## Plumbing Permit Application City of Dunes City 82877 Spruce Street P.O. Box 97, Westlake, OR 97493

**New Construction** 

1 and 2 family dwelling

Demolition

Type of Work (please circle)

Other::

Category of Construction (Please circle)

Addition / Alteration / Replacement

**Accessory Building** 



Permit Number:	
Permit Fee: \$	
Paid by: CC / Cash / Check No:	
Issued by:	
Date Issued:	

## FOR INSPECTIONS call (541) 997-3338 at least 24 hours in advance

Julti-Family	iai	Other:
JOB	SITE INFORMATION AND	LOCATION
Address:		
Nia	Chaha	7:
City	State:	Zip
Map No:		Tax Lot No:
	Description of Work	
	Property Owner Information	on
lame:		
Vailing Address:		
City:	State:	Zip:
elephone:	Cell:	
	PR INFORMATION	
CONTRACTO	PR INFORMATION	
CONTRACTO Business Name: Contact Name:	OR INFORMATION State	Zip
CONTRACTO Business Name: Contact Name: Address:		Zip
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax:	State	Zip
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No:	State Cell: E-mail: DCBL No:	Zip
CONTRACTO Business Name: Contact Name: Address: City Felephone:	State Cell: E-mail: DCBL No:	Zip
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: upervising Contractor (pleas	State Cell: E-mail: DCBL No: se print) NOTICE	
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please)	State Cell: E-mail: DCBL No:	orized is not commensed
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please)	State Cell: E-mail: DCBL No: se print) NOTICE and void if work or construction auth	orized is not commensed
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please) The permit will become null at a 180 days or if construction (fiter work is commensed.	State Cell: E-mail: DCBL No: se print) NOTICE and void if work or construction auth	orized is not commensed 180 days at any time
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Eupervising Contractor (please) The permit will become null at a 180 days or if construction (fifter work is commensed. By signing below, I hereby ve	State Cell: E-mail: DCBL No: ie print) NOTICE and void if work or construction auth or work is suspended for a period of	orized is not commensed 180 days at any time his application and know
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please) The permit will become null at a 180 days or if construction offer work is commensed. By signing below, I hereby we he same to be true and corrections.	State Cell: E-mail: DCBL No: se print) NOTICE and void if work or construction auth or work is suspended for a period of	orized is not commensed 180 days at any time his application and know ces governing this
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: upervising Contractor (please) the permit will become null at a 180 days or if construction (fiter work is commensed. By signing below, I hereby we he same to be true and correction in the same to be true and correction i	State Cell: E-mail: DCBL No: ie print) NOTICE and void if work or construction auth or work is suspended for a period of rify that I have read and examined the	orized is not commensed 180 days at any time als application and know ces governing this on or not. The granting
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: upervising Contractor (please) the permit will become null at a 180 days or if construction (fiter work is commensed. By signing below, I hereby vere he same to be true and correction of a permit does not presume of a permit does not presume other State or Local Law regu	State Cell: E-mail: DCBL No: ie print) NOTICE and void if work or construction auth or work is suspended for a period of rify that I have read and examined the	orized is not commensed 180 days at any time his application and know ces governing this fin or not. The granting of the provisions of any note of construction.
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please The permit will become null at a 180 days or if construction offer work is commensed. By signing below, I hereby we he same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the construction and sub-continued to oregon Construction Board or the content of the construction of the construction Board or the content of the construction Board or the content of the construction and sub-continued to the content of the construction and sub-continued to the construction and sub-continued to the content of t	State Cell: E-mail: DCBL No: ie print) NOTICE and void if work or construction auth or work is suspended for a period of rify that I have read and examined the ect. All provisions of law and ordinan iplied with and whether specified her e to give authority to violate or cance illating construction or the performan	orized is not commensed 180 days at any time his application and know ces governing this in or not. The granting if the provisions of any note of construction.
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please The permit will become null at a 180 days or if construction offer work is commensed. By signing below, I hereby verifies the same to be true and correct his type of work will be come for a permit does not presume other State or Local Law regulationstruction and sub-contraction and sub-contraction.	State Cell: E-mail: DCBL No: is print) NOTICE and void if work or construction auth or work is suspended for a period of rify that I have read and examined the ect. All provisions of law and ordinan plied with and whether specified her e to give authority to violate or cance ilating construction or the performan tractors are required to be licensed in	orized is not commensed 180 days at any time his application and know ces governing this in or not. The granting if the provisions of any note of construction.
CONTRACTO Business Name: Contact Name: Address: City Felephone: Fax: CCB No: Supervising Contractor (please The permit will become null at a 180 days or if construction offer work is commensed. By signing below, I hereby we he same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the same to be true and correct his type of work will be computed by the construction and sub-continued to oregon Construction Board or the content of the construction of the construction Board or the content of the construction Board or the content of the construction and sub-continued to the content of the construction and sub-continued to the construction and sub-continued to the content of t	State Cell: E-mail: DCBL No: Be print) NOTICE and void if work or construction author or work is suspended for a period of prify that I have read and examined the ect. All provisions of law and ordinant plied with and whether specified here to give authority to violate or cancellating construction or the performant tractors are required to be licensed in and under (ORS701). If applicant is executed to under (ORS701). If applicant is executed in the price of the price o	orized is not commensed 180 days at any time his application and know ces governing this in or not. The granting if the provisions of any note of construction.

Issu	ed by:				
	Date Issued:				
Dat	e issueu:				
338 at least 24 hours	in advance				
330 at icast 24 ilouis	iii davance				
	Fee Schedu	ıle			
New 1 & 2 Family Dwellings (include	s 100' for each utility co	nnection)			
Description		Quantity	Fee	Total	
New Dwelling w/ one (1) bath			\$ 396.00		
New Dwelling w/ two (2) bath			\$ 515.00		
New Dwelling w/three (3) bath			\$ 658.00		
Each additional bath or kitchen			\$ 108.00		
Fire Sprinkler ( sq.ft)					
	SITE UTI	ITIEC			
Cotch Desin on Aven Dustry	3116 011	LITTES	ć co.oo		
Catch Basin or Area Drain Drywell, Leach Line or Trench Dra	in		\$ 60.00 \$ 60.00		
•					
Manufactured Home Utilities	fact is 0.00		\$ 70.00 \$ 92.00		
Footing Drain (1st 100' each add'	100t IS U.6U)		-		
Rain Drain Connector	III 6 0 COL		\$ 60.00		
Sanitary Sewer (1st 100' each add			\$ 92.00		
Storm Sewer (1st 100 each add't			\$ 92.00		
Water Line (1st 100' each add't fo			\$ 92.00		
Water Line (1st 100' each add't fo		DITENA	\$ 92.00		
	FIXTURE C	RILEM	4		
Backwater Valve			\$ 66.00		
Backflow Preventer		-	\$ 60.00		
Clothes Washer			\$ 26.00		
Dish Washer			\$ 26.00		
Drinking Fountain			\$ 26.00		
Ejector / Sump			\$ 26.00		
Expansion Tank			\$ 26.00		
Fixture / Sewer Cap			\$ 26.00		
Floor drain/Floor Sink/Hub			\$ 26.00		
Garbage Disposal			\$ 26.00		
Hose Bib			\$ 26.00		
Ice Maker			\$ 26.00		
Intersceptor / Grease Trap			\$ 26.00		
Medical Gas (Value \$			7		
Primer	•		\$ 26.00		
Roof Drain (commercial)			\$ 26.00		
Sink/Basin/Lavatory			\$ 26.00		
Tub/Shower/Shower Pan			\$ 26.00		
Urinal			\$ 26.00		
Water closet			\$ 26.00		
Water Heater			\$ 26.00		
Other			\$ 26.00	1	
0 0101			7 20.00		
PEI	RMIT FEES (Mi	nimum Fe	e \$80.001		
1. Plumbing Permit			\$		
2. 12% State Surcharge			\$		
3. Plan Review Fee (25% of			\$		
4. Dunes City Surcharge (g	reater of 7% or	25.00)	\$		
5. Other			\$		
TOTAL AMOUNT DUE:			\$		

Ref. Ord. 183.07 11/02/2010 (Rev. 11/01/2020)