

IMPORTANT CHANGE - The Building Safety Department will perform inspections on Tuesdays and Thursdays only effective July 1, 2011.



Plumbing Permit Application

City of Troutdale

104 SE Kibling Avenue Troutdale Or 97060

Permit Specialist 503 674-7229

Application No.	Permit No.
Date Received	Date Issued
Received By	Issued By
Receipt No.	Receipt No.

Inspection Requests: Phone: 503 674-7204 Fax: 503 667-0524 E-mail: inspection@troutdaleoregon.gov

TYPE OF WORK		NEW 1- & 2- FAMILY DWELLINGS - INCLUDES 100 FT. FOR EACH UTILITY CONNECTION				
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement	FEE SCHEDULE* - DESCRIPTION		#	FEE	TOTAL
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other	NEW 1- & 2- FAMILY DWELLINGS - INCLUDES 100 FT. FOR EACH UTILITY CONNECTION				
CATEGORY OF CONSTRUCTION		New single-family 1 bath			396.00	
<input type="checkbox"/> 1- & 2-family dwelling	<input type="checkbox"/> Commercial/industrial	<input type="checkbox"/> Accessory building	New single-family 2 bath			515.00
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Master builder	<input type="checkbox"/> Other	New single-family 3 bath			658.00
JOB SITE INFORMATION AND LOCATION		Each additional bath/kitchen			108.00	
Address:		Fire sprinkler (_____sq. ft.)				
City/State/Zip:		SITE UTILITIES				
Suite/bldg./apt. no.:	Project name:	Catch basin or area drain			60.00	
Subdivision:	Lot no.:	Drywell, leach line or trench drain			60.00	
Tax map/parcel no.:		Manufactured home utilities			70.00	
DESCRIPTION OF WORK		Footing drain 1st 100 ft. ea. add'l ft. 60¢			92.00	
		Manholes			60.00	
		Rain drain connector			60.00	
		Sanitary sewer 1st 100 ft. ea. add'l ft. 60¢			92.00	
		Storm sewer 1st 100 ft. ea. add'l ft. 60¢			92.00	
		Water line 1st 100 ft. ea. add'l ft. 60¢			92.00	
PROPERTY OWNER		FIXTURE OR ITEM				
Name:		Backwater valve			66.00	
Address:		Backflow preventer			60.00	
City/State/Zip:		Cloths washer			26.00	
Phone:	Fax:	Dishwasher			26.00	
<i>Owner: This installation is being made on property I own, which is not intended for sale, lease, rent or exchange (OAR 918-695-0020).</i>		Drinking fountain			26.00	
<i>Owner Signature</i>		Ejector/sump			26.00	
<i>Date</i>		Expansion tank			26.00	
APPLICANT		Fixture/sewer cap			26.00	
Business name:		Floor drain/floor sink/hub			26.00	
Contact name:		Garbage disposal			26.00	
Address:		Hose bib			26.00	
City/State/Zip:		Ice maker			26.00	
Phone:	Fax:	Interceptor/grease trap			26.00	
CONTRACTOR		Primer			26.00	
Business name:		Roof drain (commercial)			26.00	
Address:		Sink/basin/lavatory			26.00	
City/State/Zip:		Tub/shower/shower pan			26.00	
Phone:	Fax:	Urinal			26.00	
CCB license no.:	City or Metro license no.:	Water closet			26.00	
State license no.:		Water heater			26.00	
Authorized signature:		Other				
Print name:	Date:	PLUMBING PERMIT FEES				
This permit application expires if a permit is not obtained within 180-days after it has been accepted as complete. Permits are non-transferable and expires 180-days from issuance or last inspection.		Plumbing Permit Fee		\$		
		Minimum Permit Fee		\$ 97.00		
		12% State Surcharge		\$		
		30% Plan Review Fee		\$		
		Deposit		\$		
DEPT. APPROVAL INITIAL & DATE:		Total Due		\$		