



# One and Two Family Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674

Phone: (360) 225-7299

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-212

Date Received: 12/10/15

<b>APPLICANT</b>		Name: <u>Karlson Development LLC</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		[REDACTED]	Email Address: [REDACTED]
<b>PROPERTY OWNER</b>		Name: <u>Same</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		[REDACTED]	Email Address: [REDACTED]
<b>GENERAL CONTRACTOR</b>		Business Name: <u>Karlson Development LLC</u>	Contact Person: <u>Diane Karlson</u>
Mailing Address, City, State, Zip		<u>9704 NIE 117th Ave Vancouver WA 98662</u>	Phone: <u>947-1405</u>
City Business License #		<u>14-000126.7</u>	State Contractors License #
Property Address		<u>314 Lolo Trail Ave</u>	Parcel Number
Fill & Grade/Excavation with this project?		Yes [ ] No [X] Total Quantity of Earthwork: <u>CY</u>	Type of Project
Occupancy (uses):		<u>NEW construction single family</u>	<input checked="" type="checkbox"/> New <input type="checkbox"/> Remodel <input type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other
		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	
Describe Project and Specific Use in Detail:			
<u>New construction single family</u>			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>185,000.00</u>			
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project.			
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.			
Applicant's Signature		Date: <u>12-8-15</u>	Date: <u>12-8-15</u>

RECEIVED  
 DEC 10 2015  
 PAID

<b>DO NOT WRITE BELOW - FOR OFFICE USE ONLY</b>									
Setbacks: Front:	Side:	Back:	Zone: <u>LDR-6</u>	Permit Type: <u>1</u>	Flood Zone: <u>A</u>				
Approvals	Initial	Date	Comments						
Civil Plans									
Planning Department									
Drainage/Erosion Control									
Fire/Life Safety									
Building									
Fees Due	Amount	Account	Fees Due	Amount	Account				
Building Permit	<u>1850.55</u>	001 322 10 00	Water Assessment	<u>3241.00</u>	421 368 10 10				
Plan Review Pre-payment	<u>\$600.00</u>	001 322 10 20	Meter Deposit	<u>696.00</u>	401 389 00 00				
Plan Review Balance	<u>602.86</u>	001 322 10 20	Sewer Assessment	<u>4920.00</u>	422 368 10 00				
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection	<u>232.00</u>	402 369 90 10				
Grading/Excavating		001 322 10 00	Roadway Access	<u>30x5 = 150.00</u>	104 322 40 00				
Floodplain Mgt.	<u>100.00</u>	001 345 89 00	TOTAL	<u>\$16,914.91</u>					
School Impact Fees	<u>2750</u>	350 345 85 00	Receipt Number	Amount	Date	Initial			
Fire Impact Fees	<u>1530</u>	351 345 85 00	<u>104684</u>	<u>\$600.00</u>	<u>12-10-15</u>	[REDACTED]			
Park Impact Fees	<u>---</u>	352 345 85 00	<u>104296</u>	<u>\$16,914.91</u>	<u>1-7-16</u>	[REDACTED]			
Transp. Impact Fees	<u>838.00</u>	353 345 85 00							



# One and Two Family Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674

Phone: (360) 225-7299

**PRINT IN INK OR TYPE**

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-203

Date Received: 11/18/15

<b>APPLICANT</b>		Name: <u>Karlson Development LLC</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		[REDACTED]	Email Address: [REDACTED]
<b>PROPERTY OWNER</b>		Name: <u>Same</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		[REDACTED]	Email Address: [REDACTED]
<b>GENERAL CONTRACTOR</b>		Business Name: <u>Karlson Development LLC</u>	Contact Person: <u>Diane Karlson</u>
Mailing Address, City, State, Zip		<u>9704 N.E. 117th Ave Vancouver WA 98662</u>	Phone: <u>947-1405</u>
City Business License #		<u>14-000126.7</u>	State Contractors License #
		<u>KARLSON-GSOLE</u>	Email Address: <u>Diane@acombcast.com</u>
Property Address		<u>1822 Pompey Ct</u>	Parcel Number
Fill & Grade/Excavation with this project?		Yes [ ] No [X] Total Quantity of Earthwork: <u>CY</u>	Type of Project
Occupancy (uses):		<u>New Construction Single Family</u>	<input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
		No. of Units	No. of Bedrooms
		<u>2</u>	<u>4</u>
		No. of Bathrooms	<u>3</u>
		No. of Stories	Building Height
			<u>2432</u>
Describe Project and Specific Use in Detail:		<u>664 garage</u>	
		<u>New construction Single family</u>	

**TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT** \$ 175,000 # 276,146.54

NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project.

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.

Applicant's Signature: [REDACTED] Date: 10-30-15

PAID  
Date: 10-30-15 **JAN 07 2016**  
CITY OF WOODLAND

**DO NOT WRITE BELOW - FOR OFFICE USE ONLY**

Setbacks: Front: _____ Side: _____ Back: _____	Zone: <u>LDR-6</u>	Permit Type: <u>PAID 1</u>	Flood Zone: <u>A</u>
Approvals	Initial	Date	Comments
Civil Plans	[REDACTED]	<u>12/18/15</u>	<u>LI-215-935 minor variance</u>
Planning Department	[REDACTED]	<u>12/18/15</u>	<u>NOV 18 2015</u>
Drainage/Erosion Control	[REDACTED]		
Fire/Life Safety	[REDACTED]		
Building	[REDACTED]	<u>12-18-15</u>	

Fees Due		Fees Due	
Amount	Account	Amount	Account
Building Permit	<u>1984.95</u>	001 322 10 00	Water Assessment
Plan Review Pre-payment	<u>\$600.00</u>	001 322 10 20	Meter Deposit
Plan Review Balance	<u>690.22</u>	001 322 10 20	Sewer Assessment
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection
Grading/Excavating	<u>—</u>	001 322 10 00	Roadway Access
Floodplain Mgt.	<u>100.00</u>	001 345 89 00	<u>25x5=125.00</u>
School Impact Fees	<u>2750.00</u>	350 345 85 00	<b>TOTAL</b>
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	<u>\$17,111.67</u>
Park Impact Fees	<u>416.00</u>	352 345 85 00	Receipt Number
Transp. Impact Fees	<u>838.00</u>	353 345 85 00	Amount
			Date
			Initial
		<u>102873</u>	<u>\$1600.00</u>
		<u>104298</u>	<u>11-18-15</u>
			<u>1-7-16</u>

# Plumbing & Mechanical Permit Application

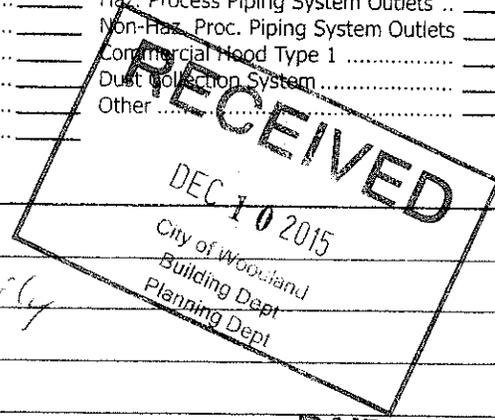
City of Woodland - Washington - Building Department  
**PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL**

**FOR OFFICE USE ONLY**  
 Permit No: 315-213  
 Date: 12/10/15

Applicant Name <u>Karlson Development LLC</u>		Title (if owner, state OWNER) <u>Owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>Same</u>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>Same</u>		Business Address, City, State & Zip <u>Vanessa WA 98667</u>	Daytime Phone: [REDACTED]
City of Woodland Business License Number <u>14-00176.7</u>		Washington State Labor & Industries Number and Expiration Date <u>Karlson 1980 LE</u>	
Project Address <u>314 Lolo Trail Ave</u>		Subdivision/Legal Description <u>lot #1 Meriwether Estates</u>	Parcel Number <u>5-07060101</u>
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input checked="" type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING:	MECHANICAL:	Other:
Fixtures (or set) on one trap ..... <u>12</u>	Furnace up to 100,000 BTU ..... <u>1</u>	Air Handling Units up to 10,000 CFM _____
Building or Trailer Park Sewer ..... <u>1</u>	Furnace over 100,000 BTU ..... _____	• over 10,000 CFM ..... _____
Rainwater System Drains (inside) ..... _____	Floor Furnace installation or relocation ..... _____	Evaporative Cooler (non portable)..... _____
Private Sewage System ..... _____	Heater (suspended, recessed or floor) ..... _____	Ventilation Fan w/ single duct ..... <u>5</u>
Water Heaters and/or Vents ..... <u>1</u>	Vent not included with appliance ..... _____	Ventilation System (not heat or a/c) .. _____
Gas Piping Systems of 1 to 5 vents ..... <u>1</u>	Repair/Alteration/Addition to Appliance ..... _____	Hood w/ mechanical exhaust ..... <u>1</u>
Gas Piping Systems over 5 vents ..... _____	Boilers/Compressors to 3hp (heat pump) ..... <u>1</u>	Incinerator, domestic type ..... _____
Industrial Waste Interceptors ..... _____	• from 3 to 15 hp ..... _____	• commercial or industrial ..... _____
Installations/Alterations/ Repairs of:	• from 15 to 30 hp ..... _____	Appliance/Equipment Item (UMC) .... _____
• Water Piping ..... <u>1</u>	• from 30 to 50 hp ..... _____	Fuel-Gas Piping System Outlets ..... <u>4</u>
• Water Treating Equipment ..... _____	• over 50 hp ..... _____	Haz. Process Piping System Outlets .. _____
• Medical Gas Piping ..... _____	Absorption Systems to 100,000 BTU/h ..... _____	Non-Haz. Proc. Piping System Outlets _____
Fixtures with drain/vent repairs or alterations ..... _____	• from 100,000 to 500,000 BTU/h ..... _____	Commercial Hood Type 1 ..... _____
Lawn Sprinkler System with Backflow Device ..... _____	• from 500,000 to 1,000,000 BTU/h ..... _____	Dust Collection System ..... _____
Vacuum Breakers not with Sprinkler ..... _____	• from 1,000,000 to 1,750,000 BTU/h ..... _____	Other ..... _____
Backflow Protective Devices to 2" diameter ..... _____	• over 1,750,000 BTU/h ..... _____	
Backflow Protective Devices over 2" diameter ..... _____		

Describe Project and Specific Use in Detail:  
New construction single family



**PAID**

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 15,000.00 JAN 07 2016

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

[REDACTED SIGNATURE] 12-8-15

APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY							
Project Address/Location: <u>314 Lolo Trail</u>		<input checked="" type="checkbox"/> First Plumbing Permit		Permit Type: <u>36</u>		Reg. Zone: <u>A</u>	
<input checked="" type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>12/10/15</u>					
Plumbing	[REDACTED]						
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$199.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>\$175.00</u>	001 322 10 00	Other			
Other				Other			
Received By: [REDACTED]	Date	<u>1-7-16</u>	Receipt Number	<u>104297</u>	Total Due: <u>\$374.00</u>		

**Plumbing & Mechanical Permit Application**  
 City of Woodland, Washington - Building Department  
**PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL**

**FOR OFFICE USE ONLY**  
 Permit No. 215-204  
 Date 11/18/15

Applicant Name <u>Karkas Development LLC</u>	Title (if owner, state OWNER) <u>owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>same</u>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone:
Contractor <u>same</u>	Business Address, City, State & Zip <u>Vancouver WA 98662</u>	Daytime Phone:
City of Woodland Business License Number <u>14-201762</u>	Washington State Labor & Industries Number and Expiration Date <u>KA15069806E</u>	
Project Address <u>1827 Pompey Ct</u>	Subdivision/Legal Description <u>Meriwether estates</u>	Parcel Number <u>507060111</u>
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input checked="" type="checkbox"/> Addition <u>New</u>

PLUMBING:	MECHANICAL:
Fixtures (or set) on one trap ..... <u>14</u>	Furnace up to 100,000 BTU ..... <u>1</u>
Building or Trailer Park Sewer ..... <u>1</u>	Furnace over 100,000 BTU ..... <u>1</u>
Rainwater System Drains (inside) ..... <u>1</u>	Air Handling Units up to 10,000 CFM ..... <u>1</u>
Private Sewage System ..... <u>1</u>	• over 10,000 CFM ..... <u>1</u>
Water Heaters and/or Vents ..... <u>1</u>	Evaporative Cooler (non portable)..... <u>1</u>
Gas Piping Systems of 1 to 5 vents ..... <u>1</u>	Heater (suspended, recessed or floor) ..... <u>1</u>
Gas Piping Systems over 5 vents ..... <u>1</u>	Vent not included with appliance ..... <u>1</u>
Industrial Waste Interceptors ..... <u>1</u>	Ventilation Fan w/ single duct ..... <u>1</u>
Installations/Alterations/ Repairs of:	Ventilation System (not heat or a/c) .. <u>1</u>
• Water Piping ..... <u>1</u>	Repair/Alteration/Addition to Appliance ..... <u>1</u>
• Water Treating Equipment ..... <u>1</u>	Hood w/ mechanical exhaust ..... <u>1</u>
• Medical Gas Piping ..... <u>1</u>	Boilers/Compressors to 3hp (heat pump) ..... <u>1</u>
Fixtures with drain/vent repairs or alterations ..... <u>1</u>	• from 3 to 15 hp ..... <u>1</u>
Lawn Sprinkler System with Backflow Device ..... <u>1</u>	• commercial or industrial ..... <u>1</u>
Vacuum Breakers not with Sprinkler ..... <u>1</u>	• from 15 to 30 hp ..... <u>1</u>
Backflow Protective Devices to 2" diameter ..... <u>1</u>	• from 30 to 50 hp ..... <u>1</u>
Backflow Protective Devices over 2" diameter ..... <u>1</u>	• over 50 hp ..... <u>1</u>
	Absorption Systems to 100,000 BTU/h ..... <u>1</u>
	• from 100,000 to 500,000 BTU/h ..... <u>1</u>
	• from 500,000 to 1,000,000 BTU/h ..... <u>1</u>
	• from 1,000,000 to 1,750,000 BTU/h ..... <u>1</u>
	• over 1,750,000 BTU/h ..... <u>1</u>
	Appliance/Equipment Item (UMC) ..... <u>1</u>
	Fuel-Gas Piping System Outlets ..... <u>3</u>
	Haz. Process Piping System Outlets .. <u>1</u>
	Non-Haz. Proc. Piping System Outlets ..... <u>1</u>
	Commercial Hood Type 1 ..... <u>1</u>
	Dust Collection System ..... <u>1</u>
	Other ..... <u>1</u>

Describe Project and Specific Use in Detail: PLUMBING & MECHANICAL SYSTEMS FOR NEW SFR  
15,000.00

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 15,000.00

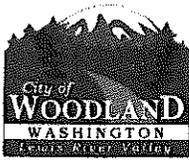
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

APPLICANT'S SIGNATURE [REDACTED] DATE 12-30-15

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY**

Project Address/Location:	<input type="checkbox"/> First Plumbing Permit	Permit Type: <u>36</u>	Flood Zone: <u>PAID A</u>
	<input type="checkbox"/> First Mechanical Permit		
Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	<u>12-18-15</u>	<u>JAN 07 2016</u>
Plumbing	[REDACTED]		
Fire/Life Safety			<u>CITY OF WOODLAND</u>

FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$199.00</u>	<u>001 322 10 00</u>	Other			
Mechanical Permit		<u>\$166.00</u>	<u>001 322 10 00</u>	Other			
Other				Other			
Received By: [REDACTED]	Date	<u>1-7-16</u>	Receipt Number	<u>104799</u>	Total Due	<u>\$365.00</u>	



# Commercial & Multifamily Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674  
Phone: (360) 225-7299

**PRINT IN INK OR TYPE**

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 216-002

Date Received: 1/5/16

<b>APPLICANT</b>		Name <b>Advanced Electric Sign</b>	Phone: <b>360-225-6826</b>
Mailing Address, City, State Zip <b>550 Down River Dr Woodland, WA 98674</b>		Email Address: <b>michael@advancedelectricsign.com</b>	
<b>PROPERTY OWNER</b>		Name <b>Weekender LLC</b>	Phone: [REDACTED]
Mailing Address, City State, Zip [REDACTED]		Email Address:	
<b>GENERAL CONTRACTOR</b>		Business Name <b>Advanced Electric Sign</b>	Contact Person <b>Michael Boyd</b>
Mailing Address, City State, Zip <b>550 Down River Dr Woodland, WA 98674</b>		Phone: <b>360-225-6826</b>	
City Business License # <b>5-000015.3</b>	State Contractors License # <b>advanes903b5</b>	Email: <b>michael@advancedelectricsign.com</b>	
<b>PROPERTY ADDRESS</b>		Parcel Number <b>5-07810105</b>	
<b>745 Schurman Way</b>			
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: <b>1</b> <b>CY</b>		Type of Project	<input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Other <b>Sib-d</b>
Occupancy (uses):		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
			Total Square Feet

Describe Project and Specific Use in Detail:

Install of (1) non-illuminated monument sign

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 3500.00

NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project. Utility service requests and associated fees are processed by the City of Woodland Public Works Department. For information on application and rates, contact (360) 225-7999.

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.**

Owner's Signature  
[REDACTED]

Applicant's Signature  
[REDACTED]

Date JAN 08 2016  
10/23/15 CITY OF WOODLAND

**DO NOT WRITE BELOW - FOR OFFICE USE ONLY**

Comments: Application Complete:		Zone: <b>I-I</b>	Permit Type: <b>35</b>	Flood Zone: <b>B</b>
Approvals	Initial	Date	Comments	
Civil Plans				
Planning Department	[REDACTED]	<u>1/5/16</u>	<u>Follow WMC 17.52-050(A) + APPROVED W-215-905</u>	
Drainage/Erosion Control				
Fire/Life Safety				
Building		<u>1-5-16</u>	<u>CALL FOR FINAL INSPECTION</u>	
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>\$145.00</u>	001 322 10 00	Fire Impact Fees	351 345 85 00
Plan Review Pre-payment		001 322 10 20	Park Impact Fees	352 345 85 00
Plan Review Balance		001 322 10 20	Roadway Access	104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	<b>TOTAL</b>	<u>\$149.50</u>
Grading/Excavating		001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	<u>104324</u>	<u>149.50</u>
School Impact Fees		650 345 85 00	Date	<u>1-8-16</u>
Transp. Impact Fees		353 345 85 00	Initial	[REDACTED]



# Commercial & Multifamily Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674  
Phone: (360) 225-7299

**PRINT IN INK OR TYPE**

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-196

Date Received: 11/2/15

<b>APPLICANT</b>		Name <u>Bret Fleeger</u>	Phone: [REDACTED]
Mailing Address, City, State Zip		[REDACTED]	Email Address: [REDACTED]
<b>PROPERTY OWNER</b>		Name <u>Bret Fleeger</u>	Phone: [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	Email Address: [REDACTED]
<b>GENERAL CONTRACTOR</b>		Business Name <u>Same as above</u>	Contact Person <u>Bret Fleeger</u>
Mailing Address, City State, Zip		[REDACTED]	Phone: [REDACTED]
City Business License #		[REDACTED]	Email: [REDACTED]
<b>PROPERTY ADDRESS</b>		Parcel Number <u>504211606</u>	
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: <u>Permit # 215-083</u> <b>CY</b>		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses): <u>Warehouse Rental Space</u>		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	
Describe Project and Specific Use in Detail: <u>Rental space, construct (2) 90x50 steel buildings</u>			

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 180,000 - 200,000

NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state, or local laws regulating construction, the performance of construction, and/or operation of the project. Utility service requests and associated fees are processed by the City of Woodland Public Works Department. For information on application and rates, contact (360) 225-7999.

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.

[REDACTED SIGNATURE]

Date 10/2/15

Date 10/2/15

Applicant's Signature

PAID

JAN 08 2016  
CITY OF WOODLAND

RECEIVED  
NOV 02 2015  
City of Woodland  
Building Dept  
Planning Dept

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete:		Zone: <u>C-2</u>	Permit Type: <u>11</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments	
Civil Plans				
Planning Department				
Drainage/Erosion Control				
Fire/Life Safety				
Building		<u>11-12-15</u>		
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>1553.75</u>	001 322 10 00	Fire Impact Fees	<u>.51 x 9000sqft. \$450</u>
Plan Review Pre-payment		001 322 10 20	Park Impact Fees	
Plan Review Balance	<u>1042.94</u>	001 322 10 20	Roadway Access	
Surcharge	<u>4.50</u>	001 322 10 00	<b>TOTAL</b>	<b>\$16,920.37</b>
Grading/Excavating		001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	<u>104339</u>	<u>16920.37</u>
School Impact Fees		650 345 85 00	Date	<u>1/8/16</u>
Transp. Impact Fees	<u>\$9729.18</u>	353 345 85 00	Initial	[REDACTED]

③

**Plumbing & Mechanical Permit Application**  
 City of Woodland, Washington - Building Department  
**PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL**

**FOR OFFICE USE ONLY**  
 Permit No. 216-001  
 Date 1/4/16

Applicant Name Advantage Heating and Cooling	Title (if owner, state OWNER) Trish Smith	Daytime Phone: 360-693-5220
Property Owner Tom and Genevieve Harder	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor Advantage Heating and Cooling	Business Address, City, State & Zip 7206 NE 37th Ave Unit B Vancouver, WA 98665	Daytime Phone: 360-693-5220
City of Woodland Business License Number 16-000015.7	Washington State Labor & Industries Number and Expiration Date ADVANHCO11DQ	
Project Address 325 Madrona Avenue	Subdivision/Legal Description	Parcel Number 5-0245014

Type of Facility:  Residential  Commercial  Educational  
 Industrial  Institutional  \_\_\_\_\_

Work Type:  Demolish  Remodel/Alter  Addition  
 New  Move  Repair  \_\_\_\_\_

<b>PLUMBING:</b>	<b>MECHANICAL:</b>
Fixtures (or set) on one trap _____ Building or Trailer Park Sewer _____ Rainwater System Drains (inside) _____ Private Sewage System _____ Water Heaters and/or Vents _____ _____ Industrial Waste Interceptors _____ Installations/Alterations/ Repairs of: • Water Piping _____ • Water Treating Equipment _____ • Medical Gas Piping _____ Fixtures with drain/vent repairs or alterations _____ Lawn Sprinkler System with Backflow Device _____ Vacuum Breakers not with Sprinkler _____ Backflow Protective Devices to 2" diameter _____ Backflow Protective Devices over 2" diameter _____	Furnace up to 100,000 BTU _____ Furnace over 100,000 BTU _____ Floor Furnace installation or relocation _____ Heater (suspended, recessed or floor) _____ Vent not included with appliance _____ Repair/Alteration/Addition to Appliance _____ Boilers/Compressors to 3hp (heat pump) _____ <input checked="" type="checkbox"/> • from 3 to 15 hp _____ • from 15 to 30 hp _____ • from 30 to 50 hp _____ • over 50 hp _____ Absorption Systems to 100,000 BTU/h _____ • from 100,000 to 500,000 BTU/h _____ • from 500,000 to 1,000,000 BTU/h _____ • from 1,000,000 to 1,750,000 BTU/h _____ • over 1,750,000 BTU/h _____
	Air Handling Units up to 10,000 CFM _____ • over 10,000 CFM _____ Evaporative Cooler (non portable) _____ Ventilation Fan w/ single duct _____ Ventilation System (not heat or a/c) _____ Hood w/ mechanical exhaust _____ Incinerator, domestic type _____ • commercial or industrial _____ Appliance/Equipment Item (UMC) _____ Fuel-Gas Piping System Outlets _____ Haz. Process Piping System Outlets _____ Non-Haz. Proc. Piping System Outlets _____ Commercial Hood Type 1 _____ Dust Collection System _____ Other _____

Describe Project and Specific Use in Detail:  
 Add on Ductless Heat Pump System with 1 Wall Mounted Indoor Head.

**TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$** 4560.12

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

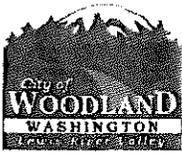
[REDACTED SIGNATURE]

01/04/2016

APPLICANT'S SIGNATURE DATE

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY**

Project Address/Location: <u>325 Madrona</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <b>36</b>	Flood Zone: <u>A</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	1-8-15	CALL FOR FINAL INSPECTION PAID
Plumbing			
Fire/Life Safety			JAN 11 2016
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		\$65.00	001 322 10 00
Other			
Rec'd	Date	Receipt Number	Total Due
[REDACTED]	1-11-14	104358	\$ 65.00



# Commercial & Multifamily Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674  
Phone: (360) 225-7299

**PRINT IN INK OR TYPE**

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 216-007

Date Received: 1/12/16

<b>APPLICANT</b>	Name Denice Cook, Co-Manager	Phone: [REDACTED]
Mailing Address, City, State, Zip	[REDACTED]	Email Address: [REDACTED]
<b>PROPERTY OWNER</b>	Name Dike Road Investments, LLC, Denice Cook Co-Mgr	Phone: [REDACTED]
Mailing Address, City, State, Zip	[REDACTED]	Email Address: [REDACTED]
<b>GENERAL CONTRACTOR</b>	Business Name Owner	Contact Person
Mailing Address, City, State, Zip		Phone:
City Business License #	State Contractors License #	Email:

**PROPERTY ADDRESS**  
1935 Belmont Loop Unit "C", Woodland, WA 98674 Parcel Number 5-0421-1505

Fill & Grade/Excavation with this project?  
Yes  No  Total Quantity of Earthwork: 0 CY

Type of Project:  New  Remodel  Add On  Repair  Demolition  Other

Occupancy (uses):	No. of Units	No. of Bedrooms	No. of Bathrooms
Retail Sales-Auto Licensing			
Bathroom-Non public use	No. of Stories	Building Height	Total Square Feet
	1	11'5"	1140/1152

Describe Project and Specific Use in Detail: Tenant improvements-add electrical plugs, switch, complete ADA compliant bathroom.

**TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT** \$ 20,000.00

NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project. Utility service requests and associated fees are processed by the City of Woodland Public Works Department. For information on application and rates, contact (360) 225-7999.

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.**

Owner's Signature: [REDACTED] Date: 01/13/2016

Applicant's Signature: [REDACTED] Date: 01/13/2016

DO NOT WRITE BELOW - FOR OFFICE USE ONLY					
Comments: Application Complete:			Zone: <u>C-2</u>	Permit Type: <u>PAID</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments		
Civil Plans					
Planning Department					
Drainage/Erosion Control					
Fire/Life Safety					
Building		<u>1-13-16</u>			
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>321.25</u>	001 322 10 00	Fire Impact Fees		351 345 85 00
Plan Review Pre-payment		001 322 10 20	Park Impact Fees		352 345 85 00
Plan Review Balance		001 322 10 20	Roadway Access		104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	<b>TOTAL</b>	<u>325.75</u>	
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date
Floodplain Mgt.		001 345 89 00	<u>104476</u>	<u>325.75</u>	<u>1-13-16</u>
School Impact Fees		650 345 85 00			
Transp. Impact Fees		353 345 85 00			

# Plumbing & Mechanical Permit Application

City of Woodland, Washington - Building Department  
**PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL**

**FOR OFFICE USE ONLY**  
 Permit No. 215-208  
 Date 12/4/15

Applicant Name <b>Renaud Electric Company</b>	Title (if owner, state OWNER) <b>Contractor</b>	Daytime Phone: <b>360-423-1420</b>
Property Owner <b>G Loomis</b>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <b>Renaud Electric Company</b>	Business Address, City, State & Zip <b>2300 Talley Way Kelso, WA 98626</b>	Daytime Phone: <b>360-423-1420</b>
City of Woodland Business License Number <b>15-000255.7</b>	Washington State Labor & Industries Number and Expiration Date <b>RENAUEC461BA 6-30-2017</b>	
Project Address <b>1359 Down River Dr Woodland WA 98674</b>	Subdivision/Legal Description <b>Woodland</b>	Parcel Number <b>504230501</b>

Type of Facility:  Residential  Commercial  Educational  
 Work Type:  Demolish  Remodel/Alter  Addition

<b>PLUMBING:</b> Fixtures (or set) on one trap ..... Building or Trailer Park Sewer ..... Rainwater System Drains (inside) ..... Private Sewage System ..... Water Heaters and/or Vents ..... Gas Piping Systems of 1 to 5 vents ..... Gas Piping Systems over 5 vents ..... Industrial Waste Interceptors ..... Installations/Alterations/ Repairs of: • Water Piping ..... • Water Treating Equipment ..... • Medical Gas Piping ..... Fixtures with drain/vent repairs or alterations ..... Lawn Sprinkler System with Backflow Device ..... Vacuum Breakers not with Sprinkler ..... Backflow Protective Devices to 2" diameter ..... Backflow Protective Devices over 2" diameter .....	<b>MECHANICAL:</b> Furnace up to 100,000 BTU ..... Furnace over 100,000 BTU ..... 1 Floor Furnace installation or relocation ..... Heater (suspended, recessed or floor) ..... Vent not included with appliance ..... Repair/Alteration/Addition to Appliance ..... Boilers/Compressors to 3hp (heat pump) ..... • from 3 to 15 hp ..... 1 • from 15 to 30 hp ..... • from 30 to 50 hp ..... • over 50 hp ..... Absorption Systems to 100,000 BTU/h ..... • from 100,000 to 500,000 BTU/h ..... • from 500,000 to 1,000,000 BTU/h ..... • from 1,000,000 to 1,750,000 BTU/h ..... • over 1,750,000 BTU/h ..... Air Handling Units up to 10,000 CFM ..... • over 10,000 CFM ..... Evaporative Cooler (non portable) ..... Ventilation Fan w/ single duct ..... Ventilation System (not heat or a/c) ..... Hood w/ mechanical exhaust ..... Incinerator, domestic type ..... • commercial or industrial ..... Appliance/Equipment Item (UMC) ..... Fuel-Gas Piping System Outlets ..... 1 Haz. Process Piping System Outlets .. Non-Haz. Proc. Piping System Outlets ..... Commercial Hood Type 1 ..... Dust Collection System ..... Other .....
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Describe Project and Specific Use in Detail:  
Replace 20 ton rooftop package unit -

**PAID**

**JAN 13 2016**

**TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$** 25450

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

APPLICANT'S SIGNATURE [REDACTED] DATE 12/03/2015

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY**

Project Address/Location: <u>1359 Down River Dr.</u>		<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit		Permit Type: <b>36</b>	Flood Zone: <b>B</b>		
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>12-14-15</u>	<u>ALTERATIONS TO ELECTRICAL Sys REQUIRE L+I PERMIT.</u>				
Plumbing							
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		<u>\$130.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	[REDACTED]	Date	Receipt Number			Total Due <u>\$130.00</u>	
		<u>1-13-16</u>	<u>104428</u>				

**Plumbing & Mechanical Permit Application**  
 City of Woodland, Washington - Building Department  
 PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL

**FOR OFFICE USE ONLY**  
 Permit No. 216-008  
 Date 1-13-16

Applicant Name <u>Dencia Cook</u>	Title (if owner, state OWNER) <u>owner</u>	Daytime Phone:
Property Owner <u>Dencia Cook</u>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone:
Contractor <u>[Signature]</u>	Business Address, City, State & Zip <u>same</u>	Daytime Phone:
City of Woodland Business License Number	Washington State Labor & Industries Number and Expiration Date	
Project Address <u>1935 Belmont Loop Unit C</u>	Subdivision/Legal Description	Parcel Number <u>5-0421-1505</u>

Type of Facility:  Residential  Commercial  Educational  
 Industrial  Institutional  \_\_\_\_\_

Work Type:  Demolish  Remodel/Alter  Addition  
 New  Move  Repair N.T.I.

PLUMBING:	MECHANICAL:	
Fixtures (or set) on one trap ..... <u>2</u>	Furnace up to 100,000 BTU ..... <u>1</u>	Air Handling Units up to 10,000 CFM <u>1</u>
Building or Trailer Park Sewer .....	Furnace over 100,000 BTU .....	• over 10,000 CFM .....
Rainwater System Drains (inside) .....	Floor Furnace installation or relocation .....	Evaporative Cooler (non portable) .....
Private Sewage System .....	Heater (suspended, recessed or floor) .....	Ventilation Fan w/ single duct <u>1</u>
Water Heaters and/or Vents ..... <u>1</u>	Vent not included with appliance .....	Ventilation System (not heat or a/c) ..
Gas Piping Systems of 1 to 5 vents .....	Repair/Alteration/Addition to Appliance .....	Hood w/ mechanical exhaust .....
Gas Piping Systems over 5 vents .....	Boilers/Compressors to 3hp (heat pump) .....	Incinerator, domestic type .....
Industrial Waste Interceptors .....	• from 3 to 15 hp .....	• commercial or industrial .....
Installations/Alterations/ Repairs of:	• from 15 to 30 hp .....	Appliance/Equipment Item (UMC) .....
• Water Piping .....	• from 30 to 50 hp .....	Fuel-Gas Piping System Outlets .....
• Water Treating Equipment .....	• over 50 hp .....	Haz. Process Piping System Outlets ..
• Medical Gas Piping .....	Absorption Systems to 100,000 BTU/h .....	Non-Haz. Proc. Piping System Outlets
Fixtures with drain/vent repairs or alterations .....	• from 100,000 to 500,000 BTU/h .....	Commercial Hood Type 1 .....
Lawn Sprinkler System with Backflow Device .....	• from 500,000 to 1,000,000 BTU/h .....	Dust Collection System .....
Vacuum Breakers not with Sprinkler .....	• from 1,000,000 to 1,750,000 BTU/h .....	Other .....
Backflow Protective Devices to 2" diameter .....	• over 1,750,000 BTU/h .....	
Backflow Protective Devices over 2" diameter .....		

Describe Project and Specific Use in Detail:  
Retail Sales - Tenant improvements - add electrical plugs, switches and complete bathroom

**PAID**  
**JAN 13 2016**

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 1500 CITY OF WOODLAND

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

[REDACTED SIGNATURE]  
 APPLICANT'S SIGNATURE

13  
1-13-2016  
 DATE

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY**

Project Address/Location: \_\_\_\_\_  First Plumbing Permit  First Mechanical Permit Permit Type: 36 Flood Zone: B

Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	<u>1-13-16</u>	
Plumbing			
Fire/Life Safety			

FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>70.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>69.00</u>	001 322 10 00	Other			
Other				Other			
Received By: [REDACTED]	Date	<u>1-13-16</u>	Receipt Number	<u>104977</u>	Total Due \$ <u>139.00</u>		



# Commercial & Multifamily Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674  
Phone: (360) 225-7299

**PRINT IN INK OR TYPE**

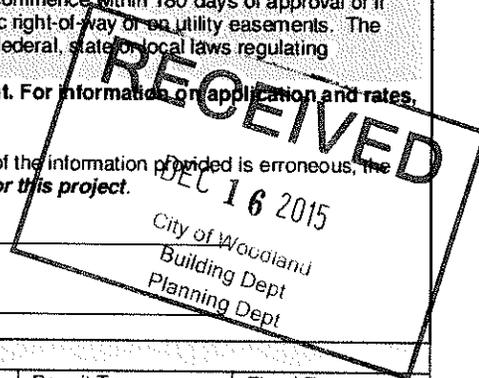
(Separate Mechanical & Plumbing Permits Required)

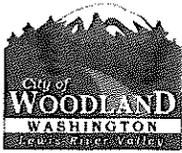
FOR OFFICE USE ONLY

Permit No. 215-216

Date Received: 12/16/15

<b>APPLICANT</b>		Name <b>PORTCO PACKAGING</b>	Phone: <b>360-696-1641</b>
Mailing Address, City, State Zip <b>211 5th st Woodland, WA 98674</b>		Email Address: <b>bwilliamson@portco.com</b>	
<b>PROPERTY OWNER</b>		Name <b>Macy Wall</b>	Phone: [REDACTED]
Mailing Address, City State, Zip [REDACTED]		Email Address: [REDACTED]	
<b>GENERAL CONTRACTOR</b>		Business Name	Contact Person
Mailing Address, City State, Zip		Phone:	
City Business License #	State Contractors License #		Email:
<b>PROPERTY ADDRESS</b> <b>211 5th st Woodland, WA 98674</b>			Parcel Number <b>5-0680008</b>
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ <b>CY</b>		Type of Project	<input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Occupancy (uses): <b>prefabricated chemical storage building.</b>		No. of Units <b>1</b>	No. of Bedrooms <b>0</b>
		No. of Bathrooms <b>0</b>	
		No. of Stories <b>1</b>	Building Height <b>8.5ft</b>
			Total Square Feet <b>966</b>
Describe Project and Specific Use in Detail: <b>2 modular chemical storage units installed as one room for chemical storage and handling. finished size is 42ft x 23ft</b>			
<b>TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ \$280,000</b>			
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project. <b>Utility service requests and associated fees are processed by the City of Woodland Public Works Department. For information on application and rates, contact (360) 225-7999.</b>			
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. <b>It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.</b>			
Owner's Signature [REDACTED]		Date <b>12/15/2015</b>	
Applicant's Signature [REDACTED]		Date [REDACTED]	
<b>DO NOT WRITE BELOW - FOR OFFICE USE ONLY</b>			
Comments: Application Complete:		Zone: <b>I-I</b>	Permit Type: <b>12</b>
		Flood Zone: <b>B</b>	
Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building	[REDACTED]	<b>1-6-16</b>	
Fees Due	Amount	Account	Fees Due
Building Permit	<b>2001.75</b>	001 322 10 00	Fire Impact Fees
Plan Review Pre-payment	—	001 322 10 20	Park Impact Fees
Plan Review Balance	<b>1301.14</b>	001 322 10 20	Roadway Access
Surcharge	<b>4.50</b>	001 322 10 00	<b>TOTAL</b>
Grading/Excavating		001 322 10 00	<b>\$3307.39</b>
Floodplain Mgt.		001 345 89 00	Receipt Number
School Impact Fees		650 345 85 00	Amount
Transp. Impact Fees		353 345 85 00	Date
			Initial





# Commercial & Multifamily Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674  
Phone: (360) 225-7299

**PRINT IN INK OR TYPE**

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-129A

Date Received: 1/8/16

<b>APPLICANT</b>		Name Pacific Development Ventures C/o: KB Restaurants, Inc.	Phone: 503-201-1309
Mailing Address, City, State Zip 101 SW Madison St., #8913 Portland, OR 97204		Email Address: josh@pdvco.com	
<b>PROPERTY OWNER</b>		Name Petroleum Enterprises, LLC.	Phone: [REDACTED]
Mailing Address, City, State, Zip [REDACTED]		Email Address: [REDACTED]	
<b>GENERAL CONTRACTOR</b>		Business Name TJ Nisbet Construction, Inc.	Contact Person Tony
Mailing Address, City, State, Zip 15896 SE 82nd Drive PO Box 40 Clackamas, OR 97015		Phone: 503-819-3022	
City Business License #		State Contractors License # TJNISC1044DN	
<b>PROPERTY ADDRESS</b> 1519 Pacific Ave. Woodland, WA			Parcel Number 50427
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: _____ CY		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Remodel	<input type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other _____
Occupancy (uses):		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	
Describe Project and Specific Use in Detail: Footing, stem wall and slab			

**TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 30,000**

NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project. Utility service requests and associated fees are processed by the City of Woodland Public Works Department. For information on application and rates, contact (360) 225-7999.

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.**

Owner's Signature: \_\_\_\_\_ Date: 01/08/2016  
Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DO NOT WRITE BELOW - FOR OFFICE USE ONLY**

Comments: Application Complete:		Zone: <u>C-2</u>	Permit Type: <u>33 PAID</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments	
Civil Plans				
Planning Department			<b>JAN 19 2016</b>	
Drainage/Erosion Control				
Fire/Life Safety				
Building		<u>1-11-16</u>	<b>CITY OF WOODLAND</b>	
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>441.75</u>	001 322 10 00	Fire Impact Fees	351 345 85 00
Plan Review Pre-payment		001 322 10 20	Park Impact Fees	352 345 85 00
Plan Review Balance	<u>287.14</u>	001 322 10 20	Roadway Access	104 322 40 00
Surcharge		001 322 10 00	<b>TOTAL</b>	<b>\$ 728.89</b>
Grading/Excavating		001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	<u>142347989</u>	<u>728.89</u>
School Impact Fees		650 345 85 00	Date	<u>1/20/16</u>
Transp. Impact Fees		353 345 85 00	Initial	[REDACTED]

Form Revised 2/2015

COM 5129A Pd credit card  
142347989

**Plumbing & Mechanical Permit Application**  
 City of Woodland, Washington - Building Department  
**PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL**

**FOR OFFICE USE ONLY**  
 Permit No. RME-16-001  
 Date 1/25/16

Applicant Name Dans Top Notch Heating and Cooling	Title (if owner, state OWNER) install manager	Daytime Phone: 360-835-9364
Property Owner Julie Grefe	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor Dans Top Notch Heating and Cooling	Business Address, City, State & Zip 594 C St Washougal WA 98671	Daytime Phone: 360-835-9364
City of Woodland Business License Number <u>Pending</u>	Washington State Labor & Industries Number and Expiration Date DANSTTN964JG	
Project Address 227 Loganberry st	Subdivision/Legal Description	Parcel Number 5- 504219615

Type of Facility:  Residential  Commercial  Educational  
 Industrial  Institutional  \_\_\_\_\_

Work Type:  Demolish  Remodel/Alter  Addition  
 New  Move  Repair  \_\_\_\_\_

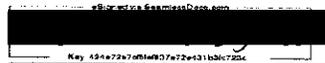
<b>PLUMBING:</b>	<b>MECHANICAL:</b>
Fixtures (or set) on one trap _____ Building or Trailer Park Sewer _____ Rainwater System Drains (inside) _____ Private Sewage System _____ Water Heaters and/or Vents _____ _____ Industrial Waste Interceptors _____ Installations/Alterations/ Repairs of: • Water Piping _____ • Water Treating Equipment _____ • Medical Gas Piping _____ Fixtures with drain/vent repairs or alterations _____ Lawn Sprinkler System with Backflow Device _____ Vacuum Breakers not with Sprinkler _____ Backflow Protective Devices to 2" diameter _____ Backflow Protective Devices over 2" diameter _____	Furnace up to 100,000 BTU _____ Furnace over 100,000 BTU _____ Floor Furnace installation or relocation _____ Heater (suspended, recessed or floor) _____ Vent not included with appliance _____ Repair/Alteration/Addition to Appliance _____ Boilers/ Compressors to 3hp (heat pump) <u>1</u> _____ • from 3 to 15 hp _____ • from 15 to 30 hp _____ • from 30 to 50 hp _____ • over 50 hp _____ Absorption Systems to 100,000 BTU/h _____ • from 100,000 to 500,000 BTU/h _____ • from 500,000 to 1,000,000 BTU/h _____ • from 1,000,000 to 1,750,000 BTU/h _____ • over 1,750,000 BTU/h _____
	Air Handling Units up to 10,000 CFM _____ • over 10,000 CFM _____ Evaporative Cooler (non portable) _____ Ventilation Fan w/ single duct _____ Ventilation System (not heat or a/c) _____ Hood w/ mechanical exhaust _____ Incinerator, domestic type _____ • commercial or industrial _____ Appliance/ Equipment Item (UMC) _____ Fuel-Gas Piping System Outlets _____ Haz. Process Piping System Outlets _____ Non-Haz. Proc. Piping System Outlets _____ Commercial Hood Type 1 _____ Dust Collection System _____ Other _____

Describe Project and Specific Use in Detail: Will be installing a mitsubishi ductless heat pump.

**RECEIVED**  
 JAN 27 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 6680.00 **CITY OF WOODLAND**

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

  
 APPLICANT'S SIGNATURE

1/25/16  
 DATE

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY**

Project Address/Location: <u>227 Loganberry</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <b>36</b>	Flood Zone: <b>A</b>
Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	<u>1-25-16</u>	<u>EQUIPMENT TO BE ABOVE BASE FLOOD ELEVATION + 1'</u>
Plumbing			
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit	<u>1</u>	<u>65.00</u>	001 322 10 00
Other			
Received By: [REDACTED]	Date	Receipt Number	Total Due
	<u>1-27-16</u>	<u>104776-IC</u>	<u>\$65.00</u>

**Plumbing & Mechanical Permit Application**  
 City of Woodland, Washington - Building Department  
 PRINT IN INK OR TYPE - PRESS FIRMLY - DO NOT USE PENCIL

**FOR OFFICE USE ONLY**  
 Permit No. CME-16-002  
 Date 1/27/16

Applicant Name <b>BRIAN STANVER</b>		Title (if owner, state OWNER) <b>COMMERCIAL SALES</b>	Daytime Phone: <b>360-423-3010</b>
Property Owner <b>BSUR PROPERTIES</b>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <b>ENTEK CORPORATION</b>		Business Address, City, State & Zip <b>1021 COLUMBIA BLVD. LONGVIEW, WA 98632</b>	Daytime Phone: <b>360-423-3010</b>
City of Woodland Business License Number <b>16.00034.0</b>		Washington State Labor & Industries Number and Expiration Date <b>152,283-00 1/5/17</b>	
Project Address <b>1015 PACIFIC AVE. WOODLAND, WA 98674</b>		Subdivision/Legal Description <b>DESL: EXC SUP HWY SECT, TOWN, RNG: 14-SW-14</b> <b>SUB: PARENTS BLK 10 LOT 4,5,6</b>	Parcel Number <b>5-0372</b>
Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Work Type: <input type="checkbox"/> Demolish <input checked="" type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/>	

<b>PLUMBING:</b>	<b>MECHANICAL:</b>
Fixtures (or set) on one trap ..... Building or Trailer Park Sewer ..... Rainwater System Drains (Inside) ..... Private Sewage System ..... Water Heaters and/or Vents ..... Gas Piping Systems of 1 to 5 vents ..... Gas Piping Systems over 5 vents ..... Industrial Waste Interceptors ..... Installations/Alterations/ Repairs of: • Water Piping ..... • Water Treating Equipment ..... • Medical Gas Piping ..... Fixtures with drain/vent repairs or alterations ..... Lawn Sprinkler System with Backflow Device ..... Vacuum Breakers not with Sprinkler ..... Backflow Protective Devices to 2" diameter ..... Backflow Protective Devices over 2" diameter .....	Furnace up to 100,000 BTU ..... Furnace over 100,000 BTU ..... Floor Furnace installation or relocation ..... Heater (suspended) recessed or floor) ..... <b>2</b> Vent not included with appliance ..... Repair/Alteration/Addition to Appliance ..... Boilers/Compressors to 3hp (heat pump) ..... • from 3 to 15 hp ..... • from 15 to 30 hp ..... • from 30 to 50 hp ..... • over 50 hp ..... Absorption Systems to 100,000 BTU/h ..... • from 100,000 to 500,000 BTU/h ..... • from 500,000 to 1,000,000 BTU/h ..... • from 1,000,000 to 1,750,000 BTU/h ..... • over 1,750,000 BTU/h .....
	Air Handling Units up to 10,000 CFM ..... • over 10,000 CFM ..... Evaporative Cooler (non portable) ..... Ventilation Fan w/ single duct ..... Ventilation System (not heat or a/c) .. Hood w/ mechanical exhaust ..... Incinerator, domestic type ..... • commercial or industrial ..... Appliance/Equipment Item (UMC) ..... Fuel-Gas Piping System Outlets ..... Haz. Process Piping System Outlets .. Non-Haz. Proc. Piping System Outlets ..... Commercial Hood Type 1 ..... Dust Collection System ..... Other .....

Describe Project and Specific Use in Detail:

LIKE FOR LIKE UNIT HEATER REPLACEMENTS FOR WAREHOUSE AREA HEATING.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 6,333.00

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

[REDACTED SIGNATURE] 27 JAN 2016

APPLICANT'S SIGNATURE DATE

**DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY**

Project Address/Location: <u>1015 Pacific Ave.</u>		<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <b>36</b>	Flood Zone: <b>B</b>			
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>1-27-16</u>	<u>ANY NEW ELECTRICAL SHALL BE THROUGH L + 1</u>				
Plumbing			<u>JAN 28 2016</u>				
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	CITY OF WOODLAND Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		<u>\$85.00</u>	001 322 10 00	Other			
Other				Other			
Received By	Date	Receipt Number		Total Due			
[REDACTED]	<u>1/28/16</u>	<u>104788</u>		<u>\$ 85.00</u>			