

# Building Permit Application

## City of Happy Valley

16000 SE Misty Drive, Happy Valley, OR 97086

Phone (503) 783-3800

Schedule Online: [hvworks.com](http://hvworks.com)

(Inspections/cancellations must be made by 6:00am)

Email: [permits@happyvalleyor.gov](mailto:permits@happyvalleyor.gov)



| TYPE OF WORK  |   |
|---|---|
| New Construction<br>Demolition  | Addition/Alteration/Replacement<br>Other:   |
| CATEGORY OF CONSTRUCTION  |   |
| 1 & 2 Family Dwelling<br>Multi-Family   | Commercial/Industrial<br>Tenant Improvement |
| Accessory Building<br>Other:  |   |
| JOB SITE INFORMATION AND LOCATION   |   |
| Job Site Address:   |   |
| City/State/ZIP:   | Suite/Bldg./Apt. No.:                       |
| Subdivision or Project Name:  |   |
| Lot # or Tax Map/Parcel #:  |   |
| DESCRIPTION OF WORK   |   |
|   |   |
| PROPERTY OWNER  |   |
| Name:   |   |
| Address:  |   |
| City/State/ZIP:   |   |
| Phone: (    )   | E-mail:                                     |
| <b>Home Owner Installation:</b> This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange. (ORS 447, 455, 479, 670, 701) |   |
| Owner Signature: _____ Date: _____  |   |
| APPLICANT / CONTACT PERSON  |   |
| Name:   |   |
| Address:  |   |
| City/State/ZIP:   |   |
| Phone:  |   |
| E-mail:   |   |
|   |   |
| CONTRACTOR  |   |
| Business Name:  |   |
| Address:  |   |
| City/State/ZIP:   |   |
| Phone: (    )   |   |
| CCB License:  | City or Metro License:                      |
| E-mail:   |   |
| Authorized Signature: _____ Date: _____   |   |
| Print Name: _____   |   |

| REQUIRED DATA: 1 & 2 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. \$ _____   |  |
| # of Bedrooms:   | # of Baths:      # of Floors:                    |
| New dwelling area  | sf x 165.67=                                     |
| Garage/Carport area:   | sf x 64.19=                                      |
| Deck area:   | sf x 32.10=                                      |
| Unfin. Bsmt./Storage:  | sf x 31.50=                                      |
| Other Structure:   | sf x      =                                      |
| <b>Total Valuation</b> (Feb 2024 ICC \$/sf values)=  |  |
| REQUIRED DATA: COMMERCIAL  |  |
| 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 (Feb. 2024 ICC =\$/sf)   |  |
| Exist. bldg area:  | sf      New building area:      sf               |
| Number of stories:   | Type of construction:                            |
| Occupancy: 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: |  |
| BUILDING PERMIT FEES   |  |
| Refer to Happy Valley fee schedule for other fees & permits  |  |
| <b>Valuation</b>   | <b>Permit Fee</b>                                |
| \$1 - \$4,000  | \$98.42 Minimum                                  |
| \$4,001 - \$25,000   | \$98.42 plus \$12.65 per \$1000 over \$4,000     |
| \$25,001 - \$50,000  | \$364.07 plus \$9.41 per \$1000 over \$25,000    |
| \$50,001 - \$100,000   | \$599.32 plus \$6.33 per \$1000 over \$50,000    |
| \$100,001 and up   | \$915.82 plus \$5.30 per \$1000 over \$100,000   |
| Permit Fee.....  | (\$98.42 minimum)                                |
| Plan Review.....   | (65% of Permit Fee)                              |
| FLS Plan Review.....   | (40% of Permit Fee)<br>(Commercial Permits Only) |
| State Surcharge.....   | (12% of Permit Fee)                              |
| Metro Excise Tax.....  | (.0012 x valuation)                              |
| School Tax(\$1.63 x sf residential, \$.82 x sf com)  |  |
| TOTAL BUILDING PERMIT FEE  |  |
| Plan Review Deposit:   |  |
| Check#   | Date:  |

**This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete**  
Rev. 9.17.2024