



**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)

②

FOR OFFICE USE ONLY	
Permit No.	<u>215-035</u>
Date Received:	<u>3/10/15</u>

APPLICANT	Name: <u>Greg Pera</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		Email Address: [REDACTED]
PROPERTY OWNER	Name: <u>Greg Pera</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		Email Address: [REDACTED]

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

PROPERTY ADDRESS		Lot #	Parcel Number
<u>1995 Rhododendron Dr</u>		<u>1</u>	<u>504214000</u>
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: <u>CY</u>		Type of Project [] New [] Remodel [] Add On [] Repair [] Demolition [] Other	
Occupancy (uses): <u>Single Family Residential</u>	No. of Units	No. of Bedrooms	No. of Bathrooms <u>2</u>
	<u>1</u>	<u>3</u>	
	No. of Stories	Building Height	Total Square Feet
	<u>1</u>		<u>1542</u>

Describe Project and Specific Use in Detail:
Fence for backyard.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 1200.00
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.

[REDACTED] _____ Date: 03-10-15
Applicant's Signature _____ Date: 03-10-15

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>A</u>
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Approvals	Initial	Date	Comments			
Civil Plans						
Planning Department	[REDACTED]	<u>5/1/15</u>	<u>4' 50% visibility</u>			
Drainage/Erosion Control			PAID			
Fire/Life Safety						
Building			MAY 01 2015			
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			
School Impact Fees		350 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00		<u>\$59.50</u>		
Park Impact Fees		352 345 85 00	<u>101085</u> ②	<u>59.50</u>	<u>5-1-15</u>	<u>LC</u>
Transp. Impact Fees		353 345 85 00				



212015-00216
FIL-0113957



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 # 215-057 Parcel #: 5-0642 Fire Marshal # FRI201 5-00216
 Job Address: 101 Hillshire Drive Woodland, WA 98674
 Occupant: The Promise Church
 Owner: The Promise Church Address: Same
 Contractor: CrossFire Sprinkler Co. Business License # CROSSSC920C9
 Address: 17400 SE 82nd Drive Clackamas, OR 97015
 E-mail: Josh@crossfiresprinkler.com Phone: (503) 210-5506 Mobile: (360) 635-3969
 Contact Person: Josh Ast Address: Same as contractor
 E-mail: " Phone: " Mobile: "
 Zone: A 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

MAY 01 2015

CITY OF WOODLAND

PAID

APR 16 2015

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. A 10% administrative cost will be added to all permits.

Applicant: [REDACTED]
Phone: [REDACTED]

Date submitted: 4/14/15
E-mail: [REDACTED]

Comments: _____

Amount	Type	ACCOUNT	Receipt #	Date Paid	Initials
\$150.00	Pre Payment	001 386 00 00 01	100899	4-16-15	JM
\$134.00	Fees - Pre Payment	001 386 00 00 01	101062	5-1-15	JM
\$28.40	Admin (10% fee)	001 341 42 00 00			
\$162.40	BALANCE	NA			



One and Two Family Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674
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(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

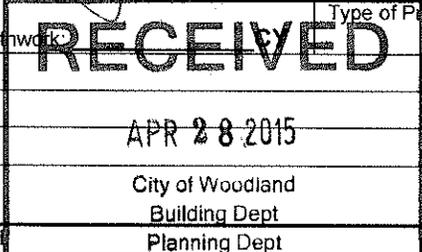
Permit No. 215-059

Date Received: 4/28/15

APPLICANT	Name: <u>Rick Haddock</u>	Phone: [REDACTED]
Mailing Address, City, State Zip [REDACTED]		Email Address: [REDACTED]
PROPERTY OWNER	Name: <u>Same as applicant</u>	Phone: [REDACTED]
Mailing Address, City State. Zip [REDACTED]		Email Address: [REDACTED]

GENERAL CONTRACTOR	Business Name: <u>The Fenceman</u>	Contact Person: <u>Tim Wilmer</u>
Mailing Address, City State. Zip: <u>2808 NE Burton Rd Vancouver, Wa</u>		Phone: <u>360-254-2299</u>
City Business License # <u>15-000123.5</u>	State Contractors License # <u>FENCE *027LW</u>	Email Address: [REDACTED]

PROPERTY ADDRESS <u>234 Misty Dr.</u>		Lot # <u>23/24</u>	Parcel Number <u>504214423</u>
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: [REDACTED]	Type of Project: [] New [] Remodel [] Add On [] Repair [] Demolition [] Other <u>Fence</u>		
Occupancy (uses): <u>Home</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: Construction of 2 Fences and Gates and Arbor

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 3,600

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: 4/24/15

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: RT Side: LT Side: Back: Zone: LDR Permit Type: 32 Flood Zone: A-15

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department	[REDACTED]	<u>4/28/15</u>	
Drainage/Erosion Control			
Fire/Life Safety			
Building		<u>4-29-15</u>	<u>LCMC</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>\$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			350 345 85 00	Receipt Number		Amount
Fire Impact Fees			351 345 85 00	<u>101152</u>	<u>54.50</u>	Date
Park Impact Fees			352 345 85 00			<u>5-6-15</u>
Transp. Impact Fees			353 345 85 00			Initial
						<u>JM</u>

Plumbing & Mechanical Permit Application

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

FOR OFFICE USE ONLY

Permit No. 315-062
 Date 4/28/15

Applicant Name REQUIRED <u>Beraud Electric Company Inc</u>		Title (if owner, state OWNER)	Daytime Phone: <u>360-423-1420</u>
Property Owner REQUIRED <u>Phillip & Linda Morris</u>		Mailing Address, City, State & Zip	Daytime Phone:
Contractor REQUIRED <u>Beraud Electric Company Inc</u>		Business Address, City, State & Zip <u>2300 Tully Way Kelso WA 98626</u>	Daytime Phone: <u>360-423-1420</u>
City of Woodland Business License Number REQUIRED <u>15-000255.7</u>		Washington State Labor & Industries Number and Expiration Date REQUIRED <u>084 005 803 11-30-2015</u>	
Project Address REQUIRED <u>275 Rosewood St</u>		Subdivision/Legal Description REQUIRED <u>Northfield Blk:) Lot 13</u>	Parcel Number REQUIRED <u>5-04211025</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		Work Type: <input type="checkbox"/> Demolish <input checked="" type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair	

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 _____ 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 <u>Heat pump</u> _____
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Describe Project and Specific Use in Detail: Heat Pump installation

RECEIVED

APR 28 2015

City of Woodland
Building Dept
Planning Dept

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 6,750.00

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

4/28/15
 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>MAY 10 2015</u>			
		<input type="checkbox"/> First Mechanical Permit		CITY OF WOODLAND B			
Permit Approval	Initial	Date	COMMENTS				
Mechanical		<u>4/29/15</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>\$75.00</u>	001 322 10 00	Other			
Other				Other			
Received by: <u>cash</u>	Date: <u>5-18-15</u>	Receipt Number: <u>101459</u>	(C)		Total Due: <u>\$ 75.00</u>		

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

⑥

FOR OFFICE USE ONLY
 Permit No. 215-065
 Date 4/30/15

Applicant Name <u>FRED WILLSON</u>		Title (if owner, state OWNER) <u>SALES ENGINEER</u>	Daytime Phone: <u>360-423-3010</u>
Property Owner <u>COWLITZ FAMILY HEALTH</u>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>LENTEK CORP.</u>		Business Address, City, State & Zip <u>1021 COLUMBIA LOWVIEW 98032</u>	Daytime Phone: <u>360-423-3010</u>
City of Woodland Business License Number <u>15-00034.0</u>		Washington State Labor & Industries Number and Expiration Date <u>LENTEK * 15E893WE 1-5-16</u>	
Project Address <u>1251 LEWIS RIVER RD</u>		Subdivision/Legal Description	Parcel Number <u>5-0515</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 checked="" type="checkbox"/> REPLACE	

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 _____

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 _____ ECONOMIZER

Describe Project and Specific Use in Detail:
DIRECT LIKE FOR LIKE REPLACEMENT OF
SMALL 3T HEAT PUMP WITH SAME SIZE, WEIGHT AND
CAPACITY CARRIER HEAT PUMP. SUPPLY AND INSTALL
ECONOMIZER PER CODE. RAWHIDE ELECTRIC DOING
LINE VOLTAGE AS NEEDED. **PAID**

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 9,500.00 **MAY 04 2015**

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 4-30-15

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1251 Lewis River Rd</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>4-30-15</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>\$115.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date <u>5-4-15</u>	Receipt Number <u>101104</u>	⑥	Total Due <u>\$115.00</u>			



Commercial & Multifamily Building Permit Application

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

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-066

Date Received: 5/1/15

360 798 7973

APPLICANT		Name	Advanced Composite Services		Phone:	360 225 1534	
Mailing Address, City, State Zip		PO Box 207 Woodland WA 98674			Email Address:	alanacs@msn.com	
PROPERTY OWNER		Name	Port of Woodland		Phone:		
Mailing Address, City State, Zip					Email Address:		
GENERAL CONTRACTOR		Business Name			Contact Person		
Mailing Address, City State, Zip					Phone:		
City Business License #		State Contractors License #		Email:			
PROPERTY ADDRESS					Parcel Number	5-042,305	
1391 Down River Drive							
Fill & Grade/Excavation with this project?		Total Quantity of Earthwork:		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		
Yes [] No [X]		CY					
Occupancy (uses):		No. of Units	No. of Bedrooms	No. of Bathrooms			
		No. of Stories	Building Height	Total Square Feet			

Describe Project and Specific Use in Detail: install fencing @ side of building - 6' tall

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 1,200

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: 5-1-15
 Date: 5-1-15

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:		Zone:	I-I	Permit Type:	32 PAID	Flood Zone:	B
Application Complete:							
Approvals	Initial	Date	Comments				
Civil Plans							
Planning Department		5/1/15					
Drainage/Erosion Control							
Fire/Life Safety							
Building							
Fees Due	Amount	Account	Fees Due	Amount	Account		
Building Permit	\$55.00	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	4.50	001 322 10 00	TOTAL	\$59.50			
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date	Initial	
Floodplain Mgt.		001 345 89 00	101075	59.50	5-1-15	LC	
School Impact Fees		650 345 85 00					
Transp. Impact Fees		353 345 85 00					

MAY 01 2015
CITY OF WOODLAND



Commercial & Multifamily Building Permit Application

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

Phone: (360) 225-7299

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-067

Date Received: 5/11/15

APPLICANT		Name: <u>STELLAR J Corp</u>	Phone: [REDACTED]
Mailing Address, City, State Zip		Email Address: [REDACTED]	
PROPERTY OWNER		Name: <u>PORT of Woodland</u>	Phone: [REDACTED]
Mailing Address, City State, Zip		Email Address: [REDACTED]	
GENERAL CONTRACTOR		Business Name: <u>STELLAR J Corp</u>	Contact Person: <u>TRE KINGSTORN</u>
Mailing Address, City State, Zip		Phone: [REDACTED]	
City Business License #		State Contractors License #	

PROPERTY ADDRESS			Parcel Number: <u>5-042305</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 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): <u>N/A</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: Fence Installation & gate - see attached

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ \$5,265.-

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 is void. The responsibility of the applicant to arrange for ANY INSPECTIONS for this project.

Owner: [REDACTED] Date: 5/11/2015
 Applicant's Signature: [REDACTED] Date: 5/11/2015 PAID

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete:		Zone: <u>I-I</u>	Permit Type: <u>32 MAY 01 2015</u>	Final Zone: <u>B</u>		
Approvals	Initial	Date	Comments			
Civil Plans	[REDACTED]	<u>5/11/15</u>	CITY OF WOODLAND			
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	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>\$59.50</u>		
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date	Initial
Floodplain Mgt.		001 345 89 00	<u>101074</u>	<u>59.50</u>	<u>5-1-14</u>	<u>LC</u>
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. 215-068
 Date 5/1/15

Applicant Name <u>Simpson Plumbing LLC / Brad</u>		Title (if owner, state <u>OWNER</u>) <u>owner</u>	Daytime Phone: <u>360-905-9746</u>
Property Owner <u>Jeff Woolever</u>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>Simpson Plumbing Brad Simpson</u>		Business Address, City, State & Zip <u>24605 NE 14th St Camas</u>	Daytime Phone: <u>360-834-5311</u>
City of Woodland Business License Number <u>Pending</u>		Washington State Labor & Industries Number and Expiration Date <u>6034623011 2-29-2016</u>	
Project Address <u>1762 Clover Ln Woodland WA</u>		Subdivision/Legal Description	Parcel Number <u>5-02357002</u>

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

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

PLUMBING:

- Fixtures (or set) on one trap 1
- 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 2
- 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
- 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:

Install a new Neo angle Shower unit
Move the toilet & lavatory over 18" to the right.

RECEIVED
 MAY - 1 2015
 City of Woodland
 Building Dept
 Planning Dept

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 13,000.00

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

APPLICANT'S SIGNATURE
 [REDACTED]

DATE
5-1-2015

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1762 Clover Lane</u>		<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: _____	PAID		
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	[REDACTED]	[REDACTED]				
Plumbing	[REDACTED]	[REDACTED]	[REDACTED]				
Fire/Life Safety	[REDACTED]	[REDACTED]	[REDACTED]				
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>70.00</u>	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date	<u>5-6-15</u>	Receipt Number	<u>101142</u>	Total Due	<u>\$ 70.00</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. 215-0609

Date Received: 5/1/15

APPLICANT		Name: <u>FRANK YOUKEY / YOUKEY'S CONSTRUCTION</u>	Phone: <u>360-225-8569</u>
Mailing Address, City, State Zip <u>369 Gun Club Rd #77 Woodland WA 98674</u>		Email Address: <u>youkeyf@gmail.com</u>	
PROPERTY OWNER		Name: <u>Len MARTIN</u>	Phone:
Mailing Address, City State, Zip		Email Address:	
GENERAL CONTRACTOR		Business Name: <u>YOUKEY'S CONSTRUCTION</u>	Contact Person: <u>FRANK YOUKEY</u>
Mailing Address, City State, Zip <u>369 Gun Club Rd #77 Woodland WA 98674</u>		Phone: <u>360-225-8569</u>	
City Business License # <u>RA0000</u>		State Contractors License # <u>YOUKEY * 58168</u>	
Email Address: <u>youkeyf@gmail.com</u>			
PROPERTY ADDRESS		Lot #	Parcel Number
<u>309 SCOTT HILL RD Woodland, WA 98674</u>			<u>5088 30100</u>
Fill & Grade/Excavation with this project? Yes [] No [] Total Quantity of Earthwork: <u>CY</u>		Type of Project	[] 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: Re Roof

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

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>LDR-8.5</u>	Permit Type: <u>PAID</u>	Flood Zone: <u>A</u>
Approvals		Initial	Date	Comments		
Civil Plans				MAY 01 2015		
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
CITY OF WOODLAND						
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		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>55.00</u>		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<u>101082</u>	<u>55.00</u>	<u>5-1-15</u>	<u>LC</u>
Park Impact Fees		352 345 85 00				
Transp. Impact Fees		353 345 85 00				

4

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

FOR OFFICE USE ONLY
 Permit No. 215-074
 Date 5/11/15

Applicant Name <u>Renaud Electric Company</u>		Title (if owner, state OWNER)	Daytime Phone: <u>360-423-1420</u>
Property Owner <u>G Loomis Inc</u>		Mailing Address, City, State & Zip.	Daytime Phone:
Contractor <u>Renaud Electric Company</u>		Business Address, City, State & Zip <u>2300 Talley Way Kelso, WA 98626</u>	Daytime Phone: <u>360-423-1420</u>
City of Woodland Business License Number <u>15-000255.7</u>		Washington State Labor & Industries Number and Expiration Date <u>200400-00-0</u>	
Project Address <u>1359 Down River Drive</u>		Subdivision/Legal Description <u>Woodland out lot</u>	Parcel Number <u>5-04230501</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 checked="" 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 _____ Building or Trailer Park Sewer _____ Rainwater System Drains (inside) _____ Private Sewage System _____ Water Heaters and/or Vents _____ Gas Piping Systems of 1 to 5 vents _____ Gas Piping Systems over 5 vents _____ Industrial Waste Interceptors _____ Installations/Alterations/ Repairs of: • Water Piping _____ • Water Treating Equipment _____ • Medical Gas Piping _____ Fixtures with drain/vent repairs or alterations _____ Lawn Sprinkler System with Backflow Device _____ Vacuum Breakers not with Sprinkler _____ Backflow Protective Devices to 2" diameter _____ Backflow Protective Devices over 2" diameter _____	Furnace up to 100,000 BTU _____ Furnace over 100,000 BTU _____ Floor Furnace Installation or relocation _____ Heater (suspended, recessed or floor) _____ 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 <input checked="" type="checkbox"/> • 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 _____ <input checked="" type="checkbox"/>

Describe Project and Specific Use in Detail: HVAC package unit changeout

RECEIVED
 MAY 12 2015
 City of Woodland
 Building Dept
 Planning Dept

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 10750

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.

[Signature] 5/11/15
 APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1359 Down River Dr.</u>		<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>B PAID</u>			
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[Redacted]	<u>5-12-15</u>					
Plumbing	[Redacted]						
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>\$95.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>WCash</u>	Date: <u>5-18-15</u>	Receipt Number: <u>101458</u>	Total Due: <u>\$95.00</u>				

MAY 18 2015
 CITY OF WOODLAND



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

FOR OFFICE USE ONLY
Permit No. 215-076
Date Received: 5/13/15

APPLICANT	Name: <u>Arnie Turner</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip [REDACTED]		Email Address: [REDACTED]
PROPERTY OWNER	Name: <u>Same</u>	Phone: [REDACTED]
Mailing Address, City State, Zip [REDACTED]		Email Address: [REDACTED]

GENERAL CONTRACTOR	Business Name: <u>My Self</u>	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 #	Parcel Number
<u>369 GamClub Rd</u>		<u>2</u>	<u>5-0759</u>
Fill & Grade/Excavation with this project? Yes [] No [] Total Quantity of Earthwork: <u>CY</u>	Type of Project [] New <input checked="" type="checkbox"/> [] Add On [] Demolition <u>ROOFING</u>	[] Remodel [] Repair [] Other	
Occupancy (uses):	No. of Units	No. of Bedrooms	No. of Bathrooms
RECEIVED			
<u>MAY 13 2015</u>	No. of Stories	Building Height	Total Square Feet
			<u>1900 SF</u>

Describe Project and Specific Use in Detail: Take off old Roof + install NEW Roof
CITY OF WOODLAND

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

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

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.* **PAID**

Owner's Signature: [REDACTED] Date: 5/3/15 **MAY 15 2015**

Applicant's Signature: [REDACTED] Date: [REDACTED] **CITY OF WOODLAND**

DO NOT WRITE BELOW - FOR OFFICE USE ONLY						
Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>HDR</u>	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		<u>5-14-15</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>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>101389</u>	<u>\$59.50</u>	<u>5-15-15</u>	<u>JM</u>
Park Impact Fees		352 345 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

(2)

FOR OFFICE USE ONLY
 Permit No. 215-077
 Date 5/14/15

Applicant Name <u>Mark Johnson</u>	Title (if owner, state OWNER) <u>HEAT NW, Contractor</u>	Daytime Phone: <u>360-771-2237</u>
Property Owner <u>MEEKER MOZZ/MARY</u>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>HEAT NW LLC / MARK JOHNSON</u>	Business Address, City, State & Zip <u>P.O. Box 620352 Vancouver WA 98682</u>	Daytime Phone: <u>360-771-2237</u>
City of Woodland Business License Number <u>Pending</u>	Washington State Labor & Industries Number and Expiration Date <u>255, 180-00 4/17/10</u>	
Project Address <u>1044 Park St</u>	Subdivision/Legal Description <u>Sub: Parents Blk: 2 Lot: 3 161 - Woodland West 35</u>	Parcel Number <u>5- 50251</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 checked="" 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: 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 _____ 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 _____
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Describe Project and Specific Use in Detail:

Install Mitsubishi Ductless Split System - Heat Pump (HVAC Equipment)

PAID

MAY 14 2015

CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 2,500 UNPAID

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

5/14/15

DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1044 Park Street</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	Date: <u>5-14-15</u>	COMMENTS					
Mechanical							
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>\$65.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date: <u>5-14-15</u>	Receipt Number: <u>101307</u>		Total Due: <u>\$65.00</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. 215-078

Date Received: 5/15/15 atts

APPLICANT	Name: <u>Richard CARROLL</u>	Phone: [REDACTED]
Mailing Address, City, State Zip		Email Address: [REDACTED]
PROPERTY OWNER	Name: <u>Same</u>	Phone: [REDACTED]
Mailing Address, City State. Zip		Email Address: [REDACTED]

GENERAL CONTRACTOR	Business Name: <u>Owner</u>	Contact Person
Mailing Address, City State. Zip		Phone:
City Business License #	State Contractors License #	Email Address:

PROPERTY ADDRESS <u>2025 Lewis River Rd</u>		Lot #	Parcel Number <u>5-065702</u>
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: _____ CY		Type of Project	[] New [] Add On [] Demolition [] Remodel [] Repair [X] Other <u>Pool</u>
Occupancy (uses):	No. of Units	No. of Bedrooms	No. of Bathrooms
	1	3	2
	No. of Stories	Building Height	Total Square Feet

Describe Project and Specific Use in Detail:
10' x 24' ABOVE GROUND Pool
42" depth
- 58"

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 3500

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.

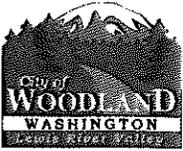
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. *It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.*

Owner's Signature: [REDACTED]	Date: <u>5/15/15</u> PAID
Applicant's Signature: [REDACTED]	Date: <u>5/15/15</u> MAY 20 2015

DO NOT WRITE BELOW - FOR OFFICE USE ONLY CITY OF WOODLAND

Setbacks: Front: _____ RT Side: _____ LT Side: _____ Back: _____	Zone: <u>LDR-6</u>	Permit Type: <u>31</u>	Flood Zone: <u>A</u>
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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>\$97.25</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		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>\$97.25</u>		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<u>101483</u>	<u>\$97.25</u>	<u>5-20-15</u>	<u>JM</u>
Park Impact Fees		352 345 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. 215-079
 Date Received: 5/15/15

APPLICANT	Name: <u>Red Leaf Coffee</u>	Phone: [REDACTED]
	Mailing Address, City, State, Zip: [REDACTED]	Email Address: [REDACTED]
PROPERTY OWNER	Name: <u>Same</u>	Phone: [REDACTED]
	Mailing Address, City, State, Zip: [REDACTED]	Email Address: [REDACTED]
GENERAL CONTRACTOR	Business Name: <u>owner</u>	Contact Person: [REDACTED]
	Mailing Address, City, State, Zip: [REDACTED]	Phone: [REDACTED]
	City Business License #	State Contractors License #
		Email: [REDACTED]

PROPERTY ADDRESS 740 Goerig Parcel Number 5-044201

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: Fence along south property line - 6' tall
60ft approx long

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ \$2,000.00

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

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided herein is incorrect, 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: May 15/2015

Applicant's Signature: [REDACTED] Date: MAY 26 2015

PAID
CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete:	Zone: <u>C-2</u>	Permit Type: <u>32</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments
Civil Plans	[REDACTED]		
Planning Department	[REDACTED]	<u>5/19/15</u>	
Drainage/Erosion Control	[REDACTED]		
Fire/Life Safety	[REDACTED]		
Building	[REDACTED]	<u>5-19-15</u>	<u>WMC</u>
Fees Due	Amount	Account	Fees Due
Building Permit	<u>\$55.00</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
School Impact Fees		650 345 85 00	Date
Transp. Impact Fees		353 345 85 00	Initial
			<u>101511</u>
			<u>\$59.50</u>
			<u>5-26-15</u>
			<u>JM</u>

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

FOR OFFICE USE ONLY
 Permit No. 215-085
 Date 5/20/15

Applicant Name <u>DAN PFAU</u>		Title (if owner, state OWNER) <u>PROJECT MANAGER</u>	Daytime Phone: <u>(360) 695-1476</u>
Property Owner <u>PACIFIC TRIM</u>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>BIAIACO, INC.</u>		Business Address, City, State & Zip <u>SAME</u>	Daytime Phone: [REDACTED]
City of Woodland Business License Number <u>49-1</u>		Washington State Labor & Industries Number and Expiration Date <u>VANCOVER, WA. 98664</u>	
Project Address <u>1685 SWAMANU WAY</u>		Subdivision/Legal Description	Parcel Number <u>5-07810111</u>

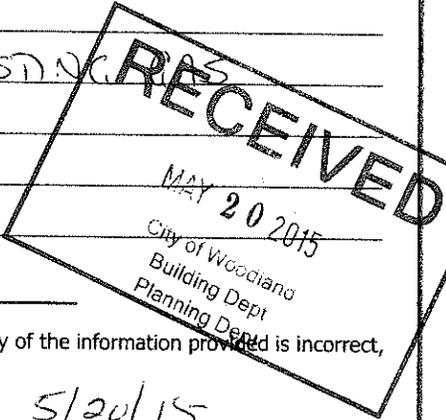
Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

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 _____ Gas Piping Systems of 1 to 5 vents _____ Gas Piping Systems over 5 vents _____ Industrial Waste Interceptors _____ Installations/Alterations/ Repairs of: • Water Piping _____ • Water Treating Equipment _____ • Medical Gas Piping _____ Fixtures with drain/vent repairs or alterations _____ Lawn Sprinkler System with Backflow Device _____ Vacuum Breakers not with Sprinkler _____ Backflow Protective Devices to 2" diameter _____ Backflow Protective Devices over 2" diameter _____	Furnace up to 100,000 BTU _____ Furnace over 100,000 BTU _____ Floor Furnace installation or relocation _____ Heater (suspended, recessed or floor) _____ 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 <u>HEAT PUMP</u> _____

Describe Project and Specific Use in Detail:

ADD HEAT PUMP CONDENSING UNIT TO EXISTING GAS FURNACE SYSTEM



TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 3250.00

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]

APPLICANT'S SIGNATURE

5/20/15
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: <u>B</u>			
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>5-20-15</u>					
Plumbing	[REDACTED]						
Fire/Life Safety	[REDACTED]						
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		<u>\$75.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date: <u>5-29-15</u>	Receipt Number: <u>101560</u>	Total Due \$ <u>75.00</u>				



Commercial & Multifamily Building Permit Application

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

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-087

Date Received: 5/20/15

APPLICANT		Name <u>STEVE LUCKMAN</u>	Phone: [REDACTED]
Mailing Address, City, State Zip		[REDACTED]	Email Address: [REDACTED]
PROPERTY OWNER		Name <u>RICHARD KESTER, ELIZABETH KESTER</u>	Phone: [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	Email Address: [REDACTED]
GENERAL CONTRACTOR		Business Name <u>SELF</u>	Contact Person [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	Phone: [REDACTED]
City Business License #	State Contractors License #	Email: [REDACTED]	
PROPERTY ADDRESS			Parcel Number
<u>1230 'C' LEWIS RD. WOODLAND WA</u>			<u>50470031</u>
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: _____ CY		Type of Project	[] New [X] Add On [] Demolition [X] Remodel [] Repair [] Other _____
Occupancy (uses): <u>COFFEE 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>BUILD 1/2 WALL FOR BARISTA STATION, 3/4 WALL DIVERPER FOR BATHROOM, FILL DOORWAY, INSTAL CABINETS</u>			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>400.00</u> 12000.00			
<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>			
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.			
[REDACTED]		Date <u>5/20/15</u>	Date <u>5/20/2015</u>
DO NOT WRITE BELOW - FOR OFFICE USE ONLY			
Comments: Application Complete:		Zone:	Permit Type: <u>15 PAID</u> Flood Zone: <u>A</u>
Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			<u>MAY 27 2015</u>
Drainage/Erosion Control			
Fire/Life Safety			
Building			<u>5/20/15</u> <u>PER REVIEW</u>
Fees Due	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	001 322 10 20	Roadway Access	104 322 40 00
Surcharge	001 322 10 00	TOTAL	<u>\$349.76</u>
Grading/Excavating	001 322 10 00	Receipt Number	Amount
Floodplain Mgt.	001 345 89 00	<u>101544</u>	<u>349.76</u>
School Impact Fees	650 345 85 00	Date	<u>5-27-15</u>
Transp. Impact Fees	353 345 85 00	Initial	<u>JM</u>

RECEIVED

MAY 20 2015

City of Woodland
Building Dept
Planning Dept



One and Two Family Building Permit Application

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

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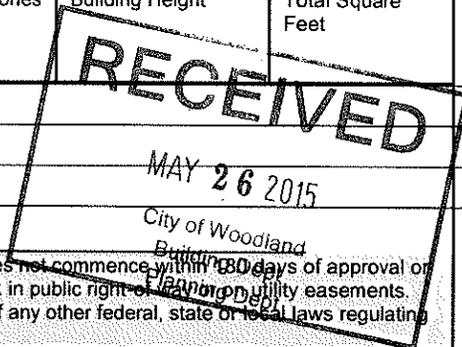
(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-092

Date Received: 5/26/15

APPLICANT		Name: Kirk Koskiniemi, IBEX Roof		Phone: 360-836-0535	
Mailing Address, City, State, Zip		13023 NE HWY 99 Ste 7 #130		Email Address: kirk@ibexroof.com	
PROPERTY OWNER		Name: Gordon Aubert		Phone: [REDACTED]	
Mailing Address, City, State, Zip				Email Address: [REDACTED]	
GENERAL CONTRACTOR		Business Name: IBEX Roof		Contact Person: Kirk Koskiniemi	
Mailing Address, City, State, Zip		13023 NE HWY 99 Ste 7 #130		Phone: 360-836-0535	
City Business License #		State Contractors License # IBEXRRL850KG		Email Address: kirk@ibexroof.com	
PROPERTY ADDRESS			Lot #		Parcel Number
2023 Rhododendron Ave.					5-0245003
Fill & Grade/Excavation with this project?		Type of Project		[] New [] Add On [] Demolition	
Yes [] No [X] Total Quantity of Earthwork: CY		[X] 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:					
Remove and replace existing roof					
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 10,272					
<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			Date		
[REDACTED]			5/25/15		
Applicant's Signature			Date		
DO NOT WRITE BELOW - FOR OFFICE USE ONLY					
Setbacks: Front:		RT Side:		LT Side:	
				Back:	
				Zone: <u>LDR-6</u>	
				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
Building Permit		\$55.00	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		\$4.50	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	\$59.50
School Impact Fees			350 345 85 00	Receipt Number	Amount
Fire Impact Fees			351 345 85 00	101515 (2)	\$59.50
Park Impact Fees			352 345 85 00	Date	5-26-15
Transp. Impact Fees			353 345 85 00	Initial	JM





Commercial & Multifamily Building Permit Application

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

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 215-093

Date Received: 5/27/15

APPLICANT		Name	<u>WEATHER GUARD INC.</u>		Phone:	<u>360) 577-7200</u>	
Mailing Address, City, State Zip		<u>1128 12th Ave Longview WA. 98632</u>			Email Address:		
PROPERTY OWNER		Name	<u>BOB NELSON</u>		Phone:		
Mailing Address, City, State, Zip		[REDACTED]			Email Address:		
GENERAL CONTRACTOR		Business Name	[REDACTED]		Contact Person		
Mailing Address, City, State, Zip		[REDACTED]			Phone:		
City Business License #		<u>15-000316.3</u>		State Contractors License #		<u>WEATH#01122</u>	Email:
PROPERTY ADDRESS		<u>631 GOERIG ST.</u>		<u>2-20-17</u>		Parcel Number <u>5-027</u>	
Fill & Grade/Excavation with this project?		Yes [] No [] Total Quantity of Earthwork: <u>CY</u>		Type of Project		<input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <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 <u>1200</u>	
Describe Project and Specific Use in Detail: <u>12 sq TORCHPOWV RECOVER ROOFING</u>							
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>8500.00</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 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 inaccurate, 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 <u>[REDACTED]</u>				Date <u>MAY 27 2015</u>			
Applicant's Signature <u>[REDACTED]</u>				Date <u>5-27-15</u> CITY OF WOODLAND			
DO NOT WRITE BELOW - FOR OFFICE USE ONLY							
Comments: Application Complete:				Zone: <u>C-1</u>		Permit Type: <u>34</u>	Flood Zone: <u>B</u>
Approvals		Initial	Date	Comments			
Civil Plans							
Planning Department							
Drainage/Erosion Control							
Fire/Life Safety							
Building			<u>5-27-15</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		<u>\$104.50</u>	
Grading/Excavating			001 322 10 00	Receipt Number		Amount	Date
Floodplain Mgt.			001 345 89 00	<u>101543</u>		<u>\$104.50</u>	<u>5-27-15</u>
School Impact Fees			650 345 85 00				<u>JM</u>
Transp. Impact Fees			353 345 85 00				

