



Plumbing Permit Application

Community Development Department-Building Division
 305 Main Street, Klamath Falls, OR 97601
 Phone: (541) 883-5121 #1 | Fax: (541) 885-3644
 Web: www.klamathcounty.org
 To apply online go to: <https://aca.oregon.accela.com/oregon/>

OFFICE USE ONLY	
Permit No:	
Received By:	Approved By:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address:	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
PROPERTY OWNER	TENANT
Name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
APPLICANT	CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
E-mail:	
CONTRACTOR	
Business name:	
Address:	
City/State/ZIP:	
Phone: ()	Fax: ()
CCB lic.:	Lic. no.:
Authorized Signature:	
Print Name:	Date:

FEE* SCHEDULE			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
Single family dwelling (1)bath/kitchen		382.00	
Single family dwelling (2)bath/kitchen		469.00	
Single family dwelling (3)bath/kitchen		557.00	
Each additional bath/kitchen		86.00	
Fire sprinkler (____sq. ft.) see back		See back	
Sanitary sewer (no. linear ft.:____) *		43.00	
Storm sewer (no. linear ft.:____) *		43.00	
Water service (no. linear ft.:____) *		43.00	
*Please list Total footage for each service on worksheet (each utility connection is an additional \$43.00 for each 100 ft. over first 100 ft.)			
Site utilities – Commercial / Multi-Family / Existing Construction			
Sanitary sewer (no. linear ft.:____)		See back	
Storm sewer (no. linear ft.:____)		See back	
Water service (no. linear ft.:____)		See back	
Footing drain (no. linear ft.:____)		See back	
Drywell, leach line, or trench drain		28.66	
Rain drain connector		28.66	
Fixture or item – Commercial / Multi-Family / Existing Construction			
Absorption valve		28.66	
Backflow preventer		28.66	
Catch basin or area drain		28.66	
Clothes washer		28.66	
Dishwasher		28.66	
Drinking fountain		28.66	
Ejectors/sump pump		28.66	
Expansion tank		28.66	
Fixture cap		28.66	
Floor drain/floor sink/hub drain		28.66	
Garbage disposal		28.66	
Hose bib		28.66	
Ice maker		28.66	
Interceptor/grease trap		28.66	
Medical gas (value: \$_____)		See back	
Primer		28.66	
Roof drain (commercial)		28.66	
Sink/basin/lavatory		28.66	
Tub/shower/shower pan		28.66	
Urinal		28.66	
Water closet		28.66	
Water heater		28.66	
Other:		28.66	
Reinspection fee		86.00	
Subtotal			\$
Permit (minimum \$86.00):			\$
(When required) Plan review (25% of permit fee):			\$
State surcharge (12% of permit fee):			\$
TOTAL PERMIT FEE			\$

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

PLUMBING PERMIT FEES

Medical Gas Permit:

Medical Gas / Vacuum Valuation	Fee
\$1 - \$2,000	\$86
\$2,001- \$25,000	\$86 for the first \$2,000+ \$10.70 for each additional \$1,000, or fraction thereof, to and including \$25,000
\$25,001 - \$50,000	\$332.10 for the first \$25,000 + \$8.00 for each additional \$1,000 or fraction thereof, to and including \$50,000
\$50,001 - \$100,000	\$532.10 for the first \$50,000 + \$6.00 for each additional \$1,000 or fraction thereof, to and including \$100,000
\$100,001 and up	\$832.10 for the first \$100,000 + \$4.85 for each additional \$1,000 or fraction thereof

Residential Fire Sprinkler System (NFPA 13-D):

Project Size	Fee	Project Size	Fee
1 – 2,000 square feet	\$86	3,601 – 7,200 square feet	\$176
2,001 – 3,600 square feet	\$129	7,201 square feet or greater	\$205

Plan Review:	Plan review fee shall be 25% the plumbing permit fee.
Reinspection or Investigation:	\$86 / hour with 1 hour minimum.
Work commencing w/o permit:	Fee equal to permit fee in addition to the required permit fees.
Inspection or plan review outside of normal hours or scope:	\$129/ hour with 2 hour minimum.

PLUMBING Plan Review Requirements (OAR 918-780-0040)

Indicate all that apply by checking Yes or No below. Plumbing Plan Review is required for any Yes answer(s). Provide two complete sets of plans, manufacture cut-sheets, specifications and calculations:

Yes / No

- Medical gas and vacuum system for healthcare or dental facility?
- Chemical drainage waste and vent system? (Grease pretreatment systems do not apply.)
- Vacuum drainage waste and vent system?
- Commercial potable water pressure booster pump system?
- Water service line with interior diameter of two inches or larger?
Exception: Those two inch systems which have been designed and stamped by a licensed engineer.
- Residential multi-purpose or continuous loop fire suppression system?
- Installation or alteration of reclaimed wastewater system?
- Installation or alteration of wastewater pretreatment system for building sewers?

Plumbing Worksheet

*New Single Family Dwelling				*Multi-Family/Commercial/Existing Residential			
Fixture or Item:	Qty:	Total		Fixture or Item:	Qty:	Total	
Utility Connections: First 100 ft. included in bath/kitchen price- each additional 100 ft. \$43.00				Utility Connections: First 100 ft. \$86.00 - each additional 100 ft. \$43.00			
Sanitary Sewer - first 100 ft.		Ea. additional 100 ft.		Sanitary Sewer - first 100 ft.		Ea. additional 100 ft.	
Water Service – first 100 ft.		Ea. additional 100 ft.		Water Service – first 100 ft.		Ea. additional 100 ft.	
Storm Drain – first 100 ft.		Ea. additional 100 ft.		Storm Drain – first 100 ft.		Ea. additional 100 ft.	

For More Information

For additional general information, please visit the Oregon State Building Codes Division website at: www.bcd.oregon.gov

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