



**CITY OF TALENT - COMMUNITY DEVELOPMENT**

110 East Main Street, Talent, Oregon 97540

Phone: (541) 535-7401 Fax: (541) 535-7423 [www.cityoftalent.org](http://www.cityoftalent.org)

**INTAKE CHECKLIST – TYPE 1 PERMIT**

All of the following items must be included for the application to be accepted for review.

|                 |                  |
|-----------------|------------------|
| <b>ADDRESS:</b> | <b>PERMIT #:</b> |
|-----------------|------------------|

| <b>MINIMUM REQUIREMENTS</b> |  | <b>YES</b> | <b>NO</b> | <b>N/A</b> | <b>STAFF</b> |
|-----------------------------|--|------------|-----------|------------|--------------|
| <b>1</b>                    | <b>VERIFICATION OF PROPERTY OWNER APPROVAL</b><br><input type="checkbox"/> Property owner signature _____ <input checked="" type="checkbox"/><br><input type="checkbox"/> OR, Letter of Authorization from property owner.   |            |           |            |              |
| <b>2</b>                    | <b>CITY BUSINESS LICENSE</b><br><input type="checkbox"/> If Contractor, has a current business license before permit issuance.   |            |           |            |              |
| <b>3</b>                    | <b>FLOODPLAIN / FLOODWAY CHECK</b><br>If property in a floodplain, all the following are required:<br><input type="checkbox"/> Floodplain Management Application,<br><input type="checkbox"/> Elevation Certificate ( <i>pre-construction, construction &amp; final</i> ) required per FEMA,<br><input type="checkbox"/> Site plans must show: Floodplain boundaries, Floodway boundaries, base floor elevation for elevation/cross section and 35-foot buffer from Floodway (if applicable)<br><input type="checkbox"/> Plot and Foundation plans must show requirements listed below (5.B, 5.C).   |            |           |            |              |
| <b>4</b>                    | <b>DEBRIS REMOVAL FOR FIRE-DAMAGED PROPERTIES</b><br>If property was damaged by fire, all the following must be completed or underway before building permit issued:<br><input type="checkbox"/> FEMA/ODOT remediation complete prior to permit issuance.<br>-OR-<br><input type="checkbox"/> Private Contractor has current Asbestos, Testing & Abatement License.<br><input type="checkbox"/> Storm drain protection permit signed.<br><input type="checkbox"/> Permit closeout: Landfill acceptance letter, lab results [pre-cleanup required, post required for those tested positive for hazardous material], & asbestos surveyor info.   |            |           |            |              |
| <b>5</b>                    | <b>THREE (3) SETS OF LEGIBLE PLANS for SHEETS 5.A. – 5.K. (below)</b><br>All plans must:<br><input type="checkbox"/> Be drawn to scale.<br><input type="checkbox"/> Show conformance to applicable local & state building codes.<br><input type="checkbox"/> Include: project name, location, design professional (architect / engineer) name and phone numbers, official engineer/architect stamp with signature and date.<br><input type="checkbox"/> Conditions imposed as part of an approved planning action shall be shown.<br><input type="checkbox"/> <i>Verify no copyright violations exist on plans.</i>  |            |           |            |              |
|                             | <b>A. SITE PLAN (Minimum 8.5" X 11")</b><br><input type="checkbox"/> Utility locations proposed and/or existing (sanitary sewer and water lines and storm drain location).   |            |           |            |              |
|                             | <b>B. PLOT PLAN (Minimum 24" X 36")</b><br><input type="checkbox"/> Show lot and building setback dimensions.<br><input type="checkbox"/> Show property corner elevations (if more than 4 ft elevation difference, the site plan must show contour lines at 2 ft intervals).<br><input type="checkbox"/> Show location of easements (public and private).<br><input type="checkbox"/> Show driveway.<br><input type="checkbox"/> Show footprint of proposed and existing structure(s), including decks.<br><input type="checkbox"/> Show lateral design details and connections (in plans or on separate full-sized attached sheet with cross section references between plan location & details).<br><input type="checkbox"/> Show location of wells-septic systems (if applicable).<br><input type="checkbox"/> Show direction indicator (show north), lot area, and surface drainage indicators.<br><input type="checkbox"/> <b>If in Floodplain:</b> show flood hazard area, floodway boundary, zones & design flood elevation, flood vents with dimensions, base flood elevation. |            |           |            |              |
|                             | <b>C. FOUNDATION PLAN (Minimum 24" X 36")</b><br><input type="checkbox"/> Show dimensions, anchor bolts, any hold-downs & reinforcing pads, connection details, vent size & location & openings.<br><input type="checkbox"/> <b>If in Floodplain:</b> show floodplain vents, vent openings and finish floor.   |            |           |            |              |
|                             | <b>D. FLOOR PLAN (Minimum 24" X 36")</b><br><input type="checkbox"/> Show each floor, dimensions, identify all rooms, door & window sizes & locations.<br><input type="checkbox"/> Show location of smoke detectors, water heater, HVAC equipment, ventilation fans, plumbing fixtures, gas fixtures & appliances.   |            |           |            |              |

In compliance with the Americans with Disabilities Act, if you need special assistance, please contact TTY phone number 1-800-735-2900 for English and for Spanish please contact TTY phone number 1-800-735-3896.

*The City of Talent is an Equal Opportunity Provider*



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|          |   |  |  |  |  |
|----------|---|--|--|--|--|
|          | <input type="checkbox"/> Show porches, balconies & decks, square footage of residence, garage, carport, covered & uncovered decks.<br><input type="checkbox"/> Show existing floor plan for remodels or additions.  |  |  |  |  |
|          | <b>E. CROSS SECTION &amp; DETAILS (Minimum 24" X 36")</b><br><input type="checkbox"/> Show all framing-member sizes & spacing such as floor-roof beams, headers, joists, sub-floor, wall construction, roof construction, wall & roof sheathing, roofing, roof slope, ceiling heights, siding material, footings, foundations, stairs, fireplace & venting, thermal insulations, etc.<br><i>More than 1 cross section may be required to clearly portray construction method(s).</i>  |  |  |  |  |
|          | <b>F. ELEVATION VIEW (Minimum 24" X 36")</b><br><input type="checkbox"/> Show elevation views for all sides of new construction - minimum of 2 elevations for additions & remodels. Exterior elevation views must reflect actual grade if grade change is greater than 4 ft at building envelope or in floodplain.  |  |  |  |  |
|          | <b>G. WALL BRACING (prescriptive path) or LATERAL ANALYSIS PLANS (Min. 24" X 36")</b><br><input type="checkbox"/> Must indicate details & locations. For non-prescriptive path analysis provide specifications & calculations to engineering standards.   |  |  |  |  |
|          | <b>H. FLOOR-ROOF FRAMING (Minimum 24" X 36")</b><br><input type="checkbox"/> Provide plans for all floors-roof assemblies indicating member sizing, spacing, bearing locations, nailing & connection details.<br><input type="checkbox"/> Show location & method of attic ventilation.  |  |  |  |  |
|          | <b>I. BASEMENT &amp; RETAINING WALLS (where applicable) (Minimum 24" X 36")</b><br><input type="checkbox"/> Provide cross sections & details showing placement of reinforcing steel, drains & waterproofing. For engineered systems see "Engineering Calculations"  |  |  |  |  |
|          | <b>J. LANDSCAPE PLANS (Minimum 11" x 17")</b><br><input type="checkbox"/> Provide landscape plan or show compliance with Talent Municipal Code 18.105.<br><input type="checkbox"/> Landscaping must be installed prior to issuance of Final Certificate of Occupancy.   |  |  |  |  |
|          | <b>K. ENERGY CODE COMPLIANCE</b><br><input type="checkbox"/> Clearly identify the prescriptive path or provide calculations and heat source type, water heater, insulation at exterior envelope and select additional measures per ORSC table 1101.1(2). A gas piping schematic plan is required for 4+ gas appliances.   |  |  |  |  |
| <b>6</b> | <b>TWO SETS OF LEGIBLE PLANS for SHEETS 6.A. – 6.C. (below)</b><br><input type="checkbox"/> All plans must meet basic requirements (see 5).   |  |  |  |  |
|          | <b>A. ROOF TRUSS &amp; FLOOR TRUSS DESIGN CRITERIA &amp; DETAILS (Minimum 8.5" X 11")</b>   |  |  |  |  |
|          | <b>B. BEAM CALCULATIONS (Minimum 8.5" X 11")</b><br><input type="checkbox"/> Provide calculations using current code design values for all beams & multiple joists exceeding prescriptive code provisions, and/or beam-joists carrying a non-uniform load.  |  |  |  |  |
|          | <b>C. ENGINEER'S CALCULATIONS</b><br><input type="checkbox"/> When required or provided (e.g. non-prescriptive lateral loading, shear walls, roof trusses, retaining wall exceeding 4 ft) shall be stamped by engineer or architect licensed in Oregon & shall be shown to be applicable to the project under review.   |  |  |  |  |
| <b>7</b> | <b>ADDITIONAL REQUIRED FORMS:</b><br><input type="checkbox"/> Building Construction Review Form <input type="checkbox"/> Plumbing Permit<br><input type="checkbox"/> Encroachment Permit <input type="checkbox"/> Moisture Sensitive Wood Framing Form<br><input type="checkbox"/> Structural Permit <input type="checkbox"/> High Efficiency Interior Lighting Form<br><input type="checkbox"/> Electrical Permit <input type="checkbox"/> Storm Drain protection permit.<br><input type="checkbox"/> Mechanical Permit <input type="checkbox"/> Debris Removal Permit Checklist |  |  |  |  |
|          | <b>CONDITIONAL FORMS</b><br><input type="checkbox"/> Miscellaneous Construction Permit and/or Right of Way Permit<br><input type="checkbox"/> Floodplain Management Application<br><input type="checkbox"/> Valid Elevation Certificate<br><input type="checkbox"/> Fencing and/or Grading Permits<br><input type="checkbox"/> Owner Responsibility Notice<br><input type="checkbox"/> Architectural Review required if in Old Town District and may be in a PUD  |  |  |  |  |
| <b>8</b> | <b>REQUIRED PRIOR TO WATER RECONNECT</b><br><input type="checkbox"/> VOC/Benzene Test & proof of no-detect results per OHA<br><input type="checkbox"/> RVSS Sewer Proof of Payment -or- Copy of Sewer Connection Permit   |  |  |  |  |
| <b>9</b> | <b>APPLICANT (required)</b><br>Name: _____ Signature: _____<br>Phone: _____ Date: _____   |  |  |  |  |

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