



# Commercial Fire Sprinkler & Fire Alarm

## -Notice-

Permit Applications will only be accepted between the hours of  
8:00 A.M. to 11:30 A.M.

**Dear Applicant;**

**Please be aware of the following:**

### **SPRINKLERS:**

- ✧ On the permit application you must provide all **JOB SITE INFORMATION**. The permit application must be filled out in its entirety, where a section of the application doesn't apply you must indicate (NA). Please provide valuation of the project.
- ✧ **No permit** is required for sprinkler heads when **4** or **less** heads are being added or moved.
- ✧ A **permit** will be required but **without** plans, for **5** to **10** sprinkler heads being added or moved.
- ✧ **11 or more** heads a permit with plans will be **required**. Provide plans designed by a Fire Protection Engineer, illustrating hydraulic calculations & sprinkler cut sheets. The system must be designed under the current NFPA 72 & other applicable codes.

### **FIRE ALARMS:**

- ✧ **5 Devices or less** can be submitted with an affidavit, you must include floor plan showing location of devices added or moved. The building permit application & completed affidavit.
- ✧ **Over 5 devices** require full submittal.



**Building Permit Application**  
 380 A Avenue  
 Lake Oswego, OR 97035  
[www.buildingpermits.oregon.gov](http://www.buildingpermits.oregon.gov)  
 Submit Permits to: [permits@lakeoswego.city](mailto:permits@lakeoswego.city)

PERMIT #	
DATE:	
AMT PD:	AMT DUE:

CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL
TYPE OF WORK	
<input type="checkbox"/> New 1- and 2-family Dwelling	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Deck/patio cover
<input type="checkbox"/> Accessory structure/garage	<input type="checkbox"/> Pool/boathouse/dock
<input type="checkbox"/> Multi-family	<input type="checkbox"/> Interior T.I. (Comm)
<input type="checkbox"/> Other (Add Description)	
JOB SITE INFORMATION AND LOCATION	
Project/tenant name:	
Job site address:	Suite #
Tax Map No.	
WORK DESCRIPTION	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	Phone:
CONTACT PERSON	
Name:	Phone:
E-mail:	
CONTRACTOR INFORMATION	
Business name:	CCB:
Address:	Phone:
E-mail (Required):	

**Authorized Signature:**

Print name	Date:
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**All contractors and subcontractors** are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply:

RESIDENTIAL REQUIRED DATA		
<p><b>Permit fees*</b> are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.</p>		
Valuation: \$		
	EXISTING	NEW OR ADDING
Number of bedrooms:		
Number of baths:		
Total # of Floors		
Dwelling SF area		
Garage/carport area		
Covered porch area		
Deck area		
Other structure area		
COMMERCIAL REQUIRED DATA		
<p><b>Permit fees*</b> are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.</p>		
Valuation: \$		
Area (SF)		
Existing Building:		
New Building Area:		
Number of stories:		
Type of construction:		
<p><b>THIS PERMIT APPLICATION EXPIRES</b> if a permit is not obtained within 180 days after it has been accepted as complete. *Fee methodology set by Tri-County Building Industry Service Board Form B70-1001</p>		
<b>Building Permit Fee*</b>		
<i>Please refer to master fee schedule</i>		
05/2017		



**City of Lake Oswego – Building Division**

PO Box 369 – 380 A Ave  
Lake Oswego, OR 97034 (503)  
635-0390 •  
www.ci.oswego.or.us/building

**FIRE ALARM SYSTEM AFFIDAVIT FOR ALTERATIONS OR TENANT IMPROVEMENT**

(Without plan review)

Building Permit No. \_\_\_\_\_

Date Received \_\_\_\_\_

Project Name: \_\_\_\_\_ Occupancy: \_\_\_\_\_

Job Address: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of System: (check one)  Required  Non-required  
(check one)  Automatic  Manual  Both

**Maximum number of devices added or moved under this permit process is 5 total per tenant space**

No. of Proposed Smoke / Heat Detectors: To be Added \_\_\_\_\_ / To be Relocated \_\_\_\_\_

No. of Proposed Manual Alarm Stations: To be Added \_\_\_\_\_ / To be Relocated \_\_\_\_\_

No of Proposed Notification Appliances: To be Added \_\_\_\_\_ / To be Relocated \_\_\_\_\_

I, \_\_\_\_\_, Oregon Construction Contractors Board No. \_\_\_\_\_ certify the following is true and defines the scope of work for this project.

- a. All work complies with the current state-adopted NFPA-72 and the authority having jurisdiction.
- b. All notification appliances are located in accordance with the current state-adopted NFPA-72.
- c. Smoke/Heat detector spacing complies with current state-adopted NFPA-72 and the AHJ.
- d. Exposed wiring will not be covered until inspected.
- e. Final approval shall be subject to on-site tests and inspections.**
- f. Voltage drop is adequate to operate all appliances.
- g. Battery supplies are capable of supporting the system modifications.
- h. A statement of compliance, with the minimum information as specified in OSFC Section 901.2.1, will be given to the building inspector prior to final approval.
- i. Compatibility of appliances and devices are in accordance with the FACP manufacturer’s specifications.

In addition, I understand the following is required:

- A sketch attached to this document and the building permit showing the area of work within the building’s structure, and
- A copy of this document shall be available for the authority having jurisdiction, and
- An electrical permit

At time of final fire department acceptance test these documents are required:

- As-Built drawings detailing the work performed
- NFPA 72 Record of Completion
- NAC EOL Voltage drop Calculations

When end of line notification circuit voltage is not calculated, alarm voltage measurements may be used. The difference between the measured source and end of line alarm voltages shall not exceed 4.4 volts.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# RECORDS RETENTION FEES WORKSHEET

## BUILDING PERMITS - PART A

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Base Fee \$ 20.00

## BUILDING PERMITS - PART B

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Fees for Building department submittals.

Note: A page with printing on both sides count as two pages.

<u>Size</u>	<u># of Pages</u>	<u>X</u>	<u>Cost Per Page</u>	<u>Total =</u>
8 1/2" x 11"	_____	X	\$ 0.25	_____
8 1/2" x 11"	_____	X	\$ 0.25	_____
11" x 17"	_____	X	\$0.50	_____
18" x 24"	_____	X	\$ 2.00	_____
24" x 36"	_____	X	\$ 3.00	_____
36" x 42"	_____	X	\$ 4.00	_____
Other formats	_____	X	\$5.00	_____
Total Part B				= _____

## PLANNING APPLICATIONS AND PERMITS - PART C

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Fees for Planning department submittals.

Type II & verification tree removal permits.....	\$20.00
Sign Permits.....	\$20.00
Ministerial land use applications.....	\$30.00
Minor land use applications (without public hearing).....	\$50.00
Minor land use applications (with public hearing).....	\$100.00
Major land use applications.....	\$100.00

## TOTAL RECORDS RETENTION FEE

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Total from Part A	\$20.00
Total from Part B	_____
Total from Part C	_____
Total Fees	= _____



**Tri-County Commercial Application Checklist**

**City of Lake Oswego – Building Division**

PO Box 369 ▪ 380 A Ave.  
 Lake Oswego, OR 97034  
 (503) 635-0390 ▪ Fax: (503) 697-6574  
 www.ci.oswego.or.us

**PROJECT INFORMATION**

Project name:		Date:	
Address:	City:	State:	ZIP:
Scope of work:			
Reference no.:	Map and tax-lot no.:		
Contact person name:	Company:		
Phone:	Fax:		
Cellular phone:	E-mail:		

**NOTES AND INSTRUCTIONS**

The purpose of this checklist is to help define a complete submittal package for the scope of work. Plan review will not take place until a complete package is submitted.

This checklist can be used for all commercial construction projects, including new construction, additions, alterations and tenant improvements.

For complex projects, applicants should use the “location” space to note the item’s location and page number from the plans or the specification book.

It is not necessary to duplicate submittal information, even if it is asked for in multiple sections.

In the checklist, “Required” means that the applicant must provide this information for plan review.

In the checklist, “P” means —

- *if checked by the applicant* — the information is provided for the plan review.
- *if checked by the plans reviewer* — this information is required for the plan review.

In the checklist, “NA” means that the information does not apply.

Choose only those sections of the checklist that apply to your scope of work. Section 1.0, “General Project Data,” must be included with each project submitted.

**PRE-SUBMITTAL PROCESS**

An applicant may request a pre-submittal meeting with representatives of the jurisdiction in which the project will be built. The meeting may take place during the conceptual, schematic, or in-progress phase, or when the applicant has completed plans.

**INDEX OF CHECKLIST SECTIONS**

1.0 General project data ..... Page 2	7.0 Mechanical data (Types I and II kitchen-hood permits)..... Page 6
2.0 Civil data ..... Page 2	8.0 Plumbing data ..... Page 7
3.0 Architectural data ..... Page 3	9.0 Electrical data ..... Page 8
4.0 Structural data ..... Page 4	10.0 Fire-suppression data ..... Page 9
5.0 Mechanical data (new construction, tenant improvement, gas-piping permits) ..... Page 5	11.0 Fire-detection and fire-alarm data ..... Page 9
6.0 Mechanical data (additional or replacement rooftop-equipment installation permits) ..... Page 6	12.0 Re-roof installation data ..... Page 10
	13.0 Jurisdictional requirements ..... Page 10

**This checklist is for building department jurisdictions in Clackamas, Multnomah, and Washington counties.**

**SECTION 1.0 — GENERAL PROJECT DATA**

**Construction documents** *Location (sheet number or spec section)*

- 1.1  Required No. of sets of plans: **2 MAX SIZE 30 X 42** ..... \_\_\_\_\_
- 1.2  Required Cover sheet title block..... \_\_\_\_\_
- 1.3  Required Cover sheet vicinity map..... \_\_\_\_\_
- 1.4  Required Cover sheet plan index ..... \_\_\_\_\_
- 1.5  P  NA Code summary..... \_\_\_\_\_
- 1.6  P  NA Deferred submittal summary ..... \_\_\_\_\_
- 1.7  P  NA Professional stamp and signature ..... \_\_\_\_\_
- 1.8  P  NA Fire and life-safety plan..... \_\_\_\_\_
- 1.9  P  NA Landscape plan ..... \_\_\_\_\_
- 1.10  P  NA Landscape specifications ..... \_\_\_\_\_

**Supporting documents** *Notes*

- 1.20  P  NA Land-use or planning actions ..... \_\_\_\_\_
- 1.21  P  NA Required fire-flow calculations ..... \_\_\_\_\_
- 1.22  P  NA Fire-hydrant flow-test report ..... \_\_\_\_\_
- 1.23  P  NA Fire department or fire district building survey report ..... \_\_\_\_\_
- 1.24  P  NA Material safety data sheets (MSDS)..... \_\_\_\_\_

**SECTION 2.0 — CIVIL DATA**

**Construction documents** *Location (sheet number or spec section)*

- 2.1  Required Site plan \_\_\_\_\_
- 2.2  Required Site utility plan ..... \_\_\_\_\_
- 2.3  Required Grading plan ..... \_\_\_\_\_
- 2.4  Required Erosion-control plan ..... \_\_\_\_\_
- 2.5  P  NA Utility-vault location and details ..... \_\_\_\_\_

**Supporting documents** *Notes*

- 2.20  P  NA Geotechnical/soil engineer report..... \_\_\_\_\_
- 2.21  P  NA Storm-water calculations ..... \_\_\_\_\_
- 2.22  P  NA Site retaining-wall structural calculations ..... \_\_\_\_\_
- 2.23  P  NA “Assurance of Compliance” with environmental rules ..... \_\_\_\_\_

**SECTION 10.0 — FIRE SUPPRESSION DATA**

<b>Construction documents</b>		<i>Location (sheet number or spec section)</i>
10.1	<input checked="" type="checkbox"/> Required Floor plan(s) .....	_____
10.2	<input checked="" type="checkbox"/> Required Sprinkler piping plan(s).....	_____
10.3	<input type="checkbox"/> P <input type="checkbox"/> NA Site plan .....	_____
10.4	<input type="checkbox"/> P <input type="checkbox"/> NA Standpipe information .....	_____
10.5	<input type="checkbox"/> P <input type="checkbox"/> NA Back flow prevention information .....	_____
10.6	<input type="checkbox"/> P <input type="checkbox"/> NA Reflected ceiling plan(s).....	_____
10.7	<input type="checkbox"/> P <input type="checkbox"/> NA Transverse and longitudinal cross sections	_____
10.8	<input type="checkbox"/> P <input type="checkbox"/> NA Fire-rated construction details .....	_____
10.9	<input type="checkbox"/> P <input type="checkbox"/> NA Specialty fire suppression system plans and list of systems .....	_____
<b>Supporting documents</b>		<i>Notes</i>
10.20	<input checked="" type="checkbox"/> Required Structural calculations for vertical loads and lateral loads for equipment weighing over 400 pounds .....	_____
10.21	<input checked="" type="checkbox"/> Required Equipment manufacturers' catalog "cut sheets" .....	_____
10.22	<input type="checkbox"/> P <input type="checkbox"/> NA Hydraulic calculations .....	_____
10.23	<input type="checkbox"/> P <input type="checkbox"/> NA Specialty fire suppression system information.....	_____

**SECTION 11.0 — FIRE DETECTION AND ALARM DATA**

<b>Construction documents</b>		<i>Location (sheet number or spec section)</i>
11.1	<input checked="" type="checkbox"/> Required Floor plan(s) .....	_____
11.2	<input type="checkbox"/> P <input type="checkbox"/> NA Site plan .....	_____
11.3	<input type="checkbox"/> P <input type="checkbox"/> NA Reflected ceiling plan(s).....	_____
11.4	<input type="checkbox"/> P <input type="checkbox"/> NA Transverse and longitudinal cross sections .....	_____
11.5	<input type="checkbox"/> P <input type="checkbox"/> NA Wiring schematic.....	_____
11.6	<input type="checkbox"/> P <input type="checkbox"/> NA Elevator recall information.....	_____
11.7	<input type="checkbox"/> P <input type="checkbox"/> NA Operational matrix.....	_____
11.8	<input type="checkbox"/> P <input type="checkbox"/> NA Fire-rated construction details .....	_____
11.9	<input type="checkbox"/> P <input type="checkbox"/> NA Standard electrical notes.....	_____
<b>Supporting documents</b>		<i>Notes</i>
11.20	<input checked="" type="checkbox"/> Required Structural calculations for vertical loads and lateral loads for equipment weighing over 400 pounds .....	_____
11.21	<input checked="" type="checkbox"/> Required Equipment manufacturers' catalog "cut sheets" .....	_____
11.22	<input checked="" type="checkbox"/> Required Installer certification information.....	_____
11.23	<input type="checkbox"/> P <input type="checkbox"/> NA Battery calculations .....	_____
11.24	<input type="checkbox"/> P <input type="checkbox"/> NA Sample fire alarm log book .....	_____
11.25	<input type="checkbox"/> P <input type="checkbox"/> NA Emergency power system specifications.....	_____
11.26	<input type="checkbox"/> P <input type="checkbox"/> NA Monitoring station information .....	_____
11.27	<input type="checkbox"/> P <input type="checkbox"/> NA Voltage drop calculations .....	_____