



**FIRE CODE / LAND USE / BUILDING REVIEW  
APPLICATION**

**North Operating Center**  
11945 SW 70<sup>th</sup> Avenue  
Tigard, OR 97223  
Phone: 503-649-8577

**South Operating Center**  
8445 SW Elligsen Rd  
Wilsonville, OR 97070  
Phone: 503-259-1500  
Fax: 503-259-1520

REV 10-23-2018

**Project Information**

Applicant Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Site Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Map & Tax Lot #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Land Use/Building Jurisdiction: \_\_\_\_\_  
Land Use/ Building Permit # \_\_\_\_\_

Choose from: Beaverton, Tigard, Newberg, Tualatin, North Plains, West Linn, Wilsonville, Sherwood, Rivergrove, Durham, King City, Washington County, Clackamas County, Multnomah County, Yamhill County

**Project Description**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Permit/Review Type (check one):**

- Land Use Review - Service Provider Letter
- Site/Civil Project
- Building Permit Review
- Emergency Radio Responder Coverage Install/Test
- LPG Tank (Greater than 2,000 gallons)
- Flammable or Combustible Liquid Tank Installation (Greater than 1,000 gallons)
- Explosives Blasting (Blasting plan is required)
- Other Hazardous Materials (Exterior)
- TVFR/Fire Code Review (other)
- Tents, Canopies, or Temporary Membrane Structures (in excess of 750 square feet)
- Temporary Haunted House or similar
- Ceremonial Fire or Bonfire (For gathering, ceremony or other assembly)

**For Fire Marshal's Office Use Only**

TVFR Permit # \_\_\_\_\_  
Permit Type: \_\_\_\_\_  
Submittal Date: \_\_\_\_\_  
Assigned To: \_\_\_\_\_  
Due Date: \_\_\_\_\_

**Approval/Inspection Conditions**  
(For Fire Marshal's Office Use Only)

**This section is for application approval only**

Fire Marshal or Designee \_\_\_\_\_ Date \_\_\_\_\_

Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**See Attached Conditions:**  Yes  No

**Site Inspection Required:**  Yes  No

**This section used when site inspection is required**

Inspection Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Final TVFR Approval Signature \_\_\_\_\_ Emp ID \_\_\_\_\_ Date \_\_\_\_\_