



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-16-010 Parcel #: 508580100 Fire Marshal # FRI201
 Job Address: 9428 OLD PACIFIC HIGHWAY, WOODLAND, WA 98674
 Occupant: INDUSTRIAL TRAINING INTERNATIONAL
 Owner: ALEX FARIS Address: _____
 Contractor: SONITROL OF SW WA Business License # SONITSW132B2
 Address: 8510-C E MILL PLAIN BLVD VANCOUVER, WA 98664
 E-mail: _____ Phone: _____
 Contact Person: LINDSAY MIZER Address: 8510-C E MILL PLAIN BLVD, 98664
 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
JUN 08 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.

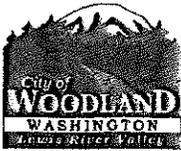
NOTE: This application is not an approval or authorization for work to begin. Plan Review and inspection fees are outlined in Resolution 619. In addition to any other penalty allowed by city code, double review fees will be charged where work has commenced prior to the applicant obtaining the required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

Applicant: _____
 Phone: _____

Date submitted: 6/8/16
 E-mail: _____ CITY OF WOODLAND

Comments: _____

Amount	Type	ACCOUNT	Receipt #	Date Paid	Initials
\$150.00	Pre Payment	001 386 00 00 01	106618	6-8-16	
\$130.00	Fees - Pre Payment	001 386 00 00 01	106825	7/1/16	
\$28.00	Admin (10% fee)	001 341 42 00 00			
\$158.00	BALANCE	NA			



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-16-003**

Date Received: **7/5/16**

APPLICANT		Name: <u>Anthony Costan</u>		Phone: [REDACTED]	
Mailing Address, City, State Zip		[REDACTED]		Email Address:	
PROPERTY OWNER		Name: <u>SAMA</u>		Phone:	
Mailing Address, City State, Zip		[REDACTED]		Email Address:	
GENERAL CONTRACTOR		Business Name		Contact Person	
Mailing Address, City State, Zip		[REDACTED]		Phone:	
City Business License #		State Contractors License #		Email Address:	
PROPERTY ADDRESS		Lot #		Parcel Number	
<u>560 Bozarth Woodland</u>		[REDACTED]		<u>5052501</u>	
Fill & Grade/Excavation with this project?		Type of Project		<input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input checked="" type="checkbox"/> Repair <input type="checkbox"/> Other	
Yes <input type="checkbox"/> No <input type="checkbox"/> Total Quantity of Earthwork: <u>CY</u>		Occupancy (uses):		No. of Units: <u>3</u>	
				No. of Bedrooms: <u>6</u>	
				No. of Bathrooms: <u>3</u>	
				No. of Stories: <u>2</u>	
				Building Height: <u>16</u>	
				Total Square Feet: <u>3,000</u>	
Describe Project and Specific Use in Detail: <u>RE ROOF Remove old 3 TAB & Replace</u> <u>Replace Fascia Boards & Metal Flashing</u>					
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ _____ NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project. I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.					
[REDACTED SIGNATURE] Applicant's Signature				<u>7-5-2016</u> Date	
[REDACTED SIGNATURE] Applicant's Signature				<u>7-5-2016</u> Date	
DO NOT WRITE BELOW - FOR OFFICE USE ONLY					
Setbacks: Front:		RT Side:		LT Side:	
Back:		Zone:		Permit Type: PAID	
Flood Zone:		Comments: JUL 05 2016			
Approvals		Initial		Date	
Civil Plans		[REDACTED]		[REDACTED]	
Planning Department		[REDACTED]		[REDACTED]	
Drainage/Erosion Control		[REDACTED]		[REDACTED]	
Fire/Life Safety		[REDACTED]		[REDACTED]	
Building		[REDACTED]		<u>7/5/16</u>	
Fees Due		Amount		Account	
Building Permit		<u>\$55.00</u>		001 322 10 00	
Plan Review Pre-payment		[REDACTED]		001 322 10 20	
Plan Review Balance		[REDACTED]		001 322 10 20	
Surcharge		<u>\$4.50</u>		001 322 10 00	
Grading/Excavating		[REDACTED]		001 322 10 00	
Floodplain Mgt.		[REDACTED]		001 345 89 00	
School Impact Fees		[REDACTED]		650 345 85 00	
Fire Impact Fees		[REDACTED]		351 345 85 00	
Park Impact Fees		[REDACTED]		352 345 85 00	
Transp. Impact Fees		[REDACTED]		353 345 85 00	
		Fees Due		Amount	
		Water Assessment		421 368 10 10	
		Meter Deposit		401 389 00 00	
		Sewer Assessment		422 368 10 00	
		Sewer Inspection		402 369 90 10	
		Roadway Access		104 322 40 00	
		TOTAL		\$59.50	
		Receipt Number		Amount	
		106836		Date	
		[REDACTED]		7/5	
		Initial		[REDACTED]	

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-16-017
 Date 7/5/16

Applicant Name Smart Choice Heating and Cooling	Title (if owner, state OWNER) Contractor	Daytime Phone: 360 260 9199
Property Owner Joaquin Cordero	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor Smart Choice Heating and Cooling	Business Address, City, State & Zip 2657 NW Ivy St Camas, WA 98607	Daytime Phone: 360 260 9199
City of Woodland Business License Number 15-000010.8	Washington State Labor & Industries Number and Expiration Date 602253717	
Project Address 545 Park St	Subdivision/Legal Description Woodland Old Town Blk	Parcel Number 5- 0036

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

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

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

Describe Project and Specific Use in Detail:
 Replace like for like Heat Pump and Evaporator

PAID
JUL 07 2016
 CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 5380.00

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

7/5/16
DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>545 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	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>7-6-16</u>					
Plumbing							
Fire/Life Safety							
FEE DUE	Req'd	Amount	Account	FEE DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		<u>\$90.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number		Total Due			
	<u>7/7</u>	<u>106881</u>		<u>\$ 90.00</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. **RRM-16-004**

Date Received: **7/5/16**

APPLICANT		Name: DALE M HANSEN	Phone: [REDACTED]
Mailing Address, City, State Zip		Email Address: [REDACTED]	
PROPERTY OWNER		Name DALE M. AND PATRICIA A HANSEN	Phone: SAME
Mailing Address, City State. Zip		Email Address: SAME	
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
127 LOVES AVE, WOODLAND			50124001
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"/> Demolition
		<input type="checkbox"/> New <input checked="" type="checkbox"/> Remodel	<input type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Other
Occupancy (uses): Family Residential		No. of Units	No. of Bedrooms
		1	2
		No. of Bathrooms	1
		No. of Stories	Building Height
		1	Basement 87"
			Total Square Feet
			805 sf

Describe Project and Specific Use in Detail: **Create 3rd bedroom in basement, cut in exterior window; frame, insulate, finish all ext walls. Drywall ceilings that were not done already. Electrical outlets as required. All existing lighting in basement to Re-carpet flooring.**

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 4,000
 NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project.
 I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.**

Owner's Signature: [REDACTED] Date: **JUL 08 2016**
 Applicant's Signature: [REDACTED] Date: **07/05/2016** CITY OF WOODLAND

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Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type:	Flood Zone: B
Approvals	Initial	Date	Comments			
Civil Plans						
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
Building		7-9-16	2015 IRC + WSEC			
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	10764 97/25	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	57.92 [REDACTED] 49/03	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	160x38	[REDACTED] 165.96	
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	106902		7/8	
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

FOR OFFICE USE ONLY
 Permit No. RME-16-038
 Date 7/7/16

Applicant Name DALE M HANSEN	Title (if owner, state OWNER) OWNER	Daytime Phone: [REDACTED]
Property Owner DALE M & PATRICIA A HANSEN	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor	Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number	Washington State Labor & Industries Number and Expiration Date	
Project Address 127 LOVES AVE, WOODLAND	Subdivision/Legal Description	Parcel Number 5- 50124

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 type="checkbox"/> New <input checked="" type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____
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PLUMBING: 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	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: Move existing gas line over approximately 18" to run alongside top corner of exterior wall
Total current run approximately 35 ft.

PAID

JUL 08 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 200.00 CITY OF WOODLAND

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

[REDACTED SIGNATURE]

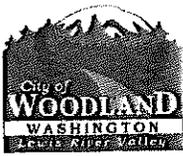
7/7/16

APPLICANT'S SIGNATURE

DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>127 Loves Ave.</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B				
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>7-8-16</u>	<u>2015 IRC</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>60-</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number	Total Due				
	<u>7/8</u>	<u>106901</u>	\$ 60-				



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-16-004

Date Received: 7/6/16

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

GENERAL CONTRACTOR	Business Name: <u>3 Rivers Construction</u>	Contact Person: [REDACTED]
	Mailing Address, City State, Zip: <u>244 18th Ave. Longview, WA 98632</u>	Phone: <u>(360)747-3720</u>
	City Business License #: [REDACTED]	State Contractors License #: <u>3RIVERC850N1</u>
		Email Address: [REDACTED]

PROPERTY ADDRESS		Lot #	Parcel Number
<u>274 Loganberry St</u>			<u>504219623</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 checked="" type="checkbox"/> Remodel <input type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other
Occupancy (uses): <u>Personal home</u>		No. of Units	No. of Bedrooms
		<u>1</u>	<u>3</u>
		No. of Stories	No. of Bathrooms
		<u>1</u>	<u>2</u>
		Building Height	Total Square Feet
			<u>1448</u>

Describe Project and Specific Use in Detail: Roof to be replaced on existing home. Existing Shingles will be removed and new shingles will be installed.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 4500.00

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

JUL 11 2016

Owner's Signature: [REDACTED]

Date: 07/06/2016

CITY OF WOODLAND

Applicant's Signature: [REDACTED]

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Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <u>LDR-6</u>	Permit Type: <u>RRF</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		<u>7-7-16</u>	

Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>\$55.00</u>	001 322 10 00	Water Assessment		421 368 10 10
Plan Review Pre-payment		001 322 10 20	Meter Deposit		401 389 00 00
Plan Review Balance		001 322 10 20	Sewer Assessment		422 368 10 00
Surcharge	<u>\$4.50</u>	001 322 10 00	Sewer Inspection		402 369 99 10
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00
Floodplain Mgt.		001 345 89 00	TOTAL	<u>\$59.50</u>	
School Impact Fees		650 345 85 00	Receipt Number		Amount
Fire Impact Fees		351 345 85 00	<u>106935</u>	<u>59.50</u>	Date
Park Impact Fees		352 345 85 00			<u>7/11</u>
Transp. Impact Fees		353 345 85 00			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. PMC 16-040
 Date 7-11-16

Applicant Name <u>Donna Rebesch</u>		Title (if owner, state OWNER) <u>OWNER</u>	Daytime Phone: [REDACTED]
Property Owner <u>Donna Rebesch</u>		Mailing Address, City, State & Zip [REDACTED]	Daytime Phone:
Contractor <u>Hendrickson Plumbing</u>		Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number <u>PENDING</u>		Washington State Labor & Industries Number and Expiration Date <u>HENDRPL 962 RZ</u>	
Project Address <u>967 Park St</u>		Subdivision/Legal Description	Parcel Number <u>5-0417</u>

Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>	Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input checked="" type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/>
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PLUMBING:	MECHANICAL:
Fixtures (or set) on one trap Building or Trailer Park Sewer Rainwater System Drains (inside) Private Sewage System Water Heaters and/or Vents Industrial Waste Interceptors Installations/Alterations/ Repairs of: • Water Piping • Water Treating Equipment • Medical Gas Piping Fixtures with drain/vent repairs or alterations Lawn Sprinkler System with Backflow Device Vacuum Breakers not with Sprinkler Backflow Protective Devices to 2" diameter Backflow Protective Devices over 2" diameter	Furnace up to 100,000 BTU Furnace over 100,000 BTU Floor Furnace installation or relocation Heater (suspended, recessed or floor) Vent not included with appliance Repair/Alteration/Addition to Appliance Boilers/Compressors to 3hp (heat pump) • from 3 to 15 hp • from 15 to 30 hp • from 30 to 50 hp • over 50 hp Absorption Systems to 100,000 BTU/h • from 100,000 to 500,000 BTU/h • from 500,000 to 1,000,000 BTU/h • from 1,000,000 to 1,750,000 BTU/h • over 1,750,000 BTU/h Air Handling Units up to 10,000 CFM • over 10,000 CFM Evaporative Cooler (non portable) Ventilation Fan w/ single duct Ventilation System (not heat or a/c) Hood w/ mechanical exhaust Incinerator, domestic type • commercial or industrial Appliance/Equipment Item (UMC) Fuel-Gas Piping System Outlets <u>1</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:
Run approximately 36-40 ft new gas line to accommodate new gas fireplace

PAID
JUL 11 2016
 CITY OF WOODLAND

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.

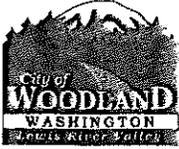
[REDACTED SIGNATURE]

APPLICANT'S SIGNATURE

DATE 7-11-16

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	<u>60 -</u>	<u>7-11-16</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			001 322 10 00	Other			
Other				Other			
Received By:	Date <u>7/11</u>	Receipt Number <u>106915</u>	Total Due \$ <u>60 -</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. <u>RNC-16-011</u>
Date Received: <u>7/5/16</u>

APPLICANT	Name: <u>All Spectrum Bldg., LLC 560 #</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		Email Address:
PROPERTY OWNER	Name: <u>Jason Lawrence</u>	Phone:
Mailing Address, City, State, Zip		Email Address:

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

PROPERTY ADDRESS		Lot #	Parcel Number
<u>249 Misty</u>			<u>504214402</u>
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input type="checkbox"/> 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"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
Occupancy (uses):	No. of Units	No. of Bedrooms	No. of Bathrooms
	No. of Stories	Building Height	Total Square Feet

Describe Project and Specific Use in Detail:

Add 100 sq Ft - Supp. Fee for Add'l sq ft.

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: 7/8/16

Applicant's Signature: _____
Date: 7/5/16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type:	Flood Zone: <u>A</u>
Approvals		Initial	Date	Comments		
Civil Plans				JUL 11 2016 CITY OF WOODLAND		
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety Building			<u>7-6-16</u>			
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>\$33.00</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>\$33.00</u>		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<u>106912</u>		<u>7/11</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

FOR OFFICE USE ONLY
 Permit No. RME-16-037
 Date 7/6/16

Applicant Name <u>Tori Hernandez</u>		Title (if owner, state OWNER)	Daytime Phone: <u>503-981-4511</u>
Property Owner <u>Judy Peterson</u>		Mailing Address, City, State & Zip	Daytime Phone:
Contractor <u>Wolfers</u>		Business Address, City, State & Zip <u>1365 N Front St Woodburn Or 97001</u>	Daytime Phone: <u>503-981-4511</u>
City of Woodland Business License Number <u>15-000325.5</u>		Washington State Labor & Industries Number and Expiration Date <u>WOLFEI * 916 PL</u>	
Project Address <u>369 Gun Club Rd, Spore 11 Woodland WA 98674</u>		Subdivision/Legal Description	Parcel Number <u>5-0759</u>
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Replacement	

PLUMBING:	MECHANICAL:
Fixtures (or set) on one trap	Furnace up to 100,000 BTU <u>1</u>
Building or Trailer Park Sewer	Furnace over 100,000 BTU
Rainwater System Drains (inside)	Floor Furnace installation or relocation
Private Sewage System	Heater (suspended, recessed or floor)
Water Heaters and/or Vents	Vent not included with appliance
Gas Piping Systems of 1 to 5 vents	Repair/Alteration/Addition to Appliance
Gas Piping Systems over 5 vents	Boilers/Compressors to 3hp (heat pump) <u>1</u>
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 <u>1</u>

Describe Project and Specific Use in Detail: Installing Mini-Split System

PAID

JUL 12 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 4,499 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.

[Signature] _____
 APPLICANT'S SIGNATURE

7-5-16
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>369 Gun Club #11</u>		<input type="checkbox"/> First Plumbing Permit	Permit Type: <u>36</u>	Flood Zone: <u>A</u>			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[Signature]	<u>7-6-16</u>	<u>INSTALL ABOVE BFE</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>\$90.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date <u>7/12</u>	Receipt Number <u>106960</u>	Total Due <u>\$ 90.00</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. RME-16-041
 Date 7/12/16

Applicant Name: <u>Kristi Loschiano</u>		Title (if owner, state OWNER)	Daytime Phone:
Property Owner: <u>Jonathan R. Harry</u>		Mailing Address, City, State & Zip	
Contractor: <u>Wolfers Home Services</u>		Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number <u>15-000325.5 WOLFEI*916P6</u>		Washington State Labor & Industries Number and Expiration Date <u>1365 N Front St Woodburn Or 97071 503-981-4511</u>	
Project Address <u>205 Misty Dr. Woodland, WA 98674</u>		Subdivision/Legal Description	Parcel Number <u>5-04214435</u>
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Replacement	

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 <input checked="" type="checkbox"/>

Describe Project and Specific Use in Detail: Installing Air Conditioner

PAID
JUL 12 2016
 CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 9,603

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: 7/7/2016

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>205 Misty</u>		<input type="checkbox"/> First Plumbing Permit	Permit Type: <u>36</u>	Flood Zone: <u>A</u>			
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[Redacted]	<u>7-12-16</u>	<u>INSTALL ABOVE RFE OR AT FIRST FLOOR LEVEL</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>\$65.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number	Total Due				
	<u>7/12</u>	<u>106959</u>	<u>\$ 65.00</u>				

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

FOR OFFICE USE ONLY
 Permit No. CME-16-016
 Date 6/22/16

Applicant Name <u>Carl Hendrikson</u>		Title (if owner, state OWNER) <u>President</u>		Daytime Phone: <u>360-557-0362</u>	
Property Owner <u>Portco Packaging</u>		Mailing Address, City, State & Zip [REDACTED]		[REDACTED]	
Contractor <u>Diversified Mechanical Services Inc</u>		Business Address, City, State & Zip <u>2019 Mt Baker Rd Kelso WA 98626</u>		Daytime Phone: <u>360-577-6604</u>	
City of Woodland Business License Number		Washington State Labor & Industries Number and Expiration Date <u>DTUEKMS 955 J8</u>		<u>4-28-17</u>	
Project Address <u>211 5th St Woodland WA 98674</u>		Subdivision/Legal Description		Parcel Number <u>5-0680008</u>	
Type of Facility: <input 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 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	_____
Rainwater System Drains (inside)	_____	Floor Furnace installation or relocation	_____
Private Sewage System	_____	Heater (suspended, recessed or floor)	_____
Water Heaters and/or Vents	_____	Vent not included with appliance	_____
_____	_____	Repair/Alteration/Addition to Appliance	_____
_____	_____	Boilers/Compressors to 3hp (heat pump)	_____
Industrial Waste Interceptors	_____	• from 3 to 15 hp	_____
Installations/Alterations/ Repairs of:	_____	• from 15 to 30 hp	_____
• Water Piping	_____	• from 30 to 50 hp	_____
• Water Treating Equipment	_____	• over 50 hp	_____
• Medical Gas Piping	_____	Absorption Systems to 100,000 BTU/h	_____
Fixtures with drain/vent repairs or alterations	_____	• from 100,000 to 500,000 BTU/h	_____
Lawn Sprinkler System with Backflow Device	_____	• from 500,000 to 1,000,000 BTU/h	_____
Vacuum Breakers not with Sprinkler	_____	• from 1,000,000 to 1,750,000 BTU/h	_____
Backflow Protective Devices to 2" diameter	_____	• over 1,750,000 BTU/h	_____
Backflow Protective Devices over 2" diameter	_____	Air Handling Units up to 10,000 CFM	_____
		• over 10,000 CFM	_____
		Evaporative Cooler (non portable)	_____
		Ventilation Fan w/ single duct	_____
		Ventilation System (not heat or a/c)	_____
		Hood w/ mechanical exhaust	_____
		Incinerator, domestic type	_____
		• commercial or industrial	_____
		Appliance/Equipment Item (UMC)	_____
		Fuel-Gas Piping System Outlets	<u>1</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: Extend Gas Piping for new kitchen with Reg + shut off

PAID
JUL 12 2016

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 4000.00 **CITY OF WOODLAND**

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

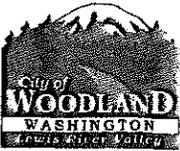
[REDACTED SIGNATURE]

6-22-16

APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>211 5th Street</u>		<input type="checkbox"/> First Plumbing Permit		Permit Type: <u>36</u>	Flood Zone: <u>B</u>		
<input type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>6-24-16</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>\$60.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number	Total Due <u>\$60.00</u>				
	<u>7/12</u>	<u>106962</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. FEN-16-008

Date Received: 7/13/16

APPLICANT		Name: <u>WF Bottemiller</u>	Phone:
Mailing Address, City, State Zip		Email Address:	
PROPERTY OWNER		Name: <u>WF Bottemiller</u>	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 Address:
PROPERTY ADDRESS		Lot #	Parcel Number
<u>End of Island Ave Dr Parcel 6455004</u>			
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"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
Occupancy (uses):		No. of Units	No. of Bedrooms
<div style="font-size: 2em; font-weight: bold; transform: rotate(-15deg);">PAID</div> <div style="font-size: 1.5em; font-weight: bold; transform: rotate(-15deg);">JUL 18 2016</div> <div style="font-size: 0.8em; font-weight: bold; transform: rotate(-15deg);">CITY OF WOODLAND</div>		No. of Stories	No. of Bathrooms
		Building Height	Total Square Feet

Describe Project and Specific Use in Detail:

Wire mesh - fence posts to mark property line
55 feet long

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 105

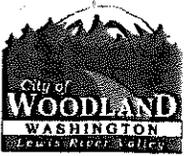
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. 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: _____ Date: 7-12-16
 _____ Date: 7-12-16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type:	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments			
Civil Plans						
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
Building		<u>7-13-16</u>				
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>\$55.00</u>	001 322 10 00	Water Assessment		421 368 10 10	
Plan Review Pre-payment		001 322 10 20	Meter Deposit		401 389 00 00	
Plan Review Balance		001 322 10 20	Sewer Assessment		422 368 10 00	
Surcharge	<u>\$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>106975</u>	<u>59.50</u>	<u>7/13/16</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. CNC-16-004

Date Received: 6/13/16

APPLICANT		Name Jeff Lighheart	Phone: 360 737-7289
Mailing Address, City, State Zip 1115 Esther Street Suite B Vancouver, WA 98660		Email Address: jeff@lbarchitecture.com	
PROPERTY OWNER		Name Garnhap Woodland	Phone:
		Email Address:	
GENERAL CONTRACTOR		Business Name RSV Construction Services, Inc.	Contact Person Josh Lino
Mailing Address, City State Zip 1115 Esther Street Suite A Vancouver, WA 98660		Phone: 360 693-8830	
City Business License # RSVC01 *182D9		State Contractors License # RSVC01 * 182D9	
		Email: josh@rsvblding.com	
PROPERTY ADDRESS Howard Way, Woodland, WA, <u>1765</u>		Parcel Number 508750100Q & 508760100	
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ CY		Type of Project	<input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other
Occupancy (uses):		No. of Units N/A	No. of Bedrooms N/A
		No. of Stories 1	Building Height 45'-0"
		Total Square Feet 45,000 s.f.	

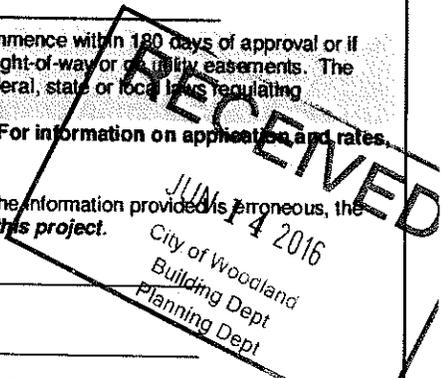
Describe Project and Specific Use in Detail: Approx. 45,000 s.f. New Manufacturing Building to be pre-engineered metal building system. New site work to include new asphalt paving, concrete walks, curbs, landscaping and gravel lay down areas.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 2,000,000.00

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 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. Signature of the applicant to arrange for ANY INSPECTIONS for this project.

Owner: _____ Date: 06/13/2016
Applicant's Signature: _____ Date: 06/13/2016



DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments: Application Complete: _____ Zone: I-I Permit Type: 11 Flood Zone: B

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building		<u>7-14-16</u>	

Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>11,496.20</u>	001 322 10 00	Fire Impact Fees	<u>\$22,950</u>	351 345 85 00
Plan Review Pre-payment	<u>—</u>	001 322 10 20	Park Impact Fees		352 345 85 00
Plan Review Balance	<u>5,748.10</u>	001 322 10 20	Roadway Access		104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL	<u>\$67,727.10</u>	
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date
Floodplain Mgt.		001 345 89 00	<u>106974</u>	<u>67727.10</u>	<u>7/13/16</u>
School Impact Fees		650 345 85 00			
Transp. Impact Fees	<u>27528.30</u>	353 345 85 00			



One and Two Family Building Permit Application

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

FOR OFFICE USE ONLY
 Permit No. PNC 16-012
 Date Received: 6-9-16

APPLICANT Name: Quail Homes **PAID** Phone: 360 952 0713
 Mailing Address, City, State Zip: 4501 NE Minnehaha St., Vancouver, WA 98661
PROPERTY OWNER Name: Wiley and Melanie Billingsley **JUL 13 2016** Email Address: Brandy@quailhomes.com
 Mailing Address, City, State Zip: [Redacted] **CITY OF WOODLAND** Phone: [Redacted]

GENERAL CONTRACTOR Business Name: Quail Homes (CONSTRUCION) Contact Person: Brandy McElrath
 Mailing Address, City State, Zip: 4501 NE Minnehaha St., Vancouver, WA 98661 Phone: 360-952-0713
 City Business License # 98 State Contractors License # QUAILCL-99075 Email Address: Brandy@quailhomes.com

PROPERTY ADDRESS 201 Misty Drive, Woodland Lot # 36 Parcel Number 504214436
 Fill & Grade/Excavation with this project? Yes No Total Quantity of Earthwork: 201 CY Type of Project New Add On Demolition
 Remodel Repair Other
 Occupancy (uses): single family residence
 No. of Units: 1 No. of Bedrooms: 3 No. of Bathrooms: 2
 No. of Stories: 1 Building Height: 23'-6" Total Square Feet: 1812

Describe Project and Specific Use in Detail:
Building a one level 1812 sf. single family residence with 3 bedrooms, 2 baths and 2 car garage.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 300K
 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 void.
 Date: 6/7/16 **PAID**
 Date: 6/7/16 **JUL 13 2016**
CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY
 Setbacks: Front: 29' RT Side: 5' LT Side: 8' Back: 16.5' Zone: LDR-6 Permit Type: 1 Flood Zone: A

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building			
Fees Due			
Building Permit		<u>2-11-16</u>	<u>DRIVEWAY 23'. 2012 IBC, WSEC. LOOK INTO HOA COVENANTS</u>
Plan Review Pre-payment	<u>2113.75</u>	<u>001 322 10 00</u>	Amount: <u>3241.00</u> CITY OF WOODLAND
Plan Review Balance	<u>600</u>	<u>001 322 10 20</u>	Amount: <u>421 368 10 10</u>
Surcharge	<u>773.94</u>	<u>001 322 10 20</u>	Amount: <u>401 389 00 00</u>
Grading/Excavating	<u>4.30</u>	<u>001 322 10 00</u>	Amount: <u>422 368 10 00</u>
Floodplain Mgt.	<u>100.00</u>	<u>001 322 10 00</u>	Amount: <u>402 369 90 10</u>
School Impact Fees	<u>100.00</u>	<u>001 345 89 00</u>	Amount: <u>104 322 40 00</u>
Fire Impact Fees	<u>2750.00</u>	<u>650 345 85 00</u>	TOTAL <u>18480.19</u>
Park Impact Fees	<u>1530.00</u>	<u>351 345 85 00</u>	Receipt Number: <u>106625</u> Amount: <u>16000.00</u> Date: <u>6-9-16</u>
Transp. Impact Fees	<u>1116.00</u>	<u>352 345 85 00</u>	Amount: <u>18480.19</u> Date: <u>7/13/16</u>
	<u>838.00</u>	<u>353 345 85 00</u>	Initial: [Redacted]

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

FOR OFFICE USE ONLY
 Permit No. RME-16-023
 Date 6/9/16

Applicant Name Quail Homes		Title (if owner, state OWNER) Applicant	Daytime Phone: 3609520713
Property Owner Wiley and Melanie Billingsley		[REDACTED]	
Contractor Quail Homes		Business Address, City, State & Zip 4501 NE Minnehaha St Vanc Wa 98661	Daytime Phone: 360-952-0713
City of Woodland Business License Number		Washington State Labor & Industries Number and Expiration Date <u>EX-Plumbing 346 891-01 exp 3/5/16 Perfect Climate 604-891-5270 1/25/16</u> ^{EXP}	
Project Address 201 Misty Drive Woodland Wa		Subdivision/Legal Description lot 36 Rivermist	Parcel Number 5-04214436

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>10</u>	Furnace up to 100,000 BTU <u>1</u>
Building or Trailer Park Sewer	Furnace over 100,000 BTU
Rainwater System Drains (inside)	Floor Furnace installation or relocation
Private Sewage System	Heater (suspended, recessed or floor)
Water Heaters and/or Vents <u>1</u>	Vent not included with appliance
Industrial Waste Interceptors	Repair/Alteration/Addition to Appliance
Installations/Alterations/ Repairs of:	Boilers/ Compressors to 3hp (heat pump)
• Water Piping	• from 3 to 15 hp
• Water Treating Equipment	• from 15 to 30 hp
• Medical Gas Piping	• from 30 to 50 hp
Fixtures with drain/vent repairs or alterations	• over 50 hp
Lawn Sprinkler System with Backflow Device	Absorption Systems to 100,000 BTU/h
Vacuum Breakers not with Sprinkler	• from 100,000 to 500,000 BTU/h
Backflow Protective Devices to 2" diameter	• from 500,000 to 1,000,000 BTU/h
Backflow Protective Devices over 2" diameter	• 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>4</u>
	Ventilation System (not heat or a/c) .. <u>1</u>
	Hood w/ mechanical exhaust <u>1</u>
	Incinerator, domestic type
	• commercial or industrial
	Appliance/ Equipment Item (JMC)
	Fuel-Gas Piping System Outlets <u>2</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: building a one level 1812 sf single family residence with 3 bedrooms, 2 baths and 2 car garage.

PAID
JUL 13 2016
 CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 300K

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

[REDACTED SIGNATURE] 6/8/16
 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: A			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	7-11-16					
Plumbing							
Fire/Life Safety							
FEE DUE	Req'd	Amount	Account	FEE DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		161.00	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number	Total Due \$				
[REDACTED]	7/13/16	106971	161.00				

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-16-012
 Date 6/9/16

Applicant Name Quail Homes		Title (if owner, state OWNER) Applicant	Daytime Phone: 3609520713
Property Owner Wiley and Melanie Billingsley		Mailing Address, City, State & Zip [REDACTED]	
Contractor Quail Homes		Business Address, City, State & Zip 4501 NE Minnehaha St Vanc Wa 98661	Daytime Phone: 360-952-0713
City of Woodland Business License Number		Washington State Labor & Industries Number and Expiration Date <u>EXP 3/5/16 Perfect Climate Ltd 891-5270 1/25/16</u>	
Project Address 201 Misty Drive Woodland Wa		Subdivision/Legal Description lot 36 Rivermist	Parcel Number 5-04214436

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>X10</u>	Furnace up to 100,000 BTU <u>1</u>
Building or Trailer Park Sewer	Furnace over 100,000 BTU
Rainwater System Drains (inside)	Floor Furnace installation or relocation
Private Sewage System	Heater (suspended, recessed or floor)
Water Heaters and/or Vents <u>1</u>	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 <u>1</u>	• 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
	Evaporative Cooler (non portable)
	Ventilation Fan w/ single duct
	Ventilation System (not heat or a/c) .. <u>4</u>
	Hood w/ mechanical exhaust <u>1</u>
	Incinerator, domestic type
	• commercial or industrial
	Appliance/Equipment Item (UMC)
	Fuel-Gas Piping System Outlets <u>2</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: building a one level 1812 sf single family residence with 3 bedrooms, 2 baths and 2 car garage.

PAID
JUL 13 2016
 CITY OF WOODLAND

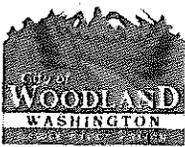
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 300K

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

[REDACTED] DATE 6/8/16

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location:		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: A			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]						
Plumbing	[REDACTED]	<u>7-11-16</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>179.00</u>	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Receipt	Date	<u>7/13/16</u>	Receipt Number	<u>106970</u>	Total Due	\$	<u>179.00</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. ACC-16-002

Date Received: 3/28/16

APPLICANT	Name: <u>Michael Wheaton</u>	Phone: <u>360-624-2231</u>
	Mailing Address, City, State Zip <u>335 Hillshire Drive, Woodland, WA 98674</u>	Email Address: <u>mfwheaton@comcast.net</u>
PROPERTY OWNER	Name <u>Monty & Tonia Lewellen</u>	Phone:
	Mailing Address, City, State, Zip	Email Address:

GENERAL CONTRACTOR	Business Name <u>Karlsen Homes</u>	Contact Person <u>Michael Wheaton</u>
	Mailing Address, City, State, Zip	Phone:
City Business License #	State Contractors License # <u>KARLSHL898LW</u>	Email Address:

PROPERTY ADDRESS		
<u>108 Brothers Road</u>	Lot #	Parcel Number <u>508450100</u>
Fill & Grade/Excavation with this project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Total Quantity of Earthwork: <u>CY</u>	Type of Project <input checked="" type="checkbox"/> New Remodel <input type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other
Occupancy (uses): <u>Shop</u>	No. of Units <u>1</u>	No. of Bedrooms <u>0</u>
	No. of Bathrooms <u>0</u>	No. of Stories <u>1</u>
	Building Height <u>22'</u>	Total Square Feet <u>896 SF</u>

Describe Project and Specific Use in Detail: Shop/ Detached Garage

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 20,000

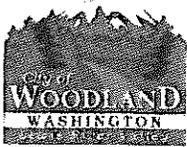
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements.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

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

Over [Redacted] Date 3-28-16

App [Redacted] Date 3-28-16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY									
Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type: <u>3L</u>	Flood Zone: <u>4</u>			
Approvals	Initial	Date	Comments						
Civil Plans			PAID <u>JUL 14 2016</u>						
Planning Department									
Drainage/Erosion Control									
Fire/Life Safety									
Building		<u>5-4-16</u>							
CITY OF WOODLAND									
Fees Due	Amount	Account	Fees Due	Amount	Account				
Building Permit	<u>492.25</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	<u>319.96</u>	001 322 10 20	Sewer Assessment		422 368 10 00				
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection		402 369 90 10				
Grading/Excavating		001 322 10 00	Roadway Access		104 322.40 00				
Floodplain Mgt.		001 345 89 00	TOTAL	<u>816.71</u>					
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial			
Fire Impact Fees		351 345 85 00	<u>107033</u>	<u>7/14</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-16-010

Date Received: 4/20/16

APPLICANT		Name: <u>Michael Wheaton</u>	Phone: <u>360-624-2231</u>
Mailing Address, City, State Zip <u>335 Hillshire Drive, Woodland, WA 98674</u>		Email Address: <u>mfwheaton@comcast.net</u>	
PROPERTY OWNER		Name: <u>Monty & Tonia Lewellen</u>	Phone:
Mailing Address, City, State, Zip		Email Address:	
GENERAL CONTRACTOR		Business Name: <u>KARLSEN HOMES, LLC</u>	Contact Person: <u>MICHAEL WHEATON</u>
Mailing Address, City, State, Zip <u>9704 NE 114th AVE VANCOVER, WA 98662</u>		Phone: <u>360.892.9874</u>	
City Business License #		State Contractors License #	Email Address: <u>ERRAR@comcast.net</u>
PROPERTY ADDRESS			
<u>108 Brothers Road, Woodland, WA 98674</u>		Lot #	Parcel Number <u>508450100</u>
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ CY			
Occupancy (uses): <u>Single Family Residence</u>		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	
		No. of Units: <u>1</u>	No. of Bedrooms: <u>4</u>
		No. of Stories: <u>2</u>	No. of Bathrooms: <u>3</u>
		Building Height: <u>25'-5"</u>	Total Square Feet: <u>2420 SF</u>
Describe Project and Specific Use in Detail: <u>Single family residence</u> <u>862 SF Garage</u>			

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

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

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

PAID

APR 21 2016

Owner's Signature: _____
Date: 4.20.16

Applicant's Signature: _____
Date: _____

CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type: <u>1</u>	PAID																																																																																								
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**One and Two Family Building
Permit Application**
Building Department, 230 Davidson Ave., Woodland, WA 98674
Phone: (360) 225-7299
PRINT IN INK OR TYPE
(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY
Permit No. ACC-16-009
Date Received: 7/18/16

APPLICANT		Name: <u>JOVA J Powell</u> <u>98674</u>	[Redacted]
Mailing Address, City, State Zip		<u>1884 Willow Street Woodland</u>	Email Address:
PROPERTY OWNER		Name	Phone:
Mailing Address, City State, Zip			Email Address:

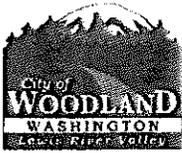
GENERAL CONTRACTOR		Business Name	Contact Person
Mailing Address, City State, Zip			Phone:
City Business License #	State Contractors License #		Email Address:

PROPERTY ADDRESS		Lot #	Parcel Number
<u>1884 Willow St Woodland, wa</u>			<u>504214123</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	
Occupancy (uses):		<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
	No. of Units	No. of Bedrooms	No. of Bathrooms
	No. of Stories	Building Height	Total Square Feet

Describe Project and Specific Use in Detail:
Storage Shed 10x14

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 1451.00
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: [Redacted] Date: 7-18-2016
Applicant's Signature: _____ Date: _____

DO NOT WRITE BELOW - FOR OFFICE USE ONLY									
Setbacks: Front:	RT Side:	LT Side:	Back:	Zone:	Permit Type:	Flood Zone: <u>A</u>			
Approvals	Initial	Date	Comments						
Civil Plans			PAID JUL 18 2016						
Planning Department									
Drainage/Erosion Control									
Fire/Life Safety									
Building		<u>7-18-16</u>							
Fees Due	Amount	Account	Fees Due	Amount	CITY OF WOODLAND Account				
Building Permit		001 322 10 00	Water Assessment		421 368 10 10				
Plan Review Pre-payment	<u>\$54.00</u>	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	\$58.50					
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial			
Fire Impact Fees		351 345 85 00	<u>107141</u>		<u>7/18</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. ACC-16-006
Date Received: 6/28/16

APPLICANT	Name: Ricks Custom Fencing and Decking	Phone: 360-253-3792
Mailing Address, City, State Zip 11516 NE 66th st		Email Address: stu.bailey@ricksfencing.com
PROPERTY OWNER	Name Phil Rainville	Phone: [REDACTED]
Mailing Address, City, State, Zip [REDACTED]		Email Address:

GENERAL CONTRACTOR	Business Name Rick's Custom Fencing & Decking	Contact Person Stu Bailey
Mailing Address, City, State, Zip 11516 NE 66th st		Phone: 253-3792
City Business License #	State Contractors License # RICKSCF099KB	Email Address: stu.bailey@ricksfencing.com

PROPERTY ADDRESS 1768 mariweather lane		Lot #	Parcel Number 507060165
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ CY		Type of Project <input checked="" type="checkbox"/> New Remodel	<input type="checkbox"/> Add On <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other PATIO CVR
Occupancy (uses): Residential home - adding a 17x8 aluminum patio cover		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
			Total Square Feet 138

Describe Project and Specific Use in Detail:
17x8 aluminum patio cover on back of house - cover is engineered by manufacturer and will attach to the roof via skylift

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 5000
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: 06/27/2016
Applicant's Signature: [REDACTED] Date: 06/27/2016

PAID
JUL 18 2016

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: _____ RT Side: _____ LT Side: _____ Back: _____ Zone: _____ Permit Type: CITY OF WOODLAND Flood Zone: **A**

Approvals	Initial	Date	Comments			
Civil Plans						
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
Building		2/18/16				
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	111.25	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	72.31	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	\$188.06		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	
Fire Impact Fees		351 345 85 00	107148		7/18	
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

FOR OFFICE USE ONLY
 Permit No. 2ME16-042
 Date 7-18-16

Applicant Name <u>Chris Creagan</u>		Title (if owner, state OWNER) <u>OWNER</u>	Daytime Phone: <u>[REDACTED]</u>
Property Owner <u>Chris Creagan</u>		Mailing Address, City, State & Zip <u>198 misty drive</u>	Daytime Phone:
Contractor <u>Chris Creagan</u>		Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number		Washington State Labor & Industries Number and Expiration Date	
Project Address <u>198 misty drive</u>		Subdivision/Legal Description	Parcel Number <u>5-04214414</u>
Type of Facility: <input 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 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 _____ 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: Ad Aprox 15' overHead and 10' down the wall to new meter w/ 2 90°

PAID
JUL 18 2016
 CITY OF WOODLAND

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

7/18/2016
 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: <u>A</u>			
<input type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical	[REDACTED]	<u>7-18-16</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>60-</u>	001 322 10 00	Other			
Other				Other			
Received By: [REDACTED]	Date	<u>7-18-16</u>	Receipt Number	<u>107147</u>	Total Due \$	<u>60-</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 RME-16-026
 Date 6/21/16

Applicant Name AREA HEATING AND COOLING INC	Title (if owner, state OWNER) ADMIN	Daytime Phone: 360-663-4489
Property Owner RON FREDRICK	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor AREA HEATING AND COOLING	Business Address, City, State & Zip 2721 NE 65TH AVE VANC WA 98661	Daytime Phone: 360-663-4489
City of Woodland Business License Number 29.1	Washington State Labor & Industries Number and Expiration Date	
Project Address 176 RASPBERRY LANE	Subdivision/Legal Description	Parcel Number 5-08090145

Type of Facility: Residential Commercial Educational
 Industrial Institutional _____

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

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

AC CHANGE OUT

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 4152.77

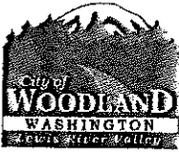
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

[REDACTED SIGNATURE] 6/21/16

APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>176 Raspberry Lane</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B
Permit Approval	Initial	Date	COMMENTS
Mechanical	[REDACTED]	<u>6-28-16</u>	
Plumbing	[REDACTED]		
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		<u>\$65.00</u>	001 322 10 00
Other			Other
Received By:	Date <u>7/18</u>	Receipt Number <u>107151</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. PA0-16-003

Date Received: 7-22-16

APPLICANT		Name: <u>RON BRECHEISEN</u>	Phone: [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	
PROPERTY OWNER		Name: <u>RON BRECHEISEN</u>	Phone: <u>702-604-7467</u>
Mailing Address, City State, Zip		<u>Same above</u>	
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>1992 Willow St</u>			<u>504214017</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"/> Add On <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
Occupancy (uses):		No. of Units	No. of Bedrooms
			No. of Bathrooms
		No. of Stories	Building Height
			Total Square Feet

Describe Project and Specific Use in Detail:

Rear Deck Replacement

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 6000.00

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 of approval may be voided. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.

[REDACTED Signature] _____ Date 7-22-16
 [REDACTED Signature] _____ Date 7-22-16

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: _____	RT Side: _____	LT Side: _____	Back: _____	Zone: <u>CDR-6</u>	Permit Type: <u>PAID</u>	Flood Zone: <u>A</u>
Approvals	Initial	Date	Comments: <u>JUL 22 2016</u>			
Civil Plans						
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
Building		<u>7-22-16</u>	CITY OF WOODLAND			
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>100</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>104.50</u>	
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<u>107194</u>		<u>7/22</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

FOR OFFICE USE ONLY
 Permit No. 2ME-16-39
 Date 7-11-16

Applicant Name <u>Air Ex change</u>		Title (if owner, state OWNER)		Daytime Phone:	
Property Owner <u>Julie Lawrence</u>		Mailing Address, City, State & Zip		Daytime Phone:	
Contractor <u>pin Ex</u>		Business Address, City, State & Zip <u>P.O. Box 822558</u>		Daytime Phone: <u>360-254-6194</u>	
City of Woodland Business License Number <u>PENDING</u>		Washington State Labor & Industries Number and Expiration Date <u>6059040 AIR EX 944NP</u>			
Project Address <u>249 Misty Lane</u>		Subdivision/Legal Description		Parcel Number <u>5-04214402</u>	
Type of Facility: <input 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 type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____		

PLUMBING: Fixtures (or set) on one trap <input checked="" type="checkbox"/> <u>FA</u> 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 _____	MECHANICAL: Furnace up to 100,000 BTU <input checked="" type="checkbox"/> 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 <u>FO</u> • over 10,000 CFM _____ Evaporative Cooler (non portable) _____ Ventilation Fan w/ single duct _____ Ventilation System (not heat or a/c) .. <u>FA</u> Hood w/ mechanical exhaust _____ Incinerator, domestic type _____ • commercial or industrial _____ Appliance/Equipment Item (UMC) _____ Fuel-Gas Piping System Outlets <u>FA</u> Haz. Process Piping System Outlets .. _____ Non-Haz. Proc. Piping System Outlets <u>FA</u> Commercial Hood Type 1 _____ Dust Collection System _____ Other _____
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Describe Project and Specific Use in Detail:
Heating Gas

PAID
JUL 22 2016
 CITY OF WOODLAND

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.

APPLICANT'S SIGNATURE

 DATE 7/10/16

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>249 Misty Lane</u>		<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit		Permit Type: <u>36</u>	Flood Zone: <u>A</u>		
Permit Approval	Initial	Date	COMMENTS				
Mechanical		<u>7-22-16</u>	<u>INFORMATION NEEDED, PLS CONTACT ME IN FLOOD ZONE.</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>\$193.00</u>	001 322 10 00	Other			
Other				Other			
Received By:	Date	Receipt Number		Total Due			
	<u>7/22</u>	<u>107197</u>		<u>\$ 193.00</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. RPL-16-021
 Date 7/22/16

Applicant Name Dale Hansen	Title (if owner, state OWNER) Owner	Daytime Phone: [REDACTED]
Property Owner Dale Hansen	Mailing Address, City, State & Zip [REDACTED]	
Contractor	Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number	Washington State Labor & Industries Number and Expiration Date	
Project Address 127 Loves Ave, Woodland, WA	Subdivision/Legal Description	Parcel Number 5-50124001
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 type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

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

Describe Project and Specific Use in Detail: 1 alteration of water piping system, 1 fixture on trap, 1 water heater

PAID

JUL 25 2016

CITY OF WOODLAND

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

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] 7/22/16
 APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>127 Loves 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]	[REDACTED]	[REDACTED]				
Plumbing	[REDACTED]	<u>7-22-16</u>	[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:	Date <u>7/25</u>	Receipt Number <u>107220</u>	Total Due \$70.00				



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. PNC16-013

Date Received: 6/18/16

APPLICANT		Name: LGI Homes - Washington, LLC	Phone: 206.445.5326
Mailing Address, City, State Zip 11410 NE 124th St., Ste 103, Kirkland, WA 98034		Email Address: rstokes@laihomes.com	
PROPERTY OWNER		Name LGI Homes - Washington, LLC	Phone: 206.445.5326
Mailing Address, City State, Zip 11410 NE 124th St., Ste 103, Kirkland, WA 98034		Email Address: rstokes@laihomes.com	
GENERAL CONTRACTOR		Business Name LGI Homes - Washington, LLC	Contact Person Ryan Stokes
Mailing Address, City State, Zip 11410 NE 124th St., Ste 103, Kirkland, WA 98034		Phone: 206.445.5326	
City Business License # PENDING		State Contractors License # LGIHOHL857MB	Email Address: rstokes@laihomes.com

PROPERTY ADDRESS		Lot # 75	Parcel Number 508070107
1865 Blacktail Lane, Woodland, WA 98674			
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: <u>N/A</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): <u>New Construction - SFR</u>		No. of Units 1	No. of Bedrooms 3
		No. of Bathrooms 2	
		No. of Stories 1	Building Height 17'-10"
			Total Square Feet 2502(1993Liv)

Describe Project and Specific Use in Detail: New Single Family Residential Construction in Merwether community. This plan will serve as our office for the community. Then be turned into a SFR home.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ \$110,000

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

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

Owner's Signature: _____ Date: 6/4/16

Applicant's Signature: _____ Date: 6/4/16

PAID JUN 20 2016
CITY OF WOODLAND

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: 26' 9 1/4" RT Side: 15' LT Side: 5' Back: 52' 7 1/4" Zone: LDL-6 Permit Type: PAID Flood Zone: A

Approvals	Initial	Date	Comments			
Civil Plans			JUL 29 2016 CITY OF WOODLAND			
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
Building		<u>7/20/16</u>	<u>W FLOOD ZONE</u>			
Fees Due						<u>18' DRIVEWAY</u>
Building Permit		<u>1878.55</u>	001 322 10 00	Water Assessment	<u>3241.00</u>	421 368 10 10
Plan Review Pre-payment		<u>600</u>	001 322 10 20	Meter Deposit	<u>696.00</u>	401 389 00 00
Plan Review Balance		<u>621.06</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>140.00</u>	104 322 40 00
Floodplain Mgt.		<u>100.00</u>	001 345 89 00	TOTAL	<u>\$20,317.11</u>	
School Impact Fees		<u>5000.00</u>	650 345 85 00	Receipt Number		Date
Fire Impact Fees		<u>1530.00</u>	351 345 85 00	<u>107273</u>		<u>7/29</u>
Park Impact Fees		<u>1116.00</u>	352 345 85 00			
Transp. Impact Fees		<u>838.00</u>	353 345 85 00			



One and Two Family Building Permit Application

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

RAD 16-002
FOR OFFICE USE ONLY
Permit No. *BRM 16-003*
Date Received: *6/27/16*

APPLICANT		Name: <i>Jon A. Serre</i>	Phone: [Redacted]
Mailing Address, City, State Zip		Email: [Redacted]	
PROPERTY OWNER		Name: <i>Jon P. Serre</i>	Phone: <i>same</i>
Mailing Address, City, State Zip		Address: <i>no</i>	
GENERAL CONTRACTOR		Business Name: <i>1</i>	Contact Person: <i>no</i>
Mailing Address, City State, Zip		Phone:	
City Business License #		State Contractors License #	
		Email Address:	
PROPERTY ADDRESS		Parcel Number	
<i>634 Davidson Ave Woodland WA 98674</i>		<i>5-0134</i>	
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Type of Project <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Add On <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses):		No. of Units	No. of Bedrooms
			<i>1</i>
		No. of Stories	Building Height
		<i>1 1/2</i>	<i>Attic</i>
		Total Square Feet <i>300,320</i>	
Describe Project and Specific Use in Detail: <i>larger Bathroom take out smaller add on, and make it larger. of Dining room</i>			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <i>Approx 10,000 - 14,000 13,500</i>			
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project. I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is false, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.			
Owner's [Redacted]		Date: <i>6-25-16</i> JUL 11 2016	
Applicant's Signature: <i>Jon A. Serre</i>		Date: <i>6-25-16</i> CITY OF WOODLAND	

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	RT Side:	LT Side:	Back:	Zone: <i>LOR-6</i>	Permit Type: <i>PAID 2</i>	Flood Zone: <i>B</i>
Approvals						
Civil Plans	Initial	Date	Comments			
Planning Department			JUL 29 2016			
Drainage/Erosion Control						
Fire/Life Safety						
Building						
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<i>237.25</i>	001 322 10 00	Water Assessment		421 368 10 10	
Plan Review Pre-payment	<i>—</i>	001 322 10 20	Meter Deposit		401 389 00 00	
Plan Review Balance	<i>118.63</i>	001 322 10 20	Sewer Assessment		422 368 10 00	
Surcharge	<i>4.50</i>	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	<i>360.38</i>		
School Impact Fees		650 345 85 00	Receipt Number	Amount	Date	Initial
Fire Impact Fees		351 345 85 00	<i>107282</i>		<i>7/29</i>	
Park Impact Fees		352 345 85 00				
Transp. Impact Fees		353 345 85 00				