

RPL-16-006

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-16-008
Date 3/2/16

Applicant Name John Ellis	Title (if owner, state OWNER) OWNER	Daytime Phone: [REDACTED]
Property Owner John Ellis	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor	Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number	Washington State Labor & Industries Number and Expiration Date	
Project Address 320 Scott Hill Rd	Subdivision/Legal Description	Parcel Number 5-08800101

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

Work Type: Demolish Remodel/Alter Addition
 New Move Repair _____

PLUMBING: <u>RPL-16-006</u>	MECHANICAL: <u>RME-16-008</u>
Fixtures (or set) on one trap <u>15/12</u>	Furnace up to 100,000 BTU <u>1</u>
Building or Trailer Park Sewer	Furnace over 100,000 BTU
Rainwater System Drains (inside)	Floor Furnace installation or relocation
Private Sewage System <u>1</u>	Heater (suspended, recessed or floor)
Water Heaters and/or Vents <u>1</u>	Vent not included with appliance
.....	Repair/Alteration/Addition to Appliance
.....	Boilers/ Compressors to 3hp (heat pump)
Industrial Waste Interceptors	• from 3 to 15 hp
Installations/Alterations/ Repairs of:	• from 15 to 30 hp
• Water Piping <u>1</u>	• from 30 to 50 hp
• Water Treating Equipment	• over 50 hp
• Medical Gas Piping	Absorption Systems to 100,000 BTU/h
Fixtures with drain/vent repairs or alterations	• from 100,000 to 500,000 BTU/h
Lawn Sprinkler System with Backflow Device	• from 500,000 to 1,000,000 BTU/h
Vacuum Breakers not with Sprinkler	• from 1,000,000 to 1,750,000 BTU/h
Backflow Protective Devices to 2" diameter <u>1</u>	• over 1,750,000 BTU/h
Backflow Protective Devices over 2" diameter	

Describe Project and Specific Use in Detail: SFD with Kitchen Sink, laundry tub, floor drain and 2-1/2 BA as well as Accessory structure with 1/2 BA. OSS serves entire property. HVAC provided by 40KBTU forced air ducted split system air source heat pump. Range hood, laundry and bathroom ventings to code. CVAC system in SFD with one inlet on each level of the home and power unit in attached garage. Please note that the fair market value below has already been included in the main building permit valuation as part of the contract price.

PAID

MAR 02 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 17756 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

DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location:	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone:				
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>3-2-16</u>	<u>VERIFY APPLICABLE TYPE ELECTRIC IS SHOWN</u>				
Plumbing	[REDACTED]	<u>3-2-16</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$195.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>\$196.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number	Total Due				
[REDACTED]	<u>3-2-16</u>	<u>105211-19500</u>	<u>\$391.00</u>				

Plumbing & Mechanical Permit Application

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

FOR OFFICE USE ONLY
 Permit No. RPL-16-005
 Date 2/17/16

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>Vanca Wa. 98662</u>	Daytime Phone: [REDACTED]
City of Woodland Business License Number <u>14-00176.7</u>		Washington State Labor & Industries Number and Expiration Date <u>KA-1502980 LE</u>	
Project Address <u>318 Lolo Trail Ave</u>		Subdivision/Legal Description <u>Merriether Estates Lot 3</u>	Parcel Number <u>5-07060103</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"/> _____	

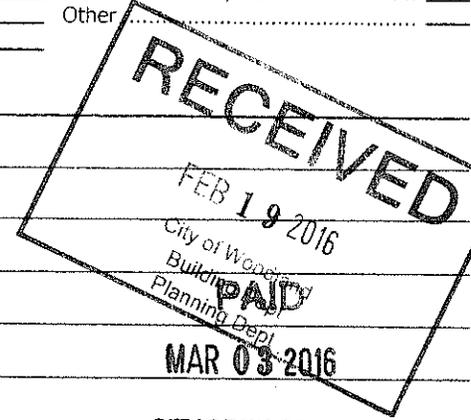
PLUMBING: RPL-16-005

Fixtures (or set) on one trap	<u>108</u>
Building or Trailer Park Sewer	<u>1</u>
Rainwater System Drains (inside)	_____
Private Sewage System	_____
Water Heaters and/or Vents	_____
Gas Piping Systems of 1 to 5 vents	<u>1</u>
Gas Piping Systems over 5 vents	_____
Industrial Waste Interceptors	_____
Installations/Alterations/ Repairs of:	
• Water Piping	<u>1</u>
• Water Treating Equipment	_____
• Medical Gas Piping	_____
Fixtures with drain/vent repairs or alterations	_____
Lawn Sprinkler System with Backflow Device	<u>1</u>
Vacuum Breakers not with Sprinkler	_____
Backflow Protective Devices to 2" diameter	_____
Backflow Protective Devices over 2" diameter	_____

MECHANICAL: RME-16-007

Furnace up to 100,000 BTU	<u>1</u>	Air Handling Units up to 10,000 CFM	_____
Furnace over 100,000 BTU	_____	• over 10,000 CFM	_____
Floor Furnace installation or relocation	_____	Evaporative Cooler (non portable)	_____
Heater (suspended, recessed or floor)	_____	Ventilation Fan w/ single duct	<u>3</u>
Vent not included with appliance	_____	Ventilation System (not heat or a/c)	_____
Repair/Alteration/Addition to Appliance	_____	Hood w/ mechanical exhaust	<u>1</u>
Boilers/Compressors to 3hp (heat pump)	<u>1</u>	Incinerator, domestic type	_____
• from 3 to 15 hp	_____	• commercial or industrial	_____
• from 15 to 30 hp	_____	Appliance/Equipment Item (UMC)	_____
• from 30 to 50 hp	_____	Fuel-Gas Piping System Outlets	<u>4</u>
• over 50 hp	_____	Haz. Process Piping System Outlets ..	_____
Absorption Systems to 100,000 BTU/h	_____	Non-Haz. Proc. Piping System Outlets ..	_____
• from 100,000 to 500,000 BTU/h	_____	Commercial Hood Type 1	_____
• from 500,000 to 1,000,000 BTU/h	_____	Dust Collection System	_____
• from 1,000,000 to 1,750,000 BTU/h	_____	Other	_____
• over 1,750,000 BTU/h	_____		

Describe Project and Specific Use in Detail:
Single family new construction



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

[REDACTED SIGNATURE]

APPLICANT'S SIGNATURE

2-17-16
DATE

DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY

Project Address/Location: <u>318 Lolo Trail</u>		<input checked="" type="checkbox"/> First Plumbing Permit		Permit type: <u>36</u>		Fee: <u>A</u>	
<input checked="" type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>2-29-16</u>	<u>PROMOU SPEC SHEETS</u>				
Plumbing	[REDACTED]	[REDACTED]					
Fire/Life Safety	[REDACTED]	[REDACTED]					
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$179.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>\$232.00</u>	001 322 10 00	Other			
Other:				Other			
Received By:	[REDACTED]	Date	<u>3/2/16</u>	Receipt Number	<u>105222</u>	<u>105233</u>	<u>\$ 411.00</u>



**One and Two Family Building
Permit Application**
 Building Department, 230 Davidson Ave., Woodland, WA 9867.
 Phone: (360) 225-7299
PRINT IN INK OR TYPE
 (Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY
 Permit No. FEN-16-001
 Date Received: 2/26/16

APPLICANT		Name: <u>Kenneth Spear</u>	Phone: [REDACTED]
Mailing Address, City, State Zip		[REDACTED]	Email Address: [REDACTED]
PROPERTY OWNER		Name: [REDACTED]	Phone: [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	Email Address: [REDACTED]
GENERAL CONTRACTOR		Business Name: <u>Cowlitz Fence Co.</u>	Contact Person: <u>Jim</u>
Mailing Address, City State, Zip		<u>2401 Talley Way, Kelso Wa</u>	Phone: <u>360 577-6110</u>
City Business License # <u>Pending</u>		State Contractors License #	Email Address:
PROPERTY ADDRESS		Lot #	Parcel Number
<u>759 CC Street</u>		<u>11</u>	<u>5-0404</u>
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: <u>CY</u> 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):			
		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>6' Wood Fence 162' on Side</u>			

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ _____
 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.*

Owner's Signature: _____ Date: _____
 Applicant's Signature: _____ Date: 2/26/16

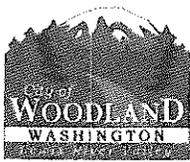
PAID
MAR 02 2016

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: _____ RT Side: _____ LT Side: _____ Back: _____ Zone: LDR-6 Permit Type: 32 Flood Zone: B

Approvals	Initial	Date	Comments
Civil Plans	[REDACTED]		
Planning Department	[REDACTED]	<u>3/1/16</u>	<u>6' fence placed 25' back from front lot line</u>
Drainage/Erosion Control	[REDACTED]		
Fire/Life Safety	[REDACTED]		
Building	[REDACTED]	<u>3-2-16</u>	

Account	Fees Due	Amount	Account	Fees Due	Amount
Building Permit		<u>59.00</u>	001 322 10 00	Water Assessment	421 368 10 10
Plan Review Pre-payment			001 322 10 20	Meter Deposit	401 389 00 00
Plan Review Balance			001 322 10 20	Sewer Assessment	422 368 10 00
Surcharge		<u>4.50</u>	001 322 10 00	Sewer Inspection	402 369 90 10
Grading/Excavating			001 322 10 00	Roadway Access	104 322 40 00
Floodplain Mgt.			001 345 89 00	TOTAL	<u>59.50</u>
School Impact Fees			650 345 85 00	Receipt Number	Amount
Fire Impact Fees			351 345 85 00	<u>105208</u>	<u>59.50</u>
Park Impact Fees			352 345 85 00	Date	<u>3/2/16</u>
Transp. Impact Fees			353 345 85 00	Initial	[REDACTED]



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. ACC 16-001

Date Received: 1/27/16

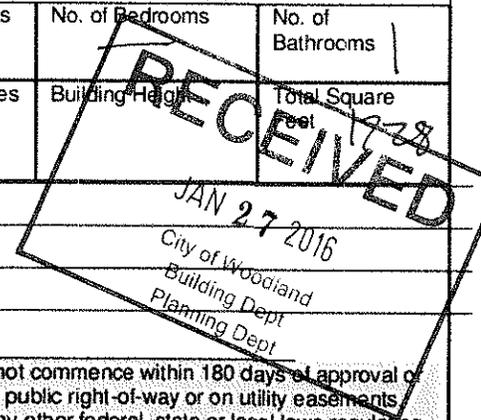
APPLICANT	Name: Nordahl Nordic Homes, Inc.	Phone: [REDACTED]
Mailing Address, City, State, Zip	16106 NE 82nd Avenue, Vancouver, WA 98662-1076	
PROPERTY OWNER	Name John & Heidi Ellis	Phone: [REDACTED]
Mailing Address, City, State, Zip	[REDACTED]	

GENERAL CONTRACTOR	Business Name Nordahl Nordic Homes, Inc.	Contact Person Lorraine Nordahl
Mailing Address, City, State, Zip	16106 NE 82nd Avenue, Vancouver, WA 98662-1076	
City Business License #	State Contractors License # CC NORDANH062K4	Phone: 360-573-7623
		Email Address: lorrainenordahl@hotmail.com

PROPERTY ADDRESS		Lot #	Parcel Number
320 Scott Hill Rd., Woodland, WA 98674			508800101
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: CY			
Type of Project		<input checked="" type="checkbox"/> New	<input type="checkbox"/> Add On
		<input type="checkbox"/> Remodel	<input type="checkbox"/> Repair
		<input type="checkbox"/> Demolition	<input type="checkbox"/> Other
Occupancy (uses):	No. of Units	No. of Bedrooms	No. of Bathrooms
Storage Building	1		1
	No. of Stories	Building Height	Total Square Feet
	1		1728

Describe Project and Specific Use in Detail:

1728 ACCESSORY BUILDING w/ DILET



TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$19,285.67

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.**

Owner's Signature: [REDACTED]
Applicant's Signature: [REDACTED]

Date: 1-27-16
Date: MAR 02 2016
CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY					
Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>LDR 7.2</u>	Permit Type: <u>PAID</u> Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments		
Civil Plans			MAR 02 2016 CITY OF WOODLAND		
Planning Department					
Drainage/Erosion Control					
Fire/Life Safety Building	[REDACTED]	<u>3-2-16</u>			
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>321.25</u>	001 322 10 00	Water Assessment		421 368 10 10
Plan Review Pre-payment	<u>---</u>	001 322 10 20	Meter Deposit		401 389 00 00
Plan Review Balance	<u>---</u>	001 322 10 20	Sewer Assessment		422 368 10 00
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection		402 369 90 10
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00
Floodplain Mgt.		001 345 89 00	TOTAL	\$325.75	
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees		351 345 85 00	<u>105 213</u>	<u>\$ 325.75</u>	<u>3-2-16</u>
Park Impact Fees		352 345 85 00			
Transp. Impact Fees		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

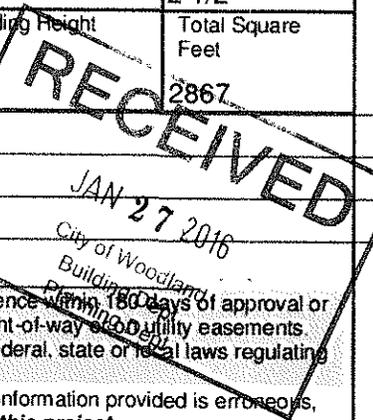
(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. ENC 16-003

Date Received: 1/27/16

APPLICANT		Name: Nordahl Nordic Homes, Inc.	Phone: 360-573-7623
Mailing Address, City, State Zip 16106 NE 82nd Avenue, Vancouver, WA 98662-1076		Email Address: lorraineordahl@hotmail.com	
PROPERTY OWNER		Name John & Heidi Ellis	Phone: [REDACTED]
Mailing Address, City, State, Zip [REDACTED]		Email Address: john@ellis.me	
GENERAL CONTRACTOR		Business Name Nordahl Nordic Homes, Inc.	Contact Person Lorraine Nordahl
Mailing Address, City, State, Zip 16106 NE 82nd Avenue, Vancouver, WA 98662-1076		Phone: 360-573-7623	
City Business License #		State Contractors License # CC NORDANH062K4	Email Address: lorraineordahl@hotmail.com
PROPERTY ADDRESS		Lot #	Parcel Number
320 Scott Hill Rd., Woodland, WA 98674			508800101
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: CY		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): Single family residence with detached storage building		No. of Units 1	No. of Bedrooms 4
		No. of Bathrooms 2 1/2	
		No. of Stories 2	Building Height 30'
			Total Square Feet 2867
Describe Project and Specific Use in Detail: <u>NEW SFR</u>			
<p>TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>321,363.62</u> <u>266,870</u></p> <p>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.</p> <p>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.</p>			
Owner's Signature [REDACTED]		Date <u>1-27-16</u>	
Applicant's Signature [REDACTED]		Date [REDACTED]	
DO NOT WRITE BELOW - FOR OFFICE USE ONLY			
Setbacks: Front:	RT Side:	LT Side:	Back:
			Zone: <u>LDR 7.2</u>
			Permit Type: <u>1</u>
			Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building	[REDACTED]	<u>2-19-16</u>	<u>SEE NOTES ON PLANS</u>
Fees Due	Amount	Account	Fees Due
Building Permit	<u>2236.95</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>854.02</u>	001 322 10 20	Sewer Assessment
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection
Grading/Excavating		001 322 10 00	Roadway Access
Floodplain Mgt.		001 345 89 00	TOTAL
School Impact Fees		650 345 85 00	<u>73,095.47</u>
Fire Impact Fees		351 345 85 00	Receipt Number
Park Impact Fees		352 345 85 00	Amount
Transp. Impact Fees		353 345 85 00	Date
			Initial
			<u>104773</u>
			<u>600.00</u>
			<u>1-27-16</u>
			<u>105215</u>
			<u>3,095.47</u>
			<u>3-2-16</u>





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. RNC-16-005

Date Received: 2/19/16

APPLICANT		Name: <u>Karlson Development LLC</u>	Phone: <u>944-1405</u>
Mailing Address, City, State Zip		<u>9704 N.E. 117th Ave Vancouver WA 98662</u>	Email Address: <u>Dvata@acconcast.com</u>
PROPERTY OWNER		Name: <u>Same</u>	Phone:
Mailing Address, City State, Zip			Email Address:
GENERAL CONTRACTOR		Business Name: <u>Karlson Development LLC</u>	Contact Person: <u>Dvane Karlson</u>
Mailing Address, City State, Zip		<u>9704 N.E. 117th Ave Vancouver WA 98662</u>	Phone: <u>944-1405</u>
City Business License #		<u>14-000126.7</u>	Email Address: <u>Dvata@acconcast.com</u>
State Contractors License #		<u>KARLSON 9850E</u>	
Property Address		<u>318 Lolo trail Ave</u>	
Parcel Number		<u>507060103</u>	
Fill & Grade/Excavation with this project?		Type of Project	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: <u>CY</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	
Occupancy (uses):		No. of Units	No. of Bedrooms
<u>NEW construction single family</u>			<u>3</u>
		No. of Bathrooms	<u>2</u>
		No. of Stories	<u>1</u>
		Building Height	<u>20</u>
		Total Square Feet	<u>1493</u>
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>172,737.73</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 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.

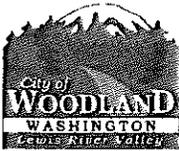
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is false or deceptive, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.

PAID

On [Redacted] Date 2-17-16 FEB 19 2016
 Applicant's Signature [Redacted] Date 2-17-16 CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

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		<u>2-29-16</u>	<u>LADEST Floor to BE 1" ABOVE BFE</u>
Fees Due	Amount	Account	Fees Due
Building Permit	<u>1402.55</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>311.66</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	TOTAL
School Impact Fees	<u>2750.00</u>	350 345 85 00	Amount: <u>\$15,337.71</u>
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	Receipt Number
Park Impact Fees	<u>—</u>	352 345 85 00	Amount: <u>105050</u>
Transp. Impact Fees	<u>—</u>	353 345 85 00	Amount: <u>105221</u>
			Date: <u>2-19-16</u>
			Date: <u>3-2-16</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. CCP-16-001

Date Received: 2-5-16

APPLICANT		Name <u>Tim Doyle</u>		[Redacted]	
Mailing Address, City, State, Zip		[Redacted]		[Redacted]	
PROPERTY OWNER		Name <u>Double J Investments</u>		Phone: <u>Same</u>	
Mailing Address, City, State, Zip		<u>Same</u>		Email Address:	
GENERAL CONTRACTOR		Business Name		Contact Person	
Mailing Address, City, State, Zip		<u>1260 ATLANTIC</u>		Phone:	
City Business License #		State Contractors License #		Email:	
PROPERTY ADDRESS				Parcel Number	
<u>1260 Atlantic</u>				<u>50458</u>	
Fill & Grade/Excavation with this project?		Type of Project		[] New [] Add On [] Demolition	
Yes [] No [X] Total Quantity of Earthwork: <u>CY</u>		[] Remodel [] Repair [X] Other			
Occupancy (uses): <u>Place 12x40 office Trailer install</u>		No. of Units	No. of Bedrooms	No. of Bathrooms	
<u>New Sewer Line</u>		<u>1</u>			
<u>Commercial Office Trailer</u>		No. of Stories	Building Height	Total Square Feet	
		<u>1</u>	<u>10</u>	<u>480</u>	
Describe Project and Specific Use in Detail: <u>Place 12x40 Trailer install new Sewer Line Per City</u>					
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>1500</u>					
<p>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.</p> <p>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.</p>					
<p>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 false or misleading, the permittee shall be responsible for the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.</p>					
Applicant's Signature: [Redacted]				Date: <u>2/5/16</u>	
				Date: <u>MAR 07 2016</u>	
				CITY OF WOODLAND	
DO NOT WRITE BELOW - FOR OFFICE USE ONLY					
Comments:		Zone: <u>C-2</u>	Permit Type: <u>14</u>	Flood Zone: <u>B</u>	
Application Complete:		Comments			
Approvals	Initial	Date			
Civil Plans					
Planning Department					
Drainage/Erosion Control					
Fire/Life Safety					
Building		<u>2-8-16</u>	<u>NOV L+1 PERMIT REQ'D FOR WORK IN UNIT. PLUMBING PERMITS NEEDED FOR SEWER</u>		
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>\$250</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	TOTAL	<u>\$254.50</u>	
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date
Floodplain Mgt.		001 345 89 00	<u>105264</u>	<u>254.50</u>	<u>3-7-16</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. CME-16-006
 Date 3/1/16

Applicant Name <u>Portco Packaging</u>	Title (if owner, state OWNER)	Daytime Phone:
Property Owner	Mailing Address, City, State & Zip	Daytime Phone:
Contractor <u>VANCOUVER ROOFING & SHEET METAL</u>	Business Address, City, State & Zip <u>211 5th Street, Woodland, WA 98674</u>	Daytime Phone:
City of Woodland Business License Number <u>52</u>	Washington State Labor & Industries Number and Expiration Date	
Project Address <u>211 5th Street, Woodland, WA 98674</u>	Subdivision/Legal Description	Parcel Number <u>5-0630009</u>

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

Work Type: Demolish Remodel/Alter Addition
 New Move Repair _____

PLUMBING:	MECHANICAL:
Fixtures (or set) on one trap _____	Furnace up to 100,000 BTU _____
Building or Trailer Park Sewer _____	Furnace over 100,000 BTU _____
Rainwater System Drains (inside) _____	Floor Furnace installation or relocation _____
Private Sewage System _____	Heater (suspended, recessed or floor) _____
Water Heaters and/or Vents _____	Vent not included with appliance _____
_____	Repair/Alteration/Addition to Appliance _____
_____	Boilers/Compressors to 3hp (heat pump) _____
Industrial Waste Interceptors _____	• from 3 to 15 hp _____
Installations/Alterations/ Repairs of:	• from 15 to 30 hp _____
• Water Piping _____	• from 30 to 50 hp _____
• Water Treating Equipment _____	• over 50 hp _____
• Medical Gas Piping _____	Absorption Systems to 100,000 BTU/h _____
Fixtures with drain/vent repairs or alterations _____	• from 100,000 to 500,000 BTU/h _____
Lawn Sprinkler System with Backflow Device _____	• from 500,000 to 1,000,000 BTU/h _____
Vacuum Breakers not with Sprinkler _____	• from 1,000,000 to 1,750,000 BTU/h _____
Backflow Protective Devices to 2" diameter _____	• over 1,750,000 BTU/h _____
Backflow Protective Devices over 2" diameter _____	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) <input checked="" type="checkbox"/>
	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:
See attached description.

PAID
MAR 07 2016
 CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 7500.00

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

3-1-16
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>211 5th Street</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B
Permit Approval	Initial	Date	COMMENTS
Mechanical		<u>3-2-16</u>	<u>FOR NETWORK ONLY - NO EQUIPMENT</u>
Plumbing			
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		<u>\$48.60</u>	001 322 10 00
Other			Other
Received By: 	Date	Receipt Number	Total Due
	<u>3-7-16</u>	<u>105270</u>	<u>\$ 48.60</u>

INV12700

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-16-007
 Date 3/2/16

Applicant Name Lyle Kargel / JNB Mechanical, Inc.	Title (if owner, state OWNER) Project Manager	Daytime Phone: 360-433-9067
Property Owner Rod Shearer	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor JNB Mechanical	Business Address, City, State & Zip 3315 Ne 112th Ave, Suite A-40, Vanc. Wa.	Daytime Phone: 360-433-9067
City of Woodland Business License Number 16-000159.3	Washington State Labor & Industries Number and Expiration Date JNBMEM1946QL / 4/30/2016	
Project Address 1745 Schurman Way, Woodland, WA.	Subdivision/Legal Description	Parcel Number 5-07810105

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

Work Type: Demolish Remodel/Alter Addition
 New Move Repair _____

PLUMBING:	MECHANICAL:	
Fixtures (or set) on one trap	Furnace up to 100,000 BTU X	Air Handling Units up to 10,000 CFM 1
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 1
Water Heaters and/or Vents	Vent not included with appliance	Ventilation System (not heat or a/c) ..
.....	Repair/Alteration/Addition to Appliance	Hood w/ mechanical exhaust
.....	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:

.....

PAID
MAR 07 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 11,275.00

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.

[REDACTED SIGNATURE] 3/2/16
 APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1745 Schurman Way</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B				
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>3/2/16</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>\$64.00</u>	001 322 10 00	Other			
Other				Other			
Received By: [REDACTED]	Date	<u>3-8-16</u>	Receipt Number	<u>105289</u>	Total Due	<u>\$64.00</u>	

Plumbing & Mech. ical 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-16-009
 Date 3/10/16

Applicant Name Advanced Air Systems, Inc.	Title (if owner, state OWNER)	Daytime Phone: 360-693-1757
Property Owner Bob Schreiner	Mailing Address, City, State & Zip	Daytime Phone:
Contractor Advanced Air Systems, Inc.	Business Address, City, State & Zip PO Box 61569, Vancouver, WA 98666	Daytime Phone: 360-693-1757
City of Woodland Business License Number <u>15.0</u>	Washington State Labor & Industries Number and Expiration Date ADVANAS033BA	
Project Address 291 Hillshire Drive, Woodland, WA 98674	Subdivision/Legal Description	Parcel Number <u>5-02357044</u>

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

Work Type: Demolish Remodel/Alter Addition
 New Move Repair _____

PLUMBING:	MECHANICAL:
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) _____ • 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: Replace 4 ton air conditioner

PAID

MAR 16 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 3100.00

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 _____ DATE 3/10/16

CITY OF WOODLAND

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>291 Hillshire Drive</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>A</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical		<u>3-16-16</u>	<u>ELEVATE ABOVE BFE + 1'</u>
Plumbing			
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		<u>\$65.00</u>	001 322 10 00
Other			
Received By:	Date <u>3/16/16</u>	Receipt Number <u>105569</u>	Total Due <u>\$65.00</u>



Fire & Life Safety Permit Application

Permit # FLS-16-003 Parcel #: 5-042305 Fire Marshal # FRI2016-00214

Job Address: 1387 DOWN RIVER DRIVE

Occupant: FlashCo Mfg.

Owner: Joe Shorthouse Address: _____

Contractor: Express Fire Systems Business License # _____

Address: 670 S. 28th Street Washougal WA

E-mail: pattie@expressfiresystems.com Phone: 360-953-8432 Mobile: _____

Contact Person: Pattie Address: _____

E-mail: pattie@expressfiresystems.com Phone: 360-953-8432 Mobile: _____

Zone: B Special Flood Hazard Zone: Yes No

An application is hereby made for the following review:

Fire Protection

- Fire Alarm System
- Sprinkler monitoring only (\$128.70 Total)
- Complete sprinkler system
- Sprinkler underground
- Sprinkler review for spray booth
- Other sprinkler review, six heads or more
- Commercial cooking protection
- Other extinguishing system
- Smoke removal system
- Fire pump system

Special Hazards

- Magazines (explosives storage)
- LPG
- Residential LPG installations
- Aerosol storage
- High pile combustible storage
- Hazardous materials
- Underground storage tank decommissioning
- Cryogenic systems
- Compressed gasses
- Special Process or Equipment
- Application of flammable/combustible finish
- Commercial drying oven
- Organic coatings
- Semi-conductor fabrication

Other Review

- Tent/Canopy (\$145 inspection fee only)
- Special Event
- Access gate
- Other (please list) _____

To apply, submit 3 sets of plans and a \$150 general plan review deposit to the Building & Planning Department at the City Hall Annex, 230 Davidson, Woodland, WA 98674.

The balance of review, inspection, and issuance fees are due at the time of permit issuance.

NOTE: This application is not an approval or authorization for work to begin. Plan Review and inspection fees are outlined in Resolution 619. In addition to any other penalty allowed by city code, double review fees will be charged where work has commenced prior to the applicant obtaining the required reviews, approvals or permits. The City of Woodland has adopted the Clark County Fire Marshal's fee schedule. A 10% administrative cost will be added to all permits.

Applicant: _____
 Phone: _____

Date submitted: 03-08-16
 E-mail: _____

Comments: _____

Amount	Type	ACCOUNT	Receipt #	Date Paid	
\$ 150.00	Pre Payment	001 386 00 00 01	105315	3-8-16	
\$ 134.00	Fees - Pre Payment	001 386 00 00 01	105581	3-17-16	
\$ 28.40	Admin (10% fee)	001 341 42 00 00			
\$ 162.40	BALANCE	NA			



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. FEN-16-002

Date Received: 3/1/16

APPLICANT		Name: <u>William R. Dunlap</u>	Phone: [REDACTED]
Mailing Address, City, State Zip [REDACTED]			
PROPERTY OWNER		Name: <u>William R. Dunlap</u>	Phone: [REDACTED]
Mailing Address, City State, Zip [REDACTED]			
GENERAL CONTRACTOR		Business [REDACTED]	Contact Person [REDACTED]
Mailing Address, City State, Zip [REDACTED]			
City Business License #		State Contractors License #	Email Address:
PROPERTY ADDRESS			
<u>106 South Pekin Rd. Woodland WA</u>		Lot # <u>11</u>	Parcel Number <u>50680014</u>
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: _____ CY			
Type of Project: <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other			
Occupancy (uses): <u>Vacant Land</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>Fence</u>			

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 6,000

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.

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: MARCH 1, 2016

Applicant's Signature: [REDACTED] Date: MARCH 1, 2016

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>LDR-6</u>	Permit Type: <u>32</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments: <u>PAID</u>			
Civil Plans	[REDACTED]	<u>3/10/16</u>	MAR 21 2016			
Planning Department	[REDACTED]					
Drainage/Erosion Control	[REDACTED]					
Fire/Life Safety	[REDACTED]					
Building	[REDACTED]	<u>3/18/16</u>				
CITY OF WOODLAND						
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>\$55.00</u>	001 322 10 00	Water Assessment		421 368 10 10	
Plan Review Pre-payment		001 322 10 20	Meter Deposit		401 389 00 00	
Plan Review Balance		001 322 10 20	Sewer Assessment		422 368 10 00	
Surcharge	<u>\$4.50</u>	001 322 10 00	Sewer Inspection		402 369 90 10	
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00	
Floodplain Mgt.		001 345 89 00	TOTAL	<u>\$59.50</u>		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<u>105605</u>	<u>59.50</u>	<u>3-21-16</u>	[REDACTED]
Park Impact Fees		352 345 85 00				
Transp. Impact Fees		353 345 85 00				



City and Town 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. FEN-14-003
 Date Received: 3/30/16

APPLICANT		Name: <u>Jon Brown</u>	Phone: [REDACTED]
Mailing Address, City, State Zip [REDACTED]			
PROPERTY OWNER		Name: [REDACTED]	
Mailing Address, City State, Zip <u>SAME</u>			
GENERAL CONTRACTOR		Business Name	Contact Person
Mailing Address, City State, Zip			
City Business License #		State Contractors License #	Phone:
Email Address:			
PROPERTY ADDRESS			
Lot #		Parcel Number <u>502450507</u>	
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: _____ CY		Type of Project [] New [] Add On [] Demolition [] Remodel [] Repair [] 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: <u>Building a fence</u>			

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ _____
 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.*

Owner's Signature [REDACTED] Date 3-29-16
 Applicant's Signature [REDACTED] Date 3-29-16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>LDR-6</u>	Permit Type: <u>32 PAID</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments			
Civil Plans	[REDACTED]					
Planning Department	[REDACTED]	<u>3/30/16</u>				
Drainage/Erosion Control	[REDACTED]					
Fire/Life Safety	[REDACTED]					
Building	[REDACTED]	<u>3-30-16</u>				
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>55.00</u>	001 322 10 00	Water Assessment		421 368 10 10	
Plan Review Pre-payment		001 322 10 20	Meter Deposit		401 389 00 00	
Plan Review Balance		001 322 10 20	Sewer Assessment		422 368 10 00	
Surcharge	<u>1.50</u>	001 322 10 00	Sewer Inspection		402 369 90 10	
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00	
Floodplain Mgt.		001 345 89 00	TOTAL	<u>59.50</u>		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<u>105697</u>	<u>59.50</u>	<u>3-30-16</u>	[REDACTED]
Park Impact Fees		352 345 85 00				
Transp. Impact Fees		353 345 85 00				