

MAIL TO: Jerry Thom, PO Box 3030, Harbor, OR

BUILDING PERMIT

Rept # 1746

No. CC-99B-81



STATE OF OREGON
DEPARTMENT OF COMMERCE
BUILDING CODES DIVISION

Application for:

- Plan Review & Building Permit
- Plan Review - No Permit
- Plan Review - Fire & Life Safety Only

Jurisdiction of CURRY
State Curry County Curry City

Applicant to complete numbered spaces only.

JOB ADDRESS 1 <u>14405 STATELINE ROAD BROOKINGS</u>		Is building within city limits		yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>
DIRECTIONS TO JOB SITE <u> Hwy 101 SO TO STATELINE RD -</u>					
LEGAL DESCR.	LOT NO. <u>700</u>	BLK	TRACT <u>41-13-26</u>	<input type="checkbox"/> See Attached Sheet	
OWNER 2 <u>Gene Starz, 14405 STATELINE Rd, Brookings, OR</u>	MAIL ADDRESS	ZIP	PHONE		
CONTRACTOR 3 <u>Jerry Thom Builder, PO Box 3030, Harbor, OR</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 checked="" type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input type="checkbox"/> REMOVE					
8 Describe work: <u>CONSTRUCT 2 STORY 8 X 16 STORAGE ADDITION ADJACENT TO</u>					
9 Change of use from <u>EXISTING WOODSIDE HOME -</u>					
Change of use to					
10 Declaration of Valuation of work \$ <u>8 X 16 = 128 X 10.50 = 1344 X 2 = 2688.00</u>					
PLAN CHECK FEE	<u>—</u>		PERMIT FEE	<u>24.00</u>	
			+ 4% SURCHARGE = \$ <u>24.96</u>		

SPECIAL CONDITIONS:

Application Accepted By Phony 6-30-81 Initial Phony Date 6-30-81 Plans Checked By Phony 6-30-81 Initial Phony Date 6-30-81 Approved For Issuance By Phony 6-30-81 Initial Phony Date 6-30-81

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.

Jerry Thom 6-30-81
Signature of Contractor or Authorized Agent (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)			
Type of Const.	Occupancy Group	Division	
<u>V-N</u>	<u>M</u>	<u>1</u>	
Size of Bldg. (Total) Sq. Ft.	No. of Stories	Max. Occ. Load	
<u>256</u>	<u>2</u>		
Fire Zone	Use Zone	Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>3</u>	<u>R-2</u>		
No. of Dwelling Units	No. of Bedrooms		
<u>1</u>			
DATE PERMIT ISSUED			

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION M.O. CASH PERMIT VALIDATION M.O. CASH