



Commercial Pre-Development Packet

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land use planning • permits • inspections

Corvallis Development Services Division
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Corvallis, Oregon 97333
tel. 541.766.6929
fax. 541.766.6936
inspection request line. 541.766.6745
email

Check Case Status

Applications & Forms

Search Archives, Maps & Publications

Schedule an Inspection

Community Development

City of Corvallis Home

PRE-DEVELOPMENT MEETING GUIDELINES

In order to assure a successful pre-development meeting, the following guidelines should be followed:

- The Plans Examiner will schedule a pre-development meeting and create a “PRE” case file in Permit*Plan.
- The customer will be required to submit the following in writing at least five (5) working days in advance of the meeting:
 - > proposed agenda
 - > summary of key questions (the more specific, the better)
 - > any plans that have been developed to date (1 set)
 - > name of project design professional

The five day advance submittal requirement better assures that schedules of the best qualified staff can be coordinated to attend and also allows sufficient time for staff to thoroughly review the proposal. If the required information is not received at least five (5) working days in advance of the meeting, the meeting will be rescheduled

- Meeting length is limited to a maximum of one hour unless a longer time is deemed appropriate by the Plans Examiner.
- If a design professional has been retained for the project, he/she must attend the pre-development meeting.
- City staff will chair/facilitate the meeting; meetings will normally take place in City Hall.
- Customer will be requested to take meeting minutes; if requested, staff will review and “sign off” on the minutes prepared by the customer.
- After the pre-development meeting, all pertinent information related to the project will be placed in the PRE case file by the Plans Examiner until plans are submitted for a building permit and a BLD case file is opened. At that point the PRE case file may be closed.

If we can be of any assistance or answer any questions, please contact us.

Paul Vinje
Plans Examiner
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Bill Clemens
Plans Examiner
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Office (541) 766-6929
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City of Corvallis - Development Contacts

Permitting, Plan Review and Inspection Services are located in City Hall. Click [here for map](#).

City of Corvallis
501 SW Madison Avenue
PO Box 1083
Corvallis, OR 97339-1083

DEVELOPMENT SERVICES DIVISION

Phone: (541) 766-6929
Fax: (541) 766-6936
Location: Lower Level [City Hall](#)

Permitting & Plan Review

[Paul Vinje](#), Commercial Plans Examiner
[Bill Clemens](#), Commercial Plans Examiner
[Lisa Franklin](#), Civil Engineer I
[Kevin Russell](#), Senior Planner
[Jared Voice](#), Associate Planner
[Tenille Holroyd](#), Permit Technician
[Alicia Van Driel](#), Permit Technician
[Mike Fegles](#), Assistant Building Official

Inspection Services

[John Corliss](#), Building Inspector
[Norm Domagala](#), Building Inspector
[Frank DeWilde](#), Electrical Inspector
[David Hensley](#), Plumbing Inspector
[Michael Louie](#), Engineering Tech III
[Shannen Chapman](#), Land Use Inspector
[Chris Westfall](#), Code Enforcement Supervisor
[Sarah Branson](#), Code Enforcement Officer
[Greg Hall](#), Inspection Services Manager

Administrative Services

[Dan Carlson](#), Development Services Division
Manager/City Building Official
[Susie Hilaire](#), Sr. Administrative Specialist
[Phyllis Doolittle](#), Administrative Specialist

COMMUNITY DEVELOPMENT ADMIN

Phone: (541) 766-6981
Fax: (541) 766-6946
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[Ken Gibb](#), Community Development Director
[Kathleen Matthews](#), Management Assistant

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Fax: (541) 754-1792
Location: Middle Level [City Hall](#)

Current Planning

[Brian Latta](#), Assistant Planner
[Bob Richardson](#), Associate Planner
[Kevin Young](#), Senior Planner

Long-Range Planning

[Sarah Johnson](#), Associate Planner
[Kelly Potter](#), Senior Planner
[Jason Yaich](#), Associate Planner

Administrative Services

[Fred Towne](#), Planning Division Manager
[Sharon Crowell](#), Sr. Administrative Specialist
[Joan Extrom](#), Administrative Specialist

PUBLIC WORKS – DEVELOPMENT REVIEW DIVISION

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Permitting & Plan Review

[Matt Grassel](#), Civil Engineer II
[Ted Reese](#), Civil Engineer I

Inspection Services

[Mark Bauer](#), Engineering Tech III
[Jason Tacchini](#), Engineering Tech III

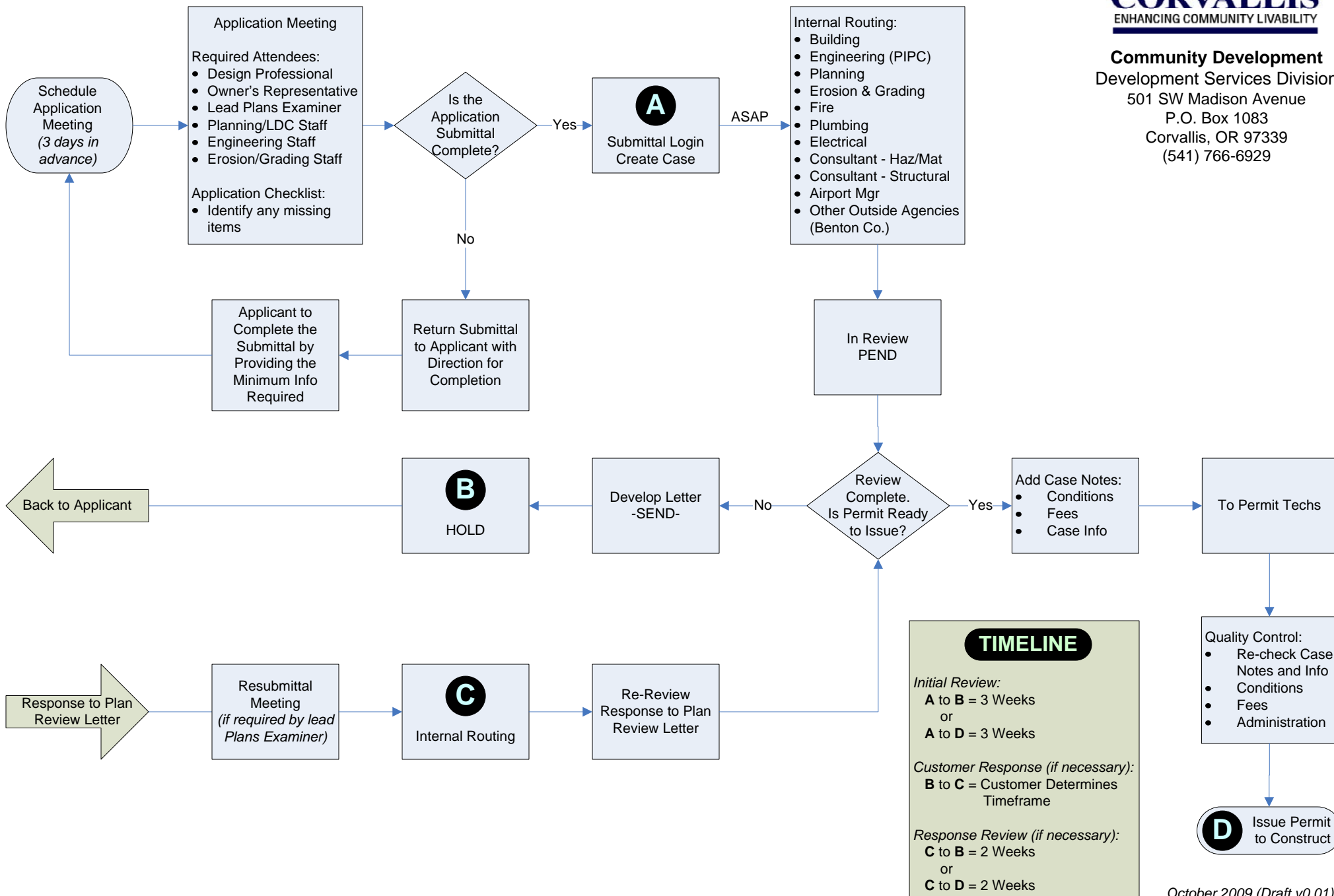
Administrative Services

[Jeff McConnell](#), Engineering Supervisor
[Linda Ackeret](#), Administrative Specialist
[Cathy Trigg](#), Administrative Specialist

COMMERCIAL PLAN REVIEW PROCESS (\$500,000+ in Value)



Community Development
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E-Mail: development.services@ci.corvallis.or.us

For office use only:

Case # _____

Parcel Tags

- historic PIPC Status
 other _____

Type of Project

- T.I. remodel
 repair deferred
 phased complete

**Commercial/Multi-Family Plan Review Application
Checklist**

date last updated: October 23, 2009

The purpose of this checklist is to help define a complete submittal package for the scope of work and address information required for typical projects. The plan review will reflect the extent and completeness of the submitted documents and may uncover additional issues requiring revised plans, documentation, and subsequent re-review. This checklist can be used for all commercial and multi-family construction projects, including new construction, additions, alterations and tenant improvements. It is recognized that some proposals will not be required to submit all of the information identified below. For example, if the proposal is a interior remodel of an existing building some of the site plan submittal requirements may be waived.

Pre-submittal Conference

Projects that have a valuation at or more than \$500,000 will be **required** to schedule a pre-submittal conference with Development Services staff. Please contact a Plans Examiner at (541) 766-6929 to schedule a date and time for your conference. Conferences will typically be held within three (3) business days from the date staff is contacted. Staff will review the checklist with the applicant to ensure complete and sufficient information is provided. Applicants should complete the checklist prior to scheduling a conference.

- Application for Historic Review made (Case Number(s) _____)
 Application for Public Improvements (PIPC) Review made (Case Number(s) _____)
 Required Planning Division approvals (Case Number(s) _____)
 Application for Phased Development

Three complete sets of legible plans

- drawn to scale in conformance with the applicable local and state building codes
 if the building exceeds 4,000 square feet in ground area or 20' in height, the plans are required to be stamped by a state of Oregon licensed architect or engineer. All sheets shall be stamped and signed by the design professional of record.

- Special Inspection and Testing Agreement form** (required if the scope of work indicates a need either by designation of the DPRC, the product listing, or Chapter 17 of the Oregon Structural Specialty Code)
 the back of the form shall be completed and signed by the Design Professional of Responsible Charge
 all signatures are required on the form in order to be complete and/or accepted

Deferred Submittal Agreement Form

- the applicant shall request items of deferred submittal by completing the Deferred Submittal Agreement Form
 the back of the form shall be completed and signed by the DPRC
 all signatures are required on the form in order to be complete and accepted

Site/plot plan (drawn to scale)

- property lines
- north arrow
- lot and building setback dimensions
- lot coverage area
- retaining walls
- location of easements
- locations and dimensions of vehicular access, sidewalks, parking, accessible parking
- footprint of all structures (including decks, porches, etc.)
- existing and proposed contour lines at 2-foot intervals
- property corner, structure corner, and finish floor elevations
- size and location of water, sewer, storm drain, power and gas utilities. Include vaults, cleanouts, hydrants and references to details
- any known fill sites or landslide hazard areas
- location of the 100-year flood plain and 0.2-foot floodway, if applicable

Erosion prevention and sediment control plan

- EXC permit application form with estimate of disturbed area, and 3 sets of plans illustrating:
- all information listed for site/plot plan above
- all areas of ground disturbance on the site, including areas that will be cleared, graded or excavated
- site entrances/exits with erosion control measures (e.g. gravel construction entrance, tire wash)
- location, type and applicable dimensions of erosion control measures (e.g. sediment fences)
- designated concrete wash-out area (away from the street, storm system, and waterways)
- applicable details of erosion control measures with dimensions and construction information
- applicable standard erosion control notes from City of Corvallis EPSC Manual Appendix B
- location and size of existing and proposed drainage, water quality, and detention facilities
- copy of issued NPDES 1200-C permit (for projects disturbing 1 or more acres of land surface)
- dust control plan (for projects disturbing 1 or more acres of land surface)
- plans are stamped and signed by a Certified Professional

Grading plan (drawn to scale)

- EXC permit application form with estimate of cut/fill quantities, and 3 sets of plans illustrating:
- north arrow
- general vicinity of the proposed site
- property boundaries, easements, grading setback requirements, and clearing limits
- existing and proposed contour lines at 2-ft. intervals, extending 15 feet beyond project boundaries
- location of existing and proposed improvements on the property and within 15 feet of the project
- location and size of existing and proposed drainage, water quality, and detention facilities
- grading cross sections as necessary to illustrate the extent of proposed grade changes
- 3 copies of the soils engineering and engineering geology reports (geotechnical report)
- special inspection and testing agreement form for geotechnical observation and/or compaction testing (if required by geotechnical report)

Land Development Code requirements:

- natural features identified on site plan and supplemental information provided (wetlands, riparian areas, significant vegetation)
- existing significant trees/shrubs (defined by Chapter 1.6 of the Land Development Code)
- tree protection fencing/arborist's report for encroachments into the circle of protection
- bicycle parking calculations and locations shown on site plan in accordance with Chapter 4.1 of the LDC
- vehicle parking calculations and locations shown on site plan in accordance with Chapter 4.1 of the LDC
- exterior lighting plan with fixture cut sheets
- mechanical equipment and screening shown on the site plan
- pedestrian oriented design standards summary (LDC 4.10)

Landscape and irrigation plans including:

- proposed planting plan including: location of trees shrubs and ground cover, size of plantings, and scientific name of plant materials (as required by Land Development Code standards)
- proposed irrigation system plan including location of double-check valve, mainlines, and valves
- proposed parking lot landscaping identified on the site plan and landscape plan

Cover sheet including:

- project name and address
- design professional's contact information
- drawing index
- project description
- code analysis
- fire sprinkler, alarm, and/or special devices proposed
- occupancy group
- proposed use
- building construction type
- allowable area calculations
- design load criteria

Floor plans including:

- dimensions
- wall types and fire resistance
- plumbing fixtures and calculations
- shafts and their ratings
- accessibility features
- sprinkler room and vault details
- room identification
- exit and egress lighting plan
- ventilation fans
- stair and landing dimensions
- door and hardware schedule
- door and window locations
- occupant load of each room
- electrical panel locations
- Fire Dept. connection location
- special device locations

Exterior elevations including:

- architectural elevations for new construction
- exterior elevations must reflect the actual changes in grade including ramp, rails, signage, etc.
- material legend
- glazing schedule
- horizontal and vertical dimension
- identify roof mounted mechanical equipment and screening

Interior elevations including:

- changes in floor level
- grade to under floor, floor to ceiling, and ceiling to roof dimensions
- stairs, guards, and railing
- accessible fixtures, counter heights, etc.

Structural sheets including:

- general notes
- foundation plan and details
- framing section details
- roof framing plan
- structural design criteria
- slab design and details
- connection details
- suspended ceiling plan
- special inspections required
- framing plan and details
- floor framing plan
- cross sections

Structural calculations including:

- gravity and lateral loads
- design parameters
- seismic calculations
- specific structural element details.
- connection adequacy

Mechanical plans including:

- equipment specifications
- connection details
- condensation lines and discharge locations
- seismic calculations for connection per chapter 16 of the OSSC and ASCE 7
- supply lines, sizes and valves
- damper locations and ratings
- ventilation air calculations

DEFERRED

Three sets of Energy Code compliance forms

DEFERRED

Please visit <http://oregon.gov/ENERGY/CONS/Codes/codehm.shtml> for instructions and forms.

- building envelope forms mechanical systems forms lighting forms

Plumbing plans including:

DEFERRED

- plumbing diagrams (isometric) fixture location
 pipe sizes, slopes and lengths pipe support details pipe type
 special devices

Fire stopping and proofing plans including:

DEFERRED

- penetration details, specifications, and listing data
 fire stopping products specifications and listing data
 fire proofing details which are site-specific to the project
 listed fire rated wall, floor/ceiling and shaft assemblies

Fire sprinkler plans including:

DEFERRED

- design specifications riser detail
 manufacturer cut sheets hydraulic calculations sprinkler room and vault details.
 pipe size and sprinkler spacing and head type piping and component drawings

Fire alarm plans including:

DEFERRED

- fire alarm diagram component locations
 component specification electrical diagrams battery calculations

Forms to be provided with application:

YES NO

- Application Checklist
 Alternate methods & material request form (if applicable)
 Building Permit application
 Deferred Submittal Agreement
 Development Agreement (for public improvements)
 Electrical application
 Excavation & Grading/Erosion Prevention & Sediment Control Permit Application
 Mechanical application
 Oregon State University Master Plan Checklist (OSU projects only)
 Plumbing application
 Sewer Discharge Form
 Special Inspection Agreement form
 Systems Development Charges worksheet



City of Corvallis - Development Services Division

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Phased Development - Agreement

In accordance with *Development Services Procedure 3066* this form is an agreement for Phased Development for the following project:

Project Name: _____ **Date:** _____

Project Address: _____

- Phases:**
- | | |
|---|--|
| <input type="checkbox"/> 1 - Demolition | <input type="checkbox"/> 4 - Foundation only |
| <input type="checkbox"/> 2 - Erosion Control, Exc & Grading | <input type="checkbox"/> 5 - Shell |
| <input type="checkbox"/> 3 - Site Utilities | <input type="checkbox"/> 6 - Completion |

NOTE : TI's are not part of phased construction per PRO 3066

Total estimated value for project (Phases 1-6): _____

Design Professional of Responsible Charge: _____

License Number: _____ E-Mail: _____

Phone: _____ Cell Phone: _____ Fax: _____

Address: _____

Guidelines:

- Design Professional of Responsible Charge (DPRC)** - A DPRC is required for all projects using phased construction. The building owner is responsible for employing a DPRC throughout the duration of a phased project. The DPRC may change during the course of a project, but not without a new signed agreement.
- Document Coordination** - The DPRC is responsible for coordinating all design documents from the trades and other design professionals and reviewing them prior to forwarding to the City for approval. A shop drawing stamp or cover sheet must accompany all submittals which indicates that the submittal has been reviewed and found to be in general conformance with the design of the building. The City will not accept documents without this review.
- Fees** - An additional 10% will be added to the plan review fees for each phase at the time of permit issuance.
- Timelines** - Every attempt will be made to review each phase within three weeks of a complete submittal package.
- Pre-Development Meeting** - A minimum of one pre-development meeting shall be held between representatives of the City, Owner, DPRC and the General Contractor (if known) prior to submitting plans.
- Scoping Document** - A scoping document from the DPRC must accompany this agreement that clearly and explicitly outlines the scope of work for all systems and trades involved in each individual phase.

ACKNOWLEDGMENTS:

Owner Name (Printed)

Owner Signature

General Contractor Firm Name (Printed)

General Contractor Signature

Design Professional in Responsible Charge (Printed)

Design Professional in Responsible Charge Signature

Building Official Name (Printed)

Building Official Signature



City of Corvallis - Development Services Division

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DEFERRED SUBMITTAL - AGREEMENT

Oregon Structural Specialty Code Section 106.3 and Corvallis Municipal Code Section 9.01.100.010 allow a permit applicant to defer certain submittals if approved by the City of Corvallis. This form is a deferred submittal agreement for the following project:

Date: _____ Project Name: _____

Project Address: _____ Permit Number: _____

Phase: Excavation & Grading Foundation only Completion
 Site Utilities Shell TI

Design Professional in Responsible Charge: _____

License Number: _____ E-Mail: _____

Phone: _____ Fax: _____

Address: _____

Guidelines:

- Approval** - Each deferred submittal shall bear the approval of the design professional in responsible charge. Notation shall be included that the deferred submittal documents have been reviewed and have been found to be in general conformance to the design of the building.
- List** - The back of this form is a list of deferred submittals. The design professional in responsible charge must check which submittals are requested to be deferred and indicate an anticipated submittal date.
- Fees** - Each deferred submittal item will be assessed a \$150 fee at the time of permit issuance.
- Timelines** - Every attempt will be made to provide timely reviews of 5 - 10 business days
- Work without a Permit** - Work that is constructed without having been reviewed and approved by both the design professional in responsible charge and Development Services, will be considered as work performed without a permit. Any person or firm performing work prior to approval shall be subject to the penalties of CMC Section 9.01.100.060 and have review fees doubled.

ACKNOWLEDGMENTS:

Owner Name (Printed)

Owner Signature

General Contractor Firm Name (Printed)

General Contractor Signature

Design Professional in Responsible Charge(Printed)

Design Professional in Responsible Charge Signature

Development Services Plans Examiner (Printed)

Development Services Plans Examiner Signature

CITY OF CORVALLIS DEFERRED SUBMITTAL AGREEMENT

Date: _____ **Project Name:** _____

Project Address: _____ **Permit Number:** _____

Phase: Excavation & Grading Foundation only Completion
 Site Utilities Shell TI

Design Professional in Responsible Charge: _____

Items which may be deferred include, but are not limited to the following:

✓	Deferred Item	Date	✓	Deferred Item	Date
	1. Acoustical ceiling suspension system			19. Plumbing system	
	2. Auxiliary power systems			20. Post-tensioned concrete structural members or panels	
	3. Awnings			21. Pre-cast concrete structural members or panels	
	4. Bleachers			22. Prefabricated stair units to include steel, aluminum, or pre-cast concrete stairs.	
	5. Carports			23. Prefabricated wall panel	
	6. Curtain wall systems			24. Ore-stressed concrete structural members or panels	
	7. Electrical system			25. Raised floor systems	
	8. Emergency call system			22. Shelving systems and steel storage racks	
	9. Exit Illumination			27. Signs	
	10. Fire alarm system			28. Skylights	
	11. Fire sprinkler			29. Smoke and heat vents	
	12. Fire stopping			30. Specialty retaining walls	
	13. Glass guardrails			31. Stone veneer	
	14. Glazing systems			32. Terra cotta veneer	
	15. HVAC system			33. Wooden, steel, or composite floor or roof trusses	
	16. Intercom system			34. Works of art	
	17. Irrigation system			35.	
	18. Metal guardrails and handrails			36.	

Fees - Each deferred submittal item will be assessed a \$150 fee at the time of permit issuance.

Work without a Permit - Work that is constructed without having been reviewed and approved by both the design professional in responsible charge and Development Services, will be considered as work performed without a permit. Any person or firm performing work prior to approval shall be subject to the penalties of CMC Section 9.01.100.060 and have review fees doubled.



**Community Development
Development Services Division**

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**Application for Approval of Alternate Materials, Alternate Design
and/or Alternate Method of Construction**

Date: _____ Permit #: _____
Project Name: _____ Project Address: _____
Owner's Name: _____ Phone: _____
Owner's Address: _____
Applicant's Name: _____ Phone: _____
Applicant's Address: _____
Development Services Div. Contact: _____

Note to Applicant: Section 104.10 of the Oregon Structural Specialty Code grants the Building Official the ability to consider alternatives to prescriptive code language in specific cases. It is the policy of the City that the use of this Section of the Code be limited, and that individual cases be considered carefully within the context of the requirements of these provisions.

Background

Request

Application Determination:

Upon due consideration, the City of Corvallis Building Official determines that the above application is: _____ Denied
_____ Approved without conditions
_____ Approved, subject to following conditions:

Date: _____ Building Official: _____

Applicants agreement to abide by conditions:

The undersigned expressly acknowledges and agrees that acceptance of this application and any subsequent issuance of a permit(s) based upon the proposed alternative(s) or modification(s), has been made subject to certain conditions which the Building Official deems necessary. The undersigned agrees to comply strictly with all conditions imposed by the Building Official. With respect to all permit(s) issued based upon any alternative to prescriptive code language of the Oregon Structural Specialty Code, the undersigned's failure to comply strictly with all conditions imposed by the Building Official in granting any permit(s) pursuant to this application will render any right to proceed with construction, occupancy or use of any property or premises pursuant to said permit void, and may subject the undersigned to revocation of said permit issued in connection with this application.

The undersigned acknowledges that this alternate proposal application, if approved, shall apply only to the project for which the alternate was requested. Future projects requiring consideration for alternate materials, design and/or methods shall be reviewed on a case by case basis.

Agreed and accepted:

Owner's signature: _____ Date: _____
(If applicant is not the owner or the owner's architect or engineer)

Applicant's signature/title: _____ Date: _____



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www.corvallispermits.com
www.ci.corvallis.or.us

_____	_____
Building Permit #	Date

Project Title	

Project Address	

SPECIAL INSPECTION AND TESTING

To applicants of projects requiring Special Inspection or Testing as per Section 1701.5 of the Oregon Structural Specialty Code, please review the information below, acknowledge an understanding of the information by signing below, and return this form to the City.

BEFORE A PERMIT CAN BE ISSUED: The Owner or his representative, on the advice of the responsible Project Engineer or Architect, shall complete, sign, and submit to this Department for review and approval two (2) copies of the attached "Structural Tests and Inspection Schedule."

The Owner and General Contractor, where applicable, shall also acknowledge the following conditions applicable to Special Inspection and/or Testing.

1. Contractor is responsible for proper notification to the Inspecting or Testing Agency for items listed.
2. Testing laboratory only should take samples and transport them to their laboratory.
3. Copies of all laboratory reports and inspections are to be sent directly to the City by the Testing Agency. All reports and correspondence shall contain permit, project title and project address.
4. Inspection Agency to submit names and qualifications of on-site Special Inspectors to the City for approval.
5. Special Inspectors shall provide appropriate reports to this department of all inspection activity.
6. It is the responsibility of the Contractor to review City approved plans for additional inspection or testing requirements that may be noted.
7. **BEFORE A CERTIFICATE OF OCCUPANCY PERMIT CAN BE ISSUED:** The Inspection Agency shall submit a statement that all items requiring testing and inspection have been fulfilled and reported. Those items not tested and/or inspected shall be noted in this statement. Copy of statement to be maintained at the job site for City's Building Inspector's review prior to final inspections.

ACKNOWLEDGMENTS

Owner Name (Printed)

Owner Signature

General Contractor Firm Name (Printed)

General Contractor Signature

Project Engineer or Architect Firm Name (Printed)

Project Engineer or Architect Signature

Special Inspection Agency Firm Name (Printed)

Special Inspection Agency Rep. Signature

Testing Laboratory Name (Printed)

Testing Laboratory Name Signature

Building Official Name (Printed)

Building Official Signature

SPECIAL INSPECTION AND TESTING SCHEDULE

PROJECT NAME _____ BUILDING PERMIT # _____

TESTING LABORATORY _____ INSPECTION AGENCY OR SPECIAL INSPECTOR _____

REINFORCED CONCRETE, GUNITE, GROUT, & MORTAR:

CONCRETE	GUNITE	GROUT	MORTAR	
				AGGREGATE TESTS FOR MIX DESIGN
				REINFORCING TEST
				MIX DESIGN-WEIGHMASTER CERT.*
				REINFORCING PLACEMENT
				CONTINUOUS BATCH PLANT INSP.
				INSPECT PLACING
				CAST SAMPLES
				SAMPLES (PICKUP/DELIVERED)
				COMPRESSION TESTS*

PRE-CAST/PRE-STRESSED CONCRETE:

PILES	POST-TENS	PRE-TENS	CLADDING	
				AGGREGATE TESTS
				REINFORCING TESTS
				TENDON TEST
				MIX DESIGNS*
				REINFORCING PLACEMENT
				INSERT PLACEMENT
				CONCRETE PATCHING
				CONCRETE PLACEMENT
				INSTALLATION INSPECTION
				CAST SAMPLES
				PICK-UP SAMPLES
				COMPRESSION TESTS*

MASONRY:

- _____ Special inspection stresses used * _____ f_m _____ f_g
- _____ Preliminary acceptance tests (masonry units, wall prisms)
- _____ Subsequent tests (mortar, grout, field wall prisms)
- _____ Placement inspection of units
- _____ Masonry, mortar, grout, and reinforcing steel certificates

PERIODIC INSPECTION (See attached for scope of work):

- _____ Masonry
- _____ High strength bolting
- _____ Structural welding
- _____ Other _____

ADDITIONAL INSTRUCTIONS, OTHER TEST, & INSPECTIONS:

•LIST OF STRUCTURAL STEEL MEMBERS TO BE INSPECTED

(IS THIS LIST CONTINUED ON AN ATTACHED SHEET? Y / N)

***PROVIDE STRENGTH REQUIRED BY ARCHITECT OR ENGINEER OR CONTRACT DOCUMENT LOCATION OF VALUES**

All inspections are continuous, unless specifically marked in the periodic inspection section and scope of work attached

Form completed by: _____ Title: _____ Telephone No.: _____ Date: _____

STRUCTURAL STEEL/WELDING:

- _____ Sample and test (list specific members below)•
- _____ Shop material identification (mill cert.)
- _____ Welding inspection shop field
- _____ Ultrasonic inspection shop field
- _____ High-strength bolting shop field
- _____ A325 N X F SC
- _____ A490 N X F SC
- _____ Metal deck welding inspection
- _____ Reinforcing steel welding inspection
- _____ Reinforcing steel mill certificate
- _____ Metal stud welding inspection
- _____ Concrete insert welding inspection
- _____ Moment resisting steel frames

FIREPROOFING:

- _____ Placement inspection
- _____ Density tests
- _____ Thickness tests
- _____ Inspect batching

INSULATING CONCRETE:

- _____ Sample and test
- _____ Placement inspection
- _____ Unit weights

SMOKE CONTROL:

- _____ Leakage testing
- _____ Control verification

FILL MATERIAL:

- _____ Acceptance tests * _____ PSF
- _____ Placement inspection/continuous
- _____ Field density

STRUCTURAL WOOD:

- _____ Shear wall nailing inspection
- _____ Shear wall anchors
- _____ Inspection of Glu-lam fab. * _____ T/C psi
- _____ Inspection of truss joist fab.
- _____ Sample and test components
- _____ Fabrication welding of steel accessories

COPIES OF REPORTS TO:	
_____ ARCHITECT	_____ INSPECTOR
_____ ENGINEER	_____ BUILDING OFFICIAL
_____ CONTRACTOR	_____ OWNER

Acknowledgment Of Oregon State University Development Agreement

For: _____
(Project Name)

It is the policy of the City of Corvallis that building permits should not be issued until all public improvements are completed and accepted by the City of Corvallis. To be accepted, all construction items must be fully completed, all contract payments made, as-built drawings from the engineer-of-record submitted to and accepted by the City Engineer and the warranty period initiated. An exception process for this policy is provided in City Council Policy 7.04.

The above-named project is proposed as an exception to City Council Policy 7.04.

Pursuant to the process in City Council Policy 7.04, a term Oregon State University Development Agreement has been executed by Oregon State University (Attach Current Agreement).

This Acknowledgment certifies that the above-named project is subject to the terms of the Oregon State University Development Agreement currently in effect.

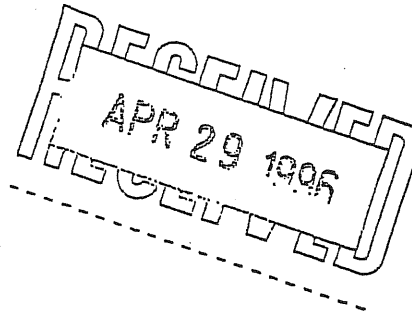
Attached Exhibit _____ depicts the location of the project for which building permit applications, beyond excavation and grading permit application, are requested prior to the acceptance of the public improvements AND how access to this location, including street signage and adequate access for fire apparatus as determined by the Fire Chief, will be achieved.

The use of storm water facilities to manage wastewater generated from the building process is not acceptable. Attached Exhibit _____ describes how wastewater generated from the building process will be managed if sanitary sewer service is not available.

OSU Project Manager

Date

April 25, 1996



OREGON
STATE
UNIVERSITY

100 Adams Hall
Corvallis, Oregon
97331-2001

Greg A. Gescher, PE
Development Engineering Supervisor
Public Works Department
501 SW Madison Avenue
P.O. Box 1083
Corvallis, OR 97339-1083

SUBJECT: Public Improvement Permit Requirements

Dear Mr Gescher

Reference: Engineering Division, Public Works Department letter dated
March 20, 1996, same subject.

Facilities Services has conducted a review of your referenced letter, and is willing to enter into an agreement covering the comments in the following paragraphs:

Security for Public Improvements

Facilities Services shares the city's concerns about having work finished in accordance with the plans and specifications for the specific project. All of our projects go through the City's Plans Review process with the plans and specifications modified to include the comments received from the City. Once the plans and specifications concur with the City's codes, the City stamps its approval on a plans set. All work will comply with the approved set of plans and specifications. Throughout the course of construction, the work is inspected by our inspection staff, by special inspectors where required, and by city inspectors. The purpose of these inspections is to assure the work is completed as specified. With these safeguards, we are more than willing to have the Certificate of Occupancy and/or the installation of the water meter withheld until the City has accepted the project as being completed in accordance with the approved set of plans and specification

Telephone
541-737-4921

Fax
541-737-3724

Warranty Security for Public Improvements

Facilities Services holds retainage on a project until such time as the punch list items have been resolved, and the project has been accepted from the contractor. On those occasions when we have had failures to a system under warranty, we have had no difficulty having the items involved appropriately corrected. In view of this we have not had an occasion to hold retainage through the warranty period. As a result of our past experiences, we are willing to stipulate to the City that OSU

Facilities Services budget is sufficient to accommodate any charges relative to correcting warranty deficiencies.

Contractor Insurance Requirements\Indemnification Agreement

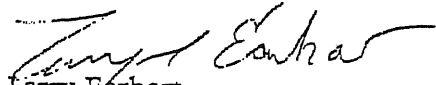
The question as to whether or not the City could be added as an additional insured and indemnify the City against negligent acts by the contractor or subcontractors was passed to the State Attorney General's Office. They have agreed this can be done. If you would furnish us with what is required on the pertinent documents, Facilities Services will assure this happens and provide you with a copy of the documentation on receipt from the contractors.

Pre-Design/Pre-Construction Conferences

Facilities Services concurs with this recommendation. On all current projects we are involving the appropriate City departments throughout the design and construction process.

I feel we are in agreement with the issues presented. With some minor adjustments, the City and Facilities Services should be able to continue our close working relationship. I do not believe we need a formal agreement to accommodate the items of concern, we just need to stay in close contact when difficulties arise. If you have any questions, please contact me at 737-7679.

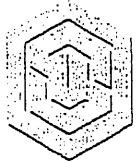
Sincerely,



Larry Earhart

Manager, Planning, Construction & Maintenance

cc: Kathleen Mulligan, Director, Facilities Services
Donna Thwing, Contracts Administration Officer
Bob Bray, Construction Superintendent
Jairus H. Watson, University Architect
Curt M°Cann, Engineering Supervisor



OREGON
STATE
UNIVERSITY



Excavation & Grading/Erosion Prevention & Sediment Control Permit Application

City of Corvallis, Development Services Division
 PO Box 1083, Corvallis OR 97339
 501 SW Madison Avenue, Corvallis OR 97333
 Phone: 541-766-6929 Fax: 541-766-6936
 E-mail: development.services@ci.corvallis.or.us
 Web: www.corvallispermits.com

DEPARTMENT USE ONLY
Permit No:
Receipt No:
Date:

CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1 & 2 Family Dwelling	<input type="checkbox"/> Commercial or Multifamily
PROJECT NAME	
DESCRIPTION OF WORK	
JOB SITE LOCATION AND LOCATION	
Job site address:	
Subdivision:	Lot no.:
Map & tax lot:	
APPLICANT	
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
Applicant Signature:	
GENERAL CONTRACTOR	
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CCB#:	Expiration Date:
EXCAVATION CONTRACTOR	
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CCB #:	Expiration Date:
24-HOUR CONTACT PERSON	
Contact Name:	
Phone:	E-mail:

PLEASE FILL IN ALL INFORMATION	
Total area to be disturbed :	sq. feet
Excavation Volume:	CY
Fill Volume:	CY
Exporting Soil? YES or NO If so, address of site:	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: 0; border-top: 1px solid black;"/>
The project site contains or abuts:	
<input type="checkbox"/> 100 -yr. Floodplain <input type="checkbox"/> Stream/Riparian Area <input type="checkbox"/> Hydric Soils/Wetlands	
Name of nearest stream, creek, river:	
Date when erosion control measures will be in place:	
Date site clearing and grading, placement of fills and excavations will commence:	
Date site clearing and grading, placement of fills and excavations will be completed:	
Projected date of removal of erosion control measures (after grass or approved vegetation is established):	
I AGREE TO COMPLY WITH THE "EROSION PREVENTION AND SEDIMENT CONTROL MANUAL" AND WILL CONSTRUCT AND MAINTAIN EPSC MEASURES TO CONTAIN SEDIMENT AND POLLUTANTS ON THE CONSTRUCTION SITE	
<hr style="border: 0; border-top: 1px solid black;"/> Owner/Applicant Signature	
<hr style="border: 0; border-top: 1px solid black;"/> Date	



Building Permit Application

City of Corvallis, Development Services Division
 PO Box 1083, Corvallis OR 97339
 501 SW Madison Avenue, Corvallis OR 97333
 Phone: 541-766-6929 Fax: 541-766-6936
 E-mail: development.services@ci.corvallis.or.us
 Web: www.corvallispermits.com

DEPARTMENT USE ONLY	
Permit No:	
Receipt No:	
Date:	
Plan Review Fee Pd:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
JOB SITE LOCATION	
Job site address (or map & tax lot number):	
DESCRIPTION OF WORK	
APPLICANT	
Company name:	
Contact name:	
Address:	
City, state, zip:	
Phone:	Fax:
E-mail:	
DESIGN PROFESSIONAL IN RESPONSIBLE CHARGE	
Name:	
Address:	
City, state, zip:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City, state, zip:	
Phone:	Fax:
E-mail:	
CCB license number:	Expiration date:
Applicant's signature:	
Print name:	Date:

REQUIRED DATA: 1- AND 2-FAMILY DWELLING	
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.	
Valuation	\$
Number. of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area (sq ft):	
Garage/carport area (sq ft):	
Covered porch area (sq ft):	
Deck area (sq ft):	
Other structure area (sq ft):	
REQUIRED DATA: COMMERCIAL & MULTI-FAMILY	
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.	
Valuation	\$
Existing building area (sq ft):	
New building area (sq ft):	
Number of stories:	
Type of construction:	
Occupancy group:	
Existing occupancy:	
New proposed occupancy:	
NOTICE	
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractor's Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:	
Manufactured Homes Fees	
Manufactured Home Installation	\$275
State Service Charge	\$ 30
This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.	

BUILDING PERMIT FEE SCHEDULE:

1. Building Permit Fees applicable under Corvallis Municipal Code Section 8.03.300.010 shall be as follows:	
\$1.00 - \$500.00	\$20
\$501.00 - \$2,000.00	(\$20.00 for the first \$500.00) + (\$1.83 for each additional \$100.00 or fraction thereof)
\$2,001.00 - \$25,000.00	(\$47.51 for the first \$2,000.00) + (\$7.94 for each additional \$1,000.00 or fraction thereof)
\$25,001.00 - \$50,000.00	(\$230.31 for the first \$25,000.00) + (\$5.97 for each additional \$1,000.00 or fraction thereof)
\$50,001.00 - \$100,000.00	(\$379.69 for the first \$50,000.00) + (\$3.96 for each additional \$1,000.00 or fraction thereof)
\$100,001.00 and up	(\$578.09 for the first \$100,000.00) + (\$3.31 for each additional \$1,000.00 or fraction thereof)
2. Plan Review Fee	Plan review fee shall be equal to the building permit fee.
3. Land Development Code Review fee	Land Development Code review fee shall be 33% of the building permit plan review fee in #2.
4. Fire Code Review Fee	Fire Code review fee shall be 10% of the building permit plan review fee in #2.
5. Fire And Life Safety Plan Review Fee	When required, Fire and Life Safety plan review fee shall be charged equal to the building permit fee in #1.
6. Certificate of Occupancy	Certificate of Occupancy fee - \$25.00
7. Temporary Certificate of Occupancy	Temporary Certificate of Occupancy fee applicable under Chapter 9.01 - \$250.00 each, per 60-day period.
8. Phased Permitting	<p>a) Each phased permit of a phased development project shall be assessed a permit and plan review fee.</p> <p>b) The phased development plan review fee for each phased permit shall be an additional 10% plan review fee, to the plan review fees noted in #2, 3, 4, & 5.</p>
9. Deferred Submittal Fee	The Deferred Submittal plan review fee shall be \$150.00 per deferred submittal.



Mechanical Permit Application

City of Corvallis, Development Services
 PO Box 1083, Corvallis OR 97339
 501 SW Madison Avenue, Corvallis OR 97333
 Phone: 541-766-6929 Fax: 541-766-6936
 E-mail: development.services@ci.corvallis.or.us
 Web: www.corvallispermits.com

DEPARTMENT USE ONLY

Permit No:

Receipt No:

Date:

CATEGORY OF CONSTRUCTION			
<input type="checkbox"/> 1 & 2 Family Dwelling		<input type="checkbox"/> Commercial or Multi-Family	
JOB SITE LOCATION			
Address:			
DESCRIPTION OF WORK			
APPLICANT INFORMATION			
Name or Company Name:			
Address:			
City:		State:	Zip:
Phone:		Fax:	
E-mail:			
Signature:			
PROPERTY OWNER INSTALLATION			
Name:			
Address:			
City:		State:	Zip:
Phone:		Fax:	
E-mail:			
This installation is being made on property owned by me or a member of my immediate family, and is exempt from licensing requirements under ORS 701.010.			
Signature:			
Print Name:			
CONTRACTOR INSTALLATION			
Business name:			
Address:			
City:		State:	Zip:
Phone:		Fax:	
E-mail:			
CCB license no.:		Expiration date:	
Signature:			
Print Name:			

FEE SCHEDULE			
Residential – 1 & 2 Family	Qty.	Cost ea.	Total cost
Fuel burning stove, fireplace, insert, lighter		\$30.00	\$
Furnace, air conditioner		\$30.00	\$
Clothes dryer, exhaust fan, hood		\$20.00	\$
Other appliance or equipment		\$20.00	\$
Gas piping system, new or altered		\$20.00	\$
Alteration to mechanical equipment or system		\$20.00	\$
Commercial & Multi-Family			
Enter total valuation of mechanical system and installation costs: \$ _____			
Valuation Range	Fee Based on Valuation		
\$1.00 - \$2,000.00	\$72.50		
\$2,001.00 - \$5,000.00	(\$72.50 for the first \$2,000.00) + (\$2.30 for each additional \$100.00 or fraction thereof)		
\$5,001.00 - \$10,000.00	(\$141.50 for the first \$5,000.00) + (\$1.80 for each additional \$100.00 or fraction thereof)		
\$10,001.00 - \$50,000.00	(\$231.50 for the first \$10,000.00) + \$1.35 for each additional \$100.00 or fraction thereof)		
\$50,001.00 - \$100,000.00	(\$771.50 for the first \$50,000.00) + \$1.25 for each additional \$100.00 or fraction thereof)		
\$100,001.00 and up	(\$1,396.50 for the first \$100,000.00) + (\$1.10 for each additional \$100.00 or fraction thereof)		
Enter fee based on valuation of mechanical system			\$
APPLICANT USE			
(A) Enter subtotal of above fees		\$	
(B) Enter 12% state surcharge (.12 x [A])		\$	
(C) Plan review and service charge (50% of [A])		\$	
TOTAL fees and surcharges (A through C):			\$
<i>This permit is issued under OAR 918-440-0050. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.</i>			



Plumbing Permit Application

City of Corvallis, Development Services Division
 PO Box 1083, Corvallis OR 97339
 501 SW Madison Avenue, Corvallis OR 97333
 Phone: 541-766-6929 Fax: 541-766-6936
 E-mail: development.services@ci.corvallis.or.us
 Web: www.corvallispermits.com

DEPARTMENT USE ONLY	
Permit No:	
Receipt No:	
Date:	

CATEGORY OF CONSTRUCTION		
<input type="checkbox"/> 1 & 2 Family Dwelling	<input type="checkbox"/> Commercial or Multi-Family	
JOB SITE LOCATION		
Address:		
DESCRIPTION OF WORK		
APPLICANT INFORMATION		
Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
Email:		
Signature:		
PROPERTY OWNER INSTALLATION		
Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
E-mail:		
This installation is being made on residential property owned by me and is exempt from licensing requirements under OAR 918-695-0020.		
Signature:		
CONTRACTOR INSTALLATION		
Business name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
E-mail:		
CCB license no.:	Expiration date:	
BCD license no.:	Expiration date:	

FEE SCHEDULE			
Description	Qty.	Cost ea.	Total cost
1 & 2 Family Dwelling (Residential)			
New construction: 1 bathroom/1 kitchen (includes: first 100 feet of water/sewer lines, hose bibs, ice maker, underfloor low-point drains and rain-drain packages)		\$250.00	\$
New construction: 2 bathrooms/1 kitchen		\$300.00	\$
New construction: 3 bathrooms/1 kitchen		\$350.00	\$
New construction: Each additional bathroom (over 3)		\$ 50.00	\$
New construction: Each additional kitchen (over 1)		\$ 50.00	\$
Each new or additional water, sewer, storm line or private storm drainage system		\$100.00	\$
■ Each backflow device (includes first 10 feet of water service)		\$ 30.00	\$
■ Replace, repair, or alter exterior water service, sanitary sewer or storm line		\$ 50.00	\$
■ Minor repair of interior plumbing system		\$ 20.00	\$
■ Repipe interior water supply or waste line, relocate, replace, or add fixtures		\$ 50.00	\$
■ Water heater or boiler		\$ 30.00	\$
Residential fire sprinklers			
Enter square footage of project (see back for fee listing)	Sq. Ft.		
Enter fee based on installation and equipment			\$
Manufactured dwelling			
Manufactured home space		\$ 50.00	\$
Commercial, industrial, or multi-family dwellings			
Each fixture (new construction only)		\$ 20.00	\$
Fixture repipe / replacement (per 5 fixtures)		\$ 50.00	\$
Each backflow device (includes first 10 feet of water service)		\$ 30.00	\$
Each new, repair, alteration or replacement of exterior water service, sanitary sewer or storm line		\$180.00	\$
Minor repair of interior plumbing system		\$ 20.00	\$
Each water heater or boiler		\$ 50.00	\$
Medical gas piping			
Enter value of installation and equipment (see back for fee sheet)	\$		
Enter fee based on installation and equipment value			\$
APPLICANT USE			
(A) Enter subtotal of above fees			\$
(B) Enter 12% state surcharge (.12 x [A])			\$
(C) Plan review and plumbing service charge (50% of [A])			\$
NOTE: Items marked with a ■ are exempt, enter \$0.00			
TOTAL fees and surcharges (A through C):			\$

See back for Residential Fire Sprinklers and Medical Gas Installation Schedules

This permit is issued under OAR 918-780-0060. Permits are issued only to the person or contractor doing the work. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

MEDICAL GAS SYSTEM FEE SCHEDULE

Based on the value of the equipment and installation costs

\$1.00 - \$5,000.00	\$100.00
\$5,001.00 - \$10,000.00	(\$100.00 for the first \$5,000.00) + (\$1.50 for each additional \$100.00 or fraction thereof)
\$10,001.00 - \$100,000.00	(\$175.00 for the first \$10,000.00) + (\$10.20 for each additional \$1,000.00 or fraction thereof)
\$100,001.00 and up	(\$1,093.50 for the first 100,000.00) + (\$7.00 for each additional \$1,000.00 or fraction thereof)

RESIDENTIAL FIRE SPRINKLER FEE SCHEDULE

Based on square footage of one or two-family structure

1 - 2,000 square feet	\$87.00
2,001 - 3,600 square feet	\$129.00
3601 - 7,200 square feet	\$164.00
7,201 square feet or greater	\$200.00



Electrical Permit Application

City of Corvallis, Development Services Division
 PO Box 1083, Corvallis OR 97339
 501 SW Madison Ave, Corvallis OR 97333
 Phone: 541-766-6929 Fax: 541-766-6936
 E-mail: development.services@ci.corvallis.or.us
 Web: www.corvallispermits.com

DEPARTMENT USE ONLY	
Permit No.:	
Receipt No.:	
Date:	

CATEGORY OF CONSTRUCTION		
<input type="checkbox"/> 1 & 2 Family Dwelling	<input type="checkbox"/> Commercial or Multifamily	
JOB SITE INFORMATION AND LOCATION		
Job site address:		
DESCRIPTION OF WORK		
APPLICANT		
Name:		
Address:		
City	State:	ZIP:
Phone:	Fax:	
E-Mail:		
PROPERTY OWNER INSTALLATION		
Name:		
Address:		
City:	State:	ZIP:
Phone:	Fax:	
E-mail:		
This installation is being made on residential property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. ORS 479.540(1) and 479.560(1).		
Signature:		Date:
CONTRACTOR INSTALLATION		
Business name:		
Address:		
City:	State:	ZIP:
Phone:	Fax:	
E-mail:		
CCB license no.:	Expiration Date:	
BCD license no.:	Expiration Date:	
Signing supervisor's name:		
Signing supervisor's license no.:		
PLAN REVIEW		
Please check all that apply. Submit 2 sets of plans with any of the following:		
<input type="checkbox"/> Fire Pump	<input type="checkbox"/> Building over 3 stories	
<input type="checkbox"/> Emergency system	<input type="checkbox"/> Service or feeder 600 amps or over	
<input type="checkbox"/> Addition of new motor load of 100hp or more	<input type="checkbox"/> Commercial-use agricultural buildings	
<input type="checkbox"/> Health Care Facilities	<input type="checkbox"/> Install of 150 KVA or larger separately derived system	
<input type="checkbox"/> Hazardous locations	<input type="checkbox"/> A, E, I-2, I-3 occupancies	
<input type="checkbox"/> Recreational vehicle parks	<input type="checkbox"/> Service of feeder 400 amps or more where the available fault current exceeds 10k amps at 150 volts or less to ground, or exceeds 14k amps for all other installs	
<input type="checkbox"/> Marinas and boatyards		
<input type="checkbox"/> Floating buildings		
<input type="checkbox"/> Six or more residential units		
<input type="checkbox"/> Supply over 600 volts nominal		

FEE SCHEDULE			
Number of inspections per item ()	Qty.	Cost ea.	Total cost
Residential 1 & 2 Family Dwelling unit. Includes attached garage.			
1,000 sq. ft. or less (4)		\$135.00	\$
Each additional 500 sq. ft. or portion thereof		\$ 25.00	\$
Limited energy (2)		\$ 65.00	\$
Each manufactured home or modular dwelling service or feeder (2)		\$ 65.00	\$
Services or feeders: installation, alteration, relocation			
200 amps or less (2)		\$ 80.00	\$
201 to 400 amps (2)		\$ 95.00	\$
401 to 600 amps (2)		\$158.00	\$
601 to 1,000 amps (2)		\$205.00	\$
Over 1,000 amps or volts (2)		\$475.00	\$
Reconnect only (2)		\$ 65.00	\$
Temporary services or feeders: installation, alteration, relocation			
200 amps or less (2)		\$ 65.00	\$
201 to 400 amps (2)		\$ 86.00	\$
401 to 600 amps (2)		\$125.00	\$
Over 600 amps or 1,000 volts, see Services or Feeders section above			
Branch circuits: new, alteration, extension per panel or feeder			
a. Branch circuits with purchase of a service or feeder permit:			
Each branch circuit		\$ 5.00	\$
b. Branch circuits without purchase of a service or feeder permit:			
First branch circuit (2)		\$ 65.00	\$
Each additional branch circuit		\$ 5.00	\$
Miscellaneous fees: service or feeder not included			
Each pump or irrigation circle (2)		\$ 65.00	\$
Each sign or outline lighting (2)		\$ 65.00	\$
Signal circuit(s) or a limited-energy panel, alteration, or extension (2)		\$ 65.00	\$
Hourly rate (no. of hrs. x fee per hr.)		\$ 65.00	\$
Each additional inspection: (1)		\$ 65.00	\$
APPLICANT USE			
(A) Enter subtotal of above fees		\$	
(B) Enter 12% surcharge (.12 x [A])		\$	
(C) Plan review, if required (25% of [A])		\$	
TOTAL fees and surcharges (A through C):		\$	
<i>This permit is issued under OAR 918-309-0000. Permits are nontransferable. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.</i>			



CITY OF CORVALLIS

Public Works Department

Utilities Division

Phone: 541-766-6916

SEWER DISCHARGE FORM

(Instructions on Reverse Side)

1) Site Address _____
(Street) (Suite) (City) (State) (Zip Code)

2) Business Name At This Location _____

3) Map & Tax Lot Number: Map # _____ Tax Lot # _____

4) Mailing Address (If Different from Site Address)

(Street or P.O. Box) (Suite) (City) (State) (Zip Code)

5) Contact Official
a) Name _____ Phone _____
b) Title _____

6) Owner
a) Name _____ Phone _____
b) Address _____
(Street or P.O. Box) (Apt.#) (City) (State) (Zip Code)

7) North American Industry Classification System Code
NAICS Code(s) _____

8) Business Activity (Check all that apply)
 Restaurant Retail/Wholesale Store Office Building Apartment/Motel/Hotel
 Other (Describe) _____

9) Type of Waste Discharged to City Sewer (Check all that apply) Domestic Sewage (e.g., bathrooms)
 Other Waste (See Instructions)

10) Explain or identify any pretreatment of discharge. _____

11) Certification
I certify that the information above is true and correct to the best of my knowledge.
Signature _____ Date _____
Print Name _____ Title _____

For City Use Only: Industrial Classification: Significant Industrial User - Categorical Non-categorical
 Non-significant Industrial User
 Additional Information Required

Sewer Strength Classification: _____

Approved Disapproved Initial _____ Date _____

Building Permit # _____

PURPOSE

Information provided in this form will be used to determine the appropriate industrial classification of your business. Depending upon the classification, additional information may be required. Questions concerning the completion of this form may be directed to Public Works at 541-766-6729 extension 5282 or 541-766-6916.

INSTRUCTIONS

Type or print legibly the information requested.

- 1) Site Address - Enter the full street address of the building or premise which is producing the wastewater pertinent to this form.
- 2) Business Name - Enter the name or title of your business located at the address identified in Item #1.
- 3) Map & Tax Lot Number - Enter the Map and Tax Lot numbers that apply. These numbers can be obtained by calling the Benton County Assessors Office at 541-766-6855.
- 4) Mailing Address - Enter the full address at which mail is received.
- 5) Contact Official - Enter the name, title and phone number of a person who can be contacted if further information is needed.
- 6) Owner - Enter the name, address and phone number of the legal owner(s) of the business.
- 7) North American Industry Classification System Code - Include all numbers that apply to the business. If you do not know your number(s) check with your insurance carrier.
- 8) Business Activity - Be specific in your description. If additional space is needed, attachments may be made.
- 9) Type of Waste - Describe as best you can the nature of the waste discharged to the city sewer. Quantities can be estimated in either gallons per day or pounds per day. If additional space is needed, attachments may be made.
- 10) Briefly describe all types of pretreatment you use. Pretreatment is any activity which removes or reduces any contaminant in the waste before it is discharged to the city sewer. If additional space is needed, attachments may be made.
- 11) Certification - This form must be signed and dated by an officer, employee, or other agent of the business who has legal authority (e.g., company president, production manager, contractor). Also print or type the name and title of the person signing the form.
- 12) Return Form To: City of Corvallis
Development Services
P.O. Box 1083/501 SW Madison Ave.
Corvallis, OR 97339-1083
Phone: 541-766-6929
FAX: 541-766-6936

NOTE: BUILDING PERMITS CAN NOT BE ISSUED UNTIL THIS FORM HAS BEEN COMPLETED AND RETURNED TO DEVELOPMENT SERVICES.

**SYSTEMS DEVELOPMENT CHARGES
APPLICANT WORKSHEET¹**

City of Corvallis
Development Services
501 SW Madison Ave
(541) 766-6929

Construction Address: _____
Project Description: _____
Contact Person: _____ Phone / Email: _____

PLUMBING FIXTURE COUNT²

Fixture ⁵	Private ³		Public ⁴	
	Demolished	New	Demolished	New
Lavatory				
Toilet				
Urinal (wall / stall)				
Urinal (common pedestal)				
Shower (each head)				
Bath tub / Shower Combo				
Sink (each set of faucets)				
Bar / Washup / Lab Sink				
Dishwasher				
Clotheswasher				
Laundry Tub				
Mop Sink (3" Trap)				
Hose Bibb				
Floor Drain				
Floor Sink ⁶ (<7.5 GPM)				
Drinking Fountain				
Irrigation (Flow in GPM ⁷)				
Other:				
Other:				
Other:				
Other:				

LAND USE⁸

Building Use Description	Gross Floor Area ⁹ of Use (Square Feet)		Number of Dwellings	
	Demolished	New	Demolished	New

IMPERVIOUS SURFACE AREA¹⁰

Impervious Areas	Demolished	New
Building		
Parking/Driveway		
Sidewalk		
Other:		
Other:		

NOTES:

- 1) For assistance in completing this form please contact Lisa Franklin at (541) 766-6929 or lisa.franklin@ci.corvallis.or.us.
- 2) Water and Sewer Systems Development Charges (SDCs) are based upon the plumbing fixture count and are determined based on equivalent fixture units given in the Oregon Plumbing Specialty Code (1996).
- 3) Plumbing fixtures in residences and apartments, to private bathrooms in hotels and hospitals, and to rest rooms in commercial establishments where the fixtures are intended for the use of a family or an individual.
- 4) Plumbing fixtures that are not defined as private.
- 5) Plumbing fixtures as defined by the Oregon Plumbing Specialty Code (1996).
- 6) Only include floor sinks that do not drain fixtures counted elsewhere in the list. For example include a floor sink that receives waste from an air conditioning condenser, but do not include a floor sink that receives waste from a sink.
- 7) Per the Community Development Interpretation 2009, irrigation systems for one and two family dwellings are exempt from SDCs. SDCs for other irrigation systems are based upon the maximum design flow in gallons per minute of the irrigation system.
- 8) Streets SDCs are based upon trip end counts determined from land uses as defined by the latest edition of the Institute of Traffic Engineers Trip Generation. Parks SDCs are assessed for residential land use on a per dwelling basis.
- 9) The gross floor area (GFA) of a building is the sum of the area of each floor level, including cellars, basements, mezzanines, penthouses, corridors, lobbies, stores and offices, that are within the principal outside faces of exterior walls, not including architectural setbacks or projections. Included are all areas that have floor surfaces with clear standing head room (6 feet, 6 inches minimum) regardless of their use. If a ground-level area, or part thereof, within the principal outside faces of the exterior walls is not enclosed, this GFA is considered part of the overall square footage of the building. However, unroofed areas and unenclosed roofed-over spaces, except those contained within the principle outside faces of exterior walls, should be excluded from the area calculations.
- 10) Drainage SDCs are based upon total impervious surface area added within the site boundary. Gravel is considered an impervious surface per Corvallis Municipal Code Section 2.09.020.

Revision Submittal?
Deferred Submittal?

City of Corvallis, Development Services Division	541-766-6929 (office)
PO Box 1083, 501 SW Madison Avenue	541-766-6936 (fax)
Corvallis, Oregon 97339	www.corvallispermits.com

Permit #

Project Address

Applicant	Address	Phone
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Design Professional of Responsible Charge (DPRC) <small>(Architect or Engineer of Record)</small>	Phone
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Revision/Deferred Description

Additional Value

Is this in response to a plan review letter or prior review? Yes No

ALL REVISIONS MUST BE STAMPED BY THE DESIGN PROFESSIONAL OF RECORD & SUBMITTED IN TRIPLICATE.

Applicant (Print Name)	Applicant (Signature)	Date	
() Owner	() DPRC	() Contractor	() Other _____

Staff use only:

Routing: BLD _____ PLN ENG FIRE PLM ELP EPSC

Intake person _____