

Plumbing Permit Application



*“Building A Stronger Community
TOGETHER”*



Community & Economic Development



MINIMUM PROJECT SUBMITTAL STANDARDS FOR MECHANICAL AND PLUMBING PERMIT APPLICATIONS.

ALL PERMIT APPLICATIONS SHALL BE ACCOMPANIED WITH PLANS DRAWN TO A RECOGNIZED SCALE AND SPECIFICATIONS OF THE COMPONENTS THAT WILL BE USED. THE PLANS SHALL BE DRAWN WITH STRAIGHT LINES DESIGNATING THE AREAS AFFECTED BY THE PROPOSED WORK. THE PLANS SHALL IDENTIFY ALL FLOOR, WALL, CEILING OR ROOF SYSTEM INSTALLED OR MODIFIED IN THE PROJECT. THERE SHALL BE A CLEAR DESIGNATION OF THE ROOM OR SPACE THE WORK WILL BE DONE IN AND THE ELEVATION THE COMPONENT WILL BE INSTALLED AT.

YOUR PERMIT APPLICATION WILL NOT BE PROCESSED WITHOUT THIS INFORMATION.

Please complete all sheets provided in the permit application and submit three (3) sets of plans demonstrating code compliance for the construction and installation of your project as required above.

Permit # _____



CITY OF SHELTON
PLUMBING PERMIT APPLICATION
525 West Cota Street, Shelton, WA 98584
(360) 426-9731 (360) 426-7746

Residential Commercial

SITE INFORMATION

Site Address _____

Parcel No. _____ Legal Description _____

OWNER INFORMATION

Owner _____ Phone # _____

Owner Address _____ City _____ St. _____ Zip _____

CONTRACTOR INFORMATION

Contractor Name _____ Phone # _____

Address _____ City _____ St. _____ Zip _____

Contractor Reg# _____ Exp. Date _____ City Business License _____

Architect/Designer: _____ Phn No. _____ Engineer: _____ Phn No. _____

Mailing Address: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

License # _____ License # _____

PROJECT INFORMATION

Type of Work:

New Addition Alteration Repair Move Remove

Describe Project: _____

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

<u>Owner's Affidavit</u> I certify that I am exempt from the requirements of the contractor's registration law RCW 18.27, and I am aware of the City of Shelton's ordinance requirements for which this permit is issued and that all work done will be in conformance therewith. No changes shall be made without obtaining approval from the Building Department.		<u>Contractor's Affidavit</u> I certify that I am a currently registered contractor in the State of Washington and I am aware of the ordinance requirements regulating the work for which the permit is issued and all work done in conformance therewith. No changes may be made without first obtaining approval from the Building Department.	
Signature of Owner	Date	Signature of Contractor	Date

PLUMBING PERMIT FEES

No.	Permit Fees	Cost	Fee
	Water Closet (toilet)	\$7.70	
	Bathtub	\$7.70	
	Lavatory (wash basin)	\$7.70	
	Shower	\$7.70	
	Kitchen Sink & Dispenser	\$7.70	
	Dishwasher	\$7.70	
	Laundry Tray	\$7.70	
	Clothes Washer	\$7.70	
	Urinal	\$7.70	
	Drinking Fountain	\$7.70	
	Floor-Sink or Drain	\$7.70	
	Sinks	\$7.70	
	Sewer	\$16.50	
	Water Heater	\$7.70	
	Waste Interceptor/Grease Trap	\$7.70	
	Water Piping	\$7.70	
	Lawn Sprinkler System	\$7.70	
	Vacuum Breakers, 1 to 5	\$5.50	
	Vacuum Breakers Over 5, Ea.	\$1.10	
	Backflow/Backwater	\$7.70	
	Miscellaneous	\$7.70	
		Basic Permit Fee:	\$22.00
		65% Commercial Plan Review Fee:	
		Other:	
		TOTAL FEE:	

Use of Building:	Number of Dwelling Units:
Change Use To:	Change of Use From:
Type of Construction:	Occupancy Group:
Division:	Size of Building (total sq. ft):
No. of Stories:	Maximum Occupancy Load:
Use Zone:	Fire Sprinklers Required: <input type="checkbox"/> Yes <input type="checkbox"/> No

Application Accepted By:	Plans Checked By:	Permit Issued By:
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CALL TWO WORKING DAYS BEFORE YOU DIG
 1-800-424-5555
www.callbeforeyoudig.com
 Utilities Underground Location Center