

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
 ASP 815-149
 Permit No. 815-149
 Date Received: 8/19/15

APPLICANT		Name <u>ALEX FARFS</u>	Phone: [REDACTED]
Mailing Address, City, State Zip [REDACTED]			
PROPERTY OWNER		Name <u>DARLENE / MIKE PARNELL</u>	Phone: [REDACTED]
Mailing Address, City State, Zip [REDACTED]			
GENERAL CONTRACTOR		Business Name <u>All Square Construction</u>	Contact Person <u>JAM SPIESS</u>
Mailing Address, City State, Zip <u>367 HILLSDALE DRIVE WOODLAND WA 98674</u>		Phone: <u>360.606.1953</u>	
City Business License # <u>91-149915.1</u>	State Contractors License # <u>ALLSBC1988605</u>	Email: <u>ALLSQUARECONSTRUCTION@hotmail.com</u>	
PROPERTY ADDRESS <u>9428 OLD PACIFIC HWY WOODLAND WA 98604</u>		Parcel Number <u>508580100</u>	
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: <u>CY</u>		Type of Project <input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses): <u>STORAGE AND CLASSROOM ADDITION</u>		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	

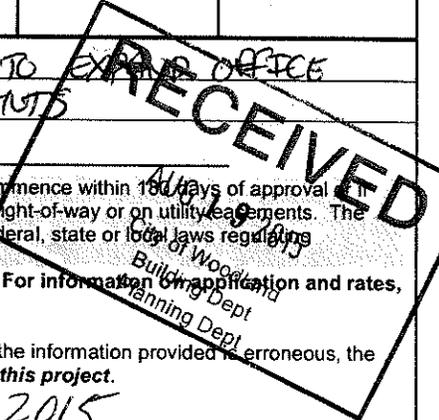
Describe Project and Specific Use in Detail: ADDING A BOOKSTORE STORAGE AREA TO EXISTING OFFICE SPACE, AND ADD CLASS ROOM UPSTAIRS FOR STUDENTS

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 137,750

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. 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) [REDACTED]

I hereby certify that the information provided is true and correct, and if any of the information provided is erroneous, the permit or approval is void. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.

Owner's Signature: [REDACTED] Date: 08.19.2015
 Applicant's Signature: [REDACTED] Date: 08.19.2015



DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:		Zone: <u>C-2</u>	Permit Type: <u>12</u>	Flood Zone: <u>B</u>
Application Complete:		Comments: <u>PAID</u>		
Approvals	Initial	Date		
Civil Plans				
Planning Department				
Drainage/Erosion Control				
Fire/Life Safety				
Building	[REDACTED]	<u>7-31-16</u>		
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>\$ 965.24</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>\$ 627.40</u>	001 322 10 20	Roadway Access	104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL	\$ 1597.14
Grading/Excavating		001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	<u>105712</u>	<u>\$ 1,597.14</u>
School Impact Fees		650 345 85 00	Date	<u>4-1-16</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. Sign-16-002

Date Received: 3/21/16

APPLICANT Name: <u>STEVE ADVANCED ELECTRIC SIGN</u>		Phone: <u>360 225 6826</u>
Mailing Address, City, State Zip: <u>1550 DOWN RIVER DRIVE WOODLAND WA</u>		Email Address: <u>STEVE@ADVANCELETRICSIGN.COM</u>
PROPERTY OWNER Name:		Phone:
Mailing Address, City State, Zip:		Email Address:
GENERAL CONTRACTOR Business Name: <u>ADVANCED ELECTRIC SIGN</u>		Contact Person: <u>STEVE SLACK</u>
Mailing Address, City State, Zip:		Phone: <u>901 4200</u>
City Business License #: <u>15-00001513</u>	State Contractors License #: <u>ADVANES0716</u>	Email:
Property Address: <u>1519 PACIFIC AVE</u>		Parcel Number: <u>5-0427</u>
Fill & Grade/Excavation with this project? Yes [] No [] 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 Stories	Building Height
		Total Square Feet

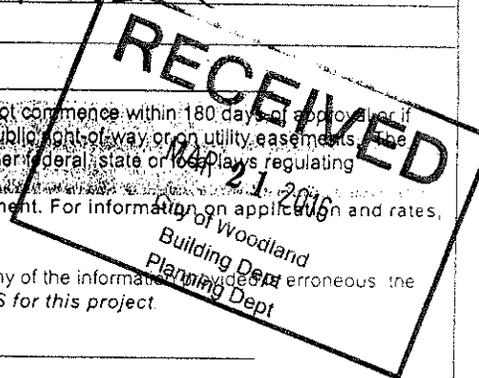
Describe Project and Specific Use in Detail: INSTALLATION OF SIGNS & MENU SEE ATTACHED

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. If work is suspended or abandoned for a period of 90 days, a new 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: _____ Date: 3-21-16
 Applicant's Signature: _____ Date: _____



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Setbacks: Front: _____ Side: _____ Back: _____	Zone: <u>C-2</u>	Permit Type: <u>35</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments
Civil Plans			
Planning Department		<u>3/20/16</u>	<u>sign + numbers OK</u>
Drainage/Erosion Control			
Fire/Life Safety			
Building		<u>4-4-16</u>	
Fees Due	Amount	Account	Fees Due
Building Permit	<u>\$635.00</u>	001 322 10 00	Fire Impact Fees
Plan Review Pre-payment		001 322 10 20	Park Impact Fees
Plan Review Balance		001 322 10 20	Roadway Access
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL
Grading/Excavating		001 322 10 00	Receipt Number
Floodplain Mgt		001 345 89 00	Amount: <u>\$639.50</u> Date: <u>4-4-16</u> Initial: _____
School Impact Fees		350 345 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. RPL-16-007
 Date 3/2/16

Applicant Name <u>Charles R Wright</u>	Title (if owner, state OWNER) <u>Business owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>Jeffrey B Wright</u>	Mailing Address, City, State & Zip [REDACTED]	
Contractor <u>Sarkinen Plumbing</u>	Business Address, City, State & Zip <u>9502 NE 72nd Ave Vancouver WA</u>	Daytime Phone: <u>360-892-2034</u>
City of Woodland Business License Number <u>16-000262.1</u>	Washington State Labor & Industries Number and Expiration Date <u>CC SARHPI946MF exp 8-8-16</u>	
Project Address <u>906 Caples Rd</u>	Subdivision/Legal Description	Parcel Number <u>5-07350106</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 <u>3</u>	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 <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 <u>3</u>	• 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)
	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: Sarkinen Plumbing will ~~run~~ ~~2~~ ~~yard~~ ~~hydrants~~ ~~and~~ ~~run~~ Rough in and install 2 sinks: 1 hand sink one prep sink and 1-3 bay sink, run the water and drains.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 2600.00

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] 2/23/16
 APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>906 Caples</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>B</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	[REDACTED]	<u>PAID</u> <u>APR 04 2016</u>
Plumbing	[REDACTED]	<u>3-18-16</u>	
Fire/Life Safety			CITY OF WOODLAND
FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$110.00</u>	001 322 10 00
Mechanical Permit			001 322 10 00
Other			
Received By: [REDACTED]	Date	<u>4-4-16</u>	Receipt Number <u>105752</u>
			Total Due <u>\$110.00</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. CPL-16-003
 Date 4/4/16 CME-16-010

Applicant Name Wayne Richey	Title (if owner, state OWNER)	Daytime Phone:
Property Owner Patti Rathbone	Mailing Address, City, State & Zip	
Contractor Wayne Richey	Business Address, City, State & Zip 1930 B Belmont Loop, Woodland, WA 98674	Daytime Phone: 360-841-8351
City of Woodland Business License Number 16-33	Washington State Labor & Industries Number and Expiration Date 603-549-264 10-06-15	
Project Address 1900 Belmont Loop, Woodland, WA 98674	Subdivision/Legal Description	Parcel Number 5-04211614

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

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

PLUMBING: CPL-16-003 Fixtures (or set) on one trap <u>6</u> Building or Trailer Park Sewer _____ Rainwater System Drains (inside) _____ Private Sewage System _____ Water Heaters and/or Vents <u>1</u> _____ 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 <u>1</u> Lawn Sprinkler System with Backflow Device _____ Vacuum Breakers not with Sprinkler _____ Backflow Protective Devices to 2" diameter _____ Backflow Protective Devices over 2" diameter _____	MECHANICAL: CME-16-010 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 <u>3</u> 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 _____
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Describe Project and Specific Use in Detail:

PAID

APR 04 2016

CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 12,000

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.

3-28-16
 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: 36	Flood Zone: B		
Permit Approval	Initial	Date	COMMENTS				
Mechanical		<u>4-4-16</u>					
Plumbing							
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$130.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>\$62.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number		Total Due			
	<u>4-4-16</u>	<u>105744 & 105750</u>		\$ 192.00			



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. **RRM-16-001**

Date Received: **3/2/16**

APPLICANT		Name: Charles R. Wright	Phone: [Redacted]
Mailing Address, City, State Zip		[Redacted]	Email Address: [Redacted]
PROPERTY OWNER		Name: Jeffrey B. Wright	Phone: [Redacted]
Mailing Address, City State, Zip		[Redacted]	[Redacted]
GENERAL CONTRACTOR		Business Name: Sarkinen Plumbing	Contact Person: Dylan
Mailing Address, City State, Zip		9502 NE 72nd Ave Vancouver WA	Phone: 360 882 2034
City Business License # 16-000262.1		State Contractors License # Sarkipi946MF	Email: Dispatch@sarkinenplumbing.com
PROPERTY ADDRESS		906 Caples Rd Woodland, WA 98674	
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: CY		Type of Project	[] New [] Add On [] Demolition [X] Remodel [] Repair [] Other
Occupancy (uses): Convert House Kitchen to Commercial Kitchen		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
			Total Square Feet

Describe Project and Specific Use in Detail: **We will be converting the kitchen and living room to a Department of Agriculture approved commercial kitchen for Recreational Marijuana Processor licenses**

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ **8000.00**

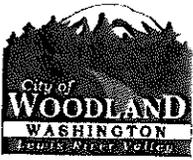
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. 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: [Redacted] Date: **2-24-16**
 Applicant's Signature: [Redacted] Date: **2/23/16**

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:		Zone: I-2	Permit Type: 2	Flood Zone: B
Application Complete:		Comments: PAID		
Approvals	Initial	Date		
Civil Plans				
Planning Department				
Drainage/Erosion Control				
Fire/Life Safety			APR 04 2016	
Building Fees Due	Amount	Account	Fees Due	Amount
Building Permit	122.60	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	79.69	001 322 10 20	Roadway Access	104 322 40 00
Surcharge	4.50	001 322 10 00	TOTAL	206.79
Grading/Excavating		001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	105751	206.79
School Impact Fees		650 345 85 00	Date	4-4-16
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. CTI-16-003

Date Received: 3/28/16

APPLICANT		Name Wayne Richey	Phone: [REDACTED]
Mailing Address, City, State Zip [REDACTED]			
PROPERTY OWNER		Name Patti Rathbone	Phone: [REDACTED]
Mailing Address, City, State, Zip [REDACTED]			
Business Name Owner Builder... Andlers Depot		Contact Person Wayne Richey	
Mailing Address, City, State, Zip [REDACTED]		Phone: [REDACTED]	
City Business License # 16-33	State Contractors License # [REDACTED]		

PROPERTY ADDRESS 1900 Belmont Loop, Woodland, WA 98674		Parcel Number <u>504211614</u>	
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ CY		Type of Project	<input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
Occupancy (uses): Retail Fly Shop		No. of Units 1	No. of Bedrooms <u>N/A</u>
		No. of Bathrooms 2	No. of Stories 1
		Building Height 9 Ft	Total Square Feet 3000

Describe Project and Specific Use in Detail: The space will be a retail shop selling fly fishing gear.
the removal of some existing walls and adding some non-bearing interior walls

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 the 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 is void. [Signature] of the applicant to arrange for **ANY INSPECTIONS** for this project.

Owner's Signature [REDACTED]	Date 03/28/2016
Applicant's Signature [Signature]	Date 4/4/16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete:	Zone: <u>C-2</u>	Permit Type: <u>15</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building	[REDACTED]	4-4-16	
Fees Due	Amount	Account	Fees Due
Building Permit	\$353.40	001 322 10 00	Amount
Plan Review Pre-payment	229.71	001 322 10 20	Account
Plan Review Balance		001 322 10 20	351 345 85 00
Surcharge	4.50	001 322 10 00	352 345 85 00
Grading/Excavating		001 322 10 00	104 322 40 00
Floodplain Mgt.		001 345 89 00	TOTAL
School Impact Fees		650 345 85 00	#587.61
Transp. Impact Fees		353 345 85 00	Receipt Number
			Amount
			Date
			Initial

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. CPL-16-002
 Date 3/29/16

Applicant Name <u>Jared Bellikka</u>		Title (if owner, state OWNER) <u>owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>Flashco</u>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>JB Plumbing</u>		Business Address, City, State & Zip <u>21105 NE 229 st Bellingham WA 98604</u>	Daytime Phone: [REDACTED]
City of Woodland Business License Number <u>* Pending</u>		Washington State Labor & Industries Number and Expiration Date	
Project Address <u>1383 Down River Dr Woodland</u>		Subdivision/Legal Description	Parcel Number <u>5-042305</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 <u>3</u>	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 <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 _____	• 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) .. _____
	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:

1 50 gallon electric water heater /
1 ADA toilet, 1 ADA wall hung LAV, 1 Kitchen sink

PAID

APR 05 2016

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

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

03/29/2016

DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1383 Down River Dr.</u>		<input type="checkbox"/> First Plumbing Permit	Permit Type: <u>36</u>	Flood Zone: <u>B</u>			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical							
Plumbing	[REDACTED]	<u>3-30-16</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$80.00</u>	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Received By:	[REDACTED]	Date <u>4-5-16</u>	Receipt Number <u>105770</u>	Total Due <u>\$ 80.00</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-16-009
 Date 3/30/16

Applicant Name Flashco	Title (if owner, state OWNER)	Daytime Phone:
Property Owner	Mailing Address, City, State & Zip	Daytime Phone:
Contractor TRI-TECH HEATING	Business Address, City, State & Zip 6603 NE 137th Ave, Vancouver 98682	Daytime Phone: 360-891-2002
City of Woodland Business License Number 16-000303.5	Washington State Labor & Industries Number and Expiration Date TRITEH19523L	
Project Address 1383 Down River Dr.	Subdivision/Legal Description	Parcel Number 5-042305

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

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

PLUMBING: 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	MECHANICAL: Furnace up to 100,000 BTU <u>1</u> 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
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Describe Project and Specific Use in Detail:

INSTALLING 9590 GAS FURNACE & A/C WITH 5 SUPPLY AIR RUNS & 1 RETURN DUCT, HEATING FURNACE

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 8682.00

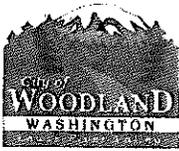
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.


 APPLICANT'S SIGNATURE

3-25-16
 DATE

DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY

Project Address/Location: 1383 Down River Dr.	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: PAID B
Permit Approval	Initial	Date	COMMENTS
Mechanical		4-6-16	APR 06 2016
Plumbing			
Fire/Life Safety			CITY OF WOODLAND
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		90.00	001 322 10 00
Other			Other
Other			Other
Received By: 	Date	Receipt Number	Total Due
	4-6-16	105794	\$ 90.00



City of Woodland
 PO Box 9 / 230 Davidson
 Woodland, WA 98674
 360-225-7299
www.ci.woodland.wa.us

Fire & Life Safety Permit Application

Permit # FLS-16-004 Parcel #: 50597 Fire Marshal # FRI201
 Job Address: 1600 ATLANTIC AVE.
 Occupant: PACIFIC PRIDE FUEL 98632
 Owner: WILCOX & FLEGEL OIL CO. Address: [REDACTED]
 Contractor: ANDERSON ENVIRONMENTAL CONTRACTING Business License # _____
 Address: 705 COLORADO STREET, KELSO, WA, 98626
 E-mail: JOHNS@AECLLC.NET Phone: 360-577-9194 Mobile: 360-703-8476
 Contact Person: JOHN SANDHOP Address: _____
 E-mail: _____ Phone: _____ 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

Other Review

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

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

PAID

APR 11 2016

CITY OF WOODLAND

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. **PAID** administrative cost will be added to all permits.

Applicant: [REDACTED]
 Phone: [REDACTED]

Date submitted: 3/24/16 **MAR 24 2016**
 E-mail: _____

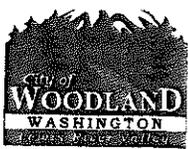
CITY OF WOODLAND

Comments:

Amount	Type	ACCOUNT	Receipt #	Date Paid	Initials
\$150.00	Pre Payment	001 386 00 00 01	105642	3-24-16	[REDACTED]
\$156.00	Fees - Pre Payment	001 386 00 00 01	105811	4-11-16	[REDACTED]
\$30.60	Admin (10% fee)	001 341 42 00 00			
\$186.60	BALANCE	NA			

Form Revised 6/13/2013

INV35207 / INV47330



City of Woodland
 PO Box 9 / 230 Davidson
 Woodland, WA 98674
 360-225-7299
www.ci.woodland.wa.us

Fire & Life Safety Permit Application

Permit # FLS 16-005 Parcel #: 5-07350106 Fire Marshal # FRI2016-00305
 Job Address: 906 Caples Rd Woodland WA 98674
 Occupant: Charles Ryan Wright
 Owner: Jeffrey B. Wright Address: 
 Contractor: OWNER Business License # _____
 Address: _____
 E-mail: _____ Phone: _____ Mobile: _____
 Contact Person: Charles Ryan Wright
 E-mail: 
 Zone: Heavy Industrial Special Flood Hazard Zone: Yes No

I 2 B
 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

Mailed CCF
 4/6 

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.

Charles Ryan Wright

Applicant: 
 Phone: _____

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. CITY OF WOODLAND

Date submitted: 3/30/16
 E-mail: 

Comments:

Amount	Type	ACCOUNT	Receipt #	Date Paid	Initials
\$ 150.00	Pre Payment	001 386 00 00 01	105699	3-30-16	
\$ 150.00	Fees - Pre Payment	001 386 00 00 01		4/14/16	
\$ 30.00	Admin (10% fee)	001 341 42 00 00			
\$ 180.00	BALANCE	NA			

RP 16-008 / RME 16-000

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. _____
 Date 4-4-16

Applicant Name Karlsen Homes LLC.		Title (if owner, state OWNER) Contractor	Daytime Phone: 360-901-2197
Property Owner Scott Peterson		Mailing Address, City, State & Zip	Daytime Phone:
Contractor Karlsen Homes LLC.		Business Address, City, State & Zip 9704 Ne 117th Ave. Vancouver, wa 98662	Daytime Phone:
City of Woodland Business License Number		Washington State Labor & Industries Number and Expiration Date KARLSHL898LW 6/16/2017	
Project Address 535 Lilac Lane		Subdivision/Legal Description Lilac Lane	Parcel Number 5-506800142
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:	
Fixtures (or set) on one trap 11	Furnace up to 100,000 BTU 1	Air Handling Units up to 10,000 CFM 1
Building or Trailer Park Sewer 1	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 1	Heater (suspended, recessed or floor)	Ventilation Fan w/ single duct 3
Water Heaters and/or Vents 1	Vent not included with appliance	Ventilation System (not heat or a/c) ..
.....	Repair/Alteration/Addition to Appliance	Hood w/ mechanical exhaust 1
.....	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 1	• from 30 to 50 hp	Fuel-Gas Piping System Outlets 3
• 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		

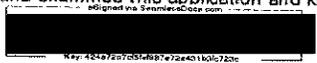
Describe Project and Specific Use in Detail: New Single Family Residence, Stick built with Manufactured Trusses

PAID
APR 14 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 0.00

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

4-1-2016
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location:		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: B			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical							
Plumbing		<u>4-4-16</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$189.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>\$197.00</u>	001 322 10 00	Other			
Other				Other			
Received By:		Date <u>4/14/16</u>	Receipt Number <u>105835</u>		Total Due <u>\$ 386.00</u>		



Permit Application
 Building Department, 230 Davidson Ave., Woodland, WA 98674
 Phone: (360) 225-7299
PRINT IN INK OR TYPE
 (Separate Mechanical & Plumbing Permits Required)

RECEIVED

FOR OFFICE USE ONLY

Permit No. FEN-16-004
 Date Received: 4/13/16

APR 13 2016

APPLICANT Name: JAMES PETERSON
 Building Dept Phone: [REDACTED]
 Planning Dept Phone: [REDACTED]
 Email Address: [REDACTED]

PROPERTY OWNER Name: JAMES PETERSON
 Building Dept Phone: [REDACTED]
 Planning Dept Phone: [REDACTED]
 Email Address: [REDACTED]

GENERAL CONTRACTOR Business Name: [REDACTED] Contact Person: [REDACTED]
 Mailing Address, City State, Zip: [REDACTED] Phone: [REDACTED]
 City Business License #: [REDACTED] State Contractors License #: [REDACTED] Email Address: [REDACTED]

PROPERTY ADDRESS Lot # 50125 Parcel Number 50125
SUB-CONTRAL TO WOODWARD BLDG LOT 6

Fill & Grade/Excavation with this project?
 Yes [] No [] Total Quantity of Earthwork: CY Type of Project [] New [] Add On [] Demolition
 [] Remodel [] Repair [] Other

Occupancy (uses): [REDACTED] No. of Units [REDACTED] No. of Bedrooms [REDACTED] No. of Bathrooms [REDACTED]
 No. of Stories [REDACTED] Building Height [REDACTED] Total Square Feet [REDACTED]

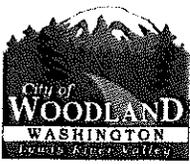
Describe Project and Specific Use in Detail:
BUILD FENCE BETWEEN PROPERTY LINES

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 1600.00
 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.
 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 responsibility of the applicant to arrange for ANY INSPECTIONS for this project.
 [REDACTED] Date 4/12/2016
 [REDACTED] Date 4/12/2016

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>C-1</u>	Permit Type: <u>PAID 32</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments			
Civil Plans	[REDACTED]	<u>4/14/16</u>	[REDACTED]			
Planning Department	[REDACTED]	<u>4-14-16</u>	[REDACTED]			
Drainage/Erosion Control	[REDACTED]	[REDACTED]	[REDACTED]			
Fire/Life Safety	[REDACTED]	[REDACTED]	[REDACTED]			
Building	[REDACTED]	[REDACTED]	[REDACTED]			

Fees Due		CITY OF WOODLAND	
Amount	Account	Fees Due	Amount
<u>\$55.00</u>	001 322 10 00	Water Assessment	421 368 10 10
	001 322 10 20	Meter Deposit	401 389 00 00
	001 322 10 20	Sewer Assessment	422 368 10 00
<u>\$4.50</u>	001 322 10 00	Sewer Inspection	402 369 90 10
	001 322 10 00	Roadway Access	104 322 40 00
	001 345 89 00	TOTAL	\$59.50
	650 345 85 00	Receipt Number	Amount
	351 345 85 00	<u>105845</u>	<u>59.50</u>
	352 345 85 00	Date	<u>4-14-16</u>
	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. RNC-16-006
Date Received: 3/4/16

APPLICANT	Name: Scott Peterson	Phone: [REDACTED]
Mailing Address, City, State Zip		Email: [REDACTED]
PROPERTY OWNER	Name: Scott Peterson	Phone: [REDACTED]
Mailing Address, City, State, Zip		Email Address: [REDACTED]

GENERAL CONTRACTOR	Business Name: Karlisen Homes	Contact Person: Chris Karlisen
Mailing Address, City, State, Zip: 9704 NE 117th Ave Vancouver, WA 98662		Phone: 3609012197
City Business License #	State Contractors License #: KARLSHL898LW	Email Address: chris@karlisenhomes.com

PROPERTY ADDRESS 535 Lilac Lane Woodland, WA 98674		Lot # <u>2</u>	Parcel Number 506800142
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: <u>97</u> 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): New stick-built, single family dwelling.		No. of Units <u>1</u>	No. of Bedrooms <u>3</u>
		No. of Bathrooms <u>2</u>	No. of Stories <u>1</u>
		Building Height <u>22</u>	Total Square Feet <u>2001 finished</u>

Describe Project and Specific Use in Detail:
2001 sf finished ranch. 625 sf unfinished garage. 78 sf covered front porch. 266 sf covered back patio. To be lived in by single family.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 190,000 230,079.16

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: [REDACTED] Date: 3-4-16

Applicant's Signature: [REDACTED] Date: 3-4-16

RECEIVED
MAR 04 2016
City of Woodland
Building Dept
Planning Dept

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: _____ RT Side: _____ LT Side: _____ Back: _____ Zone: _____ Permit Type: 1 Flood Zone: B

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building	[REDACTED]	<u>4-4-16</u>	

CITY OF WOODLAND					
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>1469.75</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>355.34</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	<u> </u>	001 322 10 00	Roadway Access	<u>150.00</u>	104 322 40 00
Floodplain Mgt.	<u>100.00</u>	001 345 89 00	TOTAL	<u>\$17402.59</u>	
School Impact Fees	<u>2750.00</u>	650 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	<u>105241</u>	<u>3-4-16</u>	<u>0600.00</u>
Park Impact Fees	<u>1116.00</u>	352 345 85 00	<u>105837</u>	<u>4/14/16</u>	<u>17,402.59</u>
Transp. Impact Fees	<u>838.00</u>	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. CME16-083
 Date 4.20.16

Applicant Name <u>Sergey Bocharov</u>		Title (if owner, state OWNER)	Daytime Phone:
Property Owner <u>Dan Gjurgevich</u>		Mailing Address, City, State & Zip	
Contractor <u>Affordable Comfort Heating & Cooling</u>		Business Address, City, State & Zip <u>1411 SE 211th Ave. Gresham, OR 97030</u>	Daytime Phone: <u>503-999-4777</u>
City of Woodland Business License Number		Washington State Labor & Industries Number and Expiration Date <u>AFFORCH903KE</u>	
Project Address <u>1519 Pacific Ave, Woodland, WA</u>		Subdivision/Legal Description	Parcel Number <u>5-0427</u>
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 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:
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 <u>2</u> 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) .. <u>3</u> Hood w/ mechanical exhaust <u>3</u> 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 <u>3</u> Dust Collection System Other

Describe Project and Specific Use in Detail:
Carls Jr. ground up construction. Two rooftop units (RTU1 & RTU2). 1 Bathroom fan on roof, 3 kitchen hoods with grease ducts and 3 fans on the roof. Air distribution system for RTU1, RTU2, and bathroom fan. PAID

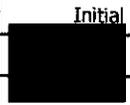
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ \$31,000.00 APR 20 2016

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.


 APPLICANT'S SIGNATURE

4/20/16
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location:		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: <u>B</u>			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical		<u>4-20-16</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>153.60</u>	001 322 10 00	Other			
Other				Other			
Received By:		Date <u>4-20-16</u>	Receipt Number <u>105879</u>	Total Due \$ <u>153.60</u>			

INV 21586

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. ME 16-008
 Date 3-18-16

Applicant Name <u>Bellard Walters</u>	Title (if owner, state OWNER)	Daytime Phone: [REDACTED]
Property Owner	Mailing Address, City, State & Zip	Daytime Phone: [REDACTED]
Contractor <u>Bulldog Mechanical</u>	Business Address, City, State & Zip <u>3307 NE 39th St. VANC.</u>	Daytime Phone:
City of Woodland Business License Number <u>PENDING</u>	Washington State Labor & Industries Number and Expiration Date <u>BULLDOGME98405</u>	
Project Address <u>1519 Pacific</u>	Subdivision/Legal Description	Parcel Number <u>5-</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) <u>2</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: install walk in cooler/freezer
combo box with remote
refrigeration

PAID

bulldogmech@gmail.com **APR 20 2016**

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 22,000 **CITY OF WOODLAND**

I hereby certify that I have read and [REDACTED] 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 03-18-16

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1519 Pacific Ave</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>B</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	<u>4-4-16</u>	<u>SPECIAL INSPECTIONS MAY BE REQ'D/WSEL REQ'D</u>
Plumbing			
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		<u>\$95.00</u>	001 322 10 00
Other			
Received By: [REDACTED]	Date	Receipt Number	Total Due
	<u>4-20-16</u>	<u>105865</u>	<u>\$95.00</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. SIGN-16-001

Date Received: 3/17/16

APPLICANT		Name <u>DALE L. CLARK / CLARK SIGN SERVICE</u>	Phone <u>503-781-6081</u>
Mailing Address, City, State, Zip <u>PO BOX 1113 ST. HELENS OR 97051</u>		Email Address: <u>DALE@CLARKSIGNS.COM</u>	
PROPERTY OWNER		Name <u>VIRK PROPERTIES WOODLAND LLC.</u>	Phone <u>[REDACTED]</u>
Mailing Address, City, State, Zip <u>[REDACTED]</u>		Email Address: <u>[REDACTED]</u>	
GENERAL CONTRACTOR		Business Name <u>CLARK SIGN SERVICE</u>	Contact Person <u>DALE L. CLARK</u>
Mailing Address, City, State, Zip <u>PO BOX 1113 ST. HELENS OR 97051</u>		Phone <u>503-781-6081</u>	
City Business License # <u>[REDACTED]</u>		State Contractors License # <u>CLARKSS015R3</u>	
PROPERTY ADDRESS		Parcel Number	
<u>1380 ATLANTIC AVE</u>		<u>5042401</u>	
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: <u> </u> CY		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 type="checkbox"/> Other <u> </u>	
Occupancy (uses): <u>HOTEL</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:
BOLT DOWN BASE REPLACE PLYON SIGN BEST WESTERN WITH NEW IMAGE D/F/BW SIGN ON EXISTING PIPE, REPLACE 5'X15' S/W WALL SIGN WITH 5'5"X10' NEW IMAGE.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 6000.00 REPLACE CABINETS ONLY AND 2 DIRECTIONAL SIGNS

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.*

Ow: [REDACTED] Date: 3/17/2016 PAID APR 20 2016
Applicant's Signature: [REDACTED] Date: 3/17/2016 CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY						
Comments: Application Complete:			Zone: <u>C-2</u>	Permit Type: <u>35</u>	Flood Zone: <u>B</u>	
Approvals	Initial	Date	Comments			
Civil Plans						
Planning Department		<u>3/21/16</u>				
Drainage/Erosion Control						
Fire/Life Safety						
Building		<u>3-24-16</u>				
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>\$100.00</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	TOTAL	\$104.50		
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date	Initial
Floodplain Mgt.		001 345 89 00	<u>1058603</u>	<u>\$104.50</u>	<u>4-10-16</u>	<u>[REDACTED]</u>
School Impact Fees		650 345 85 00				
Transp. Impact Fees		353 345 85 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. FGR-16-002

Date Received: 4/12/16

APPLICANT		Name <u>LLB ARCHITECTURE</u>	Phone: <u>(360) 735-7289</u>
Mailing Address, City, State Zip		<u>1115 ESTHER ST. STE B, VANCOUVER, WA</u>	
PROPERTY OWNER		Name <u>COLUMBIA PRECAST PRODUCTS, LLC</u>	Email Address: <u>JEFF@LLBARCHITECTURE.COM</u>
Mailing Address, City, State, Zip		[REDACTED]	
GENERAL CONTRACTOR		Business Name <u>RSV BUILDING SOLUTIONS, INC.</u>	Contact Person <u>JOSH LINGO</u>
Mailing Address, City, State, Zip		<u>1115 ESTHER ST. STE A VANCOUVER, WA</u>	
City Business License # <u>160-009</u>		State Contractors License # <u>RSJ COE *18209</u>	
PROPERTY ADDRESS		Parcel Number <u>5-08750100</u>	
<u>1765 HOWARD WAY, WOODLAND WA 98674</u>		<u>432370300</u>	
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition	
Total Quantity of Earthwork: <u>3,1546</u> CY		<input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses): <u>F2- Manufacturing Building</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: New manufacturing building of approx 45,000 s.f.

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. 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.

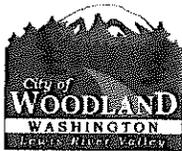
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is false or misleading, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.**

Owner's Signature: [REDACTED] Date: 4-12-16 **PAID APR 21 2016**

Applicant's Signature: [REDACTED] Date: 4-11-2016 CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete:		Zone: <u>I-I</u>	Permit Type: <u>39</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments	
Civil Plans				
Planning Department				
Drainage/Erosion Control				
Fire/Life Safety				
Building		<u>4-19-16</u>		
Fees Due	Amount	Account	Fees Due	Amount
Building Permit		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>98.25</u>	001 322 10 20	Roadway Access	104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL	\$559.75
Grading/Excavating	<u>457.00</u>	001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	<u>105898</u>	<u>559.75</u>
School Impact Fees		650 345 85 00	Date	<u>4-21-16</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. RRF-16-001

Date Received: 2/19/16

APPLICANT		Name: David McLaughlin	Phone: 360.606.6861
Mailing Address, City, State Zip 341 Streeter Road		Email Address: davsprivate@gmail.com	
PROPERTY OWNER		Name: Francis Yip	Phone:
Mailing Address, City, State, Zip		[REDACTED]	
GENERAL CONTRACTOR		Business Name: Clark County Pros, Inc.	Contact Person: David McLaughlin
Mailing Address, City, State, Zip 341 Streeter Road, Silverlake, WA 98645		Phone: 360.606.6861	
City Business License # app submitted		State Contractors License # CLARKCP864N5	
		Email Address: davsprivate@gmail.com	
PROPERTY ADDRESS			Parcel Number
295 Sycamore Street, Woodland, WA 98674			502355059
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: _____ CY		Type of Project	<input type="checkbox"/> New <input type="checkbox"/> Remodel <input checked="" type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other
Occupancy (uses): Residential		No. of Units	No. of Bedrooms No. of Bathrooms
		No. of Stories	Building Height Total Square Feet

Describe Project and Specific Use in Detail: Remove old roof and install new roof

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 6400.00

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.

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: 02/19/2016

DO NOT WRITE BELOW – FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type: <u>34</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>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>4/23/06</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

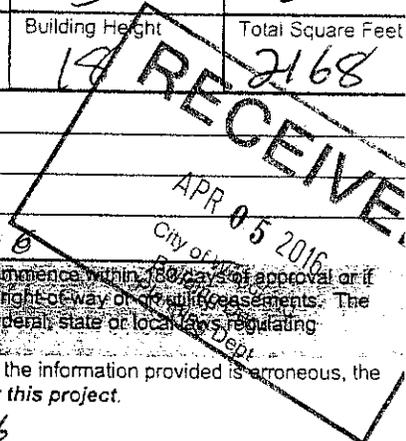
(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. RNC-16-007

Date Received: 4/5/16

APPLICANT		Name: <u>Karlson Development LLC</u>	Phone: <u>944-1405</u>
Mailing Address, City, State, Zip		<u>9704 N/E 117th Ave Vanc. Wa. 98662</u>	Email Address: <u>Dvata@acomast.net</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>Dvata Karlson</u>
Mailing Address, City, State, Zip		<u>9704 N/E 117th Ave Vanc. Wa. 98662</u>	Phone: <u>944-1405</u>
City Business License #		<u>14-000126.7</u>	State Contractors License #
		<u>KARLSON GSOLE</u>	Email Address: <u>Dvata@acomast.net</u>
Property Address:		<u>530 Lilac LN</u>	Parcel Number: <u>506800149</u>
Fill & Grade/Excavation with this project?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Type of Project: <input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition
Occupancy (uses):		Total Quantity of Earthwork: <u>CY</u>	<input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
		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>18</u>
		Total Square Feet	<u>2168</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>175,000.00</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: [Redacted] Date: 3-31-16
 Date: 3-31-16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	Side:	Back:	Zone:	PAID Type:	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments: <u>APR 05 2016</u>		
Civil Plans			CITY OF WOODLAND		
Planning Department					
Drainage/Erosion Control					
Fire/Life Safety					
Building		<u>4-19-16</u>			
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>1159.35</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>413.58</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	<u>—</u>	001 322 10 00	Roadway Access	<u>35x5=\$175</u>	104 322 40 00
Floodplain Mgt.	<u>100.00</u>	001 345 89 00	TOTAL	<u>17,575.43</u>	
School Impact Fees	<u>2750.00</u>	350 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	<u>105768</u>	<u>600.00</u>	<u>4-5-16</u>
Park Impact Fees	<u>1116.00</u>	352 345 85 00			<u>4/26/16</u>
Insp. Impact Fees	<u>838.00</u>	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

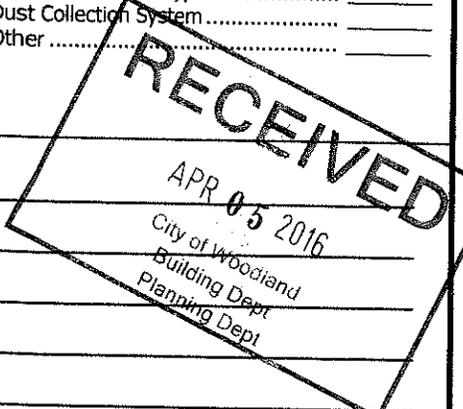
FOR OFFICE USE ONLY
 Permit No. RPL-16-009
 Date 4/5/16 RME-16-011

Applicant Name <u>Karben Development LLC</u>	Title (if owner, state OWNER) <u>owner</u>	Daytime Phone: <u>944-4405</u>
Property Owner <u>Same</u>	Mailing Address, City, State & Zip <u>9704 N/E 117th Ave</u>	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>1400176.7</u>	Washington State Labor & Industries Number and Expiration Date <u>KR15DL980LE</u>	REQUIRED
Project Address <u>530 Lilac LN</u>	Subdivision/Legal Description <u>Lilac LN</u>	Parcel Number <u>506800149</u>

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

PLUMBING: <u>RPL-16-009</u>	MECHANICAL: <u>RME-16-011</u>
Fixtures (or set) on one trap <u>12</u> Building or Trailer Park Sewer <u>1</u> Rainwater System Drains (inside) Private Sewage System Water Heaters and/or Vents <u>1</u> 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 • 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	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 <u>9</u> Ventilation System (not heat or a/c) .. Hood w/ mechanical exhaust <u>1</u> Incinerator, domestic type • commercial or industrial Appliance/Equipment Item (UMC) Fuel-Gas Piping System Outlets <u>4</u> 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:
PBS NEW CON 3 BD / 2 BA



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

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 RE [Redacted] DATE 3-31-16

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>B</u>
<input type="checkbox"/> First Mechanical Permit			
Permit Approval	Initial	Date	COMMENTS
Mechanical	[Redacted]	<u>7-19-16</u>	
Plumbing	[Redacted]		
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$199.00</u>	001 322 10 00
Mechanical Permit		<u>\$260.00</u>	001 322 10 00
Other			
Received By:	Date	Receipt Number	Total Due
	<u>4/26/16</u>		<u>\$459.00</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 16-012
 Date 4-8-16

Applicant Name <u>Northwood Cabinets, Inc. / Matt Koppen</u>		Title (if owner, state OWNER) <u>Plant Manager</u>		Daytime Phone: <u>360-225-1001</u>	
Property Owner <u>DK Enterprises Woodland, LLC</u>		Mailing Address, City, State & Zip <u>[REDACTED]</u>		Daytime Phone: <u>[REDACTED]</u>	
Contractor <u>Northwood Cabinets, Inc.</u>		Business Address, City, State & Zip <u>PO Box 2190 Woodland WA 98774</u>		Daytime Phone: <u>360-225-1001</u>	
City of Woodland Business License Number <u>15-000230.0</u>		Washington State Labor & Industries Number and Expiration Date <u>NORTHCI968M6 - 8/3/2016</u>			
Project Address <u>1570 Guild Road Woodland, WA</u>		Subdivision/Legal Description		Parcel Number <u>5-07810107</u>	
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 type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____		

PLUMBING:		MECHANICAL:	
Fixtures (or set) on one trap	_____	Furnace up to 100,000 BTU	_____
Building or Trailer Park Sewer	_____	Furnace over 100,000 BTU	<input checked="" type="checkbox"/>
Rainwater System Drains (inside)	_____	Floor Furnace installation or relocation	_____
Private Sewage System	_____	Heater (suspended, recessed or floor)	<input checked="" type="checkbox"/>
Water Heaters and/or Vents	_____	Vent not included with appliance	_____
_____	_____	Repair/Alteration/Addition to Appliance	_____
Industrial Waste Interceptors	_____	Boilers/Compressors to 3hp (heat pump)	_____
Installations/Alterations/ Repairs of:	_____	• from 3 to 15 hp	_____
• Water Piping	_____	• from 15 to 30 hp	_____
• Water Treating Equipment	_____	• from 30 to 50 hp	_____
• Medical Gas Piping	_____	• over 50 hp	_____
Fixtures with drain/vent repairs or alterations	_____	Absorption Systems to 100,000 BTU/h	_____
Lawn Sprinkler System with Backflow Device	_____	• from 100,000 to 500,000 BTU/h	_____
Vacuum Breakers not with Sprinkler	_____	• from 500,000 to 1,000,000 BTU/h	_____
Backflow Protective Devices to 2" diameter	_____	• from 1,000,000 to 1,750,000 BTU/h	_____
Backflow Protective Devices over 2" diameter	_____	• over 1,750,000 BTU/h	_____
		Air Handling Units up to 10,000 CFM	_____
		• over 10,000 CFM	<u>18700</u>
		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:
Install Air make up unit + move Radiant Heaters

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ ~~4500~~ 13500

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

4/8/16
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location:		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: B			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>4-26-16</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>120</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number		Total Due \$ <u>120</u>			
	<u>4/27/16</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. 111-16-002

Date Received: 4-8-16

APPLICANT		Name	Northwood Cabinets, Inc / Matt Kopman		Phone:	360-225-1001	
Mailing Address, City, State, Zip		PO Box 2190 Woodland WA 98674			Email Address:	mattk@northwoodcabinets.com	
PROPERTY OWNER		Name	DK Enterprises Woodland LLC		Phone:	[REDACTED]	
Mailing Address, City, State, Zip		[REDACTED]			Email Address:	[REDACTED]	
GENERAL CONTRACTOR		Business Name	Northwood Cabinets, Inc		Contact Person:	Matt Kopman	
Mailing Address, City, State, Zip		PO Box 2190 Woodland WA 98674			Phone:	360-225-1001	
City Business License #		15-000230.0		State Contractors License #	NORTHCE 1968M6		
PROPERTY ADDRESS		1570 Guild Road Woodland WA 98674			Parcel Number	507810107	
Fill & Grade/Excavation with this project?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Total Quantity of Earthwork:	CY		
Occupancy (uses):		FINISH CABINETRY		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 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>add spray booth and mezzanine</u>							

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 34000

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 voided at the discretion of the City of Woodland. I hereby certify that I am the duly authorized representative of the applicant to arrange for ANY INSPECTIONS for this project.

PAID
Date 4/8/16 APR 27 2016
Date 4/8/16 CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:		Application Complete:		Zone:	Permit Type:	Flood Zone:	
					25 PAID	B	
Approvals		Initial	Date	Comments			
Civil Plans							
Planning Department				APR 27 2016			
Drainage/Erosion Control							
Fire/Life Safety							
Building			40616	CITY OF WOODLAND			
Fees Due		Amount	Account	Fees Due	Amount	Account	
Building Permit		388.72	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		250.72	001 322 10 20	Roadway Access		104 322 40 00	
Surcharge		4.50	001 322 10 00	TOTAL	636.44		
Grading/Excavating			001 322 10 00	Receipt Number	Amount	Date	Initial
Floodplain Mgt.			001 345 89 00	105978	636.44	4-27-16	[REDACTED]
School Impact Fees			650 345 85 00				
Transp. Impact Fees			353 345 85 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. CRM-16-001

Date Received: 3/1/16

APPLICANT		Name: <u>Pete Drouin</u>	Phone: <u>360 852 4777</u>
Mailing Address, City, State, Zip		<u>10919 NE 88th St, Vancouver, WA 98662</u>	
PROPERTY OWNER		Name: <u>Pavel Brichka</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		[REDACTED]	
GENERAL CONTRACTOR		Business Name: <u>DROVIN Brothers Inc</u>	Contact Person: <u>Pete Drouin</u>
Mailing Address, City, State, Zip		<u>10919 NE 88th St, Vancouver, WA 98662</u>	
City Business License #		State Contractors License #	Phone: <u>360 852-4777</u>
<u>* Pending</u>			Email: <u>drouinbrothers@gmail.com</u>
PROPERTY ADDRESS		<u>9555 Old Pacific Hwy, Woodland, WA 98674</u>	
Parcel Address		<u>5-0725</u>	
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: <u> </u> CY			
Type of Project <input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Remodel <input checked="" type="checkbox"/> Repair <input type="checkbox"/> Other			
Occupancy (uses): <u>Auto Shop</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>take the existing wall off & put the new one Fire Remodel + TRUS/RES/ROOF</u>			

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 3,000 + 9,000 (ROOF/TRUS)

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: _____

Applicant's Signature: [REDACTED]

Date: 3/1/16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:		Zone: <u>I-I</u>	Permit Type: <u>12</u>	Flood Zone: <u>B</u>
Application Complete:		Comments: <u>PAID</u>		
Approvals	Initial	Date		
Civil Plans				
Planning Department				
Drainage/Erosion Control				
Fire/Life Safety			<u>APR 28 2016</u>	
Building		<u>4-27-16</u>		
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>167.40</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>108.81</u>	001 322 10 20	Roadway Access	104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL	<u>280.71</u>
Grading/Excavating		001 322 10 00	Receipt Number	Amount
Floodplain Mgt.		001 345 89 00	<u>105990</u>	<u>\$ 280.71</u>
School Impact Fees		650 345 85 00	Date	Initial
Transp. Impact Fees		353 345 85 00	<u>4-28-16</u>	[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)

* 2 PERMITS

FOR OFFICE USE ONLY
DEM 16-002
Permit No. DEM 16-001
Date Received: 4/23/16

APPLICANT Name: Port of Woodland Phone: [Redacted]
Mailing Address, City, State Zip: [Redacted]

PROPERTY OWNER Name: Port of Woodland Phone: [Redacted]
Mailing Address, City State, Zip: [Redacted]

GENERAL CONTRACTOR Name: Conitz County Fire #1 Contact Person: [Redacted]
Mailing Address, City State, Zip: PO Box 10 Woodland WA Phone: 360-225-7462
City Business License # State Contractors License # Email:

PROPERTY ADDRESS 1608 and 1620 Guild Road Parcel Number: 508340100/508330100

Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: CY Type of Project [] New [] Add On [X] Demolition [] Remodel [] Repair [] Other

Occupancy (uses): prior residential current none

1608 - 2121 # 3/3	No. of Units: 3	No. of Bedrooms: 7 total	No. of Bathrooms: 4
1620 - 1942 # 1/3	No. of Stories: 1/2 2	Building Height:	Total Square Feet: 4,661
1/2			1942

Describe Project and Specific Use in Detail: Fire training at properties then clearing by Port

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 0

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.

Applicant's Signature: [Redacted] Date: 4-25-2016
Date: 4-25-2016

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete: Zone: LDR-6 Permit Type: 40 Flood Zone: B

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building		4-27-16	

PAID
APR 29 2016

Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	2 55	001 322 10 00	Fire Impact Fees		
Plan Review Pre-payment		001 322 10 20	Park Impact Fees		
Plan Review Balance		001 322 10 20	Roadway Access		
Surcharge	2 4.50	001 322 10 00	TOTAL		
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date
Floodplain Mgt.		001 345 89 00			
School Impact Fees		650 345 85 00	106 017	\$69.50	4-29-16
Transp. Impact Fees		353 345 85 00	106 018	\$69.50	4-29-16