



PLUMBING PERMIT APPLICATION

Crook County Community Development
 300 NE 3RD St. Room 12, Prineville OR, 97754
 Phone: (541) 447-3211
 Email: bld@crookcountyor.gov

Date Received: _____

Initials: _____

This permit application expires if a permit is not purchased within 180 days after it has been accepted as complete

TYPE OF WORK	
<input type="checkbox"/> New construction <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Replacement <input type="checkbox"/> Demolition <input type="checkbox"/> Other, Specify: _____	
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Accessory building <input type="checkbox"/> Multi-family <input type="checkbox"/> Other, Specify: _____	
DESCRIPTION OF WORK	
JOBSITE INFORMATION AND LOCATION	
Job site address: _____	
City/State/ZIP: _____	
Suite/bldg./apt. #: _____	
Tax/map parcel #: _____	
<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: _____	
Mailing Address: _____	
City/State/ZIP: _____	
Phone: _____	
E-mail: _____	
OWNER INSTALLATION	
This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Signature: _____	Date: _____
APPLICANT	
Name: _____	
Mailing Address: _____	
City/State/ZIP: _____	
Phone: _____	
E-mail: _____	
Signature: _____	Date: _____
CONTRACTOR	
Business name: _____	
Mailing Address: _____	
City/State/ZIP: _____	
Phone: _____	
E-mail: _____	
CCB Lic#: _____	BCD Lic#: _____
JP Lic#: _____	

FEE SCHEDULE			
Line Item / Description	Qty.	\$/Ea.	Total
Fire sprinkler (_____ sq ft.)		*	
SITE UTILITIES			
Catch Basin / Area Drain / Manhole		28.60	
Drywell / Leach Line / Trench Drain / Swale / Storm Water Retention		28.60	
Alternate Potable Water Heating System		28.60	
Roof Drain (Commercial)		28.60	
Medical Gas Valuation: \$		*	
WATER & SEWER			
1 st 100' of WATER service enter "1"		85.85	
Each add 100' (or portion of) enter "1"		70.60	
Is the water service 2 inches or larger? Yes <input type="checkbox"/> No <input type="checkbox"/>			
1 st 100' of Sanitary SEWER line enter "1"		85.85	
Each add 100' (or portion of) enter "1"		70.60	
1 st 100' of STORM SEWER line enter "1"		85.85	
Each add 100' (or portion of) enter "1"		70.60	
FIXTURE OR ITEM (CIRCLE TO IDENTIFY)			
Backflow Device / Dual Check		28.60	
Backwater Valve		28.60	
Clothes Washer		28.60	
Dishwasher		28.60	
Drinking Fountain		28.60	
Ejectors / Sump Pump		28.60	
Fixture Cap		28.60	
Floor Drain / Floor Sink / Hub		28.60	
Garbage Disposal		28.60	
Ice Maker		28.60	
Sink / Basin / Lavatory		28.60	
Frost Free / Yard Hydrant / Hose Bib		28.60	
Interceptor / Grease Trap		28.60	
Tub / Shower / Shower Pan		28.60	
Urinal / Water Closet (Toilet)		28.60	
Expansion Tank		28.60	
Electric Water Heater		51.45	
Other		*	
OFFICE USE ONLY			
Minimum permit fee			115.75
Plan Review (75% of permit fee) – If applicable			
State Surcharge (12% of permit fee)			
Total Permit Fee:			

Plumbing Plan Review Requirements

Indicate all that apply by checking Yes or No below. Plumbing plan review is required for any “Yes” answer. Provide a complete set of plans, specifications, and calculations.

YES **NO**

		Installing or altering a sewer wastewater pretreatment system?
		Installing a vacuum drainage, waste and vent system?
		Installing or altering a chemical drain, waste & vent system?
		Installing or altering a reclaimed wastewater system?
		Installing a potable water pressure booster pump system for municipality supplied water?
		Building or structure more than 3 stories in height?
		Six or more residential units connected?
		Is the building occupancy listed as an A, E, I-2, or I-3?
		Is the building listed as a special occupancy such as: Hazardous, Health Facility Patient Area, Commercial Agricultural, or Recreational Vehicle Park?
		Altering or adding to an existing residential fire sprinkler system?
		Is the total potable water line exceeding 1,000 ft?