

Notification of Contractor License Information

Department of Consumer and Business Services Building Codes Division • Pendleton Field Office

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www.oregon.gov/bcd

INTRODUCTION

OAR 918-480-0140 and Section R110 of the Oregon Residential Specialty Code require a general contractor or owner who was issued a structural permit for construction to provide to the building official the contact information and relevant license information for the general contractor, electrical contractor, plumbing contractor, and HVAC contractor that performed work on the residential dwelling or townhouse.

This form must be used to provide notification to the building official.

This completed and signed form may either be delivered or mailed to the address on this form, or emailed to Building.Department@dcbs.oregon.gov.

PERMIT INFORMATION			
Permit number:			
Project address:			
City:	County:		
CONTRACTOR INFORMATION			
General contractor name:			
CCB license #:			
Contractor address:			
HVAC contractor name:			
CCB license #:			
Contractor address:			
Plumbing contractor name:			
BCD license #:			
CCB license #:			
Contractor address:			
Electrical contractor name:			
BCD license #:			
CCB license #:			
Contractor address:			

SUBCONTRACTOR INFORMATION			
Additional subcontractor name:	Additional subcontractor name		
CCB license #:	CCB license #		
Contractor address:	Contractor address		
Additional subcontractor name:	Additional subcontractor name		
CCB license #:	CCB license #		
Contractor address:	Contractor address		
Additional subcontractor name:	Additional subcontractor name		
CCB license #:	CCB license #.		
Contractor address:	Contractor address		
Additional subcontractor name:	Additional subcontractor name		
CCB license #:	CCB license #		
Contractor address:			
Additional subcontractor name:	Additional subcontractor name		
CCB license #:	CCB license #		
Contractor address:	Contractor address		
ACKNOWLEDGEMENT			
I hereby acknowledge that I am the general contractor or owner for the permit at the listed address. The required contact information and relevant license information specified in OAR 918-480-0140 and ORSC R110 is provided on this form. Failure to submit this form will delay issuance of a Certificate of Occupancy.			
Signature:			
	By signing electronically, I agree that this agreement may be electronically signed. I agree my electronic signature on this certification is the same as a handwritten signature for the purposes of validity, enforceability, and admissibility.		
Name (Printed):	Date:		