

BUILDING PERMIT



STATE OF OREGON
DEPARTMENT OF COMMERCE
BUILDING CODES DIVISION

No. OC-16-B-80

Jurisdiction of Curry
State County City

Application for:
 Plan Review & Building Permit Remove
 Plan Review - No Permit
 Plan Review - Fire & Life Safety Only

Applicant to complete numbered spaces only.

JOB ADDRESS	1 <u>Brooks Rd Hunter Creek</u>		Is building within city limits	yes	<input checked="" type="radio"/>									
DIRECTIONS TO JOB SITE														
LEGAL DESCR.	LOT NO. <u>605</u>	BLK <u>37</u>	TRACT <u>15-12D</u>	<input type="checkbox"/> See Attached Sheet										
OWNER	2 <u>Ms PD Mohr Box 1424 J.B.</u>		MAIL ADDRESS	ZIP <u>97444</u>	PHONE									
CONTRACTOR	3 <u>Same</u>		MAIL ADDRESS	PHONE	LICENSE NO.									
ARCHITECT OR DESIGNER	4		MAIL ADDRESS	PHONE	LICENSE NO.									
ENGINEER	5		MAIL ADDRESS	PHONE	LICENSE NO.									
USE OF BUILDING	6 <u>Single Family Dwelling</u>													
7 Class of work:	<input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input checked="" type="checkbox"/> REMOVE													
8 Describe work:	<u>Remove old house to build new one.</u>													
9 Change of use from														
Change of use to														
10 Declaration of Valuation of work \$														
PLAN CHECK FEE	<u>0</u>	PERMIT FEE	<u>0</u>	+ 4% SURCHARGE = \$	<u>0</u>									
SPECIAL CONDITIONS:														
Application Accepted By <u>[Signature]</u>		Plans Checked By <u>[Signature]</u>		Approved For Issuance By <u>[Signature]</u> <u>2-1-80</u>										
11 NOTICE SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL AND PLUMBING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 120 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 120 DAYS AT ANY TIME AFTER WORK IS COMMENCED. I HEREBY CERTIFY THAT 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. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION. Signature of Contractor or Authorized Agent <u>[Signature]</u> (Date) Signature of Owner (If Owner Builder) (Date)			PLANS EXAMINER COMPLETES THIS BOX AND CERTIFIES COMPLIANCE WITH LOCAL REGULATIONS											
			Special Approvals ZONING FIRE ZONE SANITARY — PUBLIC PRIVATE OTHER (Specify) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Type of Const.</td> <td>Occupancy Group <u>[Signature]</u></td> <td>Division</td> </tr> <tr> <td>Size of Bldg. (Total) Sq. Ft.</td> <td>No. of Stories</td> <td>Max. Occ. Load</td> </tr> <tr> <td>Fire Zone <u>[Signature]</u></td> <td>Use Zone</td> <td>Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>No. of Dwelling Units</td> <td>No. of Bedrooms</td> <td></td> </tr> </table> DATE PERMIT ISSUED <u>2-1-80</u>			Type of Const.	Occupancy Group <u>[Signature]</u>	Division	Size of Bldg. (Total) Sq. Ft.	No. of Stories	Max. Occ. Load	Fire Zone <u>[Signature]</u>	Use Zone	Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No
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WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION [Signature] M.O. CASH