

Building Permit Application

City of Wood Village

23335 NE Halsey St Wood Village, OR 97060

Phone: 503-489-6861 or 503 489-6859 Fax: 503-669-8723

www.woodvillageor.gov

Email: Building@woodvillageor.gov

TYPE OF WORK	
<input type="checkbox"/>	New Construction
<input type="checkbox"/>	Addition/Alteration/Replacement
<input type="checkbox"/>	Garage/Carport
<input type="checkbox"/>	Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/>	1 & 2-Family Dwelling/Accessory
<input type="checkbox"/>	Commercial/Industrial
<input type="checkbox"/>	Multi-Family (Apts. or Condos)
<input type="checkbox"/>	Other:
JOB SITE INFORMATION AND LOCATION	
Job Site Address:	
Suite #:	Bldg./Apt#:
Project Name:	
Directions to the Job Site:	
Cross Street Name:	
Subdivision:	Lot #:
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name:	
Address:	
City/State/Zip:	
Phone:	Fax:
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Name:	
Address:	
City/State/Zip:	
Phone:	Fax:
CONTRACTOR OR OWNER	
Business Name:	
Address:	
City/State/Zip:	
Phone:	Fax:
*CCB Lic. #:	Cell:
Metro or City Lic. #:	

* A Valid CCB# is Required for all Contractors.

Owner/Authorized Signature: _____

Print Signer's Name: _____

Date: _____

FOR OFFICE USE ONLY	
Application #:	Issued Permit #
Receipt #	Receipt #
Date Issued:	Date Issued:
Received by:	Issued by:
REQUIRED DATA: 1 & 2 FAMILY DWELLING	
Note: Permit fees are based on the total value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead and profit for the work indicated on this application.	
Valuation:	\$
No. of Bedrooms:	No. of Baths:
Total Number of Floors:	
New Dwelling Area (sq. ft.):	
Garage/Carport Area (sq. ft.):	
Covered Porch Area (sq. ft.):	
Main Floor Area (sq. ft.):	
Deck Area (sq. ft.):	
Other Structure Area (sq. ft.):	
REQUIRED DATA: COMMERCIAL USE CHECKLIST	
Note: Permit fees are based on the total value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead and profit fit the work indicated on this application.	
Valuation:	\$
Existing Building Area (sq. ft.):	
New Building Area (sq. ft.):	
Number of Stories:	
Type of Construction:	
Occupancy Group(s):	Existing
	New
Occupancy Load:	
NOTICE: All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under provisions of ORS 701 and may be required to be licensed in the jurisdiction where work is being performed. If the applicant is exempt from licensing, the following reason applies:	
Note: Work related to this Permit Application may be subject to regulations governing the handling, removal and/or disposal of asbestos and/or lead-based paint.	
Excise Tax	
Reynolds Tax	\$
Metro Tax	\$
BUILDING PERMIT FEES (OFFICE USE ONLY)	
Permit Fee	\$
Plan Review Fee (65% of Permit Fee)	\$
Fire/Life/Safety (40% of Permit Fee, if applicable)	\$
State Surcharge (12% of Permit Fee)	\$
Total Fee	\$