

CONTRACTORS;

- □ You must 1st apply via Oregon e-permitting. Use any internet browser and search 'oregon building permits' or use this link; <u>https://aca.oregon.accela.com/oregon/</u>
 - If you've never used the program before, use the Contractor Resources found at the bottom of the ePermit webpage for HOW-TO tips and step-by-step instructions.
- \Box Be prepared to upload your plans into the e-permit record otherwise they can be upload later.

HOMEOWNERS;

- □ Please complete the "Building Permit Application" found in this packet.
- □ Also complete the "Property Owners Statement" found within this packet.

<u>PERMIT SUBMITTAL</u>; We do NOT offer electronic plan review at this time, therefore all the following items must be submitted to our office or mailed to City Hall for the plan review process;

- □ Completed Building Permit Application
- □ 2 sets of plans with Plan Submittal Intake Checklist
- □ Mechanical and Plumbing fixture fee worksheets
- □ City Code Compliance form initialed & signed
- □ Moisture Content Acknowledgment
- □ Oregon Residential Energy Additional Measures

□ Completed Subcontractors List (with license #'s)

- All contractors <u>must</u> have a valid State CCB# and a City of Scappoose business license.
- o Link to Scappoose Business Licenses; https://www.ci.scappoose.or.us/cityhall/page/business-licenses

Plan Review timeline; approx. 2-3 weeks if plan-set is complete. *Permit Issuance*; We will contact you when your permit is ready or if more detail is required. One set of APPROVED-STAMPED plans will be returned to you which will be required on the job-site for every inspection until final.

Energy Incentives can be found by visiting Energy Trust of Oregon; www.energytrust.org

ALL ELECTRICAL PERMITS ARE ISSUED BY COLUMBIA COUNTY LAND DEVELOPMENT IN ST. HELENS 503-397-1501. Contractors can apply via Oregon e-permitting.

Questions contact Elizabeth Happala at 503-543-7184 or email; ehappala@scappoose.gov

UILDING PERMIT APPLICATION B

CITY OF SCAPPOOSE 503.543.7184 PHYSICAL ADDRESS: 52610 NE 1st #120 MAILING ADDRESS: 33568 E. COLUMBIA AVE.

PLANNER:

APPLICATION DATE

ATTACH DETAILED PLOT PLAN

MAILING ADDRESS SCAPPC	: 33568 E. COLUME OOSE, OR 97056	SIA AVE.						EST LINE 503-543-3405
ADDRESS OF STRUCTURE			MAP TAX LOT NUMB	ER (required-cont	act Columbia County Ass			IT NUMBER
PROPERTY OWNER		MAIL ADDRESS	ana ana amin'ny soratra amin'ny fisiana		CITY - STATE - ZIP		l Pł	HONE
CONTRACTOR	1	MAIL ADDRESS		CITY - STAT	IE - ZIP	LIC. NO. (CCB/L	CB) Pł	HONE
TYPE OF CONST.	SIZE OF BLDG.	TOTAL SQ. FT.	1 st 2 nd	VALUATION O	WORK	GROUP	1	REQUIRED SETBACKS
COMMERCIAL	X	n	BASEMENT GARAGE				SIDE _	
			NG LOT SIZE	NELENAND GAMESPESSION AND AN		ZONING		
						PERMIT	FEES	
JOB DESCRIPTION:				-		RECEIP	T NO.	FEE
1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -				PLAN	CHECKING			•
CITY BUSINESS		anten a content a sugaranten de las sacas de las sacas de las sacas de las sacas de las secondas de las second		FIRE /	LIFE / SAFETY			9
LICENSE NO.				CONS	RUCTION			8
	NOTICE			STATE	BUILDING FEE			
THIS PERMIT BECOME AUTHORIZED IS NOT CO	DMMENCED WITHIN	180 DAYS, OR I	CONSTRUCTION		BING			•
OR WORK IS SUSPEND AT ANY TIME AFTER W			OD OF 180 DAYS	STATE	PLUMBING			٢
This permit is granted on In all respects, conform t	o the Ordinances of t	this jurisdiction,	including the	MECH	ANICAL			0
Zoning Ordinance, regula be revoked at any time u	ating the construction pon violation of any p	and use of bui provision of said	ldings, and may I Ordinances.	STATE	MECHANICAL			•
I further certify that, pursitime of application for bu	uant to ORS 701.055 ilding permit or pluml	i(8) I will preser bing permit a fu	it to the City at the Il and complete	SDC W	ATER			ê
list of names and registra covered under chapter 7	ation numbers of all s	ubcontractors a	and suppliers	SDC S	EWER			٢
Failure to submit the list withholding of the permit		d suppliers will	result in the	SDC S	TREETS			9
Failure to immediately no suppliers will result in the	otify the City of any cl			SDC P	ARKS			
under state and local sta		occupancy perm	in and penalities	SDC S	TORM			•
ALL SUBCONTRACTORS				CET S	CHOOL			•
The granting of a permit the provisions of any other				CET A	DMIN.			٢
performance of construct	tion.			WATER	R / SEWER			•
I hereby certify that I have same to be true and corr this work will be complied	ect. All provisions of	law and ordinar	nces governing	CONS	RUCTION WATE	ER		٥
this I agree to expressly	and unequivocally ca	II for and conse		INVES	TIGATION FEE			•
inspections deemed necessary by the building officials.			ENGIN	EER REVIEW			9	
SIGNATURE OF CONTRACTOR	OR AUTHORIZED AGENT		DATE	PLANN	IING DEPT. REVI	EW		6
SIGNATURE OF PROPERTY OV	WNER	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	DATE	-				. •
STAFF USE ONLY: (S	PECIAL CONDITION	NS AND REMA	RKS):	ISSUE	DATE:	тс	DTAL	

			90400000000000000000000000000000000000	******				
	₩₩₩₩₩₽₩₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽				5997-5995-9979-9979-9979-9979-9979-9979			
			APPROVED BY ALL					
BUILDING INSPECTOR:		D	ATE:	CITY ENG	GINEER:			DATE:

_____ DATE: _____ OFFICE ADMINISTRATOR: _____

		Resid	ential Plan				
ß	A DE COL	Subm	ittal Intake Checkl	ist		FOR DEPARTMENT USE ONLY	
ST2			SCAPPOOSE Buddress: 33568 E. Columbia Ave		epartment	Permit No.:	
```	1859	• 503-543	3-7184 • Fax:503-543-5679		Jose, OK 97050	Office:	
			ebuildingdept@cityofscappoose ww.ci.scappoose.or.us/building	org.			
			PROJECT	TYPE	& APPLICABLE CODE EDI	TION	
	🗌 Nev	v Single F	Samily Residence		Alteration/addition to existing detached <i>accessory structure</i>	□ Other:	
	Alte	eration/ad	ldition to existing residence		Deck		
	🗌 Nev	v, detache	ed accessory structure		Repair	ORSC Edition	
			MINIMAL SUBMITTAL	REQU	IREMENTS CHECKLIST FO	R PLAN REVIEW	
	Provided	N/A					
1.			Local Planning/Zoning, wate	er distric	t, erosion control, DEQ/septic/sev	ver approval.	
2.				n R106.2	. The plot plan checklist can be found	g structures on the site and distances from lot on the building page;	
3.	3.       Image: Two complete sets of Construction Documents. Construction documents must be of sufficient clarity to indicate the location, site specific design criteria per Table R301.2(1), nature and extent of the work proposed and show in detail conformity to the provisions of the code, relevant laws, ordinances, rules and regulations. Reference ORSC Section R106.1.1.						
4.			Foundation Plan. Provide pla reinforcement requirements ar	in dimens id founda	sions, footing sizes, posts, anchor b tion vent locations. Reference ORS	olts, hold-downs, associated details including SC Chapter 4.	
5.						size, location of smoke and carbon monoxide onies and decks that are 30 inches above grade.	
6.		<ul> <li>Cross section(s) and details. Show all framing members such as floor beams, headers, joists, sub-floor, wall construction, and roof construction. More than one cross section may be required to clearly portray construction. Show all wall and roof sheathing, roofing, roof slope, ceiling height, siding material, footings and foundation, stairs, fireplace construction, thermal insulation, etc. Reference ORSC Section R106.1.1.</li> </ul>					
7.					ncluding but not limited to floor an erence ORSC Section R106.1.1.	d roof eave and ridge elevations, opening	
8.			location and length of braced v and connections shall be incor	wall pane	ls, and associated connections to ro nto the plans. Reference ORSC Sec	plans showing braced wall lines, bracing method, oof, floor, and foundation. Lateral design details ctions R106.1.3, R602.10, R301.1.3. See for prescriptive wall bracing calculators)	
9.			members and supports, their s	izes, spac		g assembly that shows all structural framing ns, method of attachment (e.g. hardware), roof Chapter 8.	
10.			<b>Design Calculations.</b> Provide code. Reference ORSC Section			t are not based on prescriptive span tables in the	
11.					e design layout plan with truss deta e ORSC Sections R502.11 and R80	ails and calculations that have been stamped by 02.10.	
12.			Enhancement Measure and Co Enhancement Measure No. 6 i	nservations chosen,	on Measure chosen from Table N11	ficiency, identifying the additional Envelope 01.1(2) (when applicable). Where Envelope ee <u>https://www.oregon.gov/bcd/codes-</u> .). Reference ORSC Chapter 11.	

Note: This checklist must be completed in full before the plan review process will begin.



Receiving employee (print name):

Date: _____
Date: _____



#### Site/Plot plan must be accurately drawn to scale and show:

Lot and building setback dimensions

Property corner elevations (If there is more than a 4-foot elevation differential, the site plan must also show existing and proposed contour lines at 2 foot intervals. A separate Grading Plan may be required to legibly show grading changes.)

- Location and dimensions of easements and driveway
- **G** Footprint of proposed and existing structures (including decks)
- Dimension distances between structures and property
- □ Location of wells and/or septic systems
- Lot area
- □ North Arrow upper right corner
- □ Impervious area (structures, paving, roof overhangs, etc.)
- □ Any sensitive lands; floodplain, wetlands, and slopes >15%

Community Development Center 52610 NE 1st St. (Mailing: 33568 E. Columbia Ave.) Scappoose, OR 97056 503-543-7184 scappoosebuildingdept@cityofscappoose.org

□ Location of utilities and connections; storm and sanitary sewers, water, gas, etc., including size of service and street location

- □ Location of stormwater facility
- □ Surface drainage
- U Width of adjacent right of way, street name and curb height
- Landscape plans including street tree requirement
- □ Minimum scale is 1 inch = 10 feet
- □ Minimum paper size is 11 x 17 inches
- □ Allow sufficient white space for City approval stamps & notes

□ Any additional requirements specific to your site or project (if required, or additional requirements approved/agreed during the developments approval process.



## Sample Site Plan

A well-prepared Site Plan is one of the MOST IMPORTANT documents in your building permit submittal materials. ALL major review groups need to approve your site plan.

Site Plans must be clearly legible and reproducible. A complete and accurate Site Plan will help to speed your permit application reviews and reduce the need to send you notice for missing information or charge you additional review fees for missing data.

This sample drawing has been designed to help you prepare a complete Site Plan for your project. Make sure your Site Plan includes all the information on the Site Plan Checklist.

PLEASE NOTE: The sample site plan to the left is provided as a reference tool showing how and what must be included in your site plan.

This sample site plan is not to scale, nor is it the on the minimum paper size.

Your site plan must be to scale. Our required scale is minimum 1 inch = 10 feet. Minimum paper size is 11x17.

Site plans submitted to other departments for their application/review will not be used in lieu of missing site plans. A site plan must be submitted with construction documents for Building Dept. review approval.



#### 2023-2024 PLUMBING FEE CHECKLIST

## Permit# : _____

#### **JOBSITE:**

FIXTURE	COUNT	FEE	TOTAL		F
NEW HOME 1-BATH & 1-KITCHEN		\$485.00			Garbage disposa
NEW HOME 2-BATH & 1-KITCHEN		\$631.00			Hose bibbs (incl'd
NEW HOME 3-BATH & 1-KITCHEN		\$835.00			Ice maker (incl'd v
each add'l new bathroom or kitchen;		\$115.00			Interceptor/gre
Absorption valve		\$36.00			Manholes
Backflow preventer for irrigation		\$36.00			Primer
Backwater valve		\$36.00			Roof drain (com
Catch basin or area drain		\$36.00			Septic abandon County Sanitarian for
Clothes washer		\$36.00			Sink/basin/lava
Dishwasher		\$36.00			Stormwater rete
Drinking fountain		\$36.00			Stormwater det
Drywell		\$36.00			Stormwater faci
Leach line		\$36.00			Swimming pool
Trench drain		\$36.00			Tub/shower/sh
Ejectors/sump pump		\$36.00			Urinal
Expansion tank		\$36.00			Water closet/to
Firture con		\$36.00			Water heater in
Fixture cap		Ş30.00			potable water h
Fleer drain /fleer sink		ć20.00			MISC. FIXTURES
Floor drain/floor sink		\$36.00			ABOVE;
		¢20.00		1	MISC. FIXTURES
Hub drain		\$36.00			ABOVE;

FIXTURE	COUNT	FEE	TOTAL	FIXTURE	COUNT	Fee	TOTAL
NEW HOME 1-BATH & 1-KITCHEN		\$485.00		Garbage disposal		\$36.00	
NEW HOME 2-BATH & 1-KITCHEN		\$631.00		Hose bibbs (incl'd with new home)		\$36.00	
NEW HOME 3-BATH & 1-KITCHEN		\$835.00		Ice maker (incl'd with new home)		\$36.00	
each add'l new bathroom or kitchen;		\$115.00		Interceptor/grease trap		\$36.00	
Absorption valve		\$36.00		Manholes		\$36.00	
Backflow preventer for irrigation		\$36.00		Primer		\$36.00	
Backwater valve		\$36.00		Roof drain (commercial)		\$36.00	
Catch basin or area drain		\$36.00		Septic abandonment (contact Columbia County Sanitarian for add'l permits)		\$36.00	
Clothes washer		\$36.00		Sink/basin/lavatory		\$36.00	
Dishwasher		\$36.00		Stormwater retention		\$36.00	
Drinking fountain		\$36.00		Stormwater detention tank		\$36.00	
Drywell		\$36.00		Stormwater facility;		\$36.00	
Leach line		\$36.00		Swimming pool piping/connection		\$36.00	
Trench drain		\$36.00		Tub/shower/shower pan		\$36.00	
Ejectors/sump pump		\$36.00		Urinal		\$36.00	
Expansion tank		\$36.00		Water closet/toilet		\$36.00	
Fixture cap		\$36.00		Water heater including alternate potable water heating system		\$36.00	
Floor drain/floor sink		\$36.00		MISC. FIXTURES NOT LISTED ABOVE;		\$36.00	
Hub drain		\$36.00		MISC. FIXTURES NOT LISTED ABOVE;		\$36.00	
(NOTE; ANY CONNECTION TO CITY UTI	LITIES WIL	L REQUIR	E SYSTEM DE	VELOPMENT CHARGES)			

A. RESIDENTIAL 1 & 2 FAMILY DWELLINGS: New home construction; bathrooms includes one kitchen, first 100' of site utilities, hose bibs, icemakers, underfloor low-point drains and rain drain package including piping, gutters, downspouts & perimeter system.

Jownspouls & perimeter system.		
SPECIAL EQUIPMENT OR DRAIN/WASTE/VENT ALTERATION (DWV	\$75.00	
NEW 1 & 2 FAMILY HOME; 1-BATH & 1-KITCHEN (NOT counted above, in the yellow	\$485.00	
NEW 1 & 2 FAMILY HOME; 2-BATH & 1-KITCHEN (NOT counted above, in the yellow	\$631.00	
NEW 1 & 2 FAMILY HOME; 3-BATH & 1-KITCHEN (NOT counted above, in the yellow	\$835.00	
each add'l bath(s) or kitchen(s) <b>not counted above</b>	\$115.00	
WATER SERVICE; first 100 feet (New 1 & 2 Family Homes exluded	\$131.00	
Each Additional 100 feet, or part thereof	\$69.00	
SANITARY SEWER; first 100 feet (New 1 & 2 Family Homes exluded	\$131.00	
Each Additional 100 feet, or part thereof	\$69.00	
STORMWATER; first 100 feet (New 1 & 2 Family Homes exluded		
Each Additional 100 feet, or part thereof	\$69.00	
B. MANUFACTURED DWELLINGS & PREFABRICATED STRUCTURES: 918-050-0130  Any New Manufactured/PreFab connection to existing drain, sewer, storm & water ( <u>Excludes</u> 1st 30' of initial manufactured dwelling installation plus an prescriptive requirements of the Oregon Manufactured Dwelling & Park Specialty Code.)  Plumbing Connection for new Manufactured/PreFab Structure (includes 1st 30 feet of plumbing lines)	· · ·	that complies with the
Each Add'1 30' or part thereof for each Water, Sanitary and/or Storm Sewer lines		
C. PARKS FOR RV and MANUFACTURED DWELLINGS: OAR 918-600-0030	÷55.55	
Base fee (includes 5 or less spaces	\$403.00	
6+ spaces (base fee plus cost per spaces		
Structures & storm sewer systems (per fixture		
D. COMMERCIAL, INDUSTRIAL & DWELLINGS OTHER THAN 1 & 2 FAMILY: OAR 918-050-0100 (2a) ** Minor installation - use checklist above for all fixture including additions, remodels, alterations & repairs. Installing or altering a Sewer Wastewater Pretreatment System? (circle one	vos / no	
Installing of altering a Sewer Wastewater Pretreatment System? (circle one Installing or altering a Chemical Drain, Waste & Vent System? (circle one	yes / no yes / no	
Installing a potable Water Pressure Booster Pump System for Municipality Supplied Water? (circle one	yes / no	
Installing a Vacuum Drainage, Waste and Vent System? (circle one	yes / no	
Installing or Altering a Reclaimed Wastewater System? (circle one	yes / no	
WATER SERVICE; first 100 feet count as "1"		
Each Additional 100 feet, or part thereof		
SANITARY SEWER; first 100 feet count as "1"		
Each Additional 100 feet, or part thereof		
STORMWATER; first 100 feet count as "1"	\$731.00	
Each Additional 100 feet, or part thereof	\$75.00	
. MEDICAL GAS (fee based on installation cost, system equipment including inlets, outlets, fixtures & appliances)		
Mimimum Permit Fee \$133.00	TOTAL:	
	Plan Review (35%)	
	State Fee (12%)	
-	Fotal Amount Due	
	Amt. Already Paid;	



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2023-2024 MECHANICAL PERMIT FEE CHECKLIST		<u>COUNT</u> EACH	<u>TOTAL</u>
A. RESIDENTIAL: Unless otherwise noted, fees apply to both gas & electric appliance related equipment including piping. (Minimum permit fee \$133.00)	ces for inslla	tion, repairs, alte	erations and
THE PRIMARY FUEL SOURCE IS: Also list any see	condary fu	el;	
HEATING & COOLING:			
Air Conditioning	\$16.00		
Air Handler, up to 10,000 cfm	\$16.00		
Air Handler, over 10,000 cfm	\$16.00		
Evaporative cooler other than portable Cadet Heaters; count only (no mechanical fee, electrical permit required)	\$16.00 \$16.00		
Fireplace/insert, gas or wood	\$16.00		
Floor funace, including vent	\$16.00		
Furnace/Burner including duct work/vent/liner	\$16.00		
Furnace, up to 100,000 BTU	\$16.00		
Furnace, over 100,000 BTU	\$16.00		
Heat Pump	\$16.00		
Hydronic hot water system	\$16.00		
Mini split system - must also list add'l heat source; Repair, alteration or addition to any mechanical appliance including install controls	\$16.00 \$16.00		
Repair, alteration or addition to any mechanical appliance including install controls Heater, suspended, recessed wall or floor mount	\$16.00		
Nood/Pellet Stove	\$16.00		
Dther heating/cooling not listed above but regulated;	\$16.00		
OTHER FUEL APPLICANCES:			
BBQ line	\$16.00		
Chimney/liner/flue/vent	\$16.00		
Fireplace, decorative	\$16.00		
Gas or Wood Fireplace/insert	\$16.00		
incinerator, domestic; install or relocation	\$16.00		
Generators, oil tank/gas diesel	\$16.00		
Pool/spa heater, kiln Propane Insert	\$16.00 \$16.00		
Range/Cook Top; gas (if electric then no mechanical permit required)	\$16.00		
Nater Heater; gas/hydronic (Plumbing permit also required for all types.)	\$16.00		
Nood/Pellet Stove	\$16.00		
Misc. gas lines/outlets not listed above;	\$16.00		
Other fuel applicances not listed above;	\$16.00		
ENVIRONMENTAL EXHAUST & VENTILATION:			
Applicance vent; installation, relocation or replacement not previously counted	\$16.00		
Attic/crawl space fan	\$16.00		
Chimney/liner/flue/vent	\$16.00		
Clothes Dryer Vent/exhaust	\$16.00		
Ductwork- no appliance/fixture	\$16.00		
Flue vent for water heater or gas fireplace Hood & ducts served by mechanical exhaust	\$16.00 \$16.00		
Radon Mitigation	\$16.00		
Range Hood/Vent	\$16.00		
/ent Fan; bath/laundry/attic/ect. (not apart of heating or cooling)	\$16.00		
/entilation system misc. (not apart of heating or cooling)	\$16.00		
Other environmental exhaust & ventilation;	\$16.00		
<u>TOTAL FUEL COUNT (REQUIRED)</u>			
Gas Fuel piping outlets: (count each one)	\$16.00		
Gas Pressure Test, each:	\$16.00		
B. COMMERCIAL, INDUSTRIAL & DWELLINGS OTHER THAN 1 & 2 F	AMILY:		
Mechanical fee shall be calculated based on the value of the equipment and installation costs, ncluding contractor's profit. <b>BID VALUE: \$</b>		uctural Fee ation (I.A.)	
PLAN REVIEW FEE:	cuiculo	NOTES:	
	250/ of m		
Mechanical Plan Review Fee		echanical fee	
Additional plan review required by changes, additions or revision to approved plans		r. (min. 1 hr.)	
MECHANICAL PERMIT FEE	• •	3.00 Minimum)	
PLAN CHECKING FEE	35% of	mech. permit	
STATE SURCHARGE	12% of	mech. permit	



### 2023-2024 Scappoose Code Compliance

#### **Project/Address:**

Scappoose, OR 97056

#### Subdivision Name & Lot#:_

### Building e-permit record #:759-

#### Applicant/Owner please initial each item then sign below:

#### IRC SECTION P2908 & CITY CODE ORDINANCE 748

The property owner is responsible for supplying, installing and maintaining a pressure reducer valve. The valve shall be installed on the owner's side of the water meter. (*Call Public Works for exceptions; 503-543-8404 or email;* dsukau@cityofscappoose.org)

#### ___ CITY ORDINANCE 13.04 & 13.12; https://www.ci.scappoose.or.us/municipalcode

The water line & sewer service line are the responsibility of the property owner;

- Water responsibility begins at the water-meter. New water line connections, where applicable, the Public Works crew will perform water main taps & run the new lateral from the main to the new meter. ALL CITY WATER MUST PASS THROUGH A CITY WATER METERS. NO UN-METERED WATER USE IS ALLOWED.
- Sewer responsibility beings at the sewer main. New sewer line connections, where applicable, the Public Works crew will perform sewer main taps once the contractor as exposed & shored the sewer main.

Once the tap(s) are complete; it's the property owner's responsibility to finish the lateral and backfill/patch per City's Public Works Design Standards. Any construction, maintenance, or repairs to service lines or meters shall be the responsibility of the property owner which includes all damages to street paving, curbs, sidewalks ect. https://www.ci.scappoose.or.us/engineering

#### _ CITY ORDINANCE 709 & 859; Municipal Code 9.12 (rvs. 11-7-2016)

Work hours within the city limits are as follows:

Mon–Fri. 7am-7pm Sat. 9am-4pm Sun. & Holidays No work allowed

(Any exceptions to this rule must be made **in advance** with City Council Approval)

#### ORSC; Oregon Residential Specialty Code, Section R318.2

Before final occupancy will be approved the contractor must submit the certification of moisture content, per ORSC R318.2. The approved from is on the city's website; https://www.ci.scappoose.or.us/building/page/application-permit-info-page

APPLICANTS/OWNERS SIGNATURE	
PRINTED NAME:	Date:
COMPANY NAME:	
PHONE:	



# Moisture Content Acknowledgment Form

**CITY OF SCAPPOOSE BUILDING DEPARTMENT** Mailing address: 33568 E. Columbia Ave., Scappoose, OR 97056 Phone: 503-543-7184 • Fax: 503-543-5679 email: scappoosebuildingdept@scappoose.gov



#### You must submit this form to Building Codes Division before issuance of the Certificate of Occupancy.

I,	,	am the general contractor or the owner/builder at the
following address:		
Street address:		
If applicable:		and/or map and tax lot:
I am not ORSC S [Section Sect requ	ifying the building official that I a bection R318.2 and have taken ste R318.2 is provided for reference tion R318.2 Moisture content. Prior hired by R109.1.5.2 of this code:	r to issuance of the insulation/vapor barrier approval
(A)		ng members used in construction shall have a moisture t of the weight of dry wood framing members.
(B)	The general contractor or the owne building official on a division-appr	r who was issued the structural permit shall notify the oved form that the contractor or the owner who was e of and has taken steps to meet the requirement in
	Signature:	
	Date:	





#### **Residential Energy Additional Measure Selection**

**CITY OF SCAPPOOSE BUILDING DEPARTMENT** Mailing address: 33568 E. Columbia Ave., Scappoose, OR 97056 Phone: 503-543-7184 • Fax: 503-543-5679 email: scappoosebuildingdept@scappoose.gov Estimate the energy consumption by using The Zero Code Energy Calculator: https://zero-code.org/energy-calculator/



		RESIDENTIAL	INF	ORMATION			
Date:			Bu	ilding permit number:			
Owner	r's na	me:					
Job ad	ldress	:					
City: State: ZIP:							
		INSTRU	СТІ	ONS			
measu	res ac	ype of construction. If the project is an addition, s ccordingly; print and sign your name. Submit this old until the required information is provided.					
		<b>construction.</b> All conditioned spaces within resident of the state of the space of the state of the space of	enti	al buildings shall comply wi	th Table N1101.1(1) and one		
	<ul> <li>Additions. Additions to existing buildings or structures may be made without making the entire building or structure comply if the new additions comply with the requirements of this chapter. [See ORSC Section N1101.3]</li> <li>Large additions. Additions that are equal to or more than 600 square feet in area are required to select one measure from Table N1101.1(2). Enter the selected Table N1101.1(2) additional measure</li> <li>Small additions. Additions that are less than 600 square feet in area are required to select one measure from Table N1101.1(2) or select one measure from Table N1101.1(2) additional measure</li> </ul>						
	<ul> <li>Exception: Additions that are less than 225 square feet in area are not required to comply with Table N1101.1(2) or Table N1101.3.</li> <li>For reference Tables N1101.1(2) and N1101.3 are included in this form below.</li> </ul>						
	<i>Note:</i> Depending on the additional measure you have selected, there may be sub-options that you will have to specify. Check the appropriate box, if provided.						
Applic	cant's	printed name: Applica	nt's	signature:			



		TABLE N1101.1(2) – ADDITIONAL MEASURES
		HIGH-EFFICIENCY HVAC SYSTEM ^a
	1	a. Gas-fired furnace or boiler AFUE 94 percent, or
	1	b. Air-source heat pump HSPF 10.0/14.0 SEER cooling, or
		c. Ground-source heat pump COP 3.5 or Energy Star rated
		HIGH-EFFICIENCY WATER HEATING SYSTEM
	•	a. Natural gas/propane water heater with minimum UEF 0.90, or
	2	b. Electric heat pump water heater with minimum 2.0 COP, or
		c. Natural gas/propane tankless/instantaneous heater with minimum 0.80 UEF and Drain Water Heat Recovery Unit installed on minimum of one shower/tub-shower
		WALL INSULATION UPGRADE
	3	Exterior walls—U-0.045/R-21 conventional framing with R-5.0 continuous insulation
		ADVANCED ENVELOPE
	4	Windows—U-0.21 (Area weighted average), and Flat ceiling ^b —U-0.017/R-60, and
		Framed floors—U-0.026/R-38 or slab edge insulation to F-0.48 or less (R-10 for 48"; R-15 for 36" or R-5 fully
		insulated slab)
		DUCTLESS HEAT PUMP
	5	For dwelling units with all-electric heat, provide:
	5	Ductless heat pump of minimum HSPF 10 in primary zone replaces zonal electric heat sources, and
		programmable thermostat for all heaters in bedrooms
	6	HIGH EFFICIENCY THERMAL ENVELOPE UA ^c
		Proposed UA is 8 percent lower than the code UA
	7	GLAZING AREA
		Glazing area, measured as the total of framed openings is less than 12 percent of conditioned floor area
		3 ACH AIR LEAKAGE CONTROL AND EFFICIENT VENTILATION
	8	Achieve a maximum of 3.0 ACH50 whole-house air leakage when third-party tested and provide a whole-house ventilation system including heat recovery with a minimum sensible heat recovery efficiency of not less than 66
		percent.
For SI:	1 sauare	$e \text{ foot} = 0.093 \text{ m}^2$ , 1 watt per square foot = 10.8 W/m ² .
	-	located within the building thermal envelope shall have sealed combustion air installed. Combustion air shall be ducted directly
fror	n the ou	tdoors.

- b. The maximum vaulted ceiling surface area shall not be greater than 50 percent of the total heated space floor area unless vaulted area has a *U*-factor no greater than U-0.026.
- c. In accordance with Table N1104.1(1), the Proposed UA total of the Proposed Alternative Design shall be a minimum of 8 percent less than the Code UA total of the Standard Base Case.

	TABLE N1101.3 – SMALL-ADDITION ADDITIONAL MEASURES (SELECT ONE)
1	Increase the ceiling insulation of the existing portion of the home as specified in Table N1101.2.
2	Replace all existing single-pane wood or aluminum windows to the U-factor as specified in Table N1101.2
3	Insulate the existing floor, crawl space, or basement wall systems as specified in Table N1101.2 and install 100 percent of permanently installed lighting fixtures as CFL, LED, or linear fluorescent, or a minimum efficacy of 40 lumens per watt as specified in Section N1107.2.
4	Test the entire dwelling with a blower door and exhibit no more than 4.5 air changes per hour @ 50 Pascals.
5	Seal and performance test the duct system.
6	Replace existing 80-percent AFUE or less gas furnace with a 92-percent AFUE or greater system.
7	Replace existing electric radiant space heaters with a ductless mini split system with a minimum HSPF of 10.0.
8	Replace existing electric forced air furnace with an air source heat pump with a minimum HSPF of 9.5.
9	Replace existing water heater with a water heater meeting: Natural gas/propane water heater with minimum UEF 0.90, or Electric heat pump water heater with minimum 2.0 COP.



#### SUBCONTRACTORS LIST

All contractors working in the City Limits are required to have a City of Scappoose Business License. All licenses are valid from Jan. 1- Dec.31. Contact City Hall @ 503-543-7146 for an application/renewal. Or visit: <u>HTTP://www.scappoose.gov/cityhall</u> Scappoose is NOT within Portland-Metro coverage area.

TYPE OF <u>WORK</u>

**SUBCONTRACTOR** 

State CCB LICENSE # &

CITY BIZ. LICENSE #

(both state and city are required)

EXCAVATION		
FOUNDATION		
PLUMBING		
FRAMING		
ROOFING	 	
GARAGE DOORS		
SHEET METAL	 	
HEATING		
INSULATION		
ELECTRICAL	 	
SHEETROCK		
UNDERLAYMENT		
FINISH CARPENTRY	 	
CABINETS		
MASONRY		
PAINTING		
LINO/CARPET		
FLAT CONCRETE		
LANDSCAPING		
OTHERS		
·	 	
·	 	
MANUFACTURED HOME		
SET-UP		
SKIRTING		

IF MORE SPACE IS NEEDED, USE THE BACK SIDE OF THIS PAGE.