



New One & Two Family Dwelling Combination Permit Application

**City of Pendleton
Building Department**
500 SW Dorion Avenue
Pendleton, OR 97801
541 966-0205 • Fax: 541-966-0251
www.pendletonor.gov

DEPARTMENT USE ONLY	
Permit no.:	
This project has final land-use approval:	
Signature:	

This permit is issued under OAR 918-460-0030. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

Flood plain? <input type="checkbox"/> Yes <input type="checkbox"/> No	
LOCAL GOVERNMENT APPROVAL	
Zoning approval verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No
APPLICANT INFORMATION	
Name:	
Mailing address:	
City/state/ZIP:	
Phone:	Phone:
Email:	
JOB SITE INFORMATION AND LOCATION	
Job site address:	
City/state/ZIP:	
Project name:	
Directions to job site:	
Parcel no.:	
ELECTRICAL CONTRACTOR INSTALLATION	
Business name:	
Address:	
City/state/ZIP:	
Phone:	Mobile phone:
Fax:	Email:
CCB license no.:	BCD license no.:
Signing supervisor name & license no.:	
MECHANICAL CONTRACTOR INSTALLATION	
Business name:	
Address:	
City/state/ZIP:	
Phone:	Mobile phone:
Fax:	Email:
CCB license no.:	LPG license no.:
PLUMBING CONTRACTOR INSTALLATION	
Business name:	
Address:	
City/state/ZIP:	
Phone:	Mobile phone:
Fax:	Email:
CCB license no.:	BCD license no.:
Journeyman name & license no.:	

CONTRACTOR INSTALLATION		
Business name:		
Address:		
City/state/ZIP:		
Phone:	Mobile phone:	
Fax:		
Email:		
CCB license no.:		
Signature:		
PROPERTY OWNER INFORMATION		
Name:		
Mailing address:		
City/state/ZIP:		
Phone:	Mobile phone:	
Email:		
OWNER INSTALLATION		
Electrical	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fire	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Foundation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Framing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mechanical	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Plumbing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Roofing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Siding	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Structural	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Windows	<input type="checkbox"/> Yes	<input type="checkbox"/> No
This installation is being made on residential or farm property owned by me or a member of my immediate family.		
Sign here:		
PRIMARY CONTACT		
Name:		
Phone:		
Email:		

VALUATION INFORMATION							
Job description:				Total square footage (dwelling and attached garage):			
				Building height ____ ft. ____ in No. of bathrooms: ____			
				No. of kitchens: ____			
				Decks / porches / covered patios ____ (total sq. ft.)			
				Unfinished basement ____ (total sq. ft.)			
				Living area sq. ft. ____ (total sq. ft.)			
				Garage sq. ft. ____ (total sq. ft.)			
				Carport ____ (total sq. ft.)			
Declared job value: \$				No. of stories: ____ Limited or restricted energy ____			
PLUMBING							
Water service: total linear feet:			Storm sewer: total linear feet:			Sanitary sewer: total linear feet:	
HEATING / COOLING							
Type of fuel:							
Boiler	Electric	Geothermal	LPG	Natural gas	Oil	Photovoltaic	Solid fuel
Other							
Secondary type of fuel:							
Boiler	Electric	Geothermal	LPG	Natural gas	Oil	Photovoltaic	Solid fuel
Other							
			Qty				Qty
Air handling unit of up to 10,000 cfm				Air conditioner			
Air handling unit greater than 10,000 cfm				Furnace – up to 100,000 BTU			
Furnace – greater than 100,000 BTU				Floor furnace, including vent			
Heat pump				Evaporative cooler other than portable			
Suspended heater, recessed wall heater, or floor mounted unit heater				Mini split			
				Radiant in-floor heating system			
OTHER FUEL APPLIANCES							
Wood / pellet stove				Water heater			
Gas or wood fireplace/ insert				Pool or spa heater, kiln			
Decorative gas fireplace				Oil tank / gas / diesel generators			
Chimney / liner / flue / vent				Installation domestic-type incinerator			
ENVIRONMENTAL EXHAUST AND VENTILATION							
Range hood / other kitchen equipment				Attic / crawl space fans			
Ventilation system not a portion of heating or air-cooling system authorized by permit				Flue vent for water heater or gas fireplace			
				Clothes dryer exhaust			
Appliance vent installation not included in appliance permit				Ventilation fan connected to single duct			
Other environmental exhaust / ventilation							
FUEL PIPING							
Gas fuel piping outlets							



Residential Energy Additional Measure Selection

City of Pendleton
Building Department
500 SW Dorion Avenue
Pendleton, OR 97801
541 966-0205 • Fax: 541 966-0251
www.pendletonor.gov

RESIDENTIAL INFORMATION

Date:		Building permit number:	
Owner's name:			
Job address:			
City:		State:	ZIP:

INSTRUCTIONS

Select the type of construction. If the project is an addition, select the applicable addition type and enter the selected measures accordingly; print and sign your name. Submit this form with your permit application or your project will be placed on hold until the required information is provided.

- New construction.** All conditioned spaces within residential buildings shall comply with Table N1101.1(1) and one additional measure from Table N1101.1(2).
- Additions.** Additions to existing buildings or structures may be made without making the entire building or structure comply if the new additions comply with the requirements of this chapter. [See ORSC Section N1101.3]
 - Large additions.** Additions that are equal to or more than 600 square feet in area are required to select one measure from Table N1101.1(2).
Enter the selected Table N1101.1(2) additional measure _____
 - Small additions.** Additions that are less than 600 square feet in area are required to select one measure from Table N1101.1(2) **or** select one measure from Table N1101.3.
 - Selected Table N1101.1(2) additional measure _____
 - Selected Table N1101.3 additional measure _____
 - Exception:** Additions that are less than 225 square feet in area are not required to comply with Table N1101.1(2) or Table N1101.3.

For reference Tables N1101.1(2) and N1101.3 are included in this form below.

Note: Depending on the additional measure you have selected, there may be sub-options that you will have to specify. Check the appropriate box, if provided.

Applicant's printed name: _____ Applicant's signature: _____

TABLE N1101.1(2) – ADDITIONAL MEASURES

<input type="checkbox"/>	1	HIGH-EFFICIENCY HVAC SYSTEM^a
		a. Gas-fired furnace or boiler AFUE 94 percent, or b. Air-source heat pump HSPF 10.0/14.0 SEER cooling, or c. Ground-source heat pump COP 3.5 or Energy Star rated
<input type="checkbox"/>	2	HIGH-EFFICIENCY WATER HEATING SYSTEM
		a. Natural gas/propane water heater with minimum UEF 0.90, or b. Electric heat pump water heater with minimum 2.0 COP, or c. Natural gas/propane tankless/instantaneous heater with minimum 0.80 UEF and Drain Water Heat Recovery Unit installed on minimum of one shower/tub-shower
<input type="checkbox"/>	3	WALL INSULATION UPGRADE Exterior walls—U-0.045/R-21 conventional framing with R-5.0 continuous insulation
<input type="checkbox"/>	4	ADVANCED ENVELOPE
		Windows—U-0.21 (Area weighted average), and Flat ceiling ^b —U-0.017/R-60, and Framed floors—U-0.026/R-38 or slab edge insulation to F-0.48 or less (R-10 for 48”; R-15 for 36” or R-5 fully insulated slab)
<input type="checkbox"/>	5	DUCTLESS HEAT PUMP For dwelling units with all-electric heat, provide: Ductless heat pump of minimum HSPF 10 in primary zone replaces zonal electric heat sources, and programmable thermostat for all heaters in bedrooms
<input type="checkbox"/>	6	HIGH EFFICIENCY THERMAL ENVELOPE UA^c Proposed UA is 8 percent lower than the code UA
<input type="checkbox"/>	7	GLAZING AREA Glazing area, measured as the total of framed openings is less than 12 percent of conditioned floor area
<input type="checkbox"/>	8	3 ACH AIR LEAKAGE CONTROL AND EFFICIENT VENTILATION Achieve a maximum of 3.0 ACH50 whole-house air leakage when third-party tested and provide a whole-house ventilation system including heat recovery with a minimum sensible heat recovery efficiency of not less than 66 percent.

For SI: 1 square foot = 0.093 m², 1 watt per square foot = 10.8 W/m².

- a. Appliances located within the building thermal envelope shall have sealed combustion air installed. Combustion air shall be ducted directly from the outdoors.
- b. The maximum vaulted ceiling surface area shall not be greater than 50 percent of the total heated space floor area unless vaulted area has a U-factor no greater than U-0.026.
- c. In accordance with Table N1104.1(1), the Proposed UA total of the Proposed Alternative Design shall be a minimum of 8 percent less than the Code UA total of the Standard Base Case.

TABLE N1101.3 – SMALL-ADDITION ADDITIONAL MEASURES (SELECT ONE)

<input type="checkbox"/>	1	Increase the ceiling insulation of the existing portion of the home as specified in Table N1101.2.
<input type="checkbox"/>	2	Replace all existing single-pane wood or aluminum windows to the U-factor as specified in Table N1101.2
<input type="checkbox"/>	3	Insulate the existing floor, crawl space, or basement wall systems as specified in Table N1101.2 and install 100 percent of permanently installed lighting fixtures as CFL, LED, or linear fluorescent, or a minimum efficacy of 40 lumens per watt as specified in Section N1107.2.
<input type="checkbox"/>	4	Test the entire dwelling with a blower door and exhibit no more than 4.5 air changes per hour @ 50 Pascals.
<input type="checkbox"/>	5	Seal and performance test the duct system.
<input type="checkbox"/>	6	Replace existing 80-percent AFUE or less gas furnace with a 92-percent AFUE or greater system.
<input type="checkbox"/>	7	Replace existing electric radiant space heaters with a ductless mini split system with a minimum HSPF of 10.0.
<input type="checkbox"/>	8	Replace existing electric forced air furnace with an air source heat pump with a minimum HSPF of 9.5.
<input type="checkbox"/>	9	Replace existing water heater with a water heater meeting: Natural gas/propane water heater with minimum UEF 0.90, or Electric heat pump water heater with minimum 2.0 COP.



Residential Certificate of Lighting Fixtures

**City of Pendleton
Building Department**

500 SW Dorion Avenue
Pendleton, OR 97801
541-966-0205 • Fax: 541-966-0251
www.pendletonor.gov

You must submit this form to the City Building Department before issuance of the Certificate of Occupancy.

To conform with the Oregon Residential Specialty Code (ORSC), Sections N1107.2 and N1107.3, I am notifying the building official that 100 percent of the permanently installed lighting fixtures contain high-efficiency lamps.

Exceptions: (check and fill out if applicable):

Interior fixtures (Maximum of 2)

1. Location: _____
Description: _____
2. Location: _____
Description: _____

Exterior fixtures (Maximum of 2)

1. Location: _____
Description: _____
2. Location: _____
Description: _____

Date: _____

Building permit number: _____

Owner's name: _____

Job address: _____

City: _____ State: _____ ZIP: _____

General contractor/owner signature: _____

Printed name: _____



Information Notice to Owners About Construction Responsibilities

(ORS 701.325 (3))

Homeowners acting as their own general contractors to construct a new home or make a substantial improvement to an existing structure, can prevent many problems by being aware of the following responsibilities:

- Homeowners who use labor provided by workers not licensed by the Construction Contractors Board, may be considered an employer, and the workers who provide the labor may be considered employees. **As an employer, you must comply with the following:**
- **Oregon's Withholding Tax Law:** Employers must withhold income taxes from employee wages at the time employees are paid. You will be liable for the tax payments even if you don't actually withhold the tax from your employees. For more information, call the Department of Revenue at 503-378-4988.
- **Unemployment Insurance Tax:** Employers are required to pay a tax for unemployment insurance purposes on the wages of all employees. For more information, call the Oregon Employment Department at 503-947-1488.
- **Oregon's Business Identification Number (BIN):** is a combined number for both Oregon Withholding and Unemployment Insurance Tax. To file for a BIN, go online to the Oregon Business Registry. For questions, call 503-945-8091.
- **Workers Compensation Insurance:** Employers are subject to the Oregon Workers Compensation Law, and must obtain Workers Compensation Insurance for their employees. If you fail to obtain Workers Compensation Insurance, you could be subject to penalties and be liable for all claim costs if one of your workers is injured on the job. For more information, call the Workers Compensation Division at the Department of Consumer and Business Services at 800-452-0288.
- **Tax Withholding:** Employers must withhold Social Security Tax and Federal Income Tax from employee wages. You may be liable for the tax payment, even if you didn't actually withhold the tax. For a Federal EIN number, go online to www.irs.gov.

Other Responsibilities of Homeowners:

- **Code Compliance:** As the permit holder for a construction project, the homeowner is responsible for notifying building officials at the appropriate times, so that the required inspections can be performed. Homeowners are also responsible for resolving any failure to meet code requirements that may be found through inspections.
- **Property Damage and Liability Insurance:** Homeowners acting as their own contractors should contact their insurance agent to ensure adequate insurance coverage for accidents and omissions, such as falling tools, paint overspray, water damage from pipe punctures, fire, or work that must be redone. Liability Insurance must be sufficient to cover injuries to persons on the job site who are not otherwise covered as employees by Workers Compensation Insurance.
- **Expertise:** Homeowners should make sure they have the skills to act as their own general contractor, and the expertise required to coordinate the work of both rough-in and finish trades.

CONSTRUCTION CONTRACTORS BOARD

PO Box 14140, Salem, OR 97309-5052

Telephone: 503-378-4621 – Fax: 503-373-2007

Website Address: www.oregon.gov/ccb

Property Owner Statement Regarding Construction Responsibilities

Oregon Law requires residential construction permit applicants who are not licensed with the Construction Contractors Board to sign the following statement before a building permit can be issued. (ORS 701.325 (2))

This statement is required for residential building, electrical, mechanical, and plumbing permits. Licensed architect and engineer applicants, exempt from licensing under ORS 701.010 (7), need not submit this statement. This statement will be filed with the permit.

Please check the appropriate box:

I own, reside in, or will reside in the completed structure and my general contractor is:

Name

CCB#

Expiration Date

I will inform my general contractor that all subcontractors who work on the structure must be licensed with the Construction Contractors Board.

or

I will be performing work on property I own, a residence that I reside in, or a residence that I will reside in. If I hire subcontractors, I will hire only subcontractors licensed with the Construction Contractors Board. If I change my mind and hire a general contractor, I will select a contractor who is licensed with the CCB and will immediately give the name of the contractor to the office issuing this Building Permit.

I have read and understand the Information Notice to Homeowners About Construction Responsibilities, and I hereby certify that the information on this homeowner statement is true and accurate.

Print Name of Permit Applicant

Signature of Permit Applicant

Date

Permit #: _____

Address: _____

Issued by: _____ Date: _____



Moisture Content Acknowledgement Form

I, _____ am the general contractor or the owner-builder at the following address:

Street address

City

Permit number

If applicable:

Subdivision/Lot

and / or

Map and tax lot

To conform with the Oregon Residential Specialty Code (ORSC), I am notifying the building official that I am aware of the moisture content requirement of ORSC Section R318.2 and have taken steps to meet this code requirement.

R318.2 Moisture content. Prior to the installation of interior finishes, the *building official* shall be notified in writing by the general contractor that all moisture-sensitive wood framing members used in construction have a moisture content of not more than 19 percent of the weight of dry wood framing members.

Signature

Date