City of Glendale

124 3rd Street, PO Box 361
Glendale OR 97442
Phone (541)832-2106
Fax (541) 832-3221

APPLICATION FOR BUILDING PERMIT

City File No.: _____ Date Application Received: _____ Fee Paid: _____

Name of Applicant: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Address of Building site: _____ Parcel Size: _____

Tax Acct. No: _____ T_____ R_____ Section_____ TL_____

Directions to Property: _____

_____

_____

_____

Proposed Improvement: _____

_____

_____

Intended Use: _____

_____

_____

_____

Proposed Excavation/Grading: _____ cubic yds.

Depth of Excavation: _____ Depth of Fill: _____

Proposed Retaining Walls: Y/N: _____ Height if yes: _____

Proposed Water Systems:

Existing Well: _____ Existing Public System: _____ New System: _____

If new, what kind of system is proposed? _____

_____

Proposed Sanitation Systems:

Existing System: _____ Public System: _____ New Septic System: _____

If new, what kind of system is proposed? _____

_____

_____

_____

Describe all existing structures on property (Number and type): _____

_____

_____

_____

Value of proposed Improvements: $_____

Distance of building site from any watercourse or stream: _____

Attach separate sheet(s) for all planning drawings and drafts. Include existing structures and proposed structures. Water, sewer systems and other systems need to be included also.

A lessee or agent of the property owner may sign this application provided that written permission from the property owner is provided below.

I(We), _____, have no objection to
[Title holder(s)]

_____ proceeding with this application.
(Lessee or Agent)

Title holder Signed: _____ Date: _____

Lessee or Agent Name: _____ Phone: _____

Company Name: _____

License #: _____ Bond #: _____

Insurance Company Name: _____

Insurance Policy #: _____

SIGNATURE REQUIRED

These statements are true, correct and complete to the best of my knowledge.

I (we), _____, am (are) the title holder or contact purchaser (under a duly executed written contract) of the property described in this application and hereby certify that the statements and information contained herein are in all respects true complete and correct to the best of my (our) knowledge and belief. I understand that the full application fee must be paid to the City before this application will be processed, and that any additional cost incurred by the city in processing this application are my (our) responsibility. These costs may include but are not limited to, costs of legal publication, planning services, staff reports, engineering costs and attorney services incurred by the City or required for the protection of the City's interests in the processing of this application. I (We), hereby agree to pay all application processing costs in full, and within the time specified by the City (or within 30 days of the billing date if no time is specified). I (We) acknowledge that the City, in its sole discretion, has the option of providing an estimate of the projected costs and requiring a deposit in advance from the applicant(s) to cover those costs.

Printed name: _____

Signature: _____ Date: _____

The completed application and all attachments will be reviewed by the City Recorder. At that time the City Recorder may:

- Approve the application and refer it to Douglas County Building Department
- Request additional information of the applicant
- Refer the application to the contracted planner and/or the contracted engineer(s) for review before making a decision
- Refer the application to DEQ (Department of Environmental Quality)
- Deny the application upon findings that it does not comply with the City's Zoning and Land Development Ordinances

Referred to: _____

Approved By: _____

Forwarded to Douglas County Building Department on: _____

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Staff Information on Building Permit:

City File No.: _____ Date Application Received: _____ Fee Paid: _____

Owner: _____ Address of Building Permit: _____

Contractor:

Contractor: _____ Licensed/Bonded: _____

Authorized Improvement:

Zoning: _____ Use: _____

Building Height: _____ Square Footage: _____

Parking spaces required: _____

Setbacks:

Front property line: _____ Side Line: _____ Rear Line: _____

Exterior side-line: _____ Special Setbacks: _____

Overlay:

Slope Hazard Overly: _____ Flood Hazard Overlay: _____

Overlay Certification Provided: _____

Excavation:

Excavation Permit Required: _____ Provided: _____

Sanitation:

Existing Public: _____ Existing Septic: _____ New Septic: _____ New Public: _____

Water:

Existing Well: _____ Existing Public: _____ New Well: _____ New Public: _____

Conditions of Approval: _____

_____

_____

_____

Approved By: _____ Date: _____

Referred to:

Douglas Co. Bldg. Dept._____ DEQ: _____ Engineer/Planner: _____

Building Department

Douglas County Building Department
1036 SE Douglas, Room 106
Justice Building - Douglas County Courthouse
Roseburg, Oregon 97470
Inspection Line (541) 440-4284 Business Office (541) 440-4559 Fax (541) 440-4297

REQUEST FOR RE-ROOF PERMIT

Date: _____ Permit No: _____

Contractor Name: _____

Phone: _____ CCB #: _____

Job Site Address: _____

Owner/Business: _____

Estimated cost: $_____ Number of squares:_____

TYPE OF WORK/DESCRIPTION: Flat or Pitch, material type(s), etc.

_____

_____

TYPE OF STRUCTURE:

Residential _____ Commercial _____

The undersigned agrees to:

1) Providing manufacture's specifications and installation instructions of materials to be used prior to start.
2) Request inspections of:
   a. Existing roof decking/sheathing
   b. New decking/sheathing and nailing prior to covering.
   c. Other _____
   d. Final

Sign: _____ Date: _____

I:\DCforms\re-roofpermit-RW