

PERMIT # _____

RECEIPT # _____

APPLICATION FOR BUILDING PERMIT

CITY OF HERMISTON

Date _____	Valuation \$ _____	Approved By _____
	Permit Fee \$ _____	
	Plan Review Fee \$ _____	
1 ST Floor _____	F,L & S Plan Review Fee \$ _____	Date _____
2 nd Floor _____	Invest. Fee \$ _____	
Garage _____	7% Surcharge \$ _____	
Total _____	Permit Total \$ _____	By _____

	Erect _____	Setup _____	Dwelling _____
Application is Made To:	Alter _____	Demolish _____	Building _____
	Sign _____		OCCUPANCY GROUP TYPE

Owner _____ Address _____ Phone _____

Contractor _____ Address _____ Phone _____

CCB # _____ Expiration Date _____ Exempt _____ Non-Exempt _____

MDI # _____ Expiration Date _____

LSI # _____ Expiration Date _____

Architect _____ Address _____ Phone _____

Job Location Address: _____ Map No. _____ Tax Lot _____

Setbacks: Front _____ Rear _____ Side _____ and _____ Height _____

Describe work to be done. Include number of BEDROOMS WHERE APPLICABLE. (Only work described herein will be approved by this permit.)

NOTE 1: SEPARATE PUBLIC WATER AND SEWER PERMITS MUST BE OBTAINED

NOTE 2: SEPARATE PLUMBING, ELECTRICAL AND MECHANICAL PERMITS MUST BE OBTAINED

The City Building Codes Department does not survey parcels. Approval granted for the placement of structures is subject to modification by actual surveyed location of easements, rights of way, and lot lines. The owner is responsible for ensuring accuracy of set backs.

I agree to build to the above descriptions, plans and specifications and within the requirements of the Building Code of the State of Oregon

Print Applicant Name

Applicant Signature

BUILDING PERMITS BECOME NULL AND VOID AFTER 180 DAYS HAVE ELAPSED WITHOUT COMMENCEMENT VERIFIED BY INSPECTION OR A LAPSE OF WORK FOR 180 DAYS OR MORE. PLAN REVIEW FEE WILL BE CHARGED FOR ANY PERMIT NOT ISSUED WITHIN 180 DAYS OF APPROVAL DATE.

INSPECTIONS REQUIRE 24 HOURS ADVANCE NOTICE