



Facility Permit Plan Intake Form

FOR INTAKE, STAFF USE ONLY	Building/Mechanical _____
Date Received _____	Electrical _____
Building Registration # _____	Plumbing _____
Fixed Bid _____	Fire _____
Bin # _____	Planning _____
Building Permit # _____	BES _____
Mechanical # _____	PDOT _____
Plumbing Permit # _____	Structural _____
Electrical Permit # _____	Other _____

APPLICANT: Complete all sections below that apply to the project. Please print legibly.

Print Name _____ Sign Name _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Day Phone _____ FAX _____ email _____

Plans/permits available for pick up at 1900 SW 4th Avenue, 3rd floor between 7:30 a.m. and 4 p.m.

Contact Name for plan/permit pick up _____
 Day Phone _____ email _____

Project Building Name / # _____
 Project Address or Location _____
 Project Name and Description _____

Total Project Value _____ Project Reference #/Billing ID # _____
 Building Contractor _____ CCB # _____
 Mechanical Contractor _____ CCB # _____
 Electrical Contractor _____ CCB# _____ License # _____
 Plumbing Contractor _____ CCB# _____ License # _____

Building Permit

[Y] [N] Alarms Required
 No. of Stories _____ [Y] [N] Smoke Det. Req'd
 Const. Type _____ [Y] [N] Sprinklers Req'd
 [Y] [N] Struct. Eng / Calcs Submitted

Mechanical Permit

Mechanical Valuation _____
 Description _____

Electrical Permit

Please provide a completed standard electrical permit application form. You may mail or deliver it to 1900 SW 4th Avenue, Portland, Oregon 97201 or FAX to 503-823-7425.

Plumbing Permit

Number of Fixtures _____
 Back Flow Devices _____
 Water Service (# of Feet) _____
 Medical Gas _____
 Other _____ **1**