

Electrical Permit Application

Washington County, 155 N. 1st AV, Suite 350, MS 12, Hillsboro, OR 97124, Phone: 503-846-3470/ lutbldg@co.washington.or.us

Inspection Requests: 503-846-3699/www.WashCoORACA.com

Project #	
Permit #	

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TYPE O	PLAN	PLAN REVIEW			
☐ New construction ☐ Addition/alteration	Please check all that apply:				
			Service or feeder 400 amps Hazardous locations or more where the available Service or feeder 600 amps or more		
CATEGORY OF	CONSTRUCTION	fault current exceeds	fault current exceeds		
☐ 1- and 2-family dwelling ☐ Commerci	al/industrial	ding 10,000 amps at 150 volts or	☐ Marinas and boatyards		
☐ Multi-family ☐ Master bu	ilder	less to ground, or exceeds 14,000 amps for all other	☐ Floating buildings		
JOB SITE INFORMAT	_	installations.	installations		
Job no.: Job address:		Fire pump	buildings ☐ Installation of 150 KVA or large		
Job no.: Job address:		Emergency system	separately derived system		
City/State/ZIP:			☐ "A," "E," "I-2," "I-3" occupancy		
Suite/bldg./apt. no.:	Project name:	Six or more residential units	☐ Recreational vehicle parks ☐ Supply voltage for more than		
	3	☐ Health-care facilities	600 volts nominal		
Cross street/directions to job site:		FEE SO	CHEDULE		
Subdivision:	Lot no.:	Description	Otv. Fee Total *		
Tax map/parcel no.:		Residential single- or multi-far	nily dwelling unit.		
	N OF WORK	Includes attached garage.	1 1.51.00 1 1.4		
DEGGKII 110	N OI WORK	1,000 sq. ft. or less	171.00 4		
		Each add. 500 sq. ft. or portion Limited energy, residential	48.00		
		(with above sq. ft.)	110.00		
☐ PROPERTY OWNER	☐ TENANT	Limited energy, multi-family	110.00 2		
	_ ILIANI	residential (with above sq. ft.)			
Name:		Services or feeders installation			
Address:		200 amps or less 201 amps to 400 amps	110.00 2 165.00 2		
City/State/ZIP:		401 amps to 600 amps	219.50 2		
•		601 amps to 1,000 amps	329.00 2		
Phone:	Email:	Over 1,000 amps or volts	658.00 2		
Owner installation: This installation is being made or		or a member Temporary services or feeders	installation, alteration, and/or		
of my immediate family. This property is not intended fo 479.560(1).	r sale, exchange or rent. (ORS 4/9.540(1) a	Telocation	T 1		
Owner signature: Date:		200 amps or less	110.00 2		
☐ APPLICANT	☐ CONTACT PERSO	201 amps to 400 amps 401 amps to 599 amps	165.00 2 219.50 2		
		Branch circuits – new, alterati			
Business name:		A. Fee for branch circuits <i>with</i>	Jan, or entension, per paner		
Contact name:		above service or feeder fee,	9.75		
Address:		each branch circuit B. Fee for branch circuits	2		
		without service or feeder	110.00		
City/State/ZIP:		fee, first branch circuit	2		
Phone:		Each add'l branch circuit			
E-mail:		Miscellaneous (service or feede Each manufactured or modular	r not included)		
CONTRA	CTOP	dwelling, service, and/or feeder	116.25		
	0101	Reconnect only	110.00		
Business name:		Pump or irrigation circle	110.00 2		
Address:		Sign or outline lighting Signal circuit(s) or limited-	110.00 2		
City/State/ZIP:		energy panel, alteration, or	440.00		
Email:		extension. Describe:	110.00		
		Fach additional inspection over	er allowable in any of the above		
Phone:	CCB lic. no.:	Per inspection	110.00		
Electrical lic. no.:	City or metro lic.:	Investigation fee (See compliance)			
Supervising electrician		Other:			
signature, required:		ELECTRICAL	PERMIT FEES		
Print name: Date:			Subtotal		
Authorized		Plan review (25	Plan review (25% of permit fee)		
signature:		State surcharge (12	.% of permit fee)		
			L PERMIT FEE		
Print name:	Date:	This permit application exp	ires if a permit is not obtained		

within 180 days after it has been accepted as complete

^{*} Number of inspections allowed per permit. Revision 7/2020