

**Building Division**

P.O. Box 490, Albany OR 97321

Phone: (541) 917-7552 Fax: (541) 917-7598

Inspection Request Line: (541) 917-7551

**Permit Number:** \_\_\_\_\_

**Work Location:** \_\_\_\_\_

Oregon One and Two Family Dwelling Specialty Code Section N1104.9.1 states that a vapor barrier with a 1-perm dry cup rating or less shall be provided on the warm side of the walls when thermal insulation is installed in the wall.

This form is intended to be used when a paint, primer or other non-visible vapor barrier will be used.

**Product Brand Name:** \_\_\_\_\_

**Manufacturer:** \_\_\_\_\_

**Perm Dry Cup Rating:** \_\_\_\_\_

**Application Ratio:** \_\_\_\_\_

**Research Report Number:** \_\_\_\_\_

**Application To Be Verified By:**

**Contractor/Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Installer:** \_\_\_\_\_ **Date:** \_\_\_\_\_