

POLK COUNTY BUILDING DEPARTMENT



850 MAIN STREET, DALLAS, OR 97338

Email: cd.permits@co.polk.or.us

Phone: (503) 623-9237

PLUMBING PERMIT APPLICATION

Office use only:

PERMIT #: _____

DATE: _____ RECEIPT #: _____

ISSUED BY: _____

Incomplete applications will not be processed.

This permit is issued under the applicable Oregon Specialty Code. Permits are issued only to the person or contractor doing the work. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

1. TYPE OF CONSTRUCTION

Residential Commercial

2. ASSOCIATED PERMIT NUMBERS (List below)

3. LOCATION OF INSTALLATION

Job Address _____

City _____ ZIP _____ County _____

Directions _____

Job Description _____

4a. CONTRACTOR INSTALLATION Permit Holder: Yes No

Plumbing Contractor _____

Address _____

Date _____ Job Number _____

Property Owner _____

CCB Lic. No. _____ BCD Lic. No. _____

Plumbing Lic. No. _____

Active Licenses: Yes No

Signature _____

Phone _____ Fax _____

Email _____

4b. OWNER INSTALLATION Permit Holder: Yes No

Owner's Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Email _____

This installation is being made by me on residential property owned by me that is not for sale and is exempt from licensing requirements under OAR 918-695-0020, ORS 447.040 and ORS 693.020.

Signature _____

5. PERMIT HOLDER TERMS & CONDITIONS review on reverse.

6. PERMIT TERMS & CONDITIONS review on reverse.

7. PLAN REVIEW (if required) on reverse.

8. COMPLETE FEE SCHEDULE BELOW

Section A: New Single Family Dwelling	# of Items	Fee (each)	Total
1 bath (See Page 2 for what is covered)	_____	\$319.48	\$ _____
2 bath (See Page 2 for what is covered)	_____	\$420.45	\$ _____
3 bath (See Page 2 for what is covered)	_____	\$512.74	\$ _____
Each additional bathroom in addition to 3	_____	\$102.80	\$ _____
Each additional kitchen in addition to 1	_____	\$102.80	\$ _____
Additional site utilities over 100' (per 100')	_____	\$28.52	\$ _____
Section B: Fixtures New / Repair / Remodel / Alteration / Addition (Residential & Commercial)		(Repipe interior water supply or waste line, relocate, replace or add fixtures)	
Absorption valve	_____	\$32.53	\$ _____
Bath tub / shower / shower pan	_____	\$32.53	\$ _____
Clothes Washer / dishwasher	_____	\$32.53	\$ _____
Drinking fountain	_____	\$32.53	\$ _____
Expansion tank	_____	\$32.53	\$ _____
Fixture cap	_____	\$32.53	\$ _____
Floor or roof drain / floor sink / hub	_____	\$32.53	\$ _____
Garbage disposal	_____	\$32.53	\$ _____
Hose bib	_____	\$32.53	\$ _____
Ice Maker	_____	\$32.53	\$ _____
Sink / basin / lavatory	_____	\$32.53	\$ _____
Trap primer	_____	\$32.53	\$ _____
Water closet / urinal	_____	\$32.53	\$ _____
Water heater	_____	\$32.53	\$ _____
Other fixture: _____	_____	\$32.53	\$ _____
Section C: Site Utilities Water/ Sanitary / Storm Sewer (exterior of foundation)			
Water Line; First 100 feet or fraction thereof	_____	\$44.91	\$ _____
Each additional 100 feet or fraction thereof	_____	\$28.52	\$ _____
Storm Line; First 100 feet or fraction thereof	_____	\$44.91	\$ _____
Each additional 100 feet or fraction thereof	_____	\$28.52	\$ _____
Sewer Line; First 100 feet or fraction thereof	_____	\$44.91	\$ _____
Each additional 100 feet or fraction thereof	_____	\$28.52	\$ _____
Manufactured structure beyond 30 feet: total	_____		
First 100 feet or fraction thereof	_____	\$44.91	\$ _____
Each additional 100 feet or fraction thereof	_____	\$28.52	\$ _____
Sewer cap / man holes (ea.)	_____	\$32.53	\$ _____
Catch basin or area drain	_____	\$32.53	\$ _____
Storm water retention/detention tank/fixtures	_____	\$32.53	\$ _____
Section D: Miscellaneous			
Backflow preventer / Backwater valve	_____	\$66.09	\$ _____
Swimming pool/spa – water supply piping/drains	_____		
First 100 feet or fraction thereof	_____	\$44.91	\$ _____
Each additional 100 feet or fraction thereof	_____	\$28.52	\$ _____
Each fixture or drain	_____	\$32.53	\$ _____
Each additional inspection / reinspection	_____	\$119.11	\$ _____
Special inspection per hour (2 hr min.)	_____	\$119.11	\$ _____
Section E: Manufactured Dwelling Park / RV Park Sewer Collection / Water System			
Fee (1 st 10 spaces)	_____	\$221.38	\$ _____
Each additional 10 spaces	_____	\$166.04	\$ _____
Section F: Fire Sprinkler / Medical Gas			
Fire Sprinkler System (13-D) (_____ sq. ft.)	See Page 2	Enter Fee	\$ _____
Medical Gas (\$ _____ value)	See Page 2	Enter Fee	\$ _____

9. FEE TOTAL:

- A. Subtotal of permit fees above \$ _____
- B. Minimum permit fee \$ 95.41
- C. Total (enter the greater amount of A and B) \$ _____
- Add 12 % state surcharge \$ _____
- Enter 30% of line "C" for plan review fee, if required \$ _____
- D. **TOTAL DUE:** \$ _____

The **permit holder** shall be deemed the person or firm that is authorized to make all decisions regarding the permit, including permit information, notices, cancellation, transfer, extensions or refunds.

6. PLUMBING PERMIT TERMS AND CONDITIONS

Permit Application Expiration: I understand this permit application will expire within 180 days after being submitted if the permit is not issued. To avoid expiration of an application an extension request needs to be submitted in writing showing justifiable cause to extend the permit prior to 180 days of inactivity, otherwise the application will be expired.

Permit Expiration: I understand this permit expires if work is not commenced within 180 days of permit issuance or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. To avoid permit expiration, a progress report (showing progress toward the permit) needs to be submitted in writing or an extension request needs to be submitted in writing showing justifiable cause to extend the permit prior to 180 days of inactivity, otherwise the permit will be expired. A one time extension may be granted for an additional 180 days.

Permit Transferability: I understand as long as no changes have been made in the original plans, specifications and valuation of the permit, the current permit holder may request to transfer a permit to another permit holder upon submittal of the Permit Transfer Request Form and a transfer fee. If there are changes to the plans, specifications or valuation for the work being done on a permit, a new permit will need to be applied for.

Permit Refunds: I understand refunds may be requested upon written request of permit deposit/fees paid within 180 days of fee payment, less any plan review fees, landuse site review fees, administrative fees and state surcharge fees, for a permit under which no work has commenced. Refunds amounting to less than \$10 will not be processed.

Permit Renewals: I understand a plumbing permit may be renewed within 1 year of expiration of the permit upon submittal of the Permit Renewal Request Form, provided no changes have been made in the original plans and specifications for the work. The renewal fee would be ½ the amount of new permit fees. Permits that have been cancelled and/or refunded are not eligible for renewal.

7. Plumbing Plan Review Requirements. 2 sets of plans required for review if you answered yes to any items below:

Yes / No

- Medical gas and vacuum system for healthcare facility?
- Chemical drainage waste and vent system?
- Sewer wastewater pretreatment? (Grease pretreatment systems do not apply)
- Vacuum drainage waste and vent system?
- Commercial potable water pressure booster pump system?
- Water service line with interior diameter of two inches or larger? **Exception:** Those two inch systems which have been designed and stamped by a licensed engineer.
- Residential multi-purpose or continuous loop fire suppression system?

8. A. New Single Family Dwelling Includes: one kitchen, hose bibs, icemakers, underfloor low-point drains, first 100 feet of water line (water service), first 100 feet of sewer line (sanitary sewer), and first 100 feet of rain drain packages (storm sewer - including piping, gutters, downspouts and perimeter system)

F. Residential Fire Sprinklers for 13D Systems (includes plan review)

Total Square Footage	Permit Fee
0 to 2,000 square feet	\$128.32 (enter amount on page 1)
2,001 to 3,600 square feet	\$171.09 (enter amount on page 1)
3,601 to 7,200 square feet	\$213.87 (enter amount on page 1)
7,201 square feet and greater	\$256.64 (enter amount on page 1)

Medical Gas Piping – Fee Based on Value (plan review required)

Total Valuation	Permit Fee	Each Add'l \$1,000		Total
\$1.00 - \$2,000.00	\$96.87	N/A	\$96.87	\$
\$2,001.00 - \$25,000.00	\$96.87 for the first \$2,000	N/A	\$96.87	\$
	plus \$15.42 for each additional \$1,000 or fraction thereof, to and including \$25,000	\$	X \$15.42	\$
\$25,001.00 - \$50,000.00	\$451.53 for the first \$25,000	N/A	\$451.53	\$
	plus \$12.48 for each additional \$1,000 or fraction thereof, to and including \$50,000	\$	X \$12.48	\$
\$50,001.00 - \$100,000.00	\$763.53 for the first \$50,000	N/A	\$763.53	\$
	plus \$7.34 for each additional \$1,000 or fraction thereof, to and including \$100,000	\$	X \$7.34	\$
\$100,001 and up	\$1130.53 for the first \$100,000	N/A	\$1130.53	\$
	plus \$5.42 for each additional \$1,000 or fraction thereof	\$	X \$5.42	\$
Subtotal				\$ _____ (Enter amount on Page 1)