SUBJECT: Fees and Charges for County Services

DATE: February 13, 1995
REVISED: August 2020

Adopted by Board Resolution August 12, 2020 Fees effective August 13, 2020

POLICY

This fee schedule has been authorized as provided by Section 1.04.040 of the Clatsop County code.

Any fee set by statute not appearing in this schedule may be subject to collection accordingly.

A. ALL DEPARTMENTS

Photocopy fee 8 ½ X 11” and 8 ½ X 14” ..................................................................................25 cents per page
Photocopy fee 11 X 17” ..............................................................................................................50 cents per page
Audio Tape Duplication (CD) Without Research ........................................................................... $5 per CD
Audio Tape Duplication (CD) With Research$25 per CD Video Tape Duplication ....................... $15 per tape
Printed Documents (reports, plans, etc.) ............................................................... Actual cost of printing, postage and handling

Meeting Agendas:
Picked up for news media reporter .......................................................................................................................... No Charge
Mailed: Single meeting .......................................................................................................................... $2 minimum mail charge
Annual subscription (Jan.-Dec.)......................................................................................................................... $1 per expected meeting

Agenda Packets:
Requested in advance of copy day.................................................................5 cents/page plus mailing charge
All others ................................................................................................................................................. See photocopy fee above

FAX ......................................................................................................................................................... $2 per document

Refunds: For overpayments in excess of $10 only

Mail charges: PREPAID (for copies, reports, etc.), actual cost, minimum of $4 (includes first four photocopy pages)

Billing Charge ........................................................................................................................................... $7.50 per document

File Location and Research ....................................................................................................................... $15 per quarter hour or fraction thereof.
Location of requester’s personal file or current work files........................................................................ No Charge

Image Access Fee ........................................................................................................................................... 30 cents per page or image

Labels ....................................................................................................................................................... $13 per page plus standard report time (see below)

Standard Report Time ............................................................................................................................... $5 per quarter hour of staff time AND 25 cents per page

FTP or email report ........................................................................................................................................ $8 per report or file

Network Equipment Usage .......................................................................................................................... $25 per hour
B. ANIMAL CONTROL

CLATSOP COUNTY ANIMAL CONTROL SERVICE FEES

Impound – First Offense, licensed ................................................................. $25.00
    First Offense, unlicensed .................................................................. $40.00
    Second Offense, within one year ....................................................... $75.00
    Third/Subsequent Offense, within one year ....................................... $100.00

Boarding – Dogs -Per Day ................................................................. $15.00

Boarding – Cats-Per Day ............................................................... $10.00

Licensing – (No Discounts for multiple dogs)
    Altered Dog, 1-year license ............................................................... $15.00
    Altered Dog, 3-year license ............................................................... $40.00
    Fertile Dog, 1-year license ............................................................... $30.00
    Fertile Dog, 3-year license ............................................................... $90.00
    Altered Senior Dog, 1-year license .................................................. $10.00
    Altered Senior Dog, 3-year license .................................................. $25.00

Late License - No enforcement action ............................................. $15.00
    With enforcement action ................................................................ $30.00

Replacement Tag ........................................................................... $10.00

Adoption – Dogs ........................................................................... $110.00
    Cats ......................................................................................... $75.00
    Dogs - 10 years and over ............................................................... $50.00
    Cats - 10 years and over ............................................................... $20.00

Adoption of Bonded Pair, Dogs or Cats .......................................... Single fee for both

Owner Release to Shelter – Dog ..................................................... $30.00
    Cat ......................................................................................... $10.00
    Pups -litter (under 12 weeks) ......................................................... $30.00
    Cats -litter (under 12 weeks) ....................................................... $15.00

Cremation - Calculated per pound ................................................ $1.50

Live Traps – Rental – Weekly .......................................................... $5.00

C. ASSESSOR FEES

Assessor Maps

**Public Agency or representative of public agency: Half Price**

Assessor Plats

    1-2 per order ............................................................................... $15
    Extra Units ................................................................................ $8

Reproduction of Material

    Sales Data Subscription: Annual (1 per month) ............................... $350
    Tax Receipt Copies (minimum) ....................................................... 75 cents

Data Export Queries .................................................................... $60

Network Equipment Usage ............................................................. $60 per hour

Assessment and Tax Roll and Clerk Records .................................. Cost Recovery

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Single Remote Access Fee for A&T/C&E applications…………………………………………………………… $600 per month
Lookup Access Only ………………………………………………… minimum $5/month and $.30 per additional lookup

Fees Set by Law

- Warrant Fees ……………………………………………………………………………………………… $20 or cost, whichever is more
- Lien Search Fee – year 1 ………………………………………………………………………………… Set by Statute
- Lien Search Fee – subsequent years …………………………………………………………………… Actual cost
- Foreclosure Penalty …………………………………………………………………………………… $5 percent of total judgment taxes
- Garnishee Research Fee ……………………………………………………………………………… Set by Statute

Research Fee per Document, plus 25 cents per copy …………………………………………………………….. $4.75
Research Fee per Quarter Hour …………………………………………………………………………………… $15
Foreclosure Report Fee …………………………………………………………………………………………… $120
Delinquent Tax Report Fee ………………………………………………………………………………………… $120
Consolidations (Cancel and Combine) …………………………………………………………………………… $35
Proration of Value request (Deeds) ………………………………………………………………………………… $35
Subdivisions/Partitions/Condos …………………………………………………………………………………….. $120
Room Tax Determination Fee ……………………………………………………………………………………… $ 80
Short Term Rental Application & Neighbor Notification Fee …………………………………………………… $550
  Re-Inspection Following 2nd Inspection Fee ………………………………………………………………… $125 per additional inspection
  Ownership Transfer Only (no structural changes since issuance of permit) ……………………………… $50
  Ownership Transfer and Re-Inspection ………………………………………………………………………… $300
Enterprise Zone Processing Fee …………………………………………………………………………………….. $150

Farm/Forest

- Deferral Reapplication Fee ………………………………………………………………………………….. $75
- Application Fee ……………………………………………………………………………………………….. $75
- Small Tract Late Filing Fee …………………………………………………………………………………… Set By Statute
- Disqualification Fee …………………………………………………………………………………………… $150
- Calculation of Est. Deferred Taxes ………………………………………………………………………….. $150

Conservation Easement Application Fee ………………………………………………………………………… Set By Statute

Exemptions

- Processing Fee for Special Org ………………………………………………………………………………… $75
- Late Filing Fee …………………………………………………………………………………………………….. Set By Statute
- Veteran Late Filing Fee ………………………………………………………………………………………… Set By Statute
- Leased Property Application Fee ……………………………………………………………………………… $75
- Open Space Application ……………………………………………………………………………………… $250
- Open Space Disqualification …………………………………………………………………………………… $250

Manufactured Structures

- Exemption Fee …………………………………………………………………………………………………… $75
- Un-exemption Fee ………………………………………………………………………………………………… $75

Other Fees

- Taxing District Boundary Expansion/Withdrawal …………………………………………………………… $2,500
- New Urban Renewal Plan Set Up ………………………………………………………………………………… $2,500

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D. \textbf{BUDGET AND FINANCE}

\begin{itemize}
  \item NSF Charge \hspace{5cm} \$25
  \item Copy of Proposed or Adopted Budget \hspace{5cm} \$35
\end{itemize}

\section{E. \textbf{COMMUNITY DEVELOPMENT - BUILDING CODES}}

\subsection{Structural Permit Fees}

Construction values shall include all labor and material, but shall exclude the cost of the land. This section covers Residential and Commercial Structural, Commercial Mechanical, Alarm, and Fire Suppression Systems. All structural permits use valuation as determined by the International Code Council Valuation Data Table current as of April 1 of each year, when applicable as per OAR 918-050-0000 and OAR 918-309-0020 through 0070. When permits are required Masonry fireplaces/chimneys, Fences, Poles (signs, lights, flags, foundation repairs, etc. require a structural permit by valuation.)

$1 - \$500 \hspace{5cm} \$106$
$\$501-\$2,000 \hspace{5cm} $106.00 \text{ for the first } \$500 \text{ plus } \$3.32 \text{ for each additional } \$100, \text{ or fraction thereof}$
$\$2,001-\$25,000 \hspace{5cm} \$155.80 \text{ for the first } \$2,000 \text{ plus } \$13.26 \text{ for each additional } \$1,000 \text{ or fraction thereof}$
$\$25,001-\$50,000 \hspace{5cm} \$460.56 \text{ for the first } \$25,000 \text{ plus } \$9.95 \text{ for each additional } \$1,000 \text{ or fraction thereof}$
$\$50,001-\$100,000 \hspace{5cm} \$709.31 \text{ for the first } \$50,000 \text{ plus } \$6.64 \text{ for each additional } \$1,000 \text{ or fraction thereof}$
$\$100,001 \text{ & up} \hspace{5cm} \$1041.31 \text{ for the first } \$100,000 \text{ plus } \$5.53 \text{ for each additional } \$1,000 \text{ or fraction thereof}$

Moving structure permit, other than U-1 \hspace{5cm} \$106$
Moving structure permit, U-1 and Uninhabitable \hspace{5cm} \$583$
Demolition permit residential – total structure (Not subject to state surcharge) \hspace{5cm} \$292$
Demolition permit commercial – total structure less than 4,000 SF (Not subject to state surcharge) \hspace{5cm} \$152$
Demolition permit commercial – total structure larger than 4,000 SF (Not subject to state surcharge) \hspace{5cm} \$302$
Re-Roof residential when a permit is required \hspace{5cm} \$106$
Re-Roof commercial \hspace{5cm} \$3.32 \text{ for each additional } \$100, \text{ or fraction thereof}$

Foundation only fee. Optional program when the division can accommodate \hspace{5cm} \$292$

This fee is per 1,000 SF of structure in addition to the building permit fee.

\subsection{Solar Structural Installation Permits}

\subsection*{Solar Permit - Prescriptive Path System}

\begin{itemize}
  \item Solar Permit - Prescriptive Path System, fee includes plan review \hspace{5cm} \$250
\end{itemize}

Solar Permit – Non-Prescriptive Path System. Fee as per Structural Permit Fee table by valuation to include the solar panels, racking, mounting elements, rails and the cost of labor to install. Solar electrical equipment including collector panels and inverters shall be excluded from the Structural Permit valuation.

\subsection*{Investigation Fees}

Investigation fee – at cost \hspace{5cm} \$25

\begin{itemize}
  \item \textbf{Investigation Fees} – Actual or average cost may include supervision, overhead, equipment, and/or rate/wage of the employee(s) involved. Applicable to all disciplines.
\end{itemize}

Investigation fee – at cost \hspace{5cm} \$25

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\textbf{CLATSOP COUNTY ADMINISTRATIVE POLICY & PROCEDURE}

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Investigation fee – hourly ........................................ $106 per hour, minimum two hours
Inspections – structural, outside normal business hours (2 hours minimum) ....................... $106 per hour
Inspections – structural, for which no fee is specifically indicated (minimum charge 1 hour) .... $106 per hour

Residential Fire Suppression Permit Fees – Standalone 13R, fee includes plan review.
(See Plumbing Fee section for Multi-purpose/Continuous Loop System 13D)
Square footage of the residential structure to be covered:
Up to 2,000 square feet ........................................................................................................... $400
2,001 – 3,600 square feet ....................................................................................................... $500
3,601 – 7,200 square feet ....................................................................................................... $650
Greater than 7,201 square feet ............................................................................................. $800

Mechanical Permit Fees
Minimum Fee .......................................................................................................................... $106
Air Handling Unit .................................................................................................................. $41 per appliance
Air Conditioning Unit ........................................................................................................... $56 per appliance
Alteration of Existing HVAC System .................................................................................. $41 per appliance
Heat Pump ............................................................................................................................ $73 per appliance
Install/Replace Furnace
  Up to 100,000 Btus ............................................................................................................... $56 per appliance
  Over 100,000 Btus .............................................................................................................. $65 per appliance
Install/replace/relocate heaters, suspended, wall or floor mounted ...................................... $56 per appliance
Vent for appliance other than furnace ................................................................................... $45 per appliance
Appliance vent ...................................................................................................................... $41 per appliance
Dryer exhaust ....................................................................................................................... $41 per appliance
Hood ..................................................................................................................................... $41 per appliance
Exhaust fan connected to a single duct ................................................................................... $28 per appliance
Gas Piping
  1-4 outlets ......................................................................................................................... $23
  Each additional outlet ........................................................................................................... $7
Fireplace/Wood Stove .............................................................................................................. $41 per appliance

Other ...................................................................................................................................... $41 per appliance
Investigation fee – Mechanical ............................................................................................ See Structural – Investigation Fees
Inspections – mechanical, outside normal business hours (2 hours minimum) .................. $106 per hour
Inspections – mechanical, for which no fee is specifically indicated (minimum charge 1 hour)..... $106 per hour

Plumbing Permit Fees
One and Two Family Dwellings
1 Bathroom* .......................................................................................................................... $360
2 Bathrooms* ........................................................................................................................ $393
3 Bathrooms* ........................................................................................................................ $443

Each additional bathroom, half bathroom >3, kitchen >1 ....................................................... $52
Each additional 100 feet of sanitary, storm, and water service each or fraction thereof ............... $45
*Includes service one kitchen and first 100 feet of sanitary, storm an water service, hose bibbs, ice makers, underfloor low-point drain packages to include piping, gutters, downspouts, and perimeter system.

**Plumbing Schedule-Existing Residential Additions/Remodels or Alterations**

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Minimum Fee</td>
<td>$106</td>
</tr>
<tr>
<td>Plumbing fixtures, appliances, appurtenances (each)</td>
<td>$28</td>
</tr>
<tr>
<td>Water service, storm or sanitary sewer (first 100 feet)</td>
<td>$82</td>
</tr>
<tr>
<td>Each additional 100 feet of sanitary, storm and water or fraction thereof</td>
<td>$45</td>
</tr>
</tbody>
</table>

**Plumbing Schedule-Commercial, Multi-Family and Industrial**

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>New, additions, remodels, alterations</td>
<td></td>
</tr>
<tr>
<td>Commercial Minimum fee</td>
<td>$175</td>
</tr>
<tr>
<td>Water service, storm or sanitary sewer (first 100 feet)</td>
<td>$82</td>
</tr>
<tr>
<td>Each additional 100 feet of sanitary, storm and water service or fraction thereof</td>
<td>$45</td>
</tr>
</tbody>
</table>

**Residential Fire Suppression Permit Fees** - Multi-purpose/Continuous Loop System 13D, fee includes plan review.

<table>
<thead>
<tr>
<th>Square footage of the residential structure to be covered:</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 2,000 square feet</td>
<td>$250</td>
</tr>
<tr>
<td>2,001 – 3,600 square feet</td>
<td>$300</td>
</tr>
<tr>
<td>3,601 – 7,200 square feet</td>
<td>$350</td>
</tr>
<tr>
<td>Greater than 7,200 square feet</td>
<td>$400</td>
</tr>
</tbody>
</table>

**Medical Gas and Process Piping Permit Fees**

- $1-5000 ........................................................................ $106
- $5001-10,000 ....................................... $106.00 for the first $5000 plus $3.20 for each additional $100 or fraction thereof
- $10,001-100,000 .......... $266.00 for the first $10,000 plus $10.99 for each additional $1,000 or fraction thereof
- $100,001 and above ........ $1,166.00 for the first $25,000 plus $7.78 for each additional $1,000 or fraction thereof
- Investigation fee – Plumbing ........................................ See Structural – Investigation Fees

**Inspections** – plumbing, outside normal business hours (2 hours minimum)............. $106 per hour

**Manufactured Dwelling Placement Permit Fees**

Placement (includes placement and concrete slab, runners or foundation when prescriptive, electrical feeder, plumbing connections and all cross-over connections, first 30 linear feet of site utilities.) New electrical services or additional branch circuits, and new plumbing-may require separate permits. All decks 30” or more above ground, carports, garages, porches, and patios are based on valuation and may also require separate permits. See Structural schedule by valuation for non-dwelling modular placements.

<table>
<thead>
<tr>
<th>Dwelling Category</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single wide</td>
<td>$202</td>
</tr>
<tr>
<td>Double wide</td>
<td>$404</td>
</tr>
<tr>
<td>Triple wide</td>
<td>$604</td>
</tr>
</tbody>
</table>
Earthquake resistant bracing system (when not part of original dwelling installation) ........................................ $126
Manufactured Dwelling cabana ......................................................................................................................... See the Structural Schedule
State of Oregon Administration Fee ................................................................................................................ $30

**Manufactured or RV Park Development Permit Fees**
The Area Development Permit fee to be calculated based on the valuations shown in Table 2 of OAR 918-600-0030 for Manufactured Dwelling/Mobile Home Parks and Table 2 of OAR 918-650-0030 for Recreational Park and Organizational Camp and applying the valuation amount to the Structural Permit Fee table included in this schedule.

**Electrical Permit Fees**
New Construction
Residential 1,000 square feet or less (includes service) .................................................................................. $201
Each additional 500 square feet ....................................................................................................................... $56
Limited energy – new residential construction ............................................................................................... $64
Each manufactured home or modular dwelling service .................................................................................. $104

**Multi-family**
New Multifamily Construction, fee for largest unit calculated using above sq. ft. rates-plus 50% of permit fee for each additional unit
Multifamily, new construction-Limited Energy System per floor ...................................................................... $64
Multifamily, new construction-Protective Signaling-per floor ......................................................................... $64
Service or feeder (installation, alteration or relocations)
200 amps or less ........................................................................................................................................... $121
201 amps to 400 amps ................................................................................................................................ $160
401 to 600 amps ......................................................................................................................................... $240
601 amps to 1000 amps ............................................................................................................................... $360
Over 1000 amps or volts .............................................................................................................................. $674
Reconnect only ............................................................................................................................................... $104
Temporary service or feeder
200 amps or less ........................................................................................................................................... $104
201 amps to 400 amps ................................................................................................................................ $143
Over 400 amps to 600 amps ........................................................................................................................ $201
Over 600 amps to 1000 amps ....................................................................................................................... $360
Over 1000 amps .......................................................................................................................................... $674
Branch Circuits (new, alteration or extension, per panel)
Branch circuits with purchase of service or feeder ....................................................................................... $8 each
Branch Circuits *without* purchase of service or feeder
First branch circuit ........................................................................................................................................... $79
Each additional branch circuit ....................................................................................................................... $8
Miscellaneous (service or feeder not included)
Each well pump and alarm or irrigation ....................................................................................................... $104
Each sign or outline lighting ........................................................................................................................ $104
Commercial limited energy panel, alteration or extension ........................................................................ $104
Additional inspection over the allowable ..................................................................................................... $94
**All Renewable Energy systems up to 25 KVA**
- Renewable energy 5 KVA or less: $113
- Renewable energy 5.01 KVA to 15 KVA: $152
- Renewable energy 15.01 KVA to 25 KVA: $230

**Solar generation systems over 25 KVA**
- Each KVA 25.01 to 100 KVA: $9
- 100.01 KVA and over: no additional fee

**Wind Generation systems over 25 KVA**
- 25.01 to 50 KVA: $342
- 50.01 to 100 KVA: $639
- Over 100.01 KVA: Use standard service and feeder fees above

**Plan Review Fees**
- Structural Plan: 75% of building permit fee
- Fire and Life Safety: 50% of building permit fee
- Electrical: 35% of electrical permit fee
- Mechanical: 35% of mechanical permit fee
- Plumbing: 35% of plumbing permit fee
- Medical Gas/Process Piping: 35% of medical gas permit fee
- Commercial Fire Protection and Prevention: 75% of building permit fee
- Manufactured Dwelling or RV Park: 65% of building permit fee
- Additional plan review when applicable-all trades, 30 minutes minimum: $54

**Expedited Plan Review.** Structural, in addition to standard plan review fees – plan review services outside of normal time frames established, must be pre-approved, subject to availability and resources. 50% of standard plan review fee.

**Deferred Submittal review fees.** 65% of building permit based on the value of the deferred portion or system with a minimum of $250. In addition to standard plan review fees.

**Phased Construction Plan Review fees.** Plan review fee based on a minimum phasing fee of $315 plus 10% of the total project building permits not to exceed $1,500 for each phase. In addition to standard plan review fees.

**Miscellaneous Building Fees**
- Pre-application meeting for Tenant Improvement, as requested by applicant: $117
  - Per meeting, not to exceed one hour, first meeting is at no charge
Pre-application meeting for Commercial or Multi-Family projects as requested by applicant .................. $233
Per meeting, not to exceed two hours, first meeting is at no charge
Temporary Certificate of Occupancy, Residential, Maximum 30 days per fee (No charge for permanent certificates) ................................................................. $200
Temporary Certificate of Occupancy, Commercial, Maximum 30 days per fee (No charge for permanent certificates) ................................................................. $400
Change of Use or Change of Occupancy permit fee, when no structural work proposed .................. $126

**Administrative Fees**

Research Fee, per all disciplines, minimum 30 minutes ................................................................. $54
State Surcharge. All permits are subject to the current State of Oregon Surcharge ............................... 12%
Agricultural Exempt Certificate ........................................................................................................ $30
Replacement of Electrical Label ......................................................................................................... $30
Re-inspection fees each additional inspection over the allowable per all disciplines ....................... $106

**Permit Extensions – not subject to state surcharge**

Extension of permits shall be requested in writing with justifiable cause demonstrated. Extension request must be received prior to the expiration date of the permits.

NOTE: It is not the responsibility of the Clatsop County Building Division to notify the permit holder of expiration dates.

Residential permit extension fee (Includes s/m/p/e)
  1st request................................................................................................................................. $106
  2nd request ............................................................................................................................... $212

Commercial permit extension fee (Each code discipline)
  1st request ................................................................................................................................. $106
  2nd request ............................................................................................................................... $212

**Reinstatement of Expired Permits – subject to state surcharge**

Expired permits not yet six months past their expiration date (Each code discipline) ......................... $106
  Or whichever is greater ............................................................................................................... $212
Expired permits six months past their expiration date but not yet 12 months (Each code discipline) .... $106
  Or ½ the original permit fees, whichever is greater
Expired permits over one year past their expiration date .............. New application with current valuation fees
Expired permits lacking only final inspection (Each code discipline) ............................................... $106
However, in the event the governing code has been updated, additional cost and requirements necessary.

**F. COMMUNITY DEVELOPMENT - PLANNING**

Pursuant to ORS 215.416(10), the following fees represent the average cost of processing each permit application. If the actual cost of processing a permit processed as a Type Ila, Type III, or Type IV procedure or an appeal of a Type Ila or Type III decision exceeds the amount of the fee by more than 20% because of the detailed nature of the proposal or the number of hearings that are required, the applicant shall be responsible for paying the full amount of the actual cost.

**Appeals**

Director to Planning Commission/Hearings Officer – refunded if appellant prevails.................. Set by Statute $250
Hearings Officer/Planning Commission Decision to Board of Commissioners ............................. $3,170

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**CLATSOP COUNTY ADMINISTRATIVE POLICY & PROCEDURE A-9**

Revised August 2020

CLATSOP COUNTY
ADMINISTRATIVE POLICY & PROCEDURE
Policy A-9
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Permits and Reviews

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Sign-Off (Compatibility) - don’t require development of findings</td>
<td>$60</td>
</tr>
<tr>
<td>Agency Sign-Off (Compatibility) - requiring development of findings</td>
<td>$215</td>
</tr>
<tr>
<td>Beach Front Protection 1 – 5 lots</td>
<td>$835</td>
</tr>
<tr>
<td>Beach Front Protection 6+ lots</td>
<td>$890</td>
</tr>
<tr>
<td>Commercial Site Plan Review</td>
<td>$210</td>
</tr>
<tr>
<td>Comprehensive Plan or Zoning Ordinance Map Amendment</td>
<td>$5000</td>
</tr>
<tr>
<td>Comprehensive Plan or Zoning Ordinance Text Amendment</td>
<td>$5000</td>
</tr>
<tr>
<td>Conditional Use (CUP) - Type Ia, Type Iii</td>
<td>$1500</td>
</tr>
<tr>
<td>Conditional Use (CUP) - Type II</td>
<td>$1200</td>
</tr>
<tr>
<td>Development Permit - New or Expanded</td>
<td>$85</td>
</tr>
<tr>
<td>Extensions – Partitions</td>
<td>50% of application fee</td>
</tr>
<tr>
<td>Extensions – Subdivisions</td>
<td>50% of application fee</td>
</tr>
<tr>
<td>Extensions - All others</td>
<td>50% of application fee</td>
</tr>
<tr>
<td>Floodplain and Other Review Type I</td>
<td>$110</td>
</tr>
<tr>
<td>Floodplain and Other Review Type II</td>
<td>$440</td>
</tr>
<tr>
<td>Floodplain – Previously Exempt Activities</td>
<td>$50</td>
</tr>
<tr>
<td>Geologic Hazard Review</td>
<td>$440</td>
</tr>
<tr>
<td>Goal 5 Economic, Environmental, Social and Energy Consequences Review</td>
<td>$5000</td>
</tr>
<tr>
<td>Goal Exception</td>
<td>$5000</td>
</tr>
<tr>
<td>Lot of Record</td>
<td>$250</td>
</tr>
<tr>
<td>Other Hearings, Non-Conforming Use, Etc.</td>
<td>$1300</td>
</tr>
<tr>
<td>Partitions</td>
<td>$1000</td>
</tr>
<tr>
<td>Pre-App conference</td>
<td>$250</td>
</tr>
<tr>
<td>Property Line Adjustment</td>
<td>$250</td>
</tr>
<tr>
<td>Resource Zone Dwellings (F-80, AF, and EFU)</td>
<td>$1200</td>
</tr>
<tr>
<td>Review Use Minor</td>
<td>$660</td>
</tr>
<tr>
<td>Review Use Major</td>
<td>$865</td>
</tr>
<tr>
<td>Sign Permit</td>
<td>$60</td>
</tr>
<tr>
<td>Similar Use Authorization</td>
<td>$2600</td>
</tr>
<tr>
<td>Site Visit</td>
<td>$140</td>
</tr>
<tr>
<td>Subdivision – 4-6 lots</td>
<td>$2500</td>
</tr>
<tr>
<td>Planned Development &amp; Destination Resort (requires zone change fee) Subdivision - seven (7) or more lots</td>
<td>$4000</td>
</tr>
<tr>
<td>Temporary Use – Original</td>
<td>$300</td>
</tr>
<tr>
<td>Temporary Use - Renewal</td>
<td>$50</td>
</tr>
<tr>
<td>Third Party Review of Technical Reports</td>
<td>Actual Cost at Per Hour Rate</td>
</tr>
<tr>
<td>Variance</td>
<td>$2000</td>
</tr>
<tr>
<td>Violation</td>
<td>Double Application Fee</td>
</tr>
</tbody>
</table>

Rural Addressing

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>New or changed address issued or changed at request of property owner</td>
<td>$225</td>
</tr>
<tr>
<td>New or changed road name issued or changed at request of property owner</td>
<td>$265</td>
</tr>
<tr>
<td>Replacement address stakes</td>
<td>$60</td>
</tr>
</tbody>
</table>
G. COUNTY CLERK & ELECTIONS

BoPTA Filing Fee ........................................................................................................................................... $35
Liquor License .................................................................................................................................................. Set by Statute
Liquor License Renewal .................................................................................................................................. Set by Statute
OLCC New Application ................................................................................................................................. Set by Statute
Marriage License/Domestic Partnerships ........................................................................................................... $60
Marriage Ceremony [ORS 205.320(6)] ............................................................................................................ Set by Statute
Marriage 3-Day Waiver .................................................................................................................................... $20
Wedding Witness Service Fee ........................................................................................................................... $15/per witness
Certification of Copies ....................................................................................................................................... Set by Statute
Certification of Marriage License .................................................................................................................... Set by Statute
Additional copies ................................................................................................................................................ Set by Statute
Certification of Voter Registration .................................................................................................................. Set by Statute
Election Report/Lists ......................................................................................................................................... See OAR 165-002-0020
Passport Processing ....................................................................................................................................... Set by Statute
Passport Photo .................................................................................................................................................. $20
Registering each additional page of a document .............................................................................................. Set by Statute
Registering each additional transaction of a document ...................................................................................... Set by Statute
Appointment of Trustee .................................................................................................................................. Set by Statute
Death Certificate ................................................................................................................................................ Set by Statute
Deed.................................................................................................................................................................. Set by Statute
Easement .......................................................................................................................................................... Set by Statute
Judgement........................................................................................................................................................ Set by Statute
Lien/Lien Satisfaction ..................................................................................................................................... Set by Statute
Lien/Lien Satisfaction w/o HAT .......................................................................................................................... Set by Statute
IRS Lien .............................................................................................................................................................. Set by Statute
Mortgage/Deed of Trust/Line of Credit .............................................................................................................. Set by Statute
Mortgage Satisfaction ...................................................................................................................................... Set by Statute
Non-Standard Form Fee, Per Document ........................................................................................................... Set by Statute
Military Discharge DD-214 ............................................................................................................................... No Charge
Partial Reconveyance ...................................................................................................................................... Set by Statute
Partition Plat Map ............................................................................................................................................. Set by Statute
Power of Attorney .......................................................................................................................................... Set by Statute
Reconveyance .................................................................................................................................................. Set by Statute
Satisfaction of Judgement ............................................................................................................................... Set by Statute
Substitution of Trustee ..................................................................................................................................... Set by Statute
Town Plat Map ................................................................................................................................................ Set by Statute
H. DISTRICT ATTORNEY

Photocopy Charges:
Misdemeanor .................................................. $10 per case up to 30 pages/25 cents per page in excess of 30 pages
Felony .................................................. $15 per case up to 30 pages/25 cents per page in excess of 30 pages
Media .............................................................. $15 per tape/cd/dvd
Flash Drive 4gb .................................................. $27
Flash Drive 8gb .................................................. $30
Flash Drive 16gb ............................................... $37
Flash Drive 32gb ................................................. $45
Flash Drive 64gb ................................................ $57
Flash Drive 128gb .............................................. $80
Color copies – excess 30 pages .................................. $1.25 per page

I. GIS FEES

STANDARD PAPER MAP PRODUCTS

A/B size (8 ½ x 11 – 13 x19") .......................................................... Add $3 for color, orthophotos, saturated shading $5
C/D size (24” sheet roll) Standard map product .......................................................... Add $10 for color, orthophotos, saturated shading $25 per sheet
Discounted price for government, nonprofit organizations, bulk rate ........................................ $20 per /sheet
E Size (36” sheet roll) Standard map products .................................................. Add $15 for color, orthophotos, saturated shading $35 per sheet
Discounted price for government, nonprofit organizations, bulk rate ........................................ $30 per sheet
Programming Fee for custom maps and analysis .......................................................... $75 per hour

All Department – FTP or e-mail Charge ........................................................................ $8
DIGITAL MAP PRODUCTS

Tax maps (PDF format) .................................................................................................................. $100 entire county
County layers (roads, hydro, PLSS, elevation, soils, etc.) .............................................................. $25 per township-range
2002 color orthophotos – per ¼ township .................................................................................... $100

All GIS mapping products not specifically addressed by the GIS Fee Schedule will be charged at cost recovery.

PUBLIC WORKS/SURVEYOR MAPS
Will follow A&T/GIS lead for maps produced by GIS

J. INFORMATION SYSTEMS

Information Systems Manager ....................................................................................................... $90/hour
Custom Programming .................................................................................................................... $75/hour
Network Installation/Support ....................................................................................................... $75/hour
Telecom Installation/Support ........................................................................................................ $75/hour
PC Installation/Support .................................................................................................................. $50/hour
Network Usage ............................................................................................................................ $25/hour
Remote Access Setup ..................................................................................................................... Cost Recovery

K. JUVENILE DEPARTMENT Probation Supervision

Misdemeanor – One-time fees ........................................................................................................ $25
Felony – One time fees ................................................................................................................... $45

L. PARKS

County Park Fees will increase annually by an amount not less than 2.5% nor more than 5% based upon the change in the All US CPI-U for the period July to July beginning July 1, 2000, pursuant to Board Resolution adopted April 28, 1999.

Cullaby Lake Park
   Entry Fee .................................................................................................................................... $5 per vehicle
   Shelter Fee ................................................................................................................................. $35 per group
   John Day .................................................................................................................................... $5 day use fee
   Carnahan Park ............................................................................................................................ $5 day use fee
   Special Event Permit .................................................................................................................. $45
   Annual County Pass ................................................................................................................... $100
   Annual Pass Extended User ........................................................................................................ $75
   Includes $30 Annual Pass. If applicant already has an annual pass, cost will be reduced to $50.

Extended User – Lost Key Replacement Fee .................................................................................. $30

Annual park pass will be valid one year from the month of purchase and honored for vehicles displaying passes at Cullaby Lake County Park, John Day County Park and Carnahan County Park.

Commercial Film Use Fees
   1 - 5 participants ....................................................................................................................... $100
   6 - 30 participants ...................................................................................................................... $150
   31 - 60 participants .................................................................................................................... $300
   61+ participants ......................................................................................................................... $400
CLATSOP COUNTY ADMINISTRATIVE POLICY & PROCEDURE A-9

Exclusive Use Fees
Exclusive use of a specific area of a County Park (other than a shelter, camping place or boat ramp) or group use where no admission fee is paid (after hours or off season):
Minimum for exclusive use .......................................................................................................................... $25
50 - 100 participants ................................................................................................................................. $50
101 - 200 participants .............................................................................................................................. $75
201 - 400 participants ............................................................................................................................... $150
401 - 600 participants ............................................................................................................................... $300
600+ participants ....................................................................................................................................... $500

Exclusive Use of Cullaby Lake Boat Ramp

The hourly rental fee for exclusive use of the Cullaby Lake Boat Ramp shall be up to a maximum of 10 hours per day:
Monday after Labor Day to June 29 – Winter rates .................................................................................. $50/hour
June 30 to Sunday after Labor Day – Summer weekdays ........................................................................ $100/hour
June 30 to Sunday after Labor Day – Summer Weekends ..................................................................... $200/hour

M. PUBLIC HEALTH SERVICES

Licenses are purchased on a calendar year basis January – December.
Proration of half the annual fee occurs October 1.

FOOD SERVICE

Full Service Restaurant Fees are based on Seating Criteria
0-15 Seats .................................................................................................................................................. $495
16-50 Seats .................................................................................................................................................. $560
51-150 Seats ............................................................................................................................................... $630
Over 150 seats ............................................................................................................................................ $700
Bed & Breakfast ......................................................................................................................................... $205
Limited Service Restaurant ....................................................................................................................... $280
Commissary ................................................................................................................................................ $350
Mobile Unit (Class 1 or 2) ......................................................................................................................... $170
Mobile Unit (Class 3 or 4) ........................................................................................................................ $190
Warehouse ................................................................................................................................................ $140

*A license expires annually on December 31.
To reinstate a license after December 31 expiration, the applicant must pay a reinstatement fee of $100.00 in addition to the license fee required. The reinstatement fee shall increase by an additional $100.00 on the first day of each succeeding month until the license is reinstated.

PLAN REVIEW FOR FOOD SERVICE

INITIAL CONSTRUCTION

Full Service Restaurant ............................................................................................................................. $180
Bed & Breakfast ........................................................................................................................................ $115
Limited Service Restaurant ...................................................................................................................... $115
Commissary ............................................................................................................................................... $180
Mobile Unit (Class 1 or 2)........................................................................................................................ $115
Mobile Unit (Class 3 or 4) ........................................................................................................................ $125
### Remodeling
- Full Service: $135
- All Other Food Facilities: $75
- Bed and Breakfast: $115
- Limited Service Restaurant: $115
- Commissary: $180
- Mobile Units: Class 1 or 2: $115
- Mobile Units: Class 3 or 4: $125
- Warehouse: $75
- New Owner Admin Fee: $75

### Temporary Restaurant Licenses
- Single Event:
  - One day: $55
  - Two or more days: $100
  - Benevolent Organization Administrative Annual Fee: $25

### Operational Plan Review
- *Required for Intermittent & Seasonal Licenses: $60
- Intermittent: 30 days: $100
- Seasonal: 90 days: $100

### Hourly Re-inspection Fee
- *Charged in 15-minute increments: $100

### Tourist Facility
- Bed & Breakfast: $90
- Travelers Accommodation: $90
- Organizational Camp: $95
- Picnic/Recreational Park: $90 base, plus surcharge per spaces, see below
  - $3.00 per space: For 1-50 spaces, plus
  - $2.50 per space: For 51-100 spaces, plus
  - $2.00 per space: For over 100 spaces
- Change of Ownership Fee: $75

*A license expires annually on December 31.
Facilities that renew later than January 15th will be assessed a penalty fee of 50% of the original fee, and another 50% on the first day of each successive month of delinquency.

### Swimming Pool & Spa
- First Pool/Spa: $150
- Each additional Pool/Spa: $90
Plan Review for Pool/Spa ........................................................................................................... $350

OTHER FEES
Day Care Inspections .................................................................................................................. $175
Schools-Full Service..................................................................................................................... $110
Schools-Satellite ......................................................................................................................... $70
Head Start ....................................................................................................................................... $110
Inspection for School Lunch Program .......................................................................................... $55
Food Handlers Training .................................................................................................................. $10
Duplicate Food Card Fee ............................................................................................................... $5

Hourly Environmental Health rate:
Social/Mass Gathering Event ...................................................................................................... $100

Tobacco Retail License ................................................................................................................ $350
*A license expires annually on December 31.
To reinstate a license after December 31 expiration, the applicant must pay a reinstatement fee of $100.00 in addition to the license fee required. The reinstatement fee shall increase by an additional $100.00 on the first day of each succeeding month until the license is reinstated.

COMMUNITY HEALTH & FAMILY PLANNING

*IMMUNIZATIONS
Child Immunizations (0 through 18 yrs)
Private Fee Ins. 1st Shot .............................................................................................................. $60.00 + cost of vaccine
Additional Shots......................................................................................................................... $30.00 + cost of vaccine
Child Immunizations (0 through 18 yrs).................................................................................. State supplied vaccine fees will be waived if qualified
Adult Immunizations (19 yrs and older) 1st Shot ....................................................................... $60.00 + cost of vaccine
Additional Shots......................................................................................................................... $30.00 + cost of vaccine

**OFFICE VISITS
CD/STD Screening Visit Short Established................................................................................ $110
CD/STD Screening Visit Short New .......................................................................................... $150
CD/STD Counseling Visit Established ....................................................................................... $150
CD/STD Counseling Visit New .................................................................................................... $200
CD/STD Counseling Visit Long Established ............................................................................... $200
CD/STD Counseling Visit Long New .......................................................................................... $250
CD/STD Screening Visit Extended Comprehensive Established ................................................. $250
CD/STD Screening Visit Extended Comprehensive New.......................................................... $300
CD/STD Screening Visit Extended Complete Established.......................................................... $300
CD/STD Screening Visit Extended Complete New...................................................................... $350
### FAMILY PLANNING OFFICE VISITS

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit Short Established</td>
<td>$110</td>
</tr>
<tr>
<td>Office Visit Short New</td>
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<tr>
<td>Counseling Visit Short Established</td>
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<tr>
<td>Counseling Visit Short New</td>
<td>$200</td>
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<tr>
<td>Office Visit Long Established</td>
<td>$200</td>
</tr>
<tr>
<td>Office Visit Long New</td>
<td>$250</td>
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<tr>
<td>Office Visit Extended Comprehensive Established</td>
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<td>$300</td>
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<tr>
<td>Office Visit Extended Complete Established</td>
<td>$300</td>
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<tr>
<td>Office Visit Extended Complete New</td>
<td>$350</td>
</tr>
<tr>
<td>DMAP Visit Fee</td>
<td>$135</td>
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<tr>
<td>CCARE Fee</td>
<td>$150</td>
</tr>
<tr>
<td>Vasectomy Counseling</td>
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<tr>
<td>Vasectomy Procedure</td>
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<tr>
<td>IUD Insertion</td>
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<tr>
<td>IUD Removal</td>
<td>$220</td>
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<tr>
<td>Implant Procedure; Insertion -or- Removal</td>
<td>$360</td>
</tr>
<tr>
<td>Implant Removal with Reinsertion</td>
<td>$700</td>
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<tr>
<td>Depo Provera Injection</td>
<td>$60</td>
</tr>
<tr>
<td>Slide Pap Smear 21-24 yr olds and &gt; 30</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Liquid Paps 24-30 yr olds</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Liquid Paps w/ HPV Reflex 24-30 yr olds</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>HPV Digene 21-24 yr olds and &gt; 30</td>
<td>Actual Cost</td>
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</table>

### SUPPLIES

<table>
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<tr>
<th>Item</th>
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<tbody>
<tr>
<td>CCARE Drugs (ORS)</td>
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</tr>
<tr>
<td>CCARE Lab Tests (ORS)</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Condoms Female 3 pack</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Condoms</td>
<td>Actual Cost</td>
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<tr>
<td>Condoms Non-latex (box 6)</td>
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<tr>
<td>Contraceptive Foam</td>
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<tr>
<td>Contraceptive Jelly</td>
<td>Actual Cost</td>
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<tr>
<td>Cycle Beads</td>
<td>Actual Cost</td>
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<tr>
<td>Fluconazole</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Mirena / Paragard IUD</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Lutera</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Depo Provera Injection</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Diaphragm</td>
<td>Actual Cost</td>
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<tr>
<td>Nexplanon</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Metronidazole</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Nuva Ring</td>
<td>Actual Cost</td>
</tr>
<tr>
<td>Ortho Cyclen</td>
<td>Actual Cost</td>
</tr>
</tbody>
</table>
Ortho Micronor .............................................................................................................. Actual Cost
Ortho TriCyclen .............................................................................................................. Actual Cost
Ortho TriCyclen Lo ......................................................................................................... Actual Cost
Plan B One Step ............................................................................................................. Actual Cost

LABS
Orasure Test Kit ............................................................................................................. Actual Cost
Sulfamethoxazole tablets ............................................................................................... Actual Cost
Venipuncture Test Kit ................................................................................................... Actual Cost
Chlamydia/Gonorrhea Test (urine) .............................................................................. Actual Cost
Chlamydia/Gonorrhea Test (rectal/phar) .................................................................... Actual Cost
Hemoglobin .................................................................................................................. Actual Cost
Hep A Total .................................................................................................................... Actual Cost
Hep B IgM ....................................................................................................................... Actual Cost
Hep Bc AB ....................................................................................................................... Actual Cost
Hep Bs AB ....................................................................................................................... Actual Cost
Hep B AG ......................................................................................................................... Actual Cost
Hep C Screen ................................................................................................................ Actual Cost
HIV ................................................................................................................................ Actual Cost
Measles / Rubeola ......................................................................................................... Actual Cost
Mumps IgG ...................................................................................................................... Actual Cost
Orasure Test .................................................................................................................. Actual Cost
Pap Smear ....................................................................................................................... Actual Cost
Pregnancy Test .............................................................................................................. Actual Cost
QuantiFERON ................................................................................................................. Actual Cost
Syphilis .......................................................................................................................... Actual Cost
Urinalysis ....................................................................................................................... Actual Cost
Venipuncture ................................................................................................................ Actual Cost
Wet Mount ....................................................................................................................... Actual Cost

OTHER CHARGES
Vital Statistics Certified Copy ........................................................................................ Set by ORS 432.146
Medical Record Copy ........................................................................................................ $5 per ¼ hour plus 25 cents per page
Minimum request Fee for Medical Record .................................................................... $5

*Immunizations Note: Per Oregon Health Authority guidelines, state provided vaccines will be used for all who qualify. Otherwise, all immunizations charges are actual cost. All current prices are subject to change due to acquisition changes.

**Office Visits Note: Clinic Staff will determine if you are eligible for low cost or no cost counseling, laboratory services and / or medications based on Oregon Public Health Division programs.

***Family Planning Office Visits Note: Per the Federally approved Family Planning sliding fee scale will be applied when appropriate to CCare and Title X clients.
****Supplies Note: Cost of supply + shipping/handling charges and shelving cost (10 percent above cost, shipping and handling). All current prices are subject to change due to acquisition changes.

****Lab Note: All lab tests are actual cost. All current prices are subject to change due to acquisition changes.

**BABIES FIRST**
Babies First Services – State Set ........................................................................................................... $310.42
CaCoon (Care Coordination) – State Set .................................................................................................. $310.42
The current fee charged for Babies First and CaCoon is $460.36 per visit. However, the County must provide a revenue match that adjusts this fee downward to what the County actually keeps.

**ONSITE WASTEWATER MANAGEMENT**

**RESIDENTIAL FEES ................................................................. County ........... DEQ ............... Total Fee**

**New Site Evaluations**
Single Family Dwelling – First lot ........................................................................................................ $750 .............. $100 ........................ $850
Each additional lot evaluated during initial visit ............................................................................... $750 .............. $100 ........................ $850

**Construction Installation Permits**
New Construction-Standard trench, redundant, absorption in Saprolite, steep slope, aerobic ........................................................ $1100 .......... $100 ........................ $1200
New Construction-Alternative Treatment Tech (ATT), capping fill, pressurized, tile dewatering .................................................................................................................. $1350 .......... $100 ........................ $1450
New Construction-Sand filter bottomless, recirculating gravel .................................................................................................................. $1650 .......... $100 ........................ $1750
New Construction-Install holding tank ................................................................................................. $950 .......... $100 ........................ $1050
New gray water disposal sump ............................................................................................................. $495 .......... $100 ........................ $595
Pump or siphon system needed-in addition to permit fee ................................................................ $80 .......... $100 ........................ $180
Repair Residential-Minor (tank to distribution box) ........................................................................ $290 .......... $100 ........................ $390
Repair Residential-Major (drain field) ................................................................................................. $590 .......... $100 ........................ $690
Alterations-Minor (tank to distribution box) ....................................................................................... $300 .......... $100 ........................ $400

Alterations-Major (drain field) ........................................................................................................ $610 .......... $100 ........................ $710
Reinstatement, Transfer, Renewals (original permit within 1 yr of expiration)-No visit ....................... $175 .......... $100 ........................ $275
Reinstatement, Transfer, Renewals-Visit ............................................................................................ $570 .......... $100 ........................ $670

**Other Onsite Activities**
Authorization Notice-no visit ............................................................................................................. $175 .......... $100 ........................ $275
Authorization Notice-Visit (required on systems greater than 10 years old) ..................................... $675 .......... $100 ........................ $775
Existing System Evaluation-Visit (includes time of sale inspection, planning review, other system evaluations) ................................................................. $200 .......... $100 ........................ $300
Mobile Hardship Renewal Authorization
### Field visit required

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>No field visit required</td>
<td>$175</td>
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</tbody>
</table>

**Miscellaneous**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research fee per quarter hour</td>
<td>$20</td>
</tr>
<tr>
<td>Ordinance 901 Septic System Review</td>
<td>$130</td>
</tr>
<tr>
<td>Records request fee, plus .25 cents a copy</td>
<td>$4</td>
</tr>
<tr>
<td>EH field time (re-inspections, compliance) hourly, prorated at 15-minute increments</td>
<td>$300</td>
</tr>
</tbody>
</table>

### COMMERCIAL FEES

**County Fees Based on Gallons Per Day (gpd)**

**DEQ**

#### New Site Evaluations

**First 1000 … 1001-1500 … 1501-2000 … 2001-2500**

**Commercial Facility System**

- First 1,000 gallons projected flow ............................................... $750  
- $935  
- $1125  
- $1320  
- $100

#### Construction Installation Permits

**First 1000 … 1001-1500 … 1501-2000 … 2001-2500**

**New Construction-Standard trench, redundant, absorption in**

- Saproline, steep slope, aerobic ............................................... $1100  
- $1200  
- $1310  
- $1415  
- $100

**New Construction-Alternative**

- Treatment Tech (ATT), capping fill, pressurized, tile dewatering ........... $1350  
- $1430  
- $1515  
- $1600  
- $100

**New Construction-Sand filter**

- Bottomless, recirculating gravel ............................................... $1650  
- $1800  
- $1860  
- $1960  
- $100

**New Construction-Install holding tank**

- $1050  
- $1100  
- $1150  
- $1250  
- $100

**New gray water disposal sump**

- $495  
- $600  
- $700  
- $800  
- $100

**Minor Repair Permit (tank to distribution box)**

- $500  
- $500  
- $100

**Major Repair Permit (drain field)**

- $1100  
- $1100  
- $100

**Reinstatement, Transfer, Renewals**

- (original permit within 1 yr of expiration)-No Field visit ................ $175  
- $175  
- $100

**Reinstatement, Transfer, Renewals- Field Visit**

- $570  
- $570  
- $100

#### Other Onsite Activities

**Authorization Notice-no visit** ......................................................... $175  

**Authorization Notice-Visit**

- (required on systems greater than 10 years old) ................................... $675  
- $100

**Pumper Truck Inspection** ................................................................. $110

- Each additional truck per same visit .................................................. $55

**Annual Holding Tank Report Fee** ....................................................... $31

**Annual Operation & Maintenance Report Fee** ......................................... $62
Miscellaneous
Research fee per quarter hour .................................................................................................................................................. $20.00
Records request fee, plus .25 cents a copy .......................................................................................................................... $4
EH field time (re-inspections, compliance)
  hourly, prorated at 15-minute increments ......................................................................................................................... $300

N. PUBLIC WORKS

Roads Division
Permits
  Operations on County or Public ........................................................................................................................................... $-0-
  Road Approaches .............................................................................................................................................................. $-0-

Engineering Review
  Development Engineering Review .............................................................................................................................................. $100/hr

Printing and Photocopy per A&T Fee Schedule
Will follow A&T/GIS fee schedule for maps produced by Roads GIS personnel

Surveyor Division
Survey Recording ....................................................................................................................................................................... $395*
Affidavit of Correction ........................................................................................................................................................ $105

Subdivision Approval
  Pre Monumented .................................................................................................................................................................... $1790* + $26 per lot
  Post Monumented ................................................................................................................................................................. $2400* + $50 per lot
Condominium Approval ........................................................................................................................................................ $2,570* + $50/per UNIT
Repeated Field Checks ........................................................................................................................................................ $100 per hour
Repeated Office Checks ........................................................................................................................................................ $50 per hour
Partition Approval ................................................................................................................................................................. $1,100*
Certified Copies ...................................................................................................................................................................... $10
  Additional Page ..................................................................................................................................................................... $2
Vacation Index ......................................................................................................................................................................... $200
Road Vacation ........................................................................................................................................................................ $5786 + any additional costs
  *cost includes first 5 pages  $25 for each additional page

Black and White Printing
  8.5 x 11 ................................................................................................................................................................................ $0.25 per page
  11 x 17 ................................................................................................................................................................................ $1.50 per sheet
  18 x 24 ................................................................................................................................................................................ $2 per sheet
  24 x 36. $5 per sheet Emailed images ............................................................................................................................... $2 per document

Color Printing
  8.5 x 11 ................................................................................................................................................................................ $5
  11 x 17 ................................................................................................................................................................................ $8
  18 x 24 ................................................................................................................................................................................ $20
  Emailed images ................................................................................................................................................................. $5 per document
O. SHERIFF’S OFFICE PAROLE AND PROBATION SERVICES

Supervision Fees (Monthly) ........................................................................................................ $40
Electronic House Arrest/Electronic Monitoring (Intake)

A. Intake ....................................................................................................................................... $50
B. Daily Rate ................................................................................................................................ $15

Community Service Intake (Each Occurrence) ........................................................................... $50
Compact Administration (One Time Fee) .................................................................................. $200
Compact Administration (Money Order) .................................................................................... $50
Urinalysis Test (Per Test) ........................................................................................................... $10
Treatment (Reimbursements Only) ............................................................................................... Contracted Rate
Polygraph (Reimbursements Only) ................................................................................................. Contracted Rate
DNA Test (Statutory Requirement) ............................................................................................... $10
Subsidy (Reimbursement Only) .................................................................................................... Amount Given
ADES Evaluation ............................................................................................................................. By Statute
Treatment Referral Fee ................................................................................................................ No Charge
Polygraph Admin Fee ................................................................................................................... $50
UA Lab Processing Fee .................................................................................................................. Contract Rate
Dept of Revenue Fee ...................................................................................................................... $63

SHERIFF – CORRECTIONS DIVISION
Work Crew - Daily ......................................................................................................................... $10
Electronic Monitoring - Daily ....................................................................................................... $15
Electronic Monitoring – Intake ....................................................................................................... $50
Fingerprinting ............................................................................................................................... $20
Prisoner Boarding – Daily .............................................................................................................. $100
Medical .......................................................................................................................................... Actual Cost

SHERIFF – SUPPORT & CIVIL

Police Reports ORS 192.324(4)(a) ............................................................................................... $10
Photos on CD/Thumb drive .......................................................................................................... $20
Redaction of Body Cam Video ...................................................................................................... Actual Cost
Real & Personal Property Sales Processing Fee ............................................................................ $350
County Based Background Check ................................................................................................ $20
Alarm Permits ............................................................................................................................... $25
Alarms – Response penalty billable ............................................................................................. $100
Concealed Handgun License ORS 166.291(1)(a) ...................................................................... By Statute
Concealed Handgun License Finger Print Fee ORS 166.291(1)(a) ................................................ By Statute
Writ of Garnishments ORS 18.652(5) .......................................................................................... By Statute
For service of notice process ORS 21.300(1)(a) ........................................................................ By Statute
Eviction Enforcement – Baseline Fee ORS 21.300(1)(b) ............................................................ By Statute
Other Enforcement (Writ of Execution, Order of Assistance, etc.) ORS 21.300(1)(b) ............... By Statute
Conveyance of real property ORS 21.300(1)(c) ........................................................................... By Statute
Vehicle Impound ............................................................................................................................ $50
Vehicle/Equipment Storage – Daily .................................................................................................................................. $10
Cost for travel in excess of 75 miles to service location ORS 21.300(4) ......................................................... By Statute
Vehicle Rent + Federal Mileage Rate – Daily ......................................................................................................... $25
Command Vehicle – Daily ...................................................................................................................................... $200
Deputy Sheriff ................................................................................................................................................... Actual Cost
Equipment ......................................................................................................................................................... Actual Cost
Reserve Deputies ............................................................................................................................................... Actual Cost
Notary Fee .......................................................................................................................................................... $10

Public Records Research Fees – Actual or average cost may include supervision, overhead, equipment, and/or rate/wage of the employee(s) involved. Applicable to all disciplines.

Research fee – at cost ................................................................................................................................. Actual Cost as per the above