



DEVELOPMENT SERVICES
 110 E. Main St.
 Talent, OR 97540
 Phone: 541-535-7401
 Fax: 541-535-7423
 www.cityoftalent.org

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.

CATEGORY OF CONSTRUCTION		
<input type="checkbox"/> Residential	<input type="checkbox"/> Government	<input type="checkbox"/> Commercial
JOB SITE INFORMATION AND LOCATION		
Job site address:		
Owner's name:		Phone:
Directions to property:		
DESCRIPTION OF WORK AND STRUCTURE		
PROPERTY OWNER INSTALLATION		
Name:		
Address:		
City:	State:	ZIP:
Phone:		Fax:
E-mail:		
<i>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.</i>		
Signature:		
CONTRACTOR INSTALLATION		
Business name:		
Address:		
City:	State:	ZIP:
Phone:		Fax:
E-mail:		
CCB license no.:		
Print name:		
Signature:		

Building Permit Application	
Permit no.:	
Date:	

VALUATION	
<i>Permit fees are based on the value of the work performed. Indicate the value of all equipment, materials, labor, overhead, and profit.</i>	
Enter Contractor's Bid Value	\$

PERMIT FEE TABLE (effective December 19, 2013)	
Total Valuation	Fee Structure
\$1.00 to \$500	\$96.56
\$501 to \$2,000	\$96.56 for the first \$500 plus \$.61 for each additional \$100, or fraction thereof, to and including \$2,000
\$2,001 to \$25,000	\$105.71 for the first \$2,000 plus \$8.59 for each additional \$1,000, or fraction thereof, to and including \$25,000
\$25,001 to \$50,000	\$303.28 for the first \$25,000 plus \$7.79 for each additional \$1,000, or fraction thereof, to and including \$50,000
\$50,001 to \$100,000	\$498.03 for the first \$50,000 plus \$5.19 for each additional \$1,000, or fraction thereof, to and including \$100,000
\$100,001 and up	\$757.53 for the first \$100,000 plus \$4.40 for each additional \$1,000 or fraction thereof

OTHER APPLICABLE FEES	
Plan review fee	65% of structural permit fee
Community Development Fee	1.95% of value of construction
State Surcharge	12% of structural permit fee

MISCELLANEOUS FEES	
Fire and Life Safety Review (commercial)	40% of structural permit fee
Reinspection fee (for more than three of the same type of inspection)	\$96.56
Special Inspection Fee (for compliance issues, expired permits, illegally built structures, etc)	\$178.78
Inspections for which no fee is specified (1 hour minimum)	\$96.56/per hour
Additional inspection fee (when request is made, but locked out twice for same type of inspection)	\$96.56
Administration fee for changes made to existing permit (doesn't include plan review fee)	\$96.56
Minimum permit fee for change of occupancy	\$96.56
PV Solar Installation permit following prescriptive path with only one inspection	\$159.32
Investigative Fee for work done without permit	Equal to the permit fee but not more than \$1,000.00

STAFF USE ONLY			
Type of Construction	Maximum Occupancy	Fire Sprinklers req'd Yes ___ No ___	
No. of Stories	Occupancy Group	Occupancy Division	
Stated Valuation: \$ _____			
Building Space Data		Per Square Foot	Valuation Total
Heated Space _____	sq. ft.	_____	_____
Unheated Space/Garage _____	sq. ft.	_____	_____
Porches, Decks, covered spaces _____	sq. ft.	_____	_____
Carport/Other _____	sq. ft.	_____	_____
Total Area _____	sq. ft.	Total Valuation \$ _____	
		Fees	Surcharge
		Other Plan Review	
Structural Plan Review (65%).....	_____	—	—
Building Permit.....	_____	_____	—
Fire & Life Safety (40%).....	—	—	_____
Plumbing.....	_____	_____	_____
Mechanical	_____	_____	_____
Electrical	_____	_____	_____
Add'l charges (specify).....	_____	_____	_____
>>> Column Totals >>>	_____	_____	_____
TOTAL (fees, plan review & surcharges): _____			
Construction Excise Tax (CET) 2014-15 Required on all new construction	Heated Space _____ sq ft X 1.17 Residential SFR = _____ Heated Space _____ sq ft x 0.58 Non-Residential = _____ Heated Space <u>na</u> Base Rate Non-Residential Max = \$29,200 _____		
Date Plans Checked	Date Plans Approved	Permit Authorized by	
Plan Review Rcpt. No.	Date Issued	Receipt No.	Issued by