



# City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue • Portland, Oregon 97201 | 503-823-7300 | [www.portlandoregon.gov/bds](http://www.portlandoregon.gov/bds)



## Permit Revision Submittal Requirements and Application

A Permit Revision is required when there are proposed changes to the project after the permit has been issued. This may arise due to discrepancies between the city-approved permit drawings and actual field conditions, or the customer has changed their mind about an aspect of the project. In all cases, a revision to the existing permit must be submitted, reviewed and approved.

### Applicants will provide:

☒ A copy of this application

☒ Three (3) sets of plans that clearly reflect the proposed change(s).

Drawings and calculations must be stamped and signed by the Architect and/or the Engineer of Record, if applicable.

☒ One (1) copy of the original city approved permit drawings. (NOTE: If your project has an assigned process manager please contact them regarding submittal of the revision).

☐ Two (2) sets of calculations, if applicable

☐ Inspector's correction notice, if revision is due to an inspection correction

☒ Revision fee (paid at time of submittal)

### Contact Information:

Contact name MIKE COYLE/FASTER PERMITS

Address 14334 NW FREEDRIDGE LN

City PD State OR Zip Code 97229

Phone 503 680-5497 Email MIKE@FASTERPERMITS.COM

Value of proposed revision \$15,000 Issued permit # 16-212152-CO

Job site address 4814 NE 107th Ave.

Description of revision Add demising walls to create Vault, Mixing, CO2 Extraction and Compressor rooms. Revise rated assemblies at BOH Extraction room.

### Fees:

The Permit Revisions are subject to fees associated with plan review, processing and any increase in project value. Additional fees may apply if adding plumbing fixtures.

The Bureau of Development Services fee schedule is available under the fees tab on the BDS web site at: [www.portlandoregon.gov/bds](http://www.portlandoregon.gov/bds). Fees are updated annually on July 1st.

### Helpful Information:

**Bureau of Development Services**  
City of Portland, Oregon  
1900 SW 4th Avenue, Portland, OR 97201  
[www.portlandoregon.gov/bds](http://www.portlandoregon.gov/bds)

### Submit your plans in person to:

Development Services Center (DSC), First Floor,  
For Hours Call 503-823-7310

### Important Telephone Numbers:

BDS main number .....503-823-7300  
DSC automated information line .....503-823-7310  
Building code information .....503-823-1456  
BDS 24 hour inspection request line .....503-823-7000  
Residential information for  
one and two family dwelling .....503-823-7388  
General Permit Processing and  
Fee Estimate info .....503-823-7357  
City of Portland TTY .....503-823-6868



napu2i L.HOL


Plan Bin Location: 52 CO W/APPROVED SET APOT

# Joe Thornton

## Fire Safety Plan Review Checksheet Response

RECEIVED  
DEC 27 2017

Permit #: 16-212152-REV-01-CO

Date: \_\_\_\_\_ FDS

Customer name and phone number: Milke Coyle 503-680-5497

DOCUMENT SERVICES

Note: Please number each change in the '#' column. Use as many lines as necessary to describe your changes. Indicate which reviewer's checksheet you are responding to and the item your change addresses. If the item is not in response to a checksheet, write **customer** in the last column.

#	Description of changes, revisions, additions, etc.	Checksheet and item #
1	Scope of work has been revised. There are 2 new rooms proposed, one mixing room, and one for CO2 extraction, see Item #4.	CS #2 / 1
2	N/A	CS #2 / 2
3	<p><u>2016-212167-000-00-MT</u>: NEW VENTILATION AND ROOM TEMPERATURE CONTROL; EXTRACTION SYSTEM MACHINERY AND BACK UP POWER SUPPLY. BUTANE AND CO2 MONITORING SYSTEM. ROOM EXHAUSTS. SUSPENDED AIR HANDLING UNIT. *****16-212152-CO*****</p> <p><u>2016-279625-000-00-MT</u>: INSTALL NEW GASLINE FROM METER TO WATER HEATER. 2 LBS GAS PRESSURE 3/4" GAS LINE AT 200 FOOT. INSTALL AIR COOLED CONDENSING UNIT ON EAST ELEVATION. SEE 16-212167-MT FOR MONITORING AND</p> <p><u>2016-212167-REV-01-MT</u>: REVISION TO CHANGE All MECHANICAL PLANS PER CODE CHANGE. NEW VENTILATION AND ROOM TEMPERATURE CONTROL; EXTRACTION SYSTEM MACHINERY AND BACK UP POWER SUPPLY. CO2 &amp; BUTANE MONITORING SYSTEM. COMPRESSED AIR ROOM EXHAUST AND MONITORING SYSTEM. SUSPENDED AIR HANDLING UNIT. EXISTING (4) 5 TON ROOF TOP UNITS.</p>	CS #2 / 3
4	<p>There are 2 new rooms in the revised scope of work, a CO2 extraction room, and a mixing room.</p> <p>"Co2 Extraction Room 119" signifies the operation of a 45L Vitalis CO2 extraction machine. Except for the operation of this machine, no other processes occur in this room. This machine is ASME certified, National Board registered, and has undergone 3rd party certification in Oregon - see attached PSI Engineering Peer Review Report. In addition, all electrical components are UL listed. This room is equipped with 1 CFM continuous ventilation and Co2 gas detection sensor with audio and visual alarm.</p> <p>"Mixing Room 113" signifies the operations of dissolving cannabis oil in ethanol, filtering the oil and ethanol mixture and then recovering the ethanol in a rotary evaporator. Minimal to no ethanol vapor is released during this process. All containers containing ethanol are closed except when transferring fluids from one container to another. Room is equipped with 1 CFM continuous ventilation and ethanol vapor sensor with audio/visual alarm and sprinkler system.</p>	CS #2 / 4
5	N/A	CS #2 / 5
6	Fire code note #6 is not applicable and has been removed.	CS #2 / 6

7	The standby generator is not existing and intended to be installed under permit 16-212167-REV-01-MT. The note has been changed to reflect that it is new.	CS #2 / 7

---

(for office use only)

## Life Safety Checksheet Response

Permit #: 16-212152-REV-01-CO

Date: 12/27/2017

Customer name and phone number: Mike Coyle 503-680-5497

*Note:* In the spaces below, please provide specific information concerning the changes that you have made in response to the checklist. Note the checklist 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 checklist, write “**Applicant**” in the column labeled “Checksheet item number.”*

[illegible]

Plan Bin Location: 52 CO - W/APPROVED SET - \* \* \* APOT \* \* \*