Building Permit Application

P: 503-682-4960 • Submit documents to: permits@ci.wilsonville.or.us Online Portal



D Name and work	<u> </u>		29799 SW Town Cer Wilsonville, OF	•
☐ New construction		tion/replacement		
Demolition Category of construction	Other:		Office Use Only	
☐ Multifamily	☐ Commercial/industrial	Accessory building	Permit no:	porcial Had
Other:	□ Commerciai/industriai	- Accessory building	Required Data: Comm	
Job site information and lo	cation		formed. Indicate the value (rounde of all equipment, materials, labor, of	d to the nearest dollar)
Job address:			for the work indicated on this appli	
City/State/ZIP:			Valuation:	
Suite/bldg./apt. no.:	Project name:		Existing building area:	square feet
Guite/Blug./apt. 110	i roject name.		New building area:	square feet
Description of Work			Total number of stories: Type of Construction	
			Occupancy groups	
			Existing	
List all known deferred su	ubmittals associated to the	is project	New	
			New impervious area	square feet
			Fire Sprinkler System? Yes	s No
			New Water Meters:	
Owner			Domestic:	
Name:	Phone:		Irrigation:	
Address:			Do you want any other per	
City/State/ZIP:			<u>at this time</u> ? If yes, submi the appropriate types:	t an application for Mechanical
E-mail:			Plumbing (Site Utilities, Interior)
Contractor			Fire: (Alarm, Sprinkl	er, Fire Service Line Grading
Business name:				
Address:				
City/State/ZIP:	Phone:		Submit applications to the ap Erosion Control, Public Works	
E-mail:			Notice	,
CCB lic. no.	Exp. Date:		All contractors and subcontractors	are required to be
City Business/Metro License N			licensed with the Oregon Construct under ORS 701 and may be required.	
Applicant			jurisdiction in which work is being	
Business name:			Statement of Fact: I certify that the set forth in this application are true a	nd complete to the
Contact name:	_		best of my knowledge. I understand misrepresentation or omission of fac	t (whether intentional or
Address:			not) in this application or any other re as any misleading statement or omis	
City/State/ZIP:	_		revocation of permit and/or certificate of how or when discovered.	of occupancy, regardless
Phone:			I acknowledge that work related to the Application may be subject to regula	is Building Permit tions governing the
E-mail:			handling, removal and/or disposal of based paint. (initials)	
Owner / Applicant Signate	ure		Building Permit Fees*	
Authorized signature:			Please refer to fee schedule	
Print name:		Date:	Due at time of submittal:	ee, Fire/Life/Safety Fee.
This permit application will expanded as complete.	oire if a permit is not obtained v	within 180 days after it has been		,

Complete this form for any Tenant Improvement application submitted.

WILSONVILLE OREGON

ADA - Accessibility to Existing Buildings Tenant Improvement Alterations Compliance Report

ORS, Section 447.241 (OSSC, Section 3411) states that every project for renovation, alteration, or modification to affected buildings and related facilities that affects or could affect the usability of or access to an area containing a **primary function** shall be made to ensure that, to a maximum extent feasible, the paths of travel to an altered area and the rest rooms, telephones and drinking fountains serving the altered area are readily accessible and useable by individuals with disabilities, unless such alterations are disproportionate to the overall alterations in terms of cost and scope. Disproportionate shall mean all monies expended that exceeds 25% of the value of the work under consideration.

Permit Value \$ _	25% =:
Applicant:	Permit No.; BB
•	accessible elements to provide under ORS 447.241, priority shall be given to those I provide the greatest access. Elements shall be provided in the following order:
1.	Parking (requires a site plan at application
2.	An accessible entrance
3.	An accessible rout to the altered area
4.	At least one accessible restroom for each sex or a single unisex restroom
5,	Accessible telephones
6.	When possible, additional accessible elements such as storage and alarms
your work, staring approval only a m	% of the value of this work to remove barriers within this structure regardless of the scope of g with the parking space. Acceptance of this form and the information contained is not an ethod of collection information.
Check One	
	ea is fully compliant. The altered area has been assessed by the applicant to Chapter 11 of the and to be compliant (including compliance with items 1-6 noted above).
☐ The altered are	ea is not compliant and the following barriers will be removed:
1.	3,
2.	4,
Signature:	Phone:

Submit this form if there are Deferred Submittals. All signatures are required.

Deferred Submittal Agreement



City of Wilsonville
Building Division
29799 SW Town Center Loop E
Wilsonville, OR 97070
503.682.4960
www.ci.wilsonville.or.us/Building

Oregon Structural Specialty Code allows a permit applicant to defer certain submittals if approved. Wilsonville Building Division Policy BPP 111 provides the procedures for accepting projects with deferred submittals. This form is a deferred submittal agreement for the following project:

Project Name:	Permit Number:
Project Address:	
Applicant:	Phone:
E-Mail:	
Guidelines: 1. Approval - Each deferred submittal shall bear the approvation shall be included that indicates the deferred submit in general conformance to the design of the building. 2. List - The back of this form is a list of deferred submittals. which submittals are requested to be deferred and indicate 3. Fees - In accordance with OAR 918-050, a deferred submittal submitted for review and approval. The fee will be calculated. 4. Timelines - Every attempt will be made to provide timely rewitted. 5. Work Without a Permit - Work that is constructed without	oval of the design professional in responsible charge (DPRC). inittal documents have been reviewed and have been found to be The design professional of responsible charge must check an anticipated submittal date. al plan review fee will be added when the deferred submittal is ad based on the valuation of each deferred submittal. views within 5 - 10 business days. It having been reviewed and approved by both the DPRC and the thout a permit. Any person or firm performing work prior to
ACKNOWLEDGMENTS:	
Owner Name (Printed)	Owner Signature
General Contractor Name (Printed)	GC Signature
Design Professional in Responsible Charge (Printed)	DPRC Signature
Wilsonville Plans Examiner Acceptance:	

Project Name:		Permit Number:	
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T		Deferred Item	Date	T		Deferred Item	Date
	1.	Acoustical ceiling suspension system			19.	Post-tensioned concrete structural members or panels	
	2.	Auxiliary power systems			20.	Pre-cast concrete structural members or panels	
	3.	Awnings			21.	Prefabricated stair units to include steel, aluminum, or pre-cast concrete stairs.	
	4.	Bleachers			22.	Prefabricated wall panel	
	5.	Carports			23.	Pre-stressed concrete structural members or panels	
	6.	Curtain wall systems			24.	Raised floor systems	
	7.	Wooden, steel, or composite floor or roof trusses			25.	Shelving systems and steel storage racks	
	8.	Emergency call system			26.	Signs	
	9.	Exit Illumination			27.	Skylights	
	10.	Fire alarm system			28.	Smoke and heat vents	
	11.	Fire sprinkler			29.	Specialty retaining walls	
	12.	Fire stopping			30.	Stone veneer	
	13.	Glass guardrails			31.	Terra cotta veneer	
	14.	Glazing systems			32.	Works of art	
	15.	HVAC system			33.		
	16.	Intercom system			34.		
	17.	Metal guardrails and handrails			35.		
	18.	Plumbing system			36.		_

<u>Valuation</u> - Each deferred submittal item shall include the valuation of the scope at the time it is submitted for review. Valuation is the sum of labor plus materials.

<u>Work without a Permit</u> - Work that is constructed without having been reviewed and approved by both the Design Professional in Responsible Charge and Building staff, will be considered as work performed without a permit. Any person or firm performing work prior to approval shall be subject to the penalties prescribed in Wilsonville Municipal Code.

Complete this form if the application affects the Plumbing.

Plumbing Permit Supplemental Information

Fixture Work:

Are you capping, moving or replacing existing fixtures? If

"yes", please indicate work performed by fixture. Failure to accurately report fixtures could result in increased sewer fees.*

*Note: If the fixture work under this permit results in an increase of sewer EDUs, a sewer permit will be issued, and fees assessed for the sewer increase must be paid before the plumbing permit can be issued.

for the sewer increase can be issued.	must be p	paid before	e the plumb	ing permit	
	Quantity by	y (Fixture) W	ork Performed		_ b
Fixture Type:	-				_ p
,,	New	Moved	Existing	Capped	٦.
Dankista /Fant	1.01				┥╴
Baptistry/Font					_8
Bath -Tub/Shower					
-Jacuzzi/Whirlpool					
Car Wash -Each Stall					15
-Drive Thru					þ
Cuspidor/Water Aspirator					C
Dishwasher -Commercial				1	
-Domestic					
Drinking Fountain				1	
Eye Wash					1
Floor Drain/Sink - 2"					
Car Wash Drain					
Garbage -Domestic					1
Disposal -Commercial					
-Industrial					
Ice Mach./Refrig. Drains					4
Oil Separator (Gas Station)					4
Rec. Vehicle Dump Station					4
Shower -Gang					
-Stall					4
Sink -Bar/Lavatory					
-Bradley -Commercial					
-Service		-			+
Swimming Pool Filter Washer – Clothes	+	-			+
Water Extractor	+	-			+
Water Extractor Water Closet – Toilet	+	-	+	-	+
Urinal	+	-			+
	+	-	+	+	-
Other Fixtures:		<u> </u>			_

PLAN REVIEW FOR COMPLEX STRUCTURES

A "complex structure" is defined as an installation of a plumbing system that meets any of the following criteria:

- ☐ Any new commercial building
- ☐ Any new exterior plumbing site utilities
- ☐ A commercial building with installation, alteration or addition of nine (9) or more new or relocated plumbing fixtures
- ☐ Medical gas and vacuum systems for health care facilities providing services to human beings
- ☐ Plumbing installations, alterations or additions to food service facilities where new plumbing fixtures, including interceptors, are being installed for the food service area.
- □ Any new residential building containing three (3) or more dwelling units
- ☐ Any NFPA 13-D multipurpose fire sprinkler system.

Submit 2 sets of plans with any of the above.

ISOMETRIC OR RISER DIAGRAM

☐ Isometric or riser diagram is required for new buildings three (3) or more stories in height.

comments regarding fixture work:

SPECIAL INSPECTION AND TESTING AGREEMENT

Project Name:
Project Address:
Permit Number:



City of Wilsonville Building Division 29799 SW Town Center Loop E Wilsonville, OR 97070 503.682.4960 www.ci.wilsonville.or.us/building

The City of Wilsonville has adopted the Oregon Building Officials Association (OBOA) Special Inspection Program (SIP) through Building Department Policy BPP 108. In accordance with the Oregon Specialty Structural Code (OSSC) 107.1, the Registered Design Professional (RDP) shall prepare and submit a special inspection and structural observation program. The RDP shall confirm that the special inspection and structural observations noted below are indicated on the approved plans. This agreement is meant to denote areas of construction requiring special inspection. More specific special inspection requirements will be listed in the approved plans.

Per OSSC 1704.2, the Building Official may accept all special inspectors registered with the Oregon Building Officials Association (OBOA) Special Inspection Program for the type of work for which they are certified/qualified to inspect.

The Special Inspector shall observe and document the work for conformance with the building department approved plans and specifications and applicable workmanship provisions of the OSSC. Additionally, the special inspector(s), general contractor, owner and RDP shall comply with the duties and responsibilities outlined in Appendix D of the OBOA Special Inspection Program. Appendix D is available upon request or can be viewed at www.oregonbuildingofficials.com/special-inspection-program-sip-

The following special inspections, material testi a separate program of inspection is submitted b		e performed according to OSSC Chapter 17 unlessing Official.
BEFORE A PERMIT CAN BE ISSUED: The completed. Signatures are not required – only t		and verify all the acknowledgements in Part 3 are ne, and their email or phone contact.
summary report to the Building Official. The su	ımmary shall include a statement the ted and, to the best of their knowled	ion Agency and the RDP shall submit a fina lat all items requiring special inspection, testing ge, in conformance with the building department provisions of the OSSC.
1 - SPECIAL INSPECTION AND TESTING: Inspection of Fabricators (OSSC 1704.2.) Steel Construction (OSSC 1705.2) Concrete Construction (OSSC 1705.3) Masonry Construction (OSSC 1705.4) Wood Construction (OSSC 1705.5) Soils (OSSC 1705.6) Driven Deep Foundations (OSSC 1705.1) Special Case (OSSC 1705.1.1)	Helical Pile Foun Sprayed Fire-res Mastic and Intum EIFS (OSSC 170 Fire-Resist Pene	ep Foundations (OSSC 1705.8) dations (OSSC 1705.9) istant Materials (OSSC 1705.13) nescent Fire-rest. Coatings (OSSC 1705.14) 05.15) trations and Joints (OSSC 1705.16) fon / Adhesive (OSSC 1705.1.1)
Seismic Resistance – Risk Category III a Structural Steel (OSSC 1705.11.1) Structural Wood (OSSC 1705.11.2) Cold-formed Steel Light-frame Construct Designated Seismic System Verifications 2 - STRUCTURAL OBSERVATION (OSSC 1 Per Structural Observation Program note Indicate stages at which structural observation	Archite Mecha tion (OSSC 1705.11.3) Storage S (OSSC 1705.11.4) Seismin 1704.5): ad on the Structural Drawings	ctural Components (OSSC 1705.11.5) nical and Electrical Components (OSSC 1705.11.6) e Racks and Access Floors (OSSC 1705.11.7) c Isolation Systems (OSSC 1705.11.8)
3 - ACKNOWLEDGEMENTS: (I have read a	and agree to comply with the terms a	and conditions of this agreement)
Owner	Owner's Representative	Email
General Contractor	Contractor Representative	Email
Engineering or Architecture Firm	Engineer or Architect Representative	Email
OBOA Registered Agency Name ACCEPTED BY THE BUILDING DEPARTMENT:	Special Inspection Agency Representative	Email
	Building Official or Designee	Email



Energy Code Compliance

2021 Oregon Energy Efficiency Specialty Code (OEESC) Compliance

This form provides the required information to demonstrate compliance with the 2021 Oregon Energy Efficiency Specialty Code (OEESC), Chapter 13 of the 2019 Oregon Structural Specialty Code, and must be provided to the building official at the time of submitting the plan review documents.

Jurisdiction:			
	BUILDING IN	IFORMATION	
Applicant name:		Phone number:	
Project name:			
Address / location:			
City:	State: OR	ZIP:	
Primary building use (As indicated)	ated on ZERO Code Calculator repor	t): Number of flo	oors:
Part I COMcheck infor	mation		
Compliance path:	COMcheck (Standa	ard 90.1-2019) results:	
Performance path	☐ Pass		
Prescriptive path	☐ Fail *For pe	rformance path, submit the energy model re	eport with this form.
Prepared by or under the supe	ervision of:	Da	ate:
Part II Projected energ	y use		
Enter the ZERO Code 2.0 Ca	lculator results for projected en	nergy use.	
Estimated building ener	rgy consumption: MBtu	/yr	
Part III Estimated availa	able renewables for the build	ing	
Enter the ZERO Code 2.0 Ca	lculator results for offsets.		
Total renewable energy	to achieve Net Zero: M	IBtu/yr	
On-site PV generati	ional potential: MBtu/yi	r	
Remaining off-site	renewable energy: MBt	u/yr	
_		PLICANT SIGNATURE	
COM <i>check</i> report and ZERO	Code 2.0 Calculator report mu	ust be submitted with this form.	
COM <i>check</i> report is att	•	Energy model report is attached (if	COM <i>check</i> failed)
ZERO Code Calculator	<u> </u>	2021 OEESC COM <i>check</i> suppleme	
			- <u>-</u>
Print Name		Signature	Date





COM*check* Supplement

2021 Oregon Energy Efficiency Specialty Code Compliance

Include this supplement with the Oregon Energy Efficiency	Specialty Code Compliance Checklist.
Jurisdiction:	
BUILDING I	NFORMATION
Applicant name:	Phone number:
Project name:	
Address / location:	
City:	State: OR ZIP:
☐ Check here if not applicable and no items apply	
COMF	PLIANCE
DATA CENTERS	
ASHRAE 90.4-2019 compliance (Sections 6.2.2, 6.5.11	, 8.2.1, and 8.5)
Mechanical design – Registered design professional	Power design – Registered design professional
Printed name:	Printed name:
Registration number:	Registration number:
Signature: Date	Signature: Date
SECTION 5: ENVELOPE COMPLIANCE	
5.1.2.3: Unconditioned space with limited radiant heat	ing Check if not applicable
(See Oregon amendment 6.5.8.3 HVAC)	
Space is identified on plans. Coverage area with 500 ft ² or 10% of floor area per 6.5.8.3	limited radiant heating is identified on plans and the lesser of
☐ Automatic controls for radiant spot heating per 6	.5.8.3.
Plans and specs.:	
5.4.3.3: Vestibules: additional exception	☐ Check if not applicable
☐ Building is less than 25,000 ft².	re report in lieu of providing a vestibule per the following:
Reported whole-building air leakage testing per S	
Plans and specifications shall identify building engage Responsible party to provide test results:	my door(s) meeting tins exception.
responsible party to provide test results.	



SECTION 5: ENVELOPE COMPLIANCEcontinued		
Plans and specs.:		
Printed name Signature Registered design professional	Registration number	Date
SECTION 6: HVAC		
6.4.3.5.1: Packaged HVAC Equipment with Electric Heat	☐ Check if not applic	cable
Packaged HVAC systems with less than 241,000 Btu/h cooling ca 21,500 Btu/h or greater have heat pump operation for first stage of		capacity of
Plans and specs.:		
6.5.8.3: Radiant Heating for Enclosed Unconditioned Spaces	☐ Check if not applic	cable
Overhead radiant heating for occupied areas of the lesser of 500 f	t ² or 10% of floor area	
Automatic control: manual time switch or occupancy sens	sor	
Plans and specs.:		
SECTION 8: POWER		
8.4.2: Receptacle Control Exception	☐ Check if not applic	cable
Building is not providing controlled receptacles required per Section	8.4.2. Additional efficiency pr	ovided with the
following method (select one)		
	formance than minimum	
following method (select one) Performance Compliance report showing minimum 5% better per	formance than minimum	
following method (select one) Performance Compliance report showing minimum 5% better per	dix G report included	
following method (select one) Performance Compliance report showing minimum 5% better per Section 11 ECB report included or Append	dix G report included	
following method (select one) Performance Compliance report showing minimum 5% better per Section 11 ECB report included or COMcheck Envelope Compliance report showing minimum 3% p	dix G report included passing or higher	
following method (select one) Performance Compliance report showing minimum 5% better per Section 11 ECB report included or Append COMcheck Envelope Compliance report showing minimum 3% p ASHRAE 90.1-2019 COMcheck forms included	dix G report included passing or higher	
following method (select one) Performance Compliance report showing minimum 5% better per Section 11 ECB report included or Append COMcheck Envelope Compliance report showing minimum 3% p ASHRAE 90.1-2019 COMcheck forms included COMcheck Lighting report showing minimum 5% passing or high	dix G report included passing or higher	
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following method (select one) Performance Compliance report showing minimum 5% better per Section 11 ECB report included or Append COMcheck Envelope Compliance report showing minimum 3% p ASHRAE 90.1-2019 COMcheck forms included COMcheck Lighting report showing minimum 5% passing or hig ASHRAE 90.1-2019 COMcheck forms included Printed name Registered design professional SECTION 9: LIGHTING	dix G report included passing or higher her Registration number	