



# City of Umatilla

Building Division  
 700 6<sup>th</sup> St  
 Umatilla, OR 97882  
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<b>RESIDENTIAL COMBO BUILDING APPLICATION</b>	
DEPARTMENT USE ONLY	
Permit No:	
Date Issued:	By:

## WORK SITE INFORMATION & LOCATION:

<b>ADDRESS:</b>		
<b>PARCEL INFO:</b>		
<b>MAP NO:</b>	<b>TAX LOT:</b>	
<b>CATEGORY OF CONSTRUCTION:</b>		
<input type="radio"/> Single Family <input type="radio"/> Multi-Family		
<b>CHECK ALL THAT APPLY:</b>		
<input type="radio"/> Street Paved <input type="radio"/> Sidewalk <input type="radio"/> Curb <input type="radio"/> Driveway		
<b>ELECTRICAL CONTRACTOR INSTALLATION</b>		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
Email:		
CCB:	BCD:	
Signing Supervisors Name:		
Lic No:		
<b>MECHANICAL CONTRACTOR INSTALLATION</b>		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
Email:		
CCB Lic No:		
<b>PLUMBING CONTRACTOR INSTALLATION</b>		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
Email:		
CCB:	BCD:	JP#

## PEOPLE

<b>PROPERTY OWNER:</b>		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
<b>CONTRACTOR INSTALLATION</b>		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
E-mail:		
CCB license no.:	City Lic No.:	
Contact Name:	Phone #:	
<b>REQUIRED DOCUMENTS FOR APPLICATION</b>		
I have downloaded and reviewed the plans and documents Checklist (Initials): _____		
<b>SUBMITTAL METHOD FOR PLANS AND DOCS</b>		
<input type="radio"/> Paper <input type="radio"/> Electronic		
Moisture Content Acknowledgment submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Additional Energy Measures submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Additional Permits listed below need additional permits:</b>		
Right of Way Permit: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Fence: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Lawn Sprinklers: <input type="checkbox"/> Yes <input type="checkbox"/> No		

<b>STRUCTURE:</b>		<b>PLUMBING:</b>	
<b>Valuation*:</b>		<b>Water Service</b> <b>Total linear feet:</b>	
<b>Total square footage:</b> <b>(Dwelling &amp; attached garage)</b>		<b>Sanitary Sewer</b> <b>Total linear feet:</b>	
<b>Building Height:</b>		<b>MECHANICAL:</b>	
<b>No of Bathrooms:</b>		<b>Type of fuel:</b>	
<b>No. of Kitchens:</b>		<input type="checkbox"/> Boiler <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> LPG <input type="checkbox"/> Oil <input type="checkbox"/> Geothermal <input type="checkbox"/> Other	
<b>Total square footage of</b> <b>Decks/porches/covered patios:</b>			<b>QTY</b>
<b>Living area sq ft:</b>		Air handler unit up to 10,000 cfm	
<b>Basement sq ft:</b>		Air handler unit more than 10,000 cfm	
<b>Garage sq ft:</b>		Furnace up to 100,000 BTU	
<b>Carport sq ft:</b>		Furnace greater than 100,000 BTU	
<b>Temporary service 200 amp or less:</b>	<input type="checkbox"/>	Suspended heater, recessed wall heater or floor mounted unit heater	
<b>OTHER FUEL APPLIANCES:</b>		Heat Pump	
	<b>QTY</b>	Air Conditioner	
		Floor Furnace, including vent	
Wood/pellet stove		Evap cooler other than portable	
Gas or wood fire place/insert		Mini Split	
Chimney/liner/flue/vent		<b>EXHAUST AND VENTILATION</b>	
Water heater			<b>QTY</b>
Pool or spa heater, kiln		Range hood/other kitchen equipment	
Oil tank/gas/diesel generators		Appliance vent installation not included in appliance permit	
<b>FUEL PIPING</b>		Attic/Crawl space fans	
	<b>QTY</b>	Flue vent for water heater or gas fireplace	
Gas piping outlets, Four or less connections		Clothes dryer exhaust	
Gas piping outlets, more than four(per outlet)		Other exhaust/ventilation	