Demolition Permit Application

City of Happy Valley 16000 SE Misty Drive Happy Valley, OR 97086 Phone (503) 783-3800 Fax (503) 658-5214 IVR 24 Hour Inspection Request Line (888) 299-2821 Schedule Online: <u>www.oregon-epermitting.info</u> (Same day inspections /cancellations must be in by 7:00am) <u>www.happyvalleyor.gov</u>



| DEMOLITION APPLICATION | | |
|--|--|--|
| Development (over 1 acre) | Existing Commercial / Industrial Structure | |
| Existing Residential Single Lot | High Density Residential | |
| DEMOLITION SITE INFORMATION AND LOCATION | | |
| Demolition Site Address: | | |
| City/State/ZIP: | | |
| Suite/Bldg./Apt. No.: | Project Name: | |
| Cross Street: | | |
| Subdivision: | Lot No.: | |
| Tax Map/Parcel No.: | | |
| DESCRIPTION OF WORK | | |
| | | |
| | | |
| | | |
| Erosion Control Required: | Yes No | |
| Disposal Site: | | |
| PROPERTY OWNER | | |
| Name: | | |
| Address: | | |
| City/State/ZIP: | | |
| E-Mail Address: | | |
| Phone: | Fax: | |
| | CONTACT PERSON | |
| Business Name: | | |
| Contact Name (print): | | |
| Address: | | |
| City/State/ZIP: | | |
| Phone: | Fax: | |
| E-Mail: | | |
| DEMOLITION CONTRACTOR | | |
| Business Name: | | |
| Address: | | |
| City/State/ZIP: | | |
| Contact Persons Signature: | | |
| Contact Person (print name): | | |
| Contact Phone: | Fax: | |
| E-mail: | CCB lic.: | |

| DEMOLITION REQUIREMENTS | | |
|--|---|--|
| 1. | Submit a site plan indicating the location of all | |
| | structures to be removed. Scale 1:50 | |
| 2. | The owner of record is responsible for the | |
| | complete removal and completions of the | |
| | required sewer, water, electrical and gas | |
| | disconnects. | |
| 3. | Private sewer line connections to the public sewer must be disconnected and capped, with | |
| | a City inspection prior to the covering of the | |
| | trench. | |
| 4. | Water meters must be removed by the water | |
| | district. (Provide documentation) | |
| 5. | Private sewage disposal systems must be | |
| | decommissioned per County and State | |
| | requirements. (Pump receipt required) | |
| 6. | Private well systems must decommission per | |
| | County and State requirements. | |
| _ | (Provide documentation) | |
| 7. | Letter stating there are no hazardous | |
| | materials at the site or contained within the | |
| 0 | structures. | |
| 8. | Commercial / Industrial, and High Density Residential (more than four residential units) | |
| | require an Asbestos site survey conducted by | |
| | an accredited inspector. In addition to the copy | |
| | of the inspection, to be kept on site per DEQ, | |
| | submit a copy to the City of Happy Valley. | |
| 9. | Inspections: Initial full site inspection with the | |
|). | owner or their representative. At least one | |
| | inspection during the course of the demolition. | |
| | A final inspection to verify that the demolition | |
| | was per the permit requirements, and no | |
| | deficient items remain to be done. | |
| NOTICE | | |
| I HAVE READ & COMPLETED THE ABOVE LISTED | | |
| REQUIREMENTS. DOCUMENTATION IS ATTACHED | | |
| | | |
| Authorize | d | |
| Signature: | | |
| Print Nam | e: | |
| Contact P | hone: | |
| Date: | | |
| Dute. | DEMOLITION PERMIT FEES* | |
| | | |
| | Please refer to fee schedule | |
| Fee For Demo Permit \$110.00 | | |
| Fee for Sewer/Septic Disconnect \$30.00 | | |
| State Surcharge (12%) | | |
| Total Fee | | |
| Date Rece | vived: By: | |

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete **Revised 6/7/16**