



**City of Sisters**  
 520 E Cascade Ave. / PO Box 39  
 Sisters, OR 97759  
 (541) 549-6022 For general information  
 www.ci.sisters.or.us

**Building Permit  
 APPLICATION**

\*\*\*COMPLETE ALL HIGHLIGHTED AREAS\*\*\*

<b>PERMIT APPLICATION</b>				<b>PERMIT NUMBER:</b>			
TAX LOT						City Bus. Lic.	
Job Address							
Owner		Mail Address			Phone		
Contractor		Mail Address			Phone		License No.
Architect or Engineer		Mail Address			Phone		License No.
<b>Class of Work:</b> New      Addition      Alteration      Demolish      Other _____							
<b>WORK HOURS 7 a.m. TO 10 p.m. STRICTLY ENFORCED</b>				<b>PUBLIC WORKS/ENGINEERING</b>			
Describe Work:				Easements/Row:			
				Wtr. Mtr:      Size              Tap              B'flowX-conn.			
				Sewer:              Special Permit/Monitoring              Tap			
				Streets/Sidewalks/Curbs			
Special Conditions:				Comments:			
Type of Construction		Bldg.(total)SqFt.	Occupancy Group	No.of Stories		Approved by:                      Date:	
Max Occ Load		# Dwelling Units	Total Height	Roof Pitch		<b>PLANNING</b>	
Plans Checked By		Date		Use Zone                      Site & Design Review			
Approved for Issuance By		Date		Minimum Building Setbacks From Property Line:			
				Front=              Front/Side=              Side=              Rear=			
<b>VALUATION OF WORK:</b>				No. of Offstreet Parking Spaces Required=			
				Special Conditions:			
<b>Total Valuation:</b>				Approved by:                      Date:			
<b>FEES</b>				<b>CALL 323-5202 FOR INSPECTION.</b> <b>This is an equal opportunity provider.</b> <b>For TTY service dial 711.</b>			
A. Structural Permit		\$					
B. Plumbing Permit		\$					
C. Mechanical permit		\$					
D. 12% State Surcharge of lines A, B, & C		\$					
E. Plan Check Fee		\$					
F. Prepaid Plan Check Fee		\$ (      )					
G. Additional Fees:		\$					
Site Suitability Res. (125.00) Comm. (300.00)		\$					
Transportation Systems Development Charge (1,016)		\$					
Park Systems Development Charge (613)		\$					
Sewer Systems Development Charge*		\$					
Water Systems Development Charge*		\$					
*see attached calculation sheets				<b>NOTICE</b> This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.			
<b>TOTAL</b>		\$					

**COMMERCIAL WATER  
SYSTEM DEVELOPMENT CHARGE CALCULATION SHEET**

WATER SUPPLY FIXTURE UNITS (WSFU)  
(TABLE 6-4) OF THE  
OREGON SPECIALTY PLUMBING CODE

<b>FIXTURES</b>	<b># OF FIXTURES</b>	<b>X</b>	<b>PUBLIC FIXTURE UNITS</b>	<b>ASSEMBLY*</b>	<b>TOTAL PFU</b>
Appliances, Appurtenances or Fixtures		X			
Bathtub or Combination Bath/Shower (fill)		x	4.0		
3/4 Bathtub Fill Valve		x	10.0		
Clothes Washer		x	4.0		
Dental Unit, cuspidor		x	1.0		
Dishwasher, domestic		x	1.5		
Drinking Fountain or Watercooler		x	0.5	0.75	
Hose Bib (Outdoor Faucet) First One		x	2.5		
Hose Bib, each additional		x	1.0		
Lavatory		x	1.0	1.0	
<b><u>SINKS</u></b>					
Bar		x	2.0		
Clinic Faucet		x	3.0		
Clinic Flushometer Valve (with or without faucet)		x	8.0		
Kitchen, domestic		x	1.5		
Laundry		x	1.5		
Service or Mop Basin		x	3.0		
Washup, each set of faucets		x	2.0		
Shower, per head		x	2.0		
Urinal		x	2.0	3.0	
Washfountain, circular spray		x	4.0		
Water Closet (Toilet) 1.6 GPF Gravity Tank		x	2.5	3.5	
Water Closet (Toilet) 1.6 GPF Flushometer Tank		x	2.5	3.5	
Water Closet (Toilet) greater than 1.6 GPF Gravity Tank		x	5.5	7.0	
Other		x			
Other		x			
<b>TOTALS</b>					
<b>Comments:</b>			<b>Final Inspection Confirmation:</b>		
			<b>Building Inspector Signature:</b>		
			<b>\$ Per Plumb. Fixture Unit/PFU:</b>		<b>\$128.30</b>
<b>SIGNATURE:</b> _____ <b>DATE:</b> _____			<b>Total Water SDC:</b>		

\* Assembly values apply to building or tenant spaces used for assembly purposes with an occupant load of greater than 50 people.

**COMMERCIAL SEWER  
SYSTEM DEVELOPMENT CHARGE CALCULATION SHEET**

DRAINAGE FIXTURE UNITS  
(TABLE 7-3) OF THE  
OREGON SPECIALTY PLUMBING CODE

<b>FIXTURES</b>	<b># FIXTURES</b>	<b>x</b>	<b>PUBLIC FIXTURE UNITS</b>	<b>ASSEMBLY*</b>	<b>TOTAL PFU</b>
Plumbing Appliances, Appurtenances or Fixtures		x			
Bathtub or Combination Bath/Shower (fill)		x	2.0		
Clothes Washer, domestic, standpipe		x	3.0	3.0	
Dental Unit, cuspidor		x	1.0	1.0	
Dishwasher, domestic with independent drain		x	2.0	2.0	
Drinking Fountain or Watercooler (per head)		x	0.5	1.0	
Food-waste-grinder, commercial		x	3.0	3.0	
Floor Drain		x	2.0	2.0	
Shower single head trap		x	2.0	2.0	
Multi-head, each additional		x	1.0	1.0	
Lavatory, single		x	1.0	1.0	
Lavatory in sets of two or three		x	2.0	2.0	
Washfountain		x	2.0	2.0	
<b>SINKS</b>					
Bar		x	2.0	2.0	
Clinical		x	6.0	6.0	
Commercial with food waste		x	3.0	3.0	
Special Purpose with 1 1/2" trap		x	3.0	3.0	
Special Purpose with 2" trap		x	4.0	4.0	
Kitchen, domestic		x	2.0		
Laundry		x	2.0	2.0	
Service or Mop Basin		x	3.0	3.0	
Service, flushing rim		x	6.0	6.0	
Wash, each set of faucets		x	2.0	2.0	
Urinal, integral trap 1.0 GPF		x	2.0	5.0	
Urinal, integral trap greater than 1.0 GPF		x	2.0	6.0	
Urinal, exposed trap		x	2.0	5.0	
Water Closet (Toilet) 1.6 GPF Gravity Tank		x	4.0	6.0	
Water Closet (Toilet) greater than 1.6 GPF Gravity Tank		x	6.0	8.0	
Other		x			
Other		x			
<b>TOTALS</b>					
<b>Comments:</b>			<b>Final Inspection Confirmation:</b>		
			<b>Building Inspector Signature:</b>		
SIGNATURE: _____ DATE: _____			<b>\$ Per Plumb. Fixture Unit/PFU:</b>		<b>\$185.47</b>
			<b>Total Sewer SDC:</b>		

\* Assembly values apply to building or tenant spaces used for assembly purposes with an occupant load of greater than 50 people.