CITY OF WILSONVILLE Plumbing Permit Application

Secured Fax Line: (503) 682-1013

Address: 29799 SW Town Center Loop E., Wilsonville, OR 97070
Phone: (503) 682-4960
Online Inspection Request www.ci.wilsonville.or.us

24-hour IVR inspection request: (503) 682-4159

TYPE OF WORK

☐ New Construction ☐ Addition/alteration/replacement
☐ Demolition ☐ Other:

CATEGORY OF CONSTRUCTION

☐ 1 & 2 Family ☐ Commercial/industrial ☐ Other
☐ Multifamily ☐ Accessory Building

JOB SITE INFORMATION AND LOCATION

Job site address:

City/State/ZIP:

Suite/bldg./apt. no.: | Project name:

DESCRIPTION OF WORK (EXAMPLE: 2 FIXTURES FOR KITCHEN REMODEL)

☐ PROPERTY OWNER ☐ TENANT

Name:

Address:

City/State/ZIP:

Phone: ( ) | Fax: ( )

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent or exchange.

Owner signature: Date:

☐ CONTRACTOR ☐ SUBCONTRACTOR

Name:

Address:

City/State/ZIP:

Phone: ( ) | Fax: ( )

Plumber Lic. No.: PB **Expiration date:**

CCB no: **Expiration date:**

Metro no.: **Expiration date:**

Authorized signature:

Print name: Date:

☐ APPLICANT ☐ CONTACT PERSON

Business name:

Contact name:

Address:

City/State/ZIP:

Phone: ( ) | Fax: : ( )

E-mail:

**** DOES NOT INCLUDE FIRE SERVICE LINE OR FDC**

THIS PERMIT APPLICATION EXPIRES IF A PERMIT IS NOT OBTAINED WITHIN 180 DAYS AFTER IT HAS BEEN ACCEPTED AS COMPLETE.

FEE* SCHEDULE

Description	Qty.	Ea.	Total
New 1- 2-family dwellings (Includes 100 ft. for each utility connection			
SFR (1) bath		256.50	
SFR (2) bath		311.65	
SFR (3) bath		348.80	
Half-Bath		128. 50	
Fire sprinkler (SFD) _____sq. ft.)			
Site utilities (*Per 100 FT) **			
Catch basin or area drain		14.90	
Drywell, leach line, or trench drain		14.90	
Footing drain (no. linear ft.: _____)		50.80*	
Manufactured home utilities		25.65	
Manholes		14.90	
Rain drain connector		14.90	
Sanitary sewer(no. linear ft.:		50.80*	
Storm sewer (no. linear ft.: _____)		50.80*	
Water service (no. linear ft:_____)		50.80*	
Fixture or item			
Backflow preventer		14.90	
Backwater valve		14.90	
Clothes washer		14.90	
Dishwasher		14.90	
Drinking fountain		14.90	
Ejectors/sump		14.90	
Expansion tank		14.90	
Fixture/sewer cap		14.90	
Floor drain/floor sink/hub		14.90	
Garbage disposal		14.90	
Hose bib		14.90	
Ice maker		14.90	
Interceptor/grease trap		14.90	
Medical gas (value: $ _____)			
Primer		14.90	
Roof drain (commercial)		14.90	
Sink/basin/lavatory		14.90	
Tub/shower/shower pan		14.90	
Urinal		14.90	
Water closet		14.90	
Water heater		14.90	
Other:		14.90	
Other:		14.90	

Fee methodology set by Tri-County Building Industry Service Board

Subtotal (minimum permit fee $41.00) _____

Plan Check Fee (25% of Subtotal) _____

State Surcharge (12% of Permit) _____

Total Amount Due _____