

PERMIT
NUMBER:

① PROPERTY INFORMATION

ADDRESS:

PARCEL
NUMBER(S):

② PROPERTY OWNER

NAME:

ADDRESS:

CITY

STATE

ZIP

TELEPHONE:

CELL:

EMAIL:

③ CONTACT INFORMATION

NAME:

ADDRESS:

CITY

STATE

ZIP

TELEPHONE:

CELL:

EMAIL:

④ ACKNOWLEDGEMENT & SIGNATURE

READ AND INITIAL EACH OF THE FOLLOWING STATEMENTS PRIOR TO SIGNING THIS APPLICATION:

I understand a new occupancy classification and an associated Certificate of occupancy is issued by the City only once code compliance is demonstrated.

I understand that if I submit incomplete, inaccurate, and/or erroneous information it will take the City longer to process my request.

I hereby declare that I am either the owner of the property listed on this application or the owner of this property has authorized me to be their representative to act for them. I also declare under penalty of perjury under the laws of the State of Washington that all of the statements and answers contained herein, and the information submitted with this application form, is in all respects true, correct, and complete to the best of my knowledge and belief.

Signature

Date

Printed Name

PERMIT
NUMBER:

① PROPERTY WHERE WORK IS OCCURRING

ADDRESS:

PARCEL
NUMBER(S):

② DETAILED INFORMATION ON THE PROPOSED STRUCTURE

COMPLETE THE FOLLOWING INFORMATION AS IT RELATES TO YOUR PROJECT. MARK ITEMS THAT ARE NOT APPLICABLE WITH "N/A".

AREA	SQUARE FOOTAGE	OCCUPANCY GROUP	CONSTRUCTION TYPE	OCCUPANT LOAD
1 ST FLOOR:				
2 ND FLOOR				
3 RD FLOOR:				
BASEMENT:				
GARAGE:				
TOTAL DECK:				
TOTAL PORCH:				
ADJACENT BLDG #1				
ADJACENT BLDG #2				
OTHER:				

③ QUESTIONS ABOUT THE STRUCTURE

SPRINKLER SYSTEM IN THE BUILDING?

YES NO

IS THERE A MONITORED FIRE ALARM?

YES NO