

Building Permit Application

Commercial



City of Tigard

13125 SW Hall Blvd., Tigard, OR 97223
 Phone: 503-718-2439 Fax: 503-598-1960
 Inspection Line: 503-639-4175
 Internet: www.tigard-or.gov

FOR OFFICE USE ONLY	
Received Date/By:	Permit No.:
Plan Review Date/By:	Related Permit:
Date Ready/By: Notified/Method:	Juris: <input checked="" type="checkbox"/> See Page 2 for Supplemental Information

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
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP:	
Suite/bldg./apt. #:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot #:
Tax map/parcel #:	
DESCRIPTION OF WORK	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB Lic.:	

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:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

REQUIRED DATA: COMMERCIAL-USE CHECKLIST	
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:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups:	
Existing:	
New:	

BUILDING PERMIT FEES*	
<i>(Please refer to fee schedule)</i>	
Structural plan review fee (or deposit):	
FLS plan review fee (if applicable):	
Total fees due upon application:	
Amount received:	

PHOTOVOLTAIC SOLAR PANEL SYSTEM FEES*	
Commercial and residential prescriptive installation of roof-top mounted PhotoVoltaic Solar Panel System. Submit two (2) sets of roof plan with connection details and fire department access, along with the 2010 Oregon Solar Installation Specialty Code checklist.	
Permit fee (includes plan review and administrative fees):	\$180.00
State surcharge (12% of permit fee):	\$21.60
Total fee due upon application:	\$201.60

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* Fee methodology set by Tri-County Building Industry Service Board.

Authorized signature:

Print name:	Date:
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City of Tigard • COMMUNITY DEVELOPMENT DEPARTMENT
Accessibility: Barrier Removal Improvement Plan
Commercial & Multi-Family - Additions or Alterations
 13125 SW Hall Blvd. • Tigard, Oregon 97223 • 503.718.2439 • www.tigard-or.gov

REQUIREMENT: OREGON REVISED STATUTE (ORS) 447.241.

- (1) Every project for renovation, alteration or modification to affected buildings and related facilities shall be made to insure that the path of travel to the altered area and the restroom, telephones and drinking fountains are readily accessible to individuals with disabilities unless such alterations are disproportionate to the overall alterations in terms of cost and scope.
- (2) Alterations made to the path of travel to an altered area may be deemed disproportionate to the overall alteration when the cost exceeds twenty-five percent (25%).

VALUATION:	Total of all renovation, alteration or modification being done, excluding painting and wallpapering:	[1]	\$ _____
	MULTIPLIER (25% barrier removal requirement):	x	_____ .25
	TOTAL BUDGET FOR BARRIER REMOVAL:	[2]	\$ _____

ELEMENTS: In choosing which accessible elements to provide under this section, priority shall be given to those elements that will provide the greatest access. Elements shall be provided in the following order:

(a) Parking	\$ _____
(b) An accessible entrance:	\$ _____
(c) An accessible route to the altered area:	\$ _____
(d) At least one accessible restroom for each sex or a single unisex restroom:	\$ _____
(e) Accessible telephones:	\$ _____
(f) Accessible drinking fountains: and,	\$ _____
(g) When possible, additional accessible elements such as storage and alarms:	\$ _____
TOTAL (shall equal line [2] of Valuation Computation):	\$ _____



Plan Submittal Requirements

Commercial & Multi-Family - New, Additions or Alterations

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1. **SITE PLAN (3) copies** - fully dimensional, drawn to scale and labeled with:
 - A. map & tax lot # project name site address suite number
 zoning applicant name phone number
 - B. North arrow.
 - C. Scale (architectural or engineering only).
 - D. Street names.
 - E. Setbacks.
 - F. Parking, including disabled access.
 - G. Finished floor elevations.

2. **EROSION CONTROL PLANS AND DETAILS.**

3. **BUILDING PLANS:** See the “Plan Submittal Requirement Matrix” for the number of plans required based on submittal type (no redlines or tape-ons accepted).

All details listed below shall be incorporated into the plans:

- A. Scale (architectural or engineering only).
- B. Foundation plan.
- C. Floor plan(s).
- D. Cross sections.
- E. Reflective ceiling plan.
- F. Seismic bracing detail for suspended ceiling.
- G. Roof plan.
- H. Exterior elevations.
- I. Structural calculations, plans, details and specifications.
- J. Accessibility barrier removal worksheet.
- K. Deposit - based on valuation of project.



Plan Submittal Requirements Matrix

Commercial & Multi-Family - New, Additions or Alterations

Type of Submittal (Includes new, additions and alterations.)	# of Plans Required at Submittal
Demolition Permit (site plan is required showing location and square footage of all buildings to be demolished, erosion control plan and tree protection, if applicable)	2
Site Work (must include location of all accessible parking)	3
Plumbing (site utilities)	2
Building	3
Fire Protection System	3
Mechanical	2
Plumbing (building fixtures)	2
Electrical	2
Solar Photovoltaic (Requires check list for prescriptive installation. If not prescriptive installation, engineering is required.)	2

Plan review is dependent upon submittal of a completed application and plans.

After plan review approval, the Plans Examiner will contact the applicant to request additional sets of plans for distribution purposes (for contractor, City of Tigard, Washington County, and Tualatin Valley Fire & Rescue), if applicable.