

Renewable Electrical Energy Permit Application Clackamas County

150 Beavercreek Rd, Oregon City, OR 97045 Phone 503-742-4240 www.clackamas.us

FOR OFFICE USE O	ONLY
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Land use approval:

Date:

Permit:

Renewable	Energy	Fee Schedule		-
Description	Qty.	Fee	Total	*
5 Kva/Kw or less		144.00		2
5.01 to 15 Kva/Kw		169.00		2
.5.01 to 25 Kva/Kw		280.00		2
25.01 Kva/Kw or greater		11.20 per		2
(Plan review required)		Kva/Kw		
Services or feeders, instal	lation, a	Iteration, and	d/or relocat	ion
200 amps or less		161.00		2
201 amps to 400 amps		213.00		2
401 amps to 600 amps**		321.00		2
601 amps to 1,000 amps**		482.00		2
Over 1,000 amps**		882.00		2
Branch circuits new, a	Iteration.		per panel	
Fee for branch circuits with		,,		
above service or feeder fee,		12.00		2
each branch circuit				
Fee for branch circuits without				
service or feeder fee, first		90.00		2
branch circuit				
Each add'l branch circuit		12.00		2
Miscellaneous (se	rvice or fe		uded)	1
Reconnect only		109.00		1
Misc. fees hourly rate		110.00		
Each additional inspection				
ELE	CTRICAL	FEES		
		Subtotal		
Minimum permit fee***		mit fee***		
State surcharge (12% of permit fee)				
Plan review (25	% of per	mit fee)**		
Technology Fee (3% of per	rmit cost	– Max \$5)		
	TOTAL P	ERMIT FEE		
his permit application expires	-		ained withi	n 1
lays after it has been accepted	-			
'Indicates the number of inspe			ermit.	
** Plan review is 25% of the pe				ater
This only applies to permits that			-	
***For electrical permits the m		•		n of a
he items selected, whichever is			o or the sull	. 01 0
ine menna selected, which ever h	Sereater	•		

New Construction	□ Other:			
□ Addition/alteration/replacement				
CATEGORY OF CONSTRUCTION				
□ 1 & 2 family dwelling	🗆 Master Builder			
□ Accessory structure	Multi-family			
Commercial/industrial	□ Other			
JOB SITE INFORMATION AND LOCATION				
Job site address:				
City/State/Zip:				
Suite/bldg/apt no.:	Tax lot no.:			
Project name:	-			
Subdivision:	Lot no.:			
DETAILED DESC	RIPTION OF WORK			
Name:				
Address:				
City/State/Zip:				
Phone:				
Email:				
CONTACT/APPLICANT				
Business Name:				
Contact Name:				
Address:				
City/State/Zip:				
Phone:				
Email:				
CONTRACTOR				
Business Name:				
Address:				
City/State/Zip:				
Phone:				
Email:				
CCB#:	BCD#:			
Supervising electrician signature:				
Print name:				
Frint name.	Date:			

TYPE OF WORK

Print name:	Date:
Owner/authorized signature:	