

New Single Family Dwelling Combination Permit Application

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

800 SE Emigrant Ave., Suite 360 Pendleton, OR 97801

541-276-7814 • Fax: 541-276-9244 building.department@dcbs.oregon.gov

Web: www.oregon.gov/bcd

DEPARTMENT USE ONLY						
Permit no.:						
This project has final land-use approval:	DEQ approved:					
Signature:	Signature:					

This permit is issued under OAR 918-460-0030. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

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Flood plain? Yes No									
LOCAL GOVERNMENT APPROVAL			CONTRACTOR INSTALLATION						
Zoning approval			□ No	Business name:					
	APP	LICANT INF	FORMATION	Address:					
Name:				City/state/ZIP:	City/state/ZIP:				
Mailing address:				Phone:		Mobile phone:			
City/state/ZIP:		1		Fax:					
Phone:		Mobile ph	ione:	Email:					
Email:				CCB license no.:	CCB license no.:				
JOBSITE INFORMATION AND LOCATION				Signature:					
Jobsite address:				PROI	PERTY OWNE	ER INFORMATION			
City/state/ZIP:				Name:					
Project name:				Mailing address:					
Directions to jobsite:			City/state/ZIP:	· ·					
				Phone:		Mobile phone:			
Parcel no.:				Email:		1			
ELECTRICAL CONTRACTOR INSTALLATION			OWNER INSTALLATION						
Business name:				Electrical	Yes	□No			
Address:				Fire	Yes	□ No			
City/state/ZIP:		1		Foundation	Yes	□ No			
Phone:	ı	Mobile ph	one:	Framing	☐ Yes	□ No			
Fax:	Email:	1		Mechanical	☐ Yes	□ No			
CCB license no.:		BCD licen		Plumbing	☐ Yes	□ No			
Signing supervisor name and license no.:									
MECHANICAL CONTRACTOR INSTALLATION			Roofing	Yes	□ No				
Business name:				Siding	Yes	□ No			
Address:				Structural	Yes	□ No			
City/state/ZIP:				Windows	Yes	☐ No			
Phone: Mobile phone:			This installation is being made on residential or farm property owned by me or a member of my immediate family.						
Fax:	Email:			owned by me or a	member of my i	mmediate family.			
CCB license no.:	:]	LPG license no.:	Sign here:					
PLUMBING CONTRACTOR INSTALLATION			PRIMARY CONTACT						
Business name:				Name:					
Address:			Phone:						
City/state/ZIP:			Email:						
Phone:			Mobile phone:						
Fax:	Е	Email:							
CCB license no.:]	BCD license no.:	_					
Journeyman nam	ne and lice	ense no.:		Ī					

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			,	VALUATION I	NFO	RMATION					
Job description:				Total square footage (dwelling and attached garage):							
				Building height ft in no. of bathrooms:							
					no. of kitchens:						
					Decks / porches / covered patios (total sq. ft.)						
					Unfinished basement (total sq. ft.)						
					Living area sq. ft (total sq. ft.)						
					Garage sq. ft (total sq. ft.)						
					Carport (total sq. ft.)						
					No.	No. of stories: Limited or restricted energy					
Declared job val	lue: \$				Ten	nporary service 2	200 amps or le	ss			
			ı	PLUM	MBING						
Water ser	vice: total linear fee	t:	S	torm sewer: tota	l line	ar feet:	San	Sanitary sewer: total linear feet:			
				HEATING	CO	OLING					
Type of fuel:					ı		1		T		
Boiler	Electric	Geotherm	eothermal L		Natural gas		Oil	Oil Photovoltaic		Solid fuel	
Other											
Secondary type	of fuel:										
Boiler	Electric	Geotherm	nal LPG			Natural gas	Oil	Oil Photovoltaic So		olid fuel	
Other											
				Qty						Qty	
Air handling unit of up to 10,000 cfm					Air conditioner						
Air handling unit greater than 10,000 cfm					Furnace – up to 100,000 BTU						
Furnace – greater than 100,000 BTU					Floor furnace, including vent						
Heat pump					Evaporative cooler other than portable						
Suspended heater, recessed wall heater, or floor mounted				Mini split							
unit heater					Radiant in-floor heating system						
				OTHER FUEL	APP	LIANCES					
Wood / pellet stove					Water heater						
Gas or wood fireplace/ insert					Pool or spa heater, kiln						
Decorative gas fireplace					Oil tank / gas / diesel generators						
Chimney / liner / flue / vent					Installation domestic-type incinerator						
		ENV	IRONN	IENTAL EXHA	UST	AND VENTIL	ATION				
Range hood / other kitchen equipment				Attic / crawl space fans							
Ventilation system not a portion of heating or air-cooling system authorized by permit				Flue vent for water heater or gas fireplace							
				Clothes dryer exhaust							
Appliance vent installation not included in appliance permit					Ventilation fan connected to single duct						
Other environmental exhaust / ventilation											
				FUEL	PIPIN	IG					
Gas fuel piping	outlets										

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