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Construct new Dwelling	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Willamette West Habitat for Humanity</u>	
Address: <u>5293 NE Elam Young Pkwy, #140</u>	
City/State/ZIP: <u>Hillsboro, OR 97124</u>	
Phone: <u>503-502-8523</u>	Fax:
E-mail: <u>mikewille@habitatwest.org</u>	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>- Same -</u>	
Contact name: <u>Mike Wille</u>	
Address:	
City/State/ZIP:	
Phone: <u>503-502-8523</u>	Fax:
E-mail: <u>mikewille@habitatwest.org</u>	
CONTRACTOR	
Business name: <u>Northwest Plumbing Co dba Local Plumbing Co</u>	
Address: <u>2870 SE 75th Ave Ste. 206</u>	
City/State/ZIP: <u>Hillsboro, OR 97123</u>	
Phone: <u>(503) 601-3717</u>	Fax:
E-mail: <u>haleys@localplumbingco.c</u>	Plumbing. lic.: <u>34-197PB</u>
CCB lic.: <u>72263</u>	City or metro lic. no.: <u>1690</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath	X	448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: [Signature]
 Print name: Haley Shannon Date: 03/06/19

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

* See Fee Schedule



Plumbing Permit Application

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

RECEIVED

Date Received: 07/06/2020	Permit No.: B2020-2324
Date Issued: 8-25-20	By: JUK
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>check</i>	

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

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

JOB SITE INFORMATION AND LOCATION	
Job site address: 9831 SW Denney Rd	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Building 4
Cross street/directions to job site: SW Scholls Ferry Rd	
Subdivision: Denney Gardens	Lot no.: 09
Tax map/parcel no.:	

DESCRIPTION OF WORK
Construct new Dwelling

<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Willamette West Habitat for Humanity	
Address: 5293 NE Elam Young Pkwy, #140	
City/State/ZIP: Hillsboro, OR 97124	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	

<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: - Same -	
Contact name: Mike Wille	
Address:	
City/State/ZIP:	
Phone: 503-502-8523	Fax:
E-mail: mikewille@habitatwest.org	

CONTRACTOR	
Business name: Northwest Plumbing Co dba Local Plumbing Co	
Address: 2870 SE 75th Ave Ste. 206	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 601-3717	Fax:
E-mail: haleys@localplumbingco.c	Plumbing. lic.: 34-197PB
CCB lic.: 72263	City or metro lic. no.: 1690

Authorized signature: <i>Haley Shannon</i>	Date: 03/06/19
Print name: Haley Shannon	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath	X	448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



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

Residential Plumbing Authorization To Begin Work

B2020-3078

05350-BPB-20-00397

Approval Code: 248807 8/25/2020 6:16 am

E-mailed To: beavertonreeds@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: 10370 SW SHEARWATER LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: doug	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132BA02500	
DESCRIPTION OF WORK	
rough in new shower, double lavs, reset fixtures, bathtub demo	
APPLICANT	
Name: david reed	
Phone: 5039148054	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1712	CCB lic. no.: 209378
Business Name: REED PLUMBING AND MECHANICAL GROUP LLC	
Contact:	
Address: 7825 SW 184TH AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Phone: 503.336.0505	Fax:
Email: reed.pmg@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$35.71
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

B2020-3072

05350-BPB-20-00393

Approval Code: 05750G 8/24/2020 3:38 pm

E-mailed To: permits@fastwaterheater.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: 10355 SW DUNLIN PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: KIM	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AB17600	
DESCRIPTION OF WORK	
Remove/replace gas water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

B2020-3073

05350-BPB-20-00394

Approval Code: 08682G 8/24/2020 3:46 pm

E-mailed To: permits@fastwaterheater.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: 355 NW SILVERADO DR	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: SMITH	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132CC01000	
DESCRIPTION OF WORK	
Remove/replace gas water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00395

Approval Code: 08296G 8/24/2020 3:55 pm

E-mailed To: permits@fastwaterheater.com

B2020-3074

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: 14855 SW OSPREY CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: CHOI	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132AD01300	
DESCRIPTION OF WORK	
Remove/replace gas water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

B2020-3076

05350-BPB-20-00396

Approval Code: 03404G 8/24/2020 4:03 pm

E-mailed To: permits@fastwaterheater.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: 6975 SW TIERRA DEL MAR DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: WEIRICK	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AD06600	
DESCRIPTION OF WORK	
Remove/replace gas water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00391

Approval Code: 01011G 8/24/2020 2:53 pm

E-mailed To: permits@fastwaterheater.com

B2020-3068

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: 11057 SW ADELE DR	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: PAGTAKHAN	
Cross Street/directions to job site:	
Tax map/parcel no.:	1S103AA00900
DESCRIPTION OF WORK	
Remove/replace gas water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00392

Approval Code: 00973G 8/24/2020 3:15 pm

E-mailed To: permits@fastwaterheater.com

32020-3071

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: 14810 SW SANDHILL LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 201	
Project Name: HAAN	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105AA91622	
DESCRIPTION OF WORK	
Remove/replace gas water heater.	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367084	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00388

Approval Code: 01638C 8/24/2020 8:30 am

E-mailed To: anctilplumbing@frontier.com

PLAN REVIEW

- Please check all that apply:
- Med gas/vacuum system or health care facility
 - Vacuum drainage waste and vent system
 - Commercial booster pump
 - Addition of a new motor load
 - Installation of multi-purpose fire sprinkler systems
 - Wastewater pretreatment system
 - Reclaimed wastewater
 - Chemical drainage waste and vent systems
 - Multi-purpose Fire sprinkler system
 - Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer

FEE SCHEDULE

Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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: 6540 SW CHERRYHILL LN

City/State/ZIP: BEAVERTON, OR 97008

Suite/bldg./apt.no.:

Project Name:

Cross Street/directions to job site:

Tax map/parcel no.: 1S121BB09200

DESCRIPTION OF WORK

Repipe hot and cold water lines

APPLICANT

Name: William Anctil

Phone: 5036427323

Fax:

Email:

CONTRACTOR

Plumb lic. no.: 26-162PB

CCB lic. no.: 24184

Business Name: ANCTIL PLUMBING INC

Contact:

Address: 16900 SW MERLO RD

City/State/ZIP: BEAVERTON, OR 97006

Phone: 5036453401

Fax: 5036427755

Email:

Metro lic. no.:

City lic. no.:

Upon review and approval 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 Plumbing Authorization To Begin Work

05350-BPB-20-00389

Approval Code: 41423E 8/24/2020 12:53 pm

E-mailed To: jessadvancedplumbing@gmail.com

B2020-3064

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: 10036 SW TRAPPER TER	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: water service	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S134BA92712	
DESCRIPTION OF WORK	
replace water service	
APPLICANT	
Name: chuck McAllister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jessadvancedplumbing@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load		
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

B2020-3005

Residential Plumbing Authorization To Begin Work
05350-BPB-20-00390

Approval Code: 030675 8/24/2020 1:07 pm

E-mailed To: SygnetSolutions@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: 12005 SW MORLOCK CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127CC02300	
DESCRIPTION OF WORK	
Replace 70 LF sanitary sewer from property to ROW	
APPLICANT	
Name: Kerry Weninger	
Phone: 5037108297	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1826	CCB lic. no.: 213482
Business Name: SYGNET SOLUTIONS LLC	
Contact:	
Address: PO BOX 2508	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5035163588	Fax:
Email: guybeatly@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

RECEIVED

8/6/2020

Plumbing Permit Application



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

REV 20-436

T

Date Received: Permit No.: B2019-4638
Date Issued: 8/24/2020
Payment Type:

TYPE OF WORK: New construction
CATEGORY OF CONSTRUCTION: Multi-family
JOB SITE INFORMATION AND LOCATION: 4100 SW Orbit St.
DESCRIPTION OF WORK: PROPERTY OWNER
Name: West End Beaverton LLC
Address: 703 Broadway St. Suite 510
City/State/ZIP: Vancouver WA 98660
Phone: (503) 221-1920
E-mail: CGrieb@taylormorrison.com
Business name: Polygon WLH
Contact name: Cam Grieb
Address: 703 Broadway St. Suite 510
City/State/ZIP: Vancouver WA 98660
Phone: (503) 536-3486
E-mail: CGrieb@taylormorrison.com
CONTRACTOR: Alliance Plumbing
Address: 146 west historic columbia river hwy
City/State/ZIP: troutdale or 97060
Phone: (503) 492-3490
Fax: (503) 912-6438
E-mail: tomh@allianceplumbing.ne
Plumbing. lic.: PB732
CCB lic.: 184601
City or metro lic. no.: 10833

FEE SCHEDULE table with columns: Description, Qty., Ea., Total. Includes items like SFR (1) bath, Site utilities, Fixture or item, and a total of \$9,367.92.

Authorized signature: Robert Dishman
Date: 02/26/20

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

* See Fee Schedule

total due



Plumbing Permit Application

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

Date Received: 1-15-19	Permit No.: B2019-0187
Date Issued: 8/24/2020	
Payment Type:	

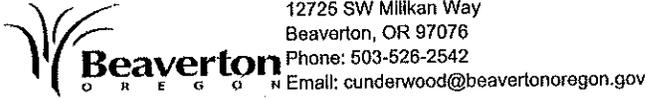
TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: SW DENNEY Rd.	
City/State/ZIP: BEAVERTON OR 97008	
Suite/bldg./apt. no.:	Project name: CAMELIA
Cross street/directions to job site: SW DENNEY and 100ST	
Subdivision:	Lot no.:
Tax map/parcel no.: 15123 BC - 00200	
DESCRIPTION OF WORK	
NEW HOME	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: PETRU BULZA	
Address:	
City/State/ZIP: 9975 SW DENNEY RD 97008	
Phone: 503 4070738	Fax:
E-mail: P.BULZA@Yahoo.com	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: PETRU BULZA CONSTRUCTION	
Contact name: PETRU	
Address: 9975 SW DENNEY Rd.	
City/State/ZIP: Beaverton OR 97008	
Phone: 503 4070738	Fax: /
E-mail: P.BULZA@Yahoo.com	
CONTRACTOR	
Business name: DELTA PLUMBING	
Address:	
City/State/ZIP:	
Phone: 503 998-0683	Fax:
E-mail:	Plumbing lic.:
CCB lic.: 182846	City or metro lic. no.:

Authorized signature:	Date:
Print name:	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	1	506.67	
Each additional bath/kitchen	1	46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Residential Plumbing Authorization To Begin Work

05350-BPB-20-00386

Approval Code: 08739G 8/20/2020 3:14 pm

E-mailed To: CAMASPLUMBING@GMAIL.COM

B2020-3035

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: 9095 SW GRAPHITE TER	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Stricker	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129DB15500	
DESCRIPTION OF WORK	
Bathroom Remodel	
APPLICANT	
Name: Mathew Anderson	
Phone: 8015970347	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1696	CCB lic. no.: 209326
Business Name: CAMAS PLUMBING LLC	
Contact:	
Address: 3803 NW 19TH CIR	
City/State/ZIP: CAMAS, WA 98607	
Phone: 8015970347	Fax:
Email: CAMASPLUMBING@GMAIL.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility		<input type="checkbox"/> Chemical drainage waste and vent systems	
<input type="checkbox"/> Vacuum drainage waste and vent system		<input type="checkbox"/> Multi-purpose Fire sprinkler system	
<input type="checkbox"/> Commercial booster pump		<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Addition of a new motor load			
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$35.71
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7665 SW COPEL ST	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: Mason	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BD01601	
DESCRIPTION OF WORK	
Installation of backflow preventer for irrigation system	
APPLICANT	
Name: Jason Booth	
Phone: 503-855-4976	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8864	CCB lic. no.:
Business Name: Oregon Landscape Construction LLC	
Contact: Oregon Landscape Construction LLC	
Address: Po Box 1265	
City/State/ZIP: Clackamas, Oregon 97015	
Phone: 5038554976	Fax:
Email: tony@oregonlandscape.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Multi-purpose Fire sprinkler system	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Minimum Fees			
Balance of permit fees			\$52.96
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



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

Residential Plumbing Authorization To Begin Work
05350-BPB-20-00385

Approval Code: 092027 8/19/2020 4:18 pm

E-mailed To: acibrian2006@gmail.com

B:2020.3026

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: 7325 SW 130TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Irrigation Backflow only	
Cross Street/directions to job site: SW brockman	
Tax map/parcel no.: 1S121DB00200	
DESCRIPTION OF WORK	
Installation of a new Backflow device for irrigation only.	
APPLICANT	
Name: Alfredo Cibrian	
Phone: 5032099748	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 9012	CCB lic. no.:
Business Name: Waterscape Irrigation LLC	
Contact: Waterscape Irrigation LLC	
Address: Po Box 1856	
City/State/ZIP: Gresham, Oregon 97030	
Phone: 5032099748	Fax:
Email: acibrian2006@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Minimum Fees			
Balance of permit fees			\$52.96
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00384

Approval Code: 08384Q 8/19/2020 3:55 pm

E-mailed To: dispatch@sutherlandplumbing.com

B2020-3025

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: 14130 SW YEARLING CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Holan Water Service	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CB11100	
DESCRIPTION OF WORK	
Replacement of main water line	
APPLICANT	
Name: Ti Sutherland	
Phone: 5037194015	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1365	CCB lic. no.: 200460
Business Name: SUTHERLAND PLUMBING LLC	
Contact:	
Address: 6765 SW 213TH AVE	
City/State/ZIP: ALOHA, OR 97078	
Phone: 5037194015	Fax:
Email: office@sutherlandplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

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

Date Received: 8/19/2020	Permit No: 2020-3013
Date Issued: 8/19/2020	BL
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other: light commercial
JOB SITE INFORMATION AND LOCATION	
Job site address: 12650 SW Brockman	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Montessori
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
water service	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Higher Ground Education	
Address: 10 Orchard, STE 200	
City/State/ZIP: Lake Forest, CA 92630	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Nick Blackman LLC DBA South Clackamas Plumbing	
Address: 13355 S Molalla Forest RD	
City/State/ZIP: Molalla, OR 97038	
Phone: (503) 462-3082	Fax:
E-mail: nick@southclackamasplumbing.com	Plumbing, llc.: PB 1965
CCB lic.: 216021	City or metro lic. no.:
Authorized signature:	
Print name: Nick Blackman	Date: 08/19/20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 150)		*	96.67
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			96.67
Minimum permit fee:			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
	State surcharge (12% of permit fee)		11.60
TOTAL PERMIT FEE			\$108.27

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 8-19-20	Permit No.: B2000-3022
Date Issued: 8-19-20	By: TK
Payment Type: visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17942 NW Dustin Lane	
City/State/ZIP: BEAVERTON OR 97006	
Suite/bldg./apt. no.:	Project name: LEITNER
Cross street/directions to job site: WALKER RD to Dustin Lane	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install new shower	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: John / Jessica Leitner	
Address: 17942 NW Dustin Lane	
City/State/ZIP: BEAVERTON OR 97006	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: CASE Remodeling	
Contact name: Alan	
Address: 9710 NE WARDEN Hill RD	
City/State/ZIP: DUNDRE OR 97115	
Phone: 503-341-3153	Fax:
E-mail: CASEREMODELINGINC95@gmail.com	
CONTRACTOR	
Business name: MAREK Plumbing	
Address: 3229 SE 160th AVE	
City/State/ZIP: POX OR. 97236	
Phone: 503-761-0105	Fax:
E-mail:	Plumbing lic.: 34-22998
CCB lic.: 75624	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Eq.	Total
New 1-2-family dwellings (includes 100 fl. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.87	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/ump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			
Roof drain (commercial)		20.31	
Sink/basin/avatory		20.31	
Tub/shower/shower pan	1	20.31	20.31
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			20.31
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			14.60
TOTAL PERMIT FEE			\$108.24

Authorized signature: _____
 Print name: **MAREK GRIELAK** Date: **8/16/20**

This permit application expires if a permit is not obtained within 480 days after it has been accepted as complete.
 * See Fee Schedule

~~\$108.24~~
 \$130.98



Plumbing Permit Application

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

Date Received: 08/19/2020	Permit No.: B2020-3017
Date Issued: 8-19-20	By: <i>[Signature]</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Visa</i>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8520 SW. 133rd Ave.	
City/State/ZIP: Beaverton, OR, 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Installation of a Ground water sump pump in Crawlspace	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Eric Barboa	
Address: 8520 SW. 133rd Ave	
City/State/ZIP: Beaverton, OR, 97008	
Phone: 971 202 2578	Fax:
E-mail: eman247365@gmail.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Johns Waterproofing	
Contact name: Brian Noon / Cleone Cantu	
Address: 201 Airport Rd. NE	
City/State/ZIP: Silverton, OR, 97381	
Phone: 503 873 5650	Fax: 503 873 3234
E-mail: Cleone@johnswaterproofing.com	
CONTRACTOR	
Business name: Johns Waterproofing	
Address: 201 Airport Rd NE	
City/State/ZIP: Silverton, OR, 97381	
Phone: 503 873 5650	Fax: 503 873 3234
E-mail: Cleone@johnswaterproofing.com	
CCB lic.: 15830	City or metro lic. no.:
Authorized signature: <i>[Signature]</i>	Date:
Print name:	Date:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump	1	20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



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

Residential Plumbing Authorization To Begin Work

32020-3019

05350-BPB-20-00383

Approval Code: 04423K 8/18/2020 5:11 pm

E-mailed To: shelly@excellenceplumbing.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: 14370 SW 27TH CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Wood	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CB94200	
DESCRIPTION OF WORK	
Repipe house Install new water heater	
APPLICANT	
Name: Shelly Eugenio	
Phone: 503-643-3459	Fax: 503-643-2815
Email:	
CONTRACTOR	
Plumb lic. no.: PB344	CCB lic. no.: 175768
Business Name: EXCELLENCE PLUMBING LLC	
Contact:	
Address: 7520 SW 140TH AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Phone: 5036433459	Fax: 5036432815
Email: shelly@excellenceplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$165.26
State surcharge (12% of permit total)			\$19.83
TOTAL PERMIT FEE			\$185.09

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

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

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

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

B2020-2995



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

Commercial Plumbing Authorization To Begin Work

05350-BPB-20-00378

Approval Code: 118143 8/18/2020 9:34 am

E-mailed To: jackie@beavertonplumbing.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: 5030 SW WASHINGTON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: SW WASH AVE W/S	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB04700	
DESCRIPTION OF WORK	
PROVIDE NEW PRIVATE SIDE CONNECTIONS TO NEW WATER METER	
APPLICANT	
Name: Jacqueline Stewart	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

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

Date Received: <u>8/18/2020</u>	Permit No: <u>152020-2994</u>
Date Issued: <u>8/18/2020</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>7240 SW Hyland Prk Way</u>	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replace about 15' feet of sanitary sewer line on property</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Sierra Excavation & Const.</u>	
Address: <u>O.P. Box 30642</u>	
City/State/ZIP: <u>Portland Or, 97294</u>	
Phone: <u>(503) 492-9242</u>	Fax: <u>(503) 252-9808</u>
E-mail: <u>sierraexcavation@gmail.com</u>	Plumbing lic.: <u>PB868</u>
CCB lic.: <u>190493</u>	City or metro lic. no.: <u>190493</u>
Authorized signature: <u>[Signature]</u>	Date: <u>08/18/20</u>
Print name: <u>Ubaldo Sierra</u>	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Eq.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft)		*	
Site utilities			
Catch basin/area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0.15</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/trub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter prv		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.84
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 8/19/20	Permit No.: 52020-2496
Date Issued: 8/19/20	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder 5315	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 5315 SW DOVER LANE	
City/State/ZIP: Beaverton	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Sewer repair on property	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Royal Flush Plumbing	
Contact name: Ted & Kim	
Address: PO Box 507	
City/State/ZIP: Beavercreek, OR 97004	
Phone: 503-3919	Fax: 503-3940
E-mail: royalflushplumbing1@msn.com	
CONTRACTOR	
Business name: Royal Flush Plumbing Co	
Address: PO Box 507	
City/State/ZIP: Beavercreek, OR 97004	
Phone: 503-657-3919	Fax: 503-657-3940
E-mail: royalflushplumbing1@msn.com	Plumbing, lic.: 3-423PB
CCB lic.: 181482	City or metro lic. no.: 9936

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		508.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (sq ft.)		*	
Site utilities:			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 20)	1	*	
Storm sewer (no. linear ft.:)		*	
Water service (no. linear ft.:)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventor		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hoae bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter put		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

Authorized signature: [Signature]
 Print name: Teddy Reynolds
 Date: 8/17/20
 FORM B70-1004
 REV 10/17

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

2020-0985



Plumbing Permit Application

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

Date Received: 8/19/2020	Permit No.: B 2020-2992
Date Issued: 8/19/2020	AY
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9905 S Cirrus Drive	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.: 22-5	Project name:
Cross street/directions to job site: Parkside Business Center	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
ADD - Breakroom sink 1 - Water heater / Tankless	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Gridline Plumbing	
Address: 14844 SW 109th Ave	
City/State/ZIP: Tigard OR 97224	
Phone: 971-275-6667	Fax:
E-mail: gridlineplumbing@gmail.com	Plumbing lic.: 26-44986
CCB lic.: 74105	City or metro lic. no.: 1725

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	X 1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	X 1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			40.62
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: <i>Jeff Duncan</i>	Print name: Jeff DUNCAN	Date: 8-17-20
--	-------------------------	---------------



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

Commercial Plumbing Authorization To Begin Work

05350-BPB-20-00380

Approval Code: 118134 8/18/2020 9:43 am

E-mailed To: jackie@beavertonplumbing.com

B3020-3001

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: 5100 SW WASHINGTON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: SW WASH AVE W/S	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB04800	
DESCRIPTION OF WORK	
PROVIDE NEW PRIVATE SIDE CONNECTIONS TO NEW WATER METER	
APPLICANT	
Name: Jacqueline Stewart	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00379

Approval Code: 118104 8/18/2020 9:40 am

E-mailed To: jackie@beavertonplumbing.com

B 2020-3000

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addillon/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5150 SW WASHINGTON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Sulte/bldg./apt.no.:	
Project Name: SW WASH AVE W/S	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CB04801	
DESCRIPTION OF WORK	
PROVIDE NEW PRIVATE SIDE CONNECTION TO NEW WATER METER	
APPLICANT	
Name: Jacqueline Stewart	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00381

Approval Code: 118174 8/18/2020 9:47 am

E-mailed To: jackie@beavertonplumbing.com

B 2020-2999

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: 5055 SW WASHINGTON AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: SW WASHINGTON AVE W/S	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116DA00100	
DESCRIPTION OF WORK	
PROVIDE NEW PRIVATE SIDE CONNECTIONS TO NEW WATER METER	
APPLICANT	
Name: Jacqueline Stewart	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

B2020. 2998

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: 15435 SW MIDDLETON CT	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Keith Personal Home	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120DC13100	
DESCRIPTION OF WORK	
Bathroom addition, water heater replacement and master tub/shower replacement	
APPLICANT	
Name: Haley Shannon	
Phone: 5036013717	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 34-197PB	CCB lic. no.: 72253
Business Name: NORTHWEST CENTRAL PLUMBING CO INC	
Contact:	
Address: 2870 SE 75TH AVE SUITE 206	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036422067	Fax: 5036425954
Email: katy-nwcp@verizon.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$15.40
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00377

Approval Code: 03005D 8/17/2020 1:51 pm

E-mailed To: service@powerplumbingco.com

B2020-2974

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: 11335 SW CLIFFORD ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 20r241	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122DB03800	
DESCRIPTION OF WORK	
New 1" Backflow Install	
APPLICANT	
Name: Carl Siewell	
Phone: 5032441900	Fax: 5032448825
Email:	
CONTRACTOR	
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378
Business Name: POWER PLUMBING CO	
Contact:	
Address: PO BOX 19418	
City/State/ZIP: PORTLAND, OR 97280	
Phone: 5032441900	Fax: 5032448825
Email: service@powerplumbingco.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Minimum Fees			
Balance of permit fees			\$52.96
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 97005
 Phone: 503-526-2500
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00375

Approval Code: 016333 8/16/2020 7:30 pm

E-mailed To: katko9792@comcast.net

B2020-2967

TYPE OF WORK	
<input type="checkbox"/> New Construction	
<input 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	
Job Address: 9550 SW PINEHURST DR	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA05100	
DESCRIPTION OF WORK	
rough in a washer	
APPLICANT	
Name: alex katko	
Phone: 5035151616	
Email:	
CONTRACTOR	
Plumb lic. no.: PB2043 CCB #: 220646	
Business Name: WATERWORKS CONTRACTORS	
Contact:	
Address: 1954 SW 35TH ST	
City/State/ZIP: GRESHAM, OR 97080	
Phone: 5034811616	
Email:	
Metro lic. no.:	

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Multi-purpose Fire sprinkler system	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



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

Date Received: 8-13-20	Permit No.: B2020-2939
Date Issued: 8-14-20	By: NK
Payment Type: Visa	

CALCULATE PLUMBING PERMIT FEES

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 4245 SW Rose Biggi Ave.	
City/State/ZIP: Beaverton / OR / 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Cap/Cap Demo & Abatement	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Beaverton Urban Redevelopment Agency	
Address: 12725 SW Millikan Way	
City/State/ZIP: Beaverton / OR / 97005	
Phone: 503.526.2520	Fax: 503.526.2550
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: LOI Environmental & Demolition Services	
Contact name: Ben Tipton	
Address: 5930 Jean Rd	
City/State/ZIP: Lake Oswego / OR / 97035	
Phone: 503.245.6460	Fax: 503.245.4201
E-mail: b.tipton@loienviron.com	
CONTRACTOR	
Business name: Beaverton Plumbing	
Address: 13980 SW Tualatin Valley Hwy	
City/State/ZIP: Beaverton, OR 97005	
Phone: 503.643.7619	Fax:
E-mail: info@beavertoplumbing.com Plumbing. lic.:	
CCB lic.: 12889	City or metro lic. no.:

FEE SCHEDULE			
>>CLICK HERE TO DETERMINE IF PLAN REVIEW IS REQUIRED<<			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>) <<Enter linear feet			
Storm sewer (no. linear ft.: <u>0</u>) <<Enter linear feet			
Water service (no. linear ft.: <u>0</u>) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>) <<Enter valuation*			
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: **Ben Tipton** Date: **8/13/20**



Plumbing Permit Application

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

Date Received: 8-13-20	Permit No.: B2020-2941
Date Issued: 8-14-20	By: JHK
Payment Type: VISA	

CALCULATE PLUMBING PERMIT FEES

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master buldger	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12875 SW Beaverdam 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	
Demo & Abatement	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Beaverton Urban Redevelopment Agency	
Address: 12725 SW Millikan Way	
City/State/ZIP: Beaverton /OR/ 97005	
Phone: 503.526.2520	Fax: 503.526.2550
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: LOE Environmental & Demolition Services	
Contact name: Ben Tipton	
Address: 5930 Jean Rd.	
City/State/ZIP: Lake Oswego /OR/ 97035	
Phone: 503.245.6460	Fax: 503.245.4201
E-mail: b.tipton@loenviro.com	
CONTRACTOR	
Business name: Beaverton Plumbing	
Address: 13980 SW Tualatin Valley Hwy	
City/State/ZIP: Beaverton, OR 97005	
Phone: 503.643.7619	Fax:
E-mail: info@beavertonplumbing.com	Plumbing, llc.:
CCB lic.: 12889	City or metro lic. no.:

Authorized signature:

Print name: Date: 8/13/20

FEE SCHEDULE			
>>CLICK HERE TO DETERMINE IF PLAN REVIEW IS REQUIRED<<			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.) <<Enter square footage>			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/roor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0) <<Enter valuation>			
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule





Plumbing Permit Application

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

Date Received:	Permit No. 152020-2949
Date Issued: 8/14/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 2597 SW Cedar Hills Blvd	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: Cedar Hills Crossing- B
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Plumbing for water fixtures	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Mall 2, LLC	
Address: 2360 SW Westfield Ave	
City/State/ZIP: Portland, OR 97225	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: PMSI, LLC	
Contact name: Amanda Reyes	
Address: 8295 Ne Evergreen Pkwy Ste 204	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 466-2222	Fax: (503) 466-2211
E-mail: areyes@msi-systems.com	
CONTRACTOR	
Business name: PMSI, LLC	
Address: 8295 NE Evergreen Pkwy Ste 204	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (503) 466-2222	Fax: (503) 466-2211
E-mail: areyes@msi-systems.com	
CCB lic.: 158286	Plumbing lic.: 34-434PB
	City or metro lic. no.: 7928

Authorized signature: [Signature]
 Print name: Amanda Reyes

Date: 08/13/20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Flushing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib	1	20.31	20.31
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)	2	20.31	40.62
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: Floor Cleanouts	5	20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

230.90



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 8/14/2020	Permit No.: B2020-2944
Date Issued: 8/14/20	By: JK
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Other:	
CATEGORY OF CONSTRUCTION	
<input 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: 14220 SW Barlow Ct
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Barlow Ct and 142nd Ave	
Subdivision: Holle Ridge/ Hyland	Lot no.: 29, Block 3
Tax map/parcel no.: R0180529	
DESCRIPTION OF WORK	
Replace 100 amp panel with 150-200 amp panel, replace wiring to bring up to code, add circuits to eliminate breaker trips	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Jennifer & Andrew Redinger	
Address: 14220 SW Barlow CT	
City/State/ZIP: Beaverton, OR 97008	
Phone: (971) 330-8686	Fax:
E-mail: andrew.redinger@outlook.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:	
Contact name: Andrew Redinger	
Address: 14220 SW Barlow CT	
City/State/ZIP: Beaverton, OR 97008	
Phone: (971) 330-8686	Fax:
E-mail: andrew.redinger@outlook.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 over 600 amps <input type="checkbox"/> Building over three stories <input type="checkbox"/> Marinas and boatyards <input type="checkbox"/> Floating buildings <input type="checkbox"/> Commercial-use agricultural buildings <input type="checkbox"/> Installation of 150 KVA or larger separately derived system <input type="checkbox"/> "A," "E," "I-2," "I-3" occupancy <input type="checkbox"/> Recreational vehicle parks		
<input type="checkbox"/> Service or feeder 400amps or more	<input type="checkbox"/> Fire pump	<input type="checkbox"/> Emergency system	<input type="checkbox"/> Addition of new motor load of 100HP or more	<input type="checkbox"/> Six or more residential units
<input type="checkbox"/> Health-care facilities	<input type="checkbox"/> Hazardous locations			
FEE SCHEDULE				
Description	Qty.	Fee	Total	*
Residential single- or multi-family dwelling unit				
Includes attached garage				
1,000 sq. ft. or less		194.64		4
Ea. add'l 500 sq. ft. or portion		34.77		
Limited energy, residential (with above sq. ft.)		46.42		2
Limited energy, multi-family residential (with above sq. ft.)		91.72		2
Services or feeders installation, alteration, and/or relocation				
200 amps or less	1	115.83	115.83	2
201 amps to 400 amps		137.89		2
401 amps to 600 amps		229.34		2
601 amps to 1,000 amps		299.93		2
Over 1,000 amps or volts		690.22		2
Utility reconnect		91.72		1
Temporary services or feeders installation, alteration, and/or relocation				
200 amps or less		91.72		2
201 amps to 400 amps		127.41		2
401 amps to 600 amps		184.11		2
601 amps to 1,000 amps		225.29		2
Branch circuits - new, alteration, or extension, per panel				
A. Fee for branch circuits with above service or feeder fee, each branch circuit		4.26		2
B. Fee for branch circuits without service or feeder fee, first branch circuit		81.14		2
Each add'l branch circuit		4.26		
Miscellaneous (service or feeder not included)				
Each manufactured or modular dwelling, service, and/or feeder		91.72		2
Pump or irrigation circle		91.72		2
Sign or outline lighting		91.72		2
Signal circuit(s) or limited-energy panel, alteration, or extension. Describe:		91.72		2
Each additional inspection over allowable in any of the above				
Per inspection		81.14		
Investigation fee				
Other:				
Electrical permit fees				
SUBTOTAL			115.83	
Plan review (25% of permit fee)				
State surcharge (12% of permit fee)				13.90
TOTAL PERMIT FEE			\$129.73	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * Number of inspections allowed per permit.
 Form B7A-1002 REV 10/17



Electrical Permit Application

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

OFFICE USE ONLY	
Date Received: 8-14-20	Permit No.: B2020-2946
Date Issued: 8-14-20	By: ML
Payment Type: MC	

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.: 64463	Job address: 9020 SW BEAVERTON HILLSDALE HWY
City/State/ZIP: PORTLAND, OR 97225	
Suite/bldg./apt. no.:	Project name: EDISON HIGH SCHOOL
Cross street/directions to job site: SW 91ST AVE AND SW BEAVERTON HILLSDALE	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
64463: INSTALL CAT6 CABLING AND SECURITY ACCESS POINTS	
<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: CHRISTENSON ELECTRIC	
Contact name: TIFFANY TURGETTO	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR	
Phone: (503) 419-3344	Fax: (503) 419-3333
E-mail: PERMITS@CHRISTENSON.COM	
CONTRACTOR	
Business name: CHRISTENSON ELECTRIC	
Address: 17201 NE SACRAMENTO ST	
City/State/ZIP: PORTLAND, OR 97230	
Phone: (503) 419-3300	Fax: (503) 419-3333
E-mail: PERMITS@CHRISTENSON.COM	CCS lic. no.: 458
Electrical lic. no.: 26-34C	City or metro lic.: 8737
Supervising electrician signature, required: Robert Bruene 52158	
Print name: ROBERT BRUENE	Date: 08/10/20
Authorized signature:	
Print name:	Date:

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

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



Plumbing Permit Application

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

Date Received: 8-14-20	Permit No.: B2020-2945
Date Issued: 8-14-20	By: JMK
Payment Type: VISA	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master bulder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 14220 SW Barlow CT	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name: Redinger Remodel
Cross street/directions to job site:	
Subdivision: Holly Ridge/Hyland	Lot no.: 29, Block 3
Tax map/parcel no.: R0180529	
DESCRIPTION OF WORK	
Add Bathroom- water tank, 2 sinks, toilet, shore. Move Washer to utility room next to bathroom. Slab floor	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Jennifer & Andrew Redinger	
Address: 14220 SW Barlow CT	
City/State/ZIP: Beaverton, OR 97008	
Phone: (971) 330-8686	Fax:
E-mail: andrew.redinger@outlook.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Andrew Redinger	
Address: 14220 SW Barlow CT	
City/State/ZIP: Beaverton, OR 97008	
Phone: (971) 330-8686	Fax:
E-mail: andrew.redinger@outlook.com	
CONTRACTOR	
Business name: Home Owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>2</u>)		*	52.99
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	20.31
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	1	20.31	20.31
Tub/shower/shower pan	1	20.31	20.31
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	1	20.31	20.31
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			101.55
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			12.19
TOTAL PERMIT FEE			\$113.74

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete. **\$173.06**

* See Fee Schedule

Print name: **Andrew Redinger**

Date:

Authorized signature:



Plumbing Permit Application

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

Date Received:	Permit No.: B2018-5270
Date Issued: 8-14-20	By: <i>HK</i>
	Payment Type: <i>check</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17321 SW Goldcrest Lane	
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.: 87
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Ray Mullen

Print name: Ray Mullen	Date: 7/20/20
------------------------	---------------

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



Plumbing Permit Application

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

Date Received:	Permit No.: B2018-5400
Date Issued: 8-14-20	By: <i>ML</i>
	Payment Type: <i>Check</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17319 SW Goldcrest Lane	
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.: 86
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing, lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or french drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Ray Mullen
 Print name: Ray Mullen Date: 7/20/20

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



Plumbing Permit Application

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

Date Received:	Permit No.: B2018-5401
Date Issued: 8-14-20	By: AM
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17315 SW Goldcrest Lane	
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.: 85
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Ray Mullen
 Print name: Ray Mullen Date: 7/20/20

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



Plumbing Permit Application

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

Date Received:	Permit No.: B2018-5402
Date Issued: 8-14-20	By: FLR
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17311 SW Goldcrest Lane	
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.: 84
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing. llc.: 34-260PB
CGB llc.: 92689	City or metro llc. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Ray Mullen
 Print name: Ray Mullen Date: 7/20/20

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



Plumbing Permit Application

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

Date Received: 8-13-20	Permit No.: B2020-2933
Date Issued: 8-13-20	By: ML
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 5325 SW Dover Lane	
City/State/ZIP: Beaverton	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Direction Bore to replace sewer line on property	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Royal Flush Plumbing	
Contact name: Ted or Kim	
Address: PO Box 507	
City/State/ZIP: Beavercreek, OR 97004	
Phone: (503) 657-3919	Fax: (503) 657-
E-mail: royalflushplumbing1@msn.com	
CONTRACTOR	
Business name: Royal Flush Plumbing Co	
Address: PO Box 507	
City/State/ZIP: Beavercreek, OR 97004	
Phone: 503-657-3919	Fax: 503-657-3940
E-mail: royalflushplumbing1@msn.com	Plumbing, lic.: 3-423PB
CCB lic.: 181482	City of Beaverton lic. no.: 9936

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.87	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft. 100)	1	*	
Storm sewer (no. linear ft. _____)		*	
Water service (no. linear ft. _____)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		49.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejector/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter prv		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		0
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature:

Print name: **Teddy Reynolds** Date: **8/13/20**

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



Plumbing Permit Application

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

Date Received: 8-13-20	Permit No.: B2020-2918
Date Issued: 8-13-20	By: AK
Payment Type: Discover	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Master buider	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 13590 SW WHITWORTH CT	
City/State/ZIP: BEAVERTON OR	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: MENLO STATES	Lot no.: 1
Tax map/parcel no.:	
DESCRIPTION OF WORK	
BACKFLOW DEVICE FOR IRRIGATION SYSTEM	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: CREEKSCAPE DESIGN	
Contact name: JUAN GUTIERREZ	
Address: 4305 SW 185TH AVE	
City/State/ZIP: ALOHA OR 97078	
Phone: 503-572-5589	Fax: _____
E-mail: JUAN@CREEKSCAPEDSIGN.COM	
CONTRACTOR	
Business name: CREEKSCAPE DESIGN	
Address: 4305 SW 185TH AVE	
City/State/ZIP: ALOHA OR 97078	
Phone: 503-572-5589	Fax: _____
E-mail: JUAN@CREEKSCAPEDSIGN.COM	Plumbing lic.:
CCB lic.: 8718	City or metro lic. no.:

Authorized signature: *[Signature]*
 Print name: **JUAN GUTIERREZ** Date: **8-13-20**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	<u>1</u>	43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00374

Approval Code: 013112 8/13/2020 8:21 am

E-mailed To: STEPHANIE@BEAVERTONPLUMBING.COM

B2020-2915

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: 15330 SW DAVIS RD	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AB02700	
DESCRIPTION OF WORK	
WATER HEATER INSTALLATION, ONE-FLOOR RE-PIPE	
APPLICANT	
Name: STEPHANIE PRATT-MCROBERTS	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$165.26
State surcharge (12% of permit total)			\$19.83
TOTAL PERMIT FEE			\$185.09

Upon review and approval 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 Plumbing Authorization To Begin Work

05350-BPB-20-00373

Approval Code: 00225G 8/12/2020 8:30 pm

E-mailed To: westlinnplumbing@hotmail.com

B2020-2911

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: 16135 SW GOSHAWK ST	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: kaiser	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105BB04600	
DESCRIPTION OF WORK	
master, hall bath, powder, kitchen remodel. replace interior water piping.	
APPLICANT	
Name: danny piscitelli	
Phone: 5037408251	Fax: 5039250932
Email:	
CONTRACTOR	
Plumb lic. no.: PB697	CCB lic. no.: 185445
Business Name: WEST LINN PLUMBING & CONSTRUCTION LLC	
Contact:	
Address: 16470 SW BROOKMAN RD	
City/State/ZIP: SHERWOOD, OR 97140	
Phone: 5037408251	Fax: 5039250932
Email: westlinnplumbing@hotmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Ice maker	1	\$20.31	\$20.31
Sink/basin/lavatory	4	\$20.31	\$81.24
Tub/shower/shower pan	3	\$20.31	\$60.93
Water closet	3	\$20.31	\$60.93
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$368.36
State surcharge (12% of permit total)			\$44.20
TOTAL PERMIT FEE			\$412.56

Upon review and approval 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



Plumbing Permit Application

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

Date Received: 8-13-20	Permit No.: B2020-2910
Date Issued: 8-13-20	By: JML
Payment Type: Check	

CALCULATE PLUMBING PERMIT FEES

CALCULATE PLUMBING PERMIT FEES

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11725 SW 12th St.	
City/State/ZIP: Beaverton OR, 97005	
Suite/bldg./apt. no.:	Project name: Garcia Irrigation
Cross street/directions to job site: SW Alger Ave.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Landscape irrigation installation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Richelle Garcia	
Address: 11725 SW 12th St.	
City/State/ZIP: Beaverton OR, 97005	
Phone: 971-275-2129	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Easy Green Irrigation	
Contact name: Paul Meyer	
Address: 1705 Conifer Dr.	
City/State/ZIP: Lake Oswego OR, 97034	
Phone: 541-420-4790	Fax:
E-mail: easygreenlandscape@gmail.com	
CONTRACTOR	
Business name: Easy Green Irrigation	
Address: 1705 Conifer Drive	
City/State/ZIP: Lake Oswego OR, 97034	
Phone: 541-420-4790	Fax:
E-mail: easygreenlandscape@gmail.com	Plumbing lic.:
CCB lic.: LCB # 9896	City or metro lic. no.:

Authorized signature: _____
 Print name: Paul Meyer Date: 8-5-20

FEE SCHEDULE			
>>CLICK HERE TO DETERMINE IF PLAN REVIEW IS REQUIRED<<			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, teach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0) <<Enter valuation*			
Roof drain (commercial)		20.31	
Sink/basin/tavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-plpe (first 20 fixtures)		144.95	
Multi-family/commercial re-plpe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Slate surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Always recalculate when adding or subtracting fees.>>>

Calculate Fees



Plumbing Permit Application

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

Date Received:	Permit No. B 2020-2889
Date Issued: 8/11/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9320 SW Buckingham Olace	
City/State/ZIP: Beaverton OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Repair approximately 14 lf of onsite sewer line	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Blue Mountain Community Management	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Faster Permits	
Contact name: Bradlee Hersey	
Address: 2000 SW 1st ste 420	
City/State/ZIP: Portland Oregon 97201	
Phone: 503-913-8811	Fax:
E-mail: Bradlee@fasterpermits.com	
CONTRACTOR	
Business name: Lovett INC	
Address: 6920 NE 42nd Ave	
City/State/ZIP: Portland OR, 97218	
Phone: 503-737-8423	Fax:
E-mail:	Plumbing. lic.: 26-773-PB
CCB lic.: 125507	City or metro lic. no.: 6930

FEE SCHEDULE			
>>CLICK HERE TO DETERMINE IF PLAN REVIEW IS REQUIRED<<			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 14) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0) <<Enter valuation*			
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: [Signature]

Print name: Bradlee Hersey Date: 8/5/20



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00372

Approval Code: 046476 8/11/2020 3:33 pm

E-mailed To: mason@myplumbingpdx.com

B2020-2892

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: 5675 SW ELM AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Miller	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114DC04700	
DESCRIPTION OF WORK	
New water service, repipe waste and water, remodel kitchen and bathrooms	
APPLICANT	
Name: Mason Yungeberg	
Phone: 9714130302	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB2054	CCB lic. no.: 221029
Business Name: MY PLUMBING SERVICES LLC	
Contact:	
Address: 17416 SE BROOKLYN ST	
City/State/ZIP: PORTLAND, OR 97236	
Phone: 9714130302	Fax:
Email: MYPLUMBINGSERVICESLLC@GMAIL.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	2	\$20.31	\$40.62
Hose bib	2	\$20.31	\$40.62
Water heater	1	\$20.31	\$20.31
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$235.78
State surcharge (12% of permit total)			\$28.29
TOTAL PERMIT FEE			\$264.07

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

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

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

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



Plumbing Permit Application

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

Date Received: 8-11-20	Permit No.: B2020-2880
Date Issued: 8-11-20	By: MK
Payment Type: MC	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9125 SW Pony Place	
City/State/ZIP: Beaverton/OR/97008	
Suite/bldg./apt. no.:	Project name: Front Yard Rain Drain
Cross street/directions to job site: SW Pony Place and SW Brockman St.	
Subdivision: Sorrento Ridge	Lot no.: R272118
Tax map/parcel no.: 1S128CB04300	
DESCRIPTION OF WORK	
Drain for on-going retaining wall project will be connected into existing rain drain.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Zachary Dunn	
Address: 9125 SW Pony Place	
City/State/ZIP: Beaverton/OR/97008	
Phone: (971) 409-8514	Fax:
E-mail: zach.international@gmail.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Home Owner	
Contact name: Zachary Dunn	
Address: 9125 SW Pony Place	
City/State/ZIP: Beaverton/OR/97008	
Phone: (971) 409-8514	Fax:
E-mail: zach.international@gmail.com	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector	1	20.31	20.31
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve	1	20.31	20.31
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Print name: Zachary Dunn	Date: 08/11/20
--------------------------	----------------

Authorized signature:

B2020-2885



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00371

Approval Code: 04956G 8/11/2020 9:58 am

E-mailed To: Scheduling@pexpdx.com

Form with sections: TYPE OF WORK, CATEGORY OF CONSTRUCTION, JOB SITE INFORMATION AND LOCATION, DESCRIPTION OF WORK, APPLICANT, CONTRACTOR.

PLAN REVIEW table with checkboxes for various plumbing systems. FEE SCHEDULE table with columns: Description, Qty, Ea, Total.

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00370

Approval Code: 601340 8/11/2020 9:40 am

E-mailed To: jpeterson@wolcott.pro

B2020-2884

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: 13070 SW FOREST GLENN CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DB04600	
DESCRIPTION OF WORK	
water repipe	
APPLICANT	
Name: Johnna Peterson	
Phone: 5039414848	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-824PB	CCB lic. no.: 112220
Business Name: DEVELOPMENT NORTHWEST INC	
Contact:	
Address: 1075 W HISTORIC COLUMBIA RIVER HWY	
City/State/ZIP: WOOD VILLAGE, OR 97060	
Phone: 5036671781	Fax: 5036679891
Email: charliec@wolcott.pro	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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

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

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

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



Plumbing Permit Application

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

RECEIVED

Date Received: 06/22/2020	Permit No.: B2020-2141
Date Issued: 8-10-20	By: JK
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
SW 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: WOLCOTT PLUMBING	
Address: 1075 W HISTORIC COLUMBIA RIVER HWY	
City/State/ZIP: TROUTDALE, OR 97060	
Phone: (503) 667-1781	Fax:
E-mail: cbowman@wolcottplumbing	Plumbing, lic.: 93-1191075
CCB lic.: 112220	City or metro lic. no.:
Authorized signature:	
Print name: Sandro Guerrero	Date: 06/22/20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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



Plumbing Permit Application

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

RECEIVED

Date Received: 06/22/2020	Permit No.: B2020-2141
Date Issued: 8-10-20	By: <i>MLK</i>
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: <i>Check</i>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master bldg	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17437 SW Dotterel Lane	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 190
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: Pacific Ground Works (Excavation)	
Address: P.O Box 646	
City/State/ZIP: Scappoose OR	
Phone: (503) 349-5762	Fax:
E-mail: pgroundw@msn.com	Plumbing. lic.: 152746
CCB lic.:	City or metro lic. no.:

Authorized signature: _____
 Print name: **William Obrien Smith** Date: **05/22/19**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector	1	20.31	20.31
Sanitary sewer (no. linear ft.: <u>10</u>)		*	52.99
Storm sewer (no. linear ft.: <u>10</u>)		*	52.99
Water service (no. linear ft.: <u>20</u>)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			222.96
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			26.76
TOTAL PERMIT FEE			\$249.72

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

* See Fee Schedule



Plumbing Permit Application

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

B2020-1258

Date Received:	Permit No.:
Date Issued: 8-10-20	By: <i>HL</i>
	Payment Type: <i>Check</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17421 SW Dotterel Lane	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 189
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: Pacific Ground Works (Excavation)	
Address: P.O Box 646	
City/State/ZIP: Scappoose OR	
Phone: (503) 349-5762	Fax:
E-mail: pgroundw@msn.com	Plumbing, lic.: 152746
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector	1	20.31	20.31
Sanitary sewer (no. linear ft.: 10)		*	52.99
Storm sewer (no. linear ft.: 10)		*	52.99
Water service (no. linear ft.: 20)		*	52.99
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			179.28
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			21.51
TOTAL PERMIT FEE			\$200.79

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

* See Fee Schedule

Authorized signature: _____
 Print name: William Obrien Smith Date: 03/31/20
 FORM B70-1004 REV 10/17



Plumbing Permit Application

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

Date Received:	P Permit No.: B2020-1258
Date Issued: 8-10-20	By: <i>JK</i>
	Payment Type: <i>Check</i>

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 17421 SW Dotterel Lane	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW 175TH AVE AND SW BARROWS RD	
Subdivision: SOUTH COOPER MT	Lot no.: 189
Tax map/parcel no.:	
DESCRIPTION OF WORK	
NEW CONSTRUCTION	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: SK HOFF CONSTRUCTION	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 641-7342	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: SK HOFF CONSTRUCTION	
Contact name: SANDRO GUERRERO	
Address: 735 SW 158TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: (503) 319-6963	Fax: (503) 641-7661
E-mail: sguerrero@arborhomes.com	
CONTRACTOR	
Business name: WOLCOTT PLUMBING	
Address: 1075 W HISTORIC COLUMBIA RIVER HWY	
City/State/ZIP: TROUTDALE, OR 97060	
Phone: (503) 667-1781	Fax:
E-mail: cbowman@wolcottplumbing	Plumbing. lic.: 93-1191075
CCB lic.: 112220	City or metro lic. no.:

FEE SCHEDULE			
For special information, use check/ist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	1	20.31	20.31
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature: _____ Date: 03/31/20

Print name: Sandro Guerrero



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00369

Approval Code: 022778 8/10/2020 1:06 pm

E-mailed To: brettb@d-f-plumbing.com

B2020-2868

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: 16065 SW BOBOLINK ST	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Eayeh - 112551	
Cross Street/directions to job site:	
Tax map/parcel no.: 2S105BB02500	
DESCRIPTION OF WORK	
Spot repair of rain drain by trenching in the right of Way	
APPLICANT	
Name: Brett Baldwin	
Phone: 5032820993	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-23PB	CCB lic. no.: 465
Business Name: D & F PLUMBING CO	
Contact:	
Address: 4636 N ALBINA AVE	
City/State/ZIP: PORTLAND, OR 97217	
Phone: 5032820993	Fax:
Email: RANDY@D-F-PLUMBING.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Rain drain	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00368

Approval Code: 010143 8/10/2020 10:05 am

E-mailed To: tiara@crownplumbingpdx.com

B2020-2866

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: 7505 SW HYLAND WAY	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Donnelly	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DC02200	
DESCRIPTION OF WORK	
New shower valve and drain install.	
APPLICANT	
Name: Joni Siderius	
Phone: 5037719449	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1136	CCB lic. no.: 163063
Business Name: R.M.S. ENTERPRISES LLC	
Contact:	
Address: 5429 SE FRANCIS ST	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5037719449	Fax:
Email: joni@crownplumbingpdx.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00367

Approval Code: 042367 8/7/2020 3:29 pm

E-mailed To: haleys@localplumbingco.com

32020-2858

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: 14940 NW GREENBRIER PKWY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Humidifier Relocate	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N132DB00300	
DESCRIPTION OF WORK	
Relocate existing humidifier water supplies and install support strut attachments for humidifiers in new humidifier locations. AREA 1 Extend existing 1/2" water piping roughly 30' to new humidifier location. Provide IPS shut off valve and cap within 5' of new unit location inside of grid ceiling. Install Unistrut support system on wall to	
APPLICANT	
Name: Haley Shannon	
Phone: 5036013717	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 34-197PB	CCB lic. no.: 72253
Business Name: NORTHWEST CENTRAL PLUMBING CO INC	
Contact:	
Address: 2870 SE 75TH AVE SUITE 206	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036422067	Fax: 5036425954
Email: katy-nwcp@verizon.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Mod gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

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

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



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

B 2020-2848

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00366

Approval Code: 061831 8/7/2020 2:47 pm

E-mailed To: haleys@localplumbingco.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: 16245 SW FALCON DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Hughes Residence	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S132CB03700	
DESCRIPTION OF WORK	
Rough-in new 42x60 tub with new valve and trim. Replace all angle stops and escutcheons for 2 sinks and toilet at rough-in. Install new sinks, faucets, reinstall existing toilet and new trim for tub shower.	
APPLICANT	
Name: Haley Shannon	
Phone: 5036013717	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 34-197PB	CCB lic. no.: 72253
Business Name: NORTHWEST CENTRAL PLUMBING CO INC	
Contact:	
Address: 2870 SE 75TH AVE SUITE 206	
City/State/ZIP: HILLSBORO, OR 97123	
Phone: 5036422067	Fax: 5036425954
Email: katy-nwcp@verizon.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00365

Approval Code: 003214 8/7/2020 11:32 am

E-mailed To: scott@livingwaterplumbing.net

320202841

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: 14780 SW OSPREY DR	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.: 250	
Project Name: Murray Hill Market Place	
Cross Street/directions to job site: Osprey and Murray Blvd	
Tax map/parcel no.: 1S132AD00300	
DESCRIPTION OF WORK	
#200 add an ice maker box	
#250 add a bar sink and Insta hot unit	
#285 add a AW box	
APPLICANT	
Name: Scott Horsfall	
Phone: 9713228532	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 3-559PB	CCB lic. no.: 162446
Business Name: LIVING WATER PLUMBING INC	
Contact:	
Address: 39234 CASCADIA VILLAGE DR	
City/State/ZIP: SANDY, OR 97055	
Phone: 5036680699	Fax: 5038268077
Email: livingwaterplumbing@msn.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Ice maker	1	\$20.31	\$20.31
Sink/basin/lavatory	1	\$20.31	\$20.31
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$15.40
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00364

Approval Code: 04210J 8/7/2020 7:51 am

E-mailed To: jfatland@alphaenvironmental.net

B2020.2839

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: 8060 SW BRENTWOOD ST	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113BA07600	
DESCRIPTION OF WORK	
Sanitary sewer repair via trenching	
APPLICANT	
Name: Jocelyn Fatland	
Phone: 5039295346	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1612	CCB lic. no.: 152125
Business Name: ALPHA ENVIRONMENTAL SERVICES INC	
Contact:	
Address: 11080 SW ALLEN BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5032925346	Fax:
Email: matthew@alphaenvironmental.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2350
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received:	Permit No. 152020 2846
Date Issued:	By:
	Payment Type:

TYPE OF WORK

New construction Demolition

Addition/alteration/replacement Other:

CATEGORY OF CONSTRUCTION

1- and 2-family dwelling Commercial/Industrial

Accessory building Multi-family

Master builder Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 6670 SW Amber LN

City/State/ZIP: Port. OR 97225

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

Cross street/directions to job site:

Subdivision: Lot no.:

Tax map/parcel no.:

DESCRIPTION OF WORK

Kitchen, master bath, laundry room remodel

PROPERTY OWNER TENANT

Name:

Address:

City/State/ZIP:

Phone: Fax:

E-mail:

APPLICANT CONTACT PERSON

Business name: B.D.J. Plumbing LLC

Contact name: Brent Jackson

Address: P.O. Box 582

City/State/ZIP: Boring OR 97009

Phone: 503-314-6713 Fax:

E-mail: BrentJackson1967@icloud.com

CONTRACTOR

Business name: B.D.J. Plumbing LLC

Address: P.O. Box 582

City/State/ZIP: Boring OR 97009

Phone: 503-314-6713 Fax:

E-mail: Brent Jackson 1967@icloud.com Plumbing, lic. # PB 2270

CB No.: 224710 City or metro lic. no.:

Authorized signature: *Brent Jackson*

Name: Brent Jackson Date: 8-5-20

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Eq.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		508.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	1	20.31	20.31
Dishwasher	1	20.31	20.31
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	20.31
Hose bib		20.31	
Ice maker	1	20.31	20.31
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	4	20.31	81.24
Tub/shower/shower pan	2	20.31	40.62
Urinal		20.31	
Water closet	1	20.31	20.31
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: Pot filler	1	20.31	20.31
Subtotal			243.72
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule



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

B2020-2834

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00363

Approval Code: 05559Q 8/6/2020 3:13 pm

E-mailed To: dispatch@sutherlandplumbing.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: 8410 SW PARKVIEW LOOP	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Shelman Water Service	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BA00200	
DESCRIPTION OF WORK	
Replacement of Main Water service	
APPLICANT	
Name: Ti Sutherland	
Phone: 5037194015	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1365	CCB lic. no.: 200460
Business Name: SUTHERLAND PLUMBING LLC	
Contact:	
Address: 6765 SW 213TH AVE	
City/State/ZIP: ALOHA, OR 97078	
Phone: 5037194015	Fax:
Email: office@sutherlandplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

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

Date Received: 08/05/2020	Permit No.: B2020-2813
Date Issued: 8-0-20	By: HK
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type: Visa	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input checked="" type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other: old falling down house
JOB SITE INFORMATION AND LOCATION	
Job site address: 6495 SW Murray Blvd.	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: just south of Murray and Davis	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S120AA-03802	
DESCRIPTION OF WORK	
This is a falling down wreck of a former house that has not been lived in for more than 20 years. It needs to be removed.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lynn Y. Sakai	
Address: 6485 SW Murray Blvd.	
City/State/ZIP: Beaverton, OR 97008	
Phone: (503) 475-2554	Fax:
E-mail: lyspdx@gmail.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Cipriano Construction Co.	
Address: 9795 SE 242nd Ave.	
City/State/ZIP: Damascus, OR 97089	
Phone: (503) 307-1282	Fax:
E-mail: cjp428@aol.com	Plumbing lic.:
CCB lic.: #81536	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap	1	20.31	20.31
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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

* See Fee Schedule

Authorized signature:

Print name: Lynn Y. Sakai	Date: 08/04/20
---------------------------	----------------



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

Commercial Plumbing Authorization To Begin Work

05350-BPB-20-00361

Approval Code: 063100 8/5/2020 9:31 pm

E-mailed To: DRONCAPLUMBING@YAHOO.COM

B 2020-282

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: 11070 SW CANYON RD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: tire shop	
Cross Street/directions to job site: canyon rd	
Tax map/parcel no.: 1S110DD03800	
DESCRIPTION OF WORK	
one hose bib	
APPLICANT	
Name: rafael dronca	
Phone: 5038391579	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB2082	CCB lic. no.: 221695
Business Name: LISA DRONCA AND RAFAEL DRONCA	
Contact:	
Address: 4196 SW REDFERN AVE	
City/State/ZIP: GRESHAM, OR 97080	
Phone: 5038391579	Fax:
Email: DRONCAPLUMBING@YAHOO.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Hose bib	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



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

B 2020-2823

Residential Plumbing Authorization To Begin Work
05350-BPB-20-00362

Approval Code: 016011 8/6/2020 8:11 am

E-mailed To: STEPHANIE@BEAVERTONPLUMBING.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: 7985 SW 155TH AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Sulte/bldg./apt.no.:	
Project Name: SINK ADDITIONS	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120CD00200	
DESCRIPTION OF WORK	
SINK ADDITIONS	
APPLICANT	
Name: STEPHANIE PRATT-MCROBERTS	
Phone: 5036437619	Fax: 5036437620
Email:	
CONTRACTOR	
Plumb lic. no.: 34-4PB	CCB lic. no.: 12889
Business Name: BEAVERTON PLUMBING INC	
Contact:	
Address: 13980 SW TV HWY	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5036437619	Fax: 5036437620
Email: tanya@beavertonplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	3	\$20.31	\$60.93
Minimum Fees			
Balance of permit fees			\$35.71
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00360

Approval Code: 06069G 8/5/2020 11:35 am

E-mailed To: nick@southclackamasplumbing.com

B 2020-2816

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: 12650 SW BROCKMAN ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Montessori	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128DA00300	
DESCRIPTION OF WORK	
under slab plumbing to add/move fixtures, new water supply lines, plumb venting to reconnect to existing	
APPLICANT	
Name: Nick Blackman	
Phone: 5034809630	Fax: 5034623082
Email:	
CONTRACTOR	
Plumb lic. no.: PB1965	CCB lic. no.: 216021
Business Name: NICK BLACKMAN PLUMBING LLC	
Contact:	
Address: 13355 S MOLALLA FOREST RD	
City/State/ZIP: MOLALLA, OR 97038	
Phone: 5034809630	Fax: 5034623082
Email: nick@southclackamasplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
Multi-family/commercial re-pipe (1st 20 fixtures)	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00359

Approval Code: 514085 8/4/2020 1:58 pm

E-mailed To: Sam@prograss.com

B 2020-2006

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: 16600 SW RED ROCK WAY	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Jennifer Sicard BF	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S130DD05600	
DESCRIPTION OF WORK	
Replacement of backflow device.	
APPLICANT	
Name: Sam Ritchie	
Phone: 5037837943	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8079	CCB lic. no.:
Business Name: Pro-Grass Inc	
Contact: Pro-Grass Inc	
Address: 29895 Sw Kinsman Rd	
City/State/ZIP: Wilsonville, Oregon 97070	
Phone: (503) 682-6076	Fax:
Email: pblzon@prograss.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Minimum Fees			
Balance of permit fees			\$52.96
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00356

Approval Code: 08073G 8/4/2020 11:35 am

E-mailed To: permits@fastwaterheater.com

B 2020-2795

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: 13845 SW HITEON DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: EASTERLING	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133BA00300	
DESCRIPTION OF WORK	
Remove/replace gas water heater	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367074	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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. 2790



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00354

Approval Code: 08420D 8/3/2020 10:39 pm

E-mailed To: allscopeplumbing@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: 2050 SW 84TH AVE	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: SW 84TH	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BB08101	
DESCRIPTION OF WORK	
REMODEL PARTIAL REPIPE	
APPLICANT	
Name: Timothy Hollenbach Jr	
Phone: 5039270713	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1249	CCB lic. no.: 197728
Business Name: ALLSCOPE PLUMBING AND CONSTRUCTION, LLC	
Contact:	
Address: 18859 SW BUTTERNUT ST	
City/State/ZIP: BEAVERTON, OR 97078	
Phone: 5039270713	Fax:
Email: allscopeplumbing@yahoo.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Dishwasher	1	\$20.31	\$20.31
Clothes washer	1	\$20.31	\$20.31
Garbage disposal	1	\$20.31	\$20.31
Ice maker	1	\$20.31	\$20.31
Sink/basin/lavatory	1	\$20.31	\$20.31
Water heater	1	\$20.31	\$20.31
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$266.81
State surcharge (12% of permit total)			\$32.02
TOTAL PERMIT FEE			\$298.83

Upon review and approval 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 Plumbing Authorization To Begin Work

05350-BPB-20-00355

Approval Code: 03883G 8/4/2020 11:28 am

E-mailed To: permits@fastwaterheater.com

B 2020-2793

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: 6283 SW ERICKSON AVE	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: PUCKETT	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AB09200	
DESCRIPTION OF WORK	
Remove/replace electric water heater	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367074	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00358

Approval Code: 01036G 8/4/2020 11:55 am

E-mailed To: permits@fastwaterheater.com

B 2020-2802

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: 8590 SW TURQUOISE LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: FLOR	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AC03700	
DESCRIPTION OF WORK	
Remove/replace gas water heater	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367074	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00357

Approval Code: 00259G 8/4/2020 11:39 am

E-mailed To: permits@fastwaterheater.com

B 2020-2801

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: 14425 NW PIONEER PARK WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: NEALE	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N133CC06900	
DESCRIPTION OF WORK	
Remove/replace gas water heater	
APPLICANT	
Name: JASON HANLEYBROWN	
Phone: 4256367074	Fax: 4258149516
Email:	
CONTRACTOR	
Plumb lic. no.: PB183	CCB lic. no.: 168049
Business Name: FWH ACQUISITION COMPANY LLC	
Contact:	
Address: 11715 NORTH CREEK PKWY S #C-106	
City/State/ZIP: BOTHELL, WA 98011	
Phone: 4256367054	Fax: 4256367055
Email: permits@fastwaterheater.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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



Plumbing Permit Application

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

Date Received: 07/28/2020	Permit No.: B2018-3708
Date Issued: 8/13/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12430 SW 171st Terrace	
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.: 58
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angle@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angle@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd, #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing, lic.: 34-260PB
CCBI lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

[Signature]

Print name: Ray Mullen Date: 7/13/20

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 07/28/2020	Permit No.: B2018-3709
Date Issued: 8/13/2020	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12428 SW 171st Terrace	
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.: 59
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Print name: Ray Mullen Date: 7/13/20

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

* See Fee Schedule



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00351

Approval Code: 03137G 8/3/2020 11:34 am

E-mailed To: judy@northlandbuild.com

B2020-2772

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: 16710 NW PEBBLE BEACH WAY	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Ginter	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131DA07800	
DESCRIPTION OF WORK	
Relocate kitchen sink	
APPLICANT	
Name: Judy Paul	
Phone: 5036254838	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB447	CCB lic. no.: 177214
Business Name: THE PLUMBERS INC	
Contact:	
Address: 90 NW 150TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5035196644	Fax: 5036841202
Email: judah@theplumbersinc.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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 Plumbing Authorization To Begin Work

05350-BPB-20-00353

Approval Code: 35203G 8/3/2020 1:53 pm

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

B2020-2776

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 or 2 family dwelling	<input checked="" type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4550 SW MURRAY BLVD	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Fountain Park unit#74	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC09800	
DESCRIPTION OF WORK	
Replacing tub/shower unit in unit #74.	
APPLICANT	
Name: Jason Teece	
Phone: 503-557-5555	Fax: 503-212-0165
Email:	
CONTRACTOR	
Plumb lic. no.: PB96	CCB lic. no.: 169234
Business Name: OASIS PLUMBING INC	
Contact:	
Address: 11177 S ALLEN CT	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5033510743	Fax: 5032120165
Email: jason@oasisplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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

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

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

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: 9140 SW HALL BLVD	
City/State/ZIP: BEAVERTON, OR 97223	
Suite/bldg./apt.no.: B	
Project Name: Benfield	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S126CA01200	
DESCRIPTION OF WORK	
New plumbing 2 WC, 1 DF, 3 FD, 1 FS, 3 TD, 1 WB, 16 sink and 1 WH	
APPLICANT	
Name: Mike Manzhura	
Phone: 3607728149	Fax: 3608594517
Email:	
CONTRACTOR	
Plumb lic. no.: PB523	CCB lic. no.: 181318
Business Name: RECON INC	
Contact:	
Address: PO BOX 822964	
City/State/ZIP: VANCOUVER, WA 98682	
Phone: 3607728149	Fax: 3608594517
Email: mmanzhura@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Drinking fountain	1	\$20.31	\$20.31
Floor drain/floor sink/hub	7	\$20.31	\$142.17
Sink/basin/lavatory	16	\$20.31	\$324.96
Water closet	2	\$20.31	\$40.62
Water heater	1	\$20.31	\$20.31
Expansion tank	1	\$20.31	\$20.31
Trap Primer	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$609.30
State surcharge (12% of permit total)			\$73.12
TOTAL PERMIT FEE			\$682.42

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

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

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



Plumbing Permit Application

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

Date Received: 07/28/2020	Permit No. B2020-3707
Date Issued: 8/13/2020	BY: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12434 SW 171st Terrace	
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.: 57
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing. lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

[Signature]

Print name: Ray Mullen	Date: 7/13/20
------------------------	---------------

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

* See Fee Schedule



Plumbing Permit Application

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

Date Received: 07/28/2020	Permit No.: B2020-3705
Date Issued: 8/3/2020	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12500 SW 171st Terrace	
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.: 56
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New SFR	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Everett Custom Homes	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7060	Fax:
E-mail: angie@everetthomesnw.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Everett Custom Homes	
Contact name: Angie Cook	
Address: 3330 NW Yeon Ave Suite 100	
City/State/ZIP: Portland OR 97210	
Phone: (503) 726-7042	Fax:
E-mail: angie@everetthomesnw.com	
CONTRACTOR	
Business name: The Mullen Co. dba Ed Mullen Plumbing	
Address: 1601 SE River Rd. #A	
City/State/ZIP: Hillsboro, OR 97123	
Phone: (503) 640-0113	Fax:
E-mail:	Plumbing lic.: 34-260PB
CCB lic.: 92689	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	X	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

<i>[Signature]</i>	Date: 7/13/20
Print name: Ray Mullen	

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

* See Fee Schedule



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

Date Received:	Permit No.: B3020-2968
Date Issued:	By:
	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 14255 SW Barrows Rd	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Murray/Barrows	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
convert shower/tub to walk in shower	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Christine Ianni	
Address: 14255 SW Barrows Rd	
City/State/ZIP: Beaverton, OR 97007	
Phone: 7038355131	Fax:
E-mail: iyawnee@gmail.com	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name:	
Contact name: Christine Ianni	
Address: 14255 SW Barrows Rd	
City/State/ZIP: Beaverton, OR 97007	
Phone: 7038355131	Fax:
E-mail: iyawnee@gmail.com	
CONTRACTOR	
Business name: AIG Renovation & Remodeling	
Address: 5200 SW Meadows Rd	
City/State/ZIP: Lake Oswego, OR 97035	
Phone: 5038305038	Fax:
E-mail: info@aigrenovation.com	Plumbing. lic.: 9572JP
CCB lic.: 208899	City or metro lic. no.:
Authorized signature:	
Print name: Christine Ianni	Date:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan	1	20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

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



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

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

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 07/29/2020	Permit No.: B2019-4681
Date Issued: 8-3-20	By: JH
CITY OF BEAVERTON BUILDING DIVISION	
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 4105 SW Orbit St.	
City/State/ZIP: Beaverton OR	
Suite/bldg./apt. no.: 12	Project name: West End Apartments
Cross street/directions to job site: SW Tualatin Valley Hwy	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: West End Beaverton LLC	
Address: 703 Broadway St. Suite 510	
City/State/ZIP: Vancouver WA 98660	
Phone: (503) 221-1920	Fax:
E-mail: CGrieb@taylormorrison.com	
<input type="checkbox"/> APPLICANT	<input checked="" 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: Alliance Plumbing	
Address: 146 west historic columbia river hwy	
City/State/ZIP: troutdale or 97060	
Phone: (503) 492-3490	Fax: (503) 912-6438
E-mail: tomh@allianceplumbing.ne	Plumbing. lic.: PB732
CCB lic.: 184601	City or metro lic. no.: 10833

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft)		*	
Site utilities			
Catch basin/ area drain/manif.		20.31	
Dryw , leach line, or trench		20.31	
Footing drain	1	20.31	20.31
Manufactured home utilities		20.31	
Rain drain connector	21	20.31	426.51
Sanitary sewer (no. linear ft.: 100)		*	52.99
Storm sewer (no. linear ft.: 100)		*	52.99
Water service (no. linear ft.: 100)		*	52.99
Fixture or Item			
Absorption valve (water hammer)	2	20.31	40.62
Backflow preventer		43.68	
Backwater valve	1	20.31	20.31
Clothes washer	36	20.31	731.16
Dishwasher	36	20.31	731.16
Drinking fountain	1	20.31	20.31
Ejectors/sump	1	20.31	20.31
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	2	20.31	40.62
Garbage disposal	36	20.31	731.16
Hose bib	2	20.31	40.62
Ice maker		20.31	
Interceptor/grease trap	2	20.31	40.62
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	106	20.31	2,152.86
Tub/shower/shower pan	57	20.31	1,157.67
Urinal	1	20.31	20.31
Water closet	60	20.31	1,218.60
Water heater/expansion tank	36	20.31	731.16
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: Future Connection Rt.	3	20.31	60.93
Subtotal			8,364.21
Minimum permit fee			
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		2,091.05
	State surcharge (12% of permit fee)		1,003.71
TOTAL PERMIT FEE			\$11,458.97

Authorized signature: _____

Print name: Robert Dishman Date: 02/26/20

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

* See Fee Schedule



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

Residential Plumbing Authorization To Begin Work

05350-BPB-20-00350

Approval Code: 08391G 7/31/2020 3:56 pm

E-mailed To: neil@craftworkplumbing.com

B2020-2763

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: 15345 SW LARK LN	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: COHRS	
Cross Street/directions to job site: MURRAY	
Tax map/parcel no.: 1S132AC02200	
DESCRIPTION OF WORK	
MASTER AND GUEST BATH REMODEL	
APPLICANT	
Name: NEIL GRUBB	
Phone: 5036448698	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 20-148PB	CCB lic. no.: 79666
Business Name: CRAFTWORK PLUMBING INC	
Contact:	
Address: 7737 SW CIRRUS DR	
City/State/ZIP: BEAVERTON, OR 970085967	
Phone: 5036448698	Fax: 5036445989
Email: POLLARDP@CRAFTWORKPLUMBING.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	3	\$20.31	\$60.93
Water closet	2	\$20.31	\$40.62
Plumbing Permit Fees			
Subtotal			\$142.17
State surcharge (12% of permit total)			\$17.06
TOTAL PERMIT FEE			\$159.23

Upon review and approval 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