



Building Permit Application
City of Portland, Oregon - Bureau of Development Services

1900 SW 4th Avenue, Portland, Oregon 97201 • 503-823-7310 • TTY 503-823-6868 • www.portlandoregon.gov/bds

12-202651-RS

Type of work

New construction Addition/alteration/replacement
 Demolition Other:

Category of construction

1 & 2 family dwelling Commercial/industrial Accessory building
 Multifamily Master builder Other:

Job site information and location

Job no.: Job address: 10127 SW 59TH PL.
 City/State/ZIP: PORTLAND, OR 97219
 Suite/bldg./apt. no.: Project name: HANSON REMODEL
 Cross street/directions to job site: 62ND & TAYLORS FERRY RD.
 LAURADALE LANE
 Subdivision: SEPTEMBER HILLS Lot no. 9 Tax map/parcel no. 170

Description of work

DEMOLITION OF 2ND FLOOR, GARAGE ROOF.
 ADD BONUS ROOM, GAR ROOF. INTERIOR FRAMING
 ELECTRICAL / PLUMBING. REWIRE & ROUGH IN.

Reference RS / Combination Permit no.

Property owner **Tenant**

Name: JOHN & PEGGY HANSON
 Address: 10127 SW 59TH PL.
 City/State/ZIP: PORTLAND, OR 97219
 Phone: 971.563.1719 FAX:

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: John M. Hanson Date: 11/6/12

Contractor

Business name: SLADEBUILT NORTHWEST, LLC
 Address: 7316 SW 33RD AVE.
 City/State/ZIP: PORTLAND, OR 97219
 Phone: 971.563.1407 FAX:
 CCB lic. no. 194341

Authorized signature: [Signature]

Print name: NICK SLADE Date: 11.6.12

Applicant **Contact Person**

Business name: SLADEBUILT NORTHWEST, LLC
 Contact name: NICK SLADE
 Address: 7316 SW 33RD AVE
 City/State/ZIP: PORTLAND, OR 97219
 Phone: 971.563.1407 FAX:
 E-mail: nick@sladebuilt.com

Authorized signature: [Signature]

Print name: NICK SLADE Date: 11.6.12

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

Office Use Only

Permit no:
 Date received:
 By:

Required Data: One and Two Family Dwelling

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

Valuation:	109,000
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

Required Data: Commercial Use

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

Valuation:	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups	
Existing:	
New:	

Notice

All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply.

Statement of Fact: I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of fact (whether intentional or not) in this application or any other required document, as well as any misleading statement or omission, may be cause for revocation of permit and/or certificate of occupancy, regardless of how or when discovered.

Building Permit Fees*

Please refer to fee schedule

Fees due upon application	
Amount received	
Date received	

Sub-contractor information can be faxed to 503-823-7693.

Life Safety Checksheet Response

Permit #: 12-202651-000-00-RS

Date: 12.13.12

Customer name and phone number: NICK SLADE 971.563.1407

Note: In the spaces below, please provide specific information concerning the changes that you have made in response to the checksheet. Note the checksheet item number, your response or a description of the revision, and the location of the change on the plans (i.e. page number and/or detail number). Use as many lines as needed. If the item is not in response to a checksheet, write "Applicant" in the column labeled "Checksheet item number."

Checksheet item number	Description of changes, corrections, additions, etc.	Location on plans
1 ✓	SEE SECTION NOTE #6	PAGE 6
2 NO	SEE SECTION NOTE #4 TABLE	PAGE 6
3 ✓	PER REDLINE	PAGE 3 & 4
4 NO	SEE ENGINEERS LETTER DATED 12.7.12	ATTACHED
12/17/2012		
[Signature]		
L/S		
RECEIVED		
DEC 13 2012		
City of Portland		
BDS - Document Services		
GAIL K.		

Plan Bin Location: 51