



1 & 2 Family Dwelling Addition, Alteration, & Repair PERMIT APPLICATION

Community Development – Building Division
333 Broadalbin Street SW • Albany, OR 97321
(541) 917-7553

cd.customerservice@cityofalbanynet.net

Obtain applications online at: cd.cityofalbanynet/forms

Job Site Location (where the work is taking place):

Job Site Address: _____

Project Description:

Property Owner:

Name of Owner: _____

Owner Mailing Address: _____

City/State/Zip: _____

E-mail: _____

Applicant (permit owner):

Name of Applicant: _____

Mailing Address: _____

City/State/Zip: _____

Phone #: _____

E-mail: _____

Owner Installation: Please complete form on the reverse side.

Contractor Company Information:

Name of Contractor: _____

Mailing Address: _____

City/State/Zip: _____

Phone #: _____

E-mail: _____

Oregon CCB # (required): _____

Contractor Information (required) LICENSING: All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701.

Plumbing: _____

CCB # _____ Phone # _____

PB # _____

Email: _____

Mechanical: _____

CCB # _____ Phone # _____

Email: _____

I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Authorized Signature: _____

Print Name: _____ Date: _____

Office Use Only:

Permit #:

Intake by:

CATEGORY OF CONSTRUCTION

- Single Family Duplex Townhouse Accessory Structure
 Addition Alteration Repair

REQUIRED DATA

Is the property in a Floodplain or Natural Resource Overlay District? Yes No

Is the property serviced with a septic system? Yes No

Permit fees are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application. See Construction Valuation Table in Fee schedule for minimum valuation.

Valuation: _____

BUILDING PERMIT DATA

No. of Bedrooms: _____	No. of Bathrooms: _____
First Floor: _____ (sqft)	Second Floor: _____ (sqft)
Third Floor: _____ (sqft)	Basement: _____ (sqft)
Garage: _____ (sqft)	Carport: _____ (sqft)
Decks/Patios: _____ (sqft)	Unfinished: _____ (sqft)

PLUMBING PERMIT *

(Select if requesting as part of this permit)

Fixtures: _____ (ea)	Water Service: _____ (lf)
Sewer Lateral: _____ (lf)	Stormwater: _____ (lf)
Backflow Device: _____ (ea)	Fire Sprinkler: _____ (sqft)

MECHANICAL PERMIT *

(Select if requesting as part of this permit)

Gas Connections: _____ (ea)	Appliances: _____ (ea)
Venting: _____ (ea)	Fireplace: _____ (ea)

Other: _____

*See the associated fee tables at cd.cityofalbanynet/fees

NOTICES

PERMITS BECOME VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITH 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

INSPECTION RESULTS

AS PART OF OUR EFFORT TO BE SUSTAINABLE AND TO BE EFFICIENT GOVERNMENT, INSPECTION RESULTS ARE EMAILED TO THE APPLICANT LISTED ON THE APPLICATION. IF YOU WOULD LIKE TO RECEIVE PAPER NOTICES AT THE JOBSITE, PLEASE CHECK HERE

Property Owner Statement Regarding Construction Responsibilities

Oregon Law requires residential construction permit applicants who are not licensed with the Construction Contractors Board to sign the following statement before a building permit can be issued. (ORS 701.325 (2))

This statement is required for residential building, electrical, mechanical, and plumbing permits. Licensed architect and engineer applicants, exempt from licensing under ORS 701.010 (7), need not submit this statement. This statement will be filed with the permit.

Please check the appropriate box:

I own, reside in, or will reside in the completed structure and my general contractor is:

Name

CCB#

Expiration Date

I will inform my general contractor that all subcontractors who work on the structure must be licensed with the Construction Contractors Board.

or

I will be performing work on property I own, a residence that I reside in, or a residence that I will reside in. If I hire subcontractors, I will hire only subcontractors licensed with the Construction Contractors Board. If I change my mind and hire a general contractor, I will select a contractor who is licensed with the CCB and will immediately give the name of the contractor to the office issuing this Building Permit.

I have read and understand the Information Notice to Homeowners About Construction Responsibilities, and I hereby certify that the information on this homeowner statement is true and accurate.

Print Name of Permit Applicant

Signature of Permit Applicant

Date

Permit #: _____

Address: _____

Issued by: _____ Date: _____

