

# Plumbing Permit Application

Residential  Commercial



**Lake County**  
 Building Department  
 513 Center Street  
 Lakeview, OR 97630

Call for Inspection: (541) 947-6033

Fax: (541) 947-2144

**Project Address:** \_\_\_\_\_

Township \_\_\_\_\_ South, Range \_\_\_\_\_ EWM, Section \_\_\_\_\_, Tax Lot# \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Tenant (if different from owner): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

No.	Residential	Fee	Charge
	<b>One &amp; Two Family Dwelling</b>		
	base fee(Includes 1 bath & 1 to 12 fixtures) (new/ addition/ remodel)	\$120.00	
	additional baths (each)	\$90.00	
	additional ½ baths (each)	\$50.00	
	Number of Fixtures	\$15.00	
	<b>Water, Sanitary, &amp; Storm Service</b>		
	first 100 feet	\$40.00	
	each additional 100 feet or fraction	\$22.00	
	Backflow Device	\$40.00	
	<b>Commercial</b>		
	3 or less fixtures	\$80.00	
	Base Fee (includes 4 to 10 fixtures)	\$160.00	
	11 or more fixtures	\$15.00	
	<b>Issuance of Plumbing Permit</b>		<b>\$40.00</b>
	Subtotal		
	12% State Surcharge		
	<b>TOTAL</b>		

For Department Use Only
Permit #:
Date Issued:
Issued by:

Contractor Information
Name:
Address:
Phone:
City:
State:                      zip:
CCB#:

This permit becomes null and void if work or construction is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 day any time after work is commenced.

**Application must hold an Oregon registration to conduct a plumbing business or be exempt from registration requirements.**

- I am the property owner doing my own work.
- I am the property owner hiring a plumbing contractor. License no.: \_\_\_\_\_ Expires: \_\_\_\_\_
- I am licensed with the Building Codes Division. License no.: \_\_\_\_\_ Expires: \_\_\_\_\_
- I am registered with the Construction Contractors Board. Registration no.: \_\_\_\_\_ Expires: \_\_\_\_\_
- I am registered with the Landscape Contractors Board. Registration no.: \_\_\_\_\_ Expires: \_\_\_\_\_

*I hereby certify that, to my knowledge, the above information is true and correct. All work to be performed shall be in accordance with all governing laws and rules.*

**Contractor Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Date:** \_\_\_\_\_