**STRUCTURAL Permit Application**

Malheur County Building Department

14 South 3rd St. / P.O. Box 2783

Nyssa, OR. 97913

Phone: 541-372-5460 Fax 541-372-5465

Email: BuildingDepartment@malheurco.org

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

### Date App Rec'd_______

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**LOCAL GOVERNMENT APPROVALS**

**PLANNING & ZONING**

<table>
<thead>
<tr>
<th>REF #</th>
<th>Use Zone:</th>
<th>T</th>
<th>S,R</th>
<th>S</th>
<th>TL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>P/Z Permit#</td>
<td>Date Issued</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Setbacks: Road ROW:</td>
<td>L.side</td>
<td>R.side</td>
<td>Rear</td>
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</tbody>
</table>

**Farm Dwelling:**
- New
- Replacement

**Non-Farm Dwelling:**
- New
- Replacement

**Other:**
- Description:

**Flood Plain:**
- Yes
- No

**Required Elevation:**

**Signature:**

**Title:**

**Print Name:**

**Date:**

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**SANITATION**

**Sanitation Required:**
- Yes
- No

**Information Verified:**
- Yes
- No

**Signature:**

**Title:**

**Print Name:**

**Date:**

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**FEE SCHEDULE - Valuation Information (Dept Use Only)**

<table>
<thead>
<tr>
<th>(a) 1 &amp; 2 FAMILY DWELLING:</th>
<th>(b) COMMERCIAL:</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Dwelling: Sq Ft New Bldg Sq Ft</td>
<td></td>
</tr>
<tr>
<td>Att'd garage/carport Sq Ft Existing Bldg Sq Ft</td>
<td></td>
</tr>
<tr>
<td>Covered Porches Sq Ft Addition to Bldg Sq Ft</td>
<td></td>
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<tr>
<td>Deck Sq Ft Number of Stories</td>
<td></td>
</tr>
<tr>
<td>Dwelling Addition Sq Ft Construction Type</td>
<td></td>
</tr>
<tr>
<td>Other Structures Sq Ft Occupancy Group</td>
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</tr>
</tbody>
</table>

**Construction Type**
- Occ. New
- Occ. Existing

**Occupancy**
- Valuation: $ Valuation: $

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**BUILDING FEES**

| (a) Permit fee $ |
| (b) Investigate fee $ |
| (c) Re-inspect/Special inspect. ($65.00 per Hr) $ |

**PLAN REVIEW FEES**

| (d) Enter 12% surcharge (.12 x (a) and/or (b), (c) if applicable) $ |
| (e) Plan review fee 65% above(a) if required $ |
| (f) Fire & life Safety Fee 40% of (a) if required $ |

**Total Permit Fee Due (A) thru (F) $**

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I hereby acknowledge that I have read this application, that the information given is correct, that I am registered with the State Construction Contractor's Board (or that I am exempt under the provisions of ORS 701), that I am the owner or authorized agent of the owner, that the registration No is correct and current, that the plans submitted are in compliance with state law. Manufactured Dwelling Foundation installers must have an Oregon MDI/LSI/LI license.