

City of Winlock



Community Development Department Commercial Building Permit Application

PO Box 777 • 323 N.E. First Street
Winlock, WA 98596-0777
360.785.3811 • fax 360.785.4378
winplan@cityofwinlock.com

MUST BE FILLED OUT COMPLETELY – INCOMPLETE APPLICATIONS WILL BE NOT BE ACCEPTED

PROPERTY INFORMATION

Site Address: _____ Parcel #: _____

Legal Description: _____

PROPERTY OWNER INFORMATION

Name(s): _____

Mailing Address: _____ City/St/Zip: _____

Phone #: _____ Email: _____

APPLICANT INFORMATION (if different than property owner)

Contractor Authorized Agent

Name(s): _____

Mailing Address: _____ City/St/Zip: _____

Phone #: _____ Email: _____

CONTACT (when permit is ready or if additional information required)

Owner Contractor

Phone #: _____

PROJECT INFORMATION

Self-Built Driver's License# _____

Contractor Name: _____ Phone #: _____

L&I License #: _____ Expiration Date : _____

Project Description : _____

attach additional sheets if needed

Valuation/Bid Price: \$ _____ Facility Size: _____ # of Bathrooms: _____

Square Feet: Main: _____ Second: _____ Garage: _____ Decks/Porches: _____

Finished Basement: _____ Unfinished Basement: _____ Other: _____

I/we certify that all plans, specifications, and other submissions required in support of this application conform to the requirements of all federal/state, and local codes and applicable laws and ordinances; and I certify that I am either the current legal owner of this property or their authorized representative. With this document, I take full responsibility for the lawful action that this document allows.

I certify that I have read and understand the limitations and conditions of the Winlock Code and agree to comply with all conditions of approval. I understand that any permits issued by the City of Winlock, consistent with the attached site plan, are valid ONLY if construction is in accordance to this plan and all other conditions of the permit are followed. By my signature below, I affirm that all the information and documents provided with this application are true and accurate to the best of my knowledge.

Signature

Date

FOR OFFICIAL USE ONLY

Minimum Requirements	Date Req'd	Initial Rec	Additional Applications	Date Req'd	Initial Rec
Completed Application			Road Approach Permit (county roads only)		
PTE Form			Fire Permit (propane tank, firework display/stands)		
Assessor's Map			Floodplain Development Permit (Class A Flood Zone)		
Site Plan			Grading Permit (50+ cf fill/grade)		
Engineer Plans (2 complete sets)			Shoreline Permit (exemption or substantial development)		
Utility Service Application			Stormwater Permit (public works)		
Energy Code Compliance			Special Use Permit		
Cross Connection Compliance			Administrative Approval		
SEPA Checklist			Variance Permit		
Critical Areas/Resource Lands (CARL)			Other:		
Zoning:	UGA/Form 17:				
Construction Type:	Occupancy:				

SEWER	WATER	BUILDING FEES	AMOUNT
Required: Yes <input type="checkbox"/> No <input type="checkbox"/>	Required: Yes <input type="checkbox"/> No <input type="checkbox"/>	Building Permit	\$
Hookup Fee: \$	Hookup Fee: \$	Mechanical Permit	\$
Facility Imp Fee: \$	Facility Imp Fee: \$	Plan Review	\$
Date Issued:	Date Issued:	Plumbing Permit	\$
Permit #:	Water System ID #:	State Building Code	\$
TOTAL HOOKUP FEE:	TOTAL HOOK UP FEE:	TOTAL BUILDING FEE:	\$
SPECIAL CONDITIONS:			

NUMBER	PLUMBING PERMIT	NUMBER	MECHANICAL PERMIT	OTHER PERMIT FEES	AMOUNT
	FIXTURE TYPE		wood stove	SEPA & public hearing	
	water piping		heat pump _____ BTU	CARL review	
	laundry tray		Force air systems _____ BTU	fire permit	
	water closet (toilet)		air conditioning units _____ BTU	grading permit	
	clothes washer		Boiler _____ BTU	meter fee	
	bathtub		commercial range hood	water deposit	
	shower		commercial clothes dryer	flood permit (JARPA)	
	water heater		air/air heat exchanger	shoreline permit	
	floor drain		Unit Heater (suspended/floor mounted)	other permit fees	
	lavatory (washbasin)		gas piping	TOTAL OTHER FEES:	
	sewer		gas fireplace/stove/heater		
	dishwasher		zero clearance fireplace		
	kitchen sink & disposal		vacuum breakers		
	bar sink		Other:		
	urinal		TOTAL MECHANICAL FEES:		
	slop sink				
	Compliance w/UPC Code				
	TOTAL PLUMBING FEE:				

Date Received:	
Received By:	
Date Approved:	
Permit #:	
TOTAL Fees Due:	
Date Paid:	
Rct #:	

City Official Signature: _____