



# Structural Permit Application

Marion County Public Works  
 5155 Silverton Rd NE, Salem, Oregon 97305  
 Phone: (503) 588-5147 Fax: (503) 588-7948  
 Email: [Building@co.marion.or.us](mailto:Building@co.marion.or.us)  
 Internet address: [www.co.marion.or.us](http://www.co.marion.or.us)

ATTN: Paul Wolterman

CATEGORY OF CONSTRUCTION		
<input type="checkbox"/> Residential	<input type="checkbox"/> Government	<input checked="" type="checkbox"/> Commercial
JOB SITE INFORMATION AND LOCATION		
Septic tank or system on this property: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Well on this property: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Job site address: 425 North First Avenue		
City: Stayton	State: OR	ZIP: 97383
Subdivision: Luttich, Ottomar Addition		Lot no.: 1-5
PROPERTY OWNER INFORMATION		
Name: Santaim Heritage Foundation		
Mailing Address: PO Box 161		
City: Stayton	State: OR	ZIP: 97383
Phone: 503-769-8860	Fax:	
E-mail: <a href="mailto:cmbrownhouse@gmail.com">cmbrownhouse@gmail.com</a>		
<b>For Homeowner Installations:</b>		
This installation is being made on residential or farm property owned by me or a member of my immediate family, and is exempt from licensing requirements under ORS 701.010.		
Signature:		Date:
CCB form is required for homeowner permits		<a href="#">Click for CCB Form</a>
CONTRACTOR INFORMATION		
Business name:		
Mailing Address:		
City:	State:	ZIP:
Phone:	Fax:	
E-mail:		
CCB license no.:		
Print name:		
Signature:		Date:
APPLICANT		
<input checked="" type="checkbox"/> Owner	<input type="checkbox"/> Contractor	<input type="checkbox"/> Other
If other, specify: Agent for Owner		
Signature: <i>Steve</i>		Date: 12/10/19
PLAN REVIEW CONTACT PERSON		
Contact Name: Steve Poisson		
Contact Address: PO Box 161		
City: Stayton	State: OR	ZIP: 97383
Phone: 503-739-0749		
Email: <a href="mailto:cmbrownhouse@gmail.com">cmbrownhouse@gmail.com</a>		

FOR CITY USE ONLY	
Required Setbacks	
Front:	Rear:
Left:	Right:
Special:	
Property located in flood plain: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zoning by:	Received by:
On County Road: <input type="checkbox"/> Yes <input type="checkbox"/> No	

FEE SCHEDULE	
1 a. Valuation information	
Job description: Change of Use and New Stairway	
Occupancy: Residential to Commercial	<i>for office space + community events</i>
Construction type: V-B	
Square feet: 2607	
Cost per square foot:	
Other information: No changes are planned for the structure or the site except replacing north exterior stairway and as required by the City and County for proposed Change of Use	
1 b. Check all that apply	
<input type="checkbox"/> new	<input type="checkbox"/> addition
<input type="checkbox"/> alteration	<input checked="" type="checkbox"/> Change of Occupancy/Use
Other: replace north exterior stairway to conform historically	
Foundation-only permit: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Plan review only: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Total valuation:</b>	\$
2. Building fees	
(a) Permit fee (use valuation table):	\$
(b) Investigative fee (if applicable):	\$
(c) Reinspection (\$52.00):	\$
(d) Enter 12% surcharge (.12 x [2a+2b+2c]):	\$
<b>(e) Subtotal of fees above (2a through 2d):</b>	\$
3. Plan review fees	
(a) Plan review (65% x permit fee [2a]):	\$
(b) Fire and life safety (40% x permit fee [2a]):**	\$
<b>(c) Subtotal of fees above (3a and 3b):</b>	\$
4. Miscellaneous fees	
(a) Seismic fee, 1% (.01 x permit fee [2a]): **	\$
(b) Septic Record Review fee (\$47.00)**	\$
(c) Zoning review fee ( ___ % x permit fee [2a])**	\$
<b>(d) Subtotal of fees above ( 4a through 4c )</b>	\$
<b>TOTAL fees and surcharges (2e+3c+4d):</b> \$	

\*\* if applicable, see other side for details

This permit is issued under OAR 918-460-0030. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

Received  
City of Stayton

DEC 10 2019