



Renewable Electrical Energy Permit Application

Department of Consumer and Business Services
Building Codes Division • Pendleton Field Office
800 SE Emigrant Ave., Suite 360
Pendleton, OR 97801
41-276-7814 • Fax: 541-276-9244
building.department@dcbs.oregon.gov
www.oregon.gov/bcd

DEPARTMENT USE ONLY	
Permit no.:	
Office:	
By:	Date:
LOCAL GOVERNMENT APPROVAL	
Zoning approval verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No

This permit is issued under OAR 918-309-0410. Permits are nontransferable. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

JOBSITE INFORMATION AND LOCATION	
Jobsite address:	
City/State/ZIP:	
Project name:	
Directions to jobsite:	
Parcel no.:	
DESCRIPTION OF WORK	
Job no.:	
PROPERTY OWNER INSTALLATION	
Name:	
Address:	
City/State/ZIP:	
Contact phone:	Email:
This installation is being made on residential or farm property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. [ORS 479.540(1) and 479.560(1)]	
Sign here:	
CONTRACTOR INSTALLATION	
Business name:	
Address:	
City/State/ZIP:	
Contact phone:	Fax:
Email:	
CCB lic.:	BCD lic. no.:
Signature:	
Name of signing supervisor:	Lic. no.:

FEE SCHEDULE			
Renewable energy installation per system total	No. of items	Cost ea.	Sum
5 kva or less		\$79.00	\$
5.01 to 15 kva		\$94.00	\$
15.01 to 25 kva		\$156.00	\$
Solar each additional kva 25.01 to 100		\$6.25	\$
Wind 25.01 to 50 kva		\$204.00	\$
Wind 50.01 to 100 kva		\$469.00	\$
Wind 100.01 or greater:			
Service or feeders of 601 to 1,000 amps		\$204.00	\$
Service or feeders more than 1,000 amps or volts		\$469.00	\$

FISCAL USE	APPLICANT USE	
70111/1195	(A) Enter total of above fees	\$
70111/1291	(B) Enter 12% surcharge (.12 x [A+B])	\$
70111/1212	(C) Plan review 25%, if required (.25 x [A])	\$
TOTAL fees and surcharges (A+B+C):		\$

Make checks or money orders payable to Department of Consumer and Business Services. If paying by credit card, applicant must sign the credit card information box. Do **not** send cash. Fax for credit card payment: 541-276-9244

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	Phone:
			/
Credit card number			Expiration
Name of cardholder as shown on credit card			
Cardholder signature			\$ Amount