

CITY OF WOOLAND
June 2014 – Monthly Recap

RESIDENTIAL CONSTRUCTION PERMITS

Month	Permits Issued	Valuation	Fees
January	6	\$402,901.64	\$19,282.47
February	3	\$9,000.00	\$259.10
March	3	\$13,868.44	\$484.00
April	12	\$774,039.57	\$48,282.27
May	12	\$420,648.85	\$35,336.62
June	16	572,631.33	35,039.59
July			
August			
September			
October			
November			
December			
TOTAL	52	\$2,193,089.83	\$138,684.05

NON-RESIDENTIAL CONSTRUCTION PERMITS

Month	Permits Issued	Valuation	Fees
January	3	\$13,605.00	\$258.34
February	2	\$101,000.00	\$3,275.51
March	4	\$8,100.00	\$510.00
April	1	\$90,411.00	\$1,540.24
May	6	\$58,465.72	\$1,804.57
June	11	\$ 104,705.00	\$ 7,130.57
July			
August			
September			
October			
November			
December			
TOTAL	27	\$376,286.72	\$14,519.23

Month	Permits Issued	Total Project Valuation	BUILDING		PUBLIC WORKS		IMPACT FEES		Total Permit Amount
			Fees	YTD Revenue	Fees	YTD Revenue	Fees	YTD Revenue	
January	9	\$416,506.64	\$5,801.81	2.5%	\$8,343.00	10.00%	\$5,396.00	N/A	\$19,540.81
February	5	\$110,000.00	\$1,978.29	0.8%	0	0.0%	\$1,556.32	N/A	\$3,534.61
March	7	\$21,968.44	\$994.00	0.4%	0	0.0%	0	N/A	\$994.00
April	13	\$864,450.57	\$12,425.01	5.3%	\$26,298.00	31.4%	\$12,840.00	N/A	\$51,563.01
May	18	\$479,114.57	9,135.19	3.9%	\$17,492.00	20.9%	\$10,514.00	N/A	\$37,141.19
June	27	\$677,336.33	16,128.16	6.9%	\$20,467.39	24.4%	\$8,560.00	N/A	\$45,155.55
July									
August									
September									
October									
November									
December									
TOTALS	79	3,048,491.12	\$46,462.46	19.8%	\$72,600.39	86.7%	\$38,866.32		\$157,929.17

June 2014

Total Permit Breakdown

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
Building	2	2	2	4	9	10							29
Plumbing/Mechanical	6	2	2	2	5	11							28
Plumbing w/backflow dev	0	0	1	3	1	3							8
Fill & Grade	0	0	0	0	1	1							2
Fire/Life Safety	1	0	1	0	1	2							5
Other-Signs	0	1	1	1	1	0							4
Totals	9	5	7	10	18	27							76

Total Permit Breakdown - A-15 & B

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
A-15	1	2	3	10	5	10							31
B	8	3	4	4	12	17							48
A-15/B					1								1
Totals	9	5	7	14	18	27							80

Residential Building Permit Breakdown

	<u>Jan</u>	<u>Feb</u>	<u>March</u>	<u>April</u>	<u>May</u>	<u>June</u>	<u>July</u>	<u>Aug</u>	<u>Sept</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Totals</u>
SFD	1	0	0	4	2	2							9
Manufactured Homes	0	0	0	0	0	0							0
Multi-Family Units	0	0	0	0	0	0							0
Remodel/Add/Assec	0	1	1	2	3	3							10
Roof/Deck/Fence	0	0	1	2	2	3							8
Demolition	0	0	0	0	0	0							0
Other-Revise/Approach	0	0	0	0	0	0							0
Totals	1	1	2	8	7	8							27

CITY OF WOODLAND
June 2014

Permit #	Parcel No.	Project Description	Issued	Project Address	Owner	Contractor	Type	Project Value	Bldg. Fees	P.W. Fees	Impact Fees	Total Fees
214-064	507350116	Antenna installation	6/30/14	289 N. Pekin	Col. River Carb	TBD	31	\$ 20,000.00	\$ 530.06			\$ 530.06
214-087	507350116	Antenna installation	6/27/14	289 N. Pekin	Col. River Carb	Pilgrim Communication	31	\$15,000.00	\$419.06			\$ 419.06
214-088	504219102	Replace AC	6/27/14	1601 Pacific Ave	McDonalds	Joel Leininger	36	\$10,500.00	\$105.00			\$ 105.00
214-028	504214443	Electronic Gate	6/26/14	253 Misty Dr (closest lot)	River Mist HOA	Ricks Custom Fencing	31	\$29,057.00	\$728.89			\$ 728.89
214-086	508800100	Fill & Grade	6/26/14	Scott Hill Park	City of Woodland	Self	39	\$24,000.00	\$258.25			\$ 258.25
214-085	50515	Plumbing	6/26/14	1365 Lewis River Rd	Steve Oliva	Paul Edwin	36	\$10,000.00	\$130.00			\$ 130.00
214-081	50298	Plumb/Mech	6/26/14	931 Dale	Becky Bjur	Merriman Plumb/All Around Mech	36	\$12,000.00	\$255.00			\$ 255.00
214-089	50249	Plumbing	6/26/14	1155 Hoffman	WSCO	Montgomery Dev.	36	\$650.00	\$85.00			\$ 85.00
214-083	5067907	Plumbing	6/25/14	372 Insel	Kathy Kirby	Rescue Rooter	36	\$4,750.00	\$100.00			\$ 100.00
214-084	50680008	Plumbing	6/22/14	211 5th St	Howard Wall	Plumbing System	36	\$16,700.00	\$120.00			\$ 120.00

214-069	504215019	Mechanical	6/25/14	255 Madrona	Candice Shepard	Renaud Electric	36	\$7,400.00	\$85.00			\$ 85.00
214-082	50600	Mechanical	6/24/14	1560 Down River Dr	Sunlight Supply	SSM Mechanical	36	\$4,200.00	\$65.00			\$ 65.00
214-037	508840100	New Foundation/ Basement	6/20/14	310 Scott Hill Rd	Ben Kopman	Self	2	\$15,000.00	\$783.38			\$ 783.38
214-066	507060158	Plumb/Mech	6/17/14	1803 Clatsop	Karlsen Development	Same	36	\$15,000.00	\$365.00			\$ 365.00
214-043	507060158	SFR	6/17/14	1803 Clatsop	Karlsen Development	Same	1	\$201,173.08	\$2,686.67	\$8,756.00	\$4,280.00	\$ 15,722.67
214-079	50450	Mechanical	6/17/14	115 Davidson	Del Swanson	Blairco	36	\$6,305.00	\$90.00			\$ 90.00
214-078	50094023	Plumbing	6/17/14	720 Beechwood	Matt Jacobs	Full Throttle	36	\$2,000.00	\$80.00			\$ 80.00
214-032	508540100	Fire & Life Safety	6/16/14	1500 Dike Access	WHS	Hydro Tech	38		\$4,705.80			\$ 4,705.80
214-036		Fire & Life Safety	6/16/14	1500 Dike Access	WHS Grandstand	Hydro Tech	38		\$631.40			\$ 631.40
214-075	507060137	Fence	6/16/14	1804 Clatsop	Richard Tapani	Richard Tapani	32	\$1,200.00	\$55.00			\$ 55.00
214-074	50735	mechanical	6/12/14	300 N Pekin	Col. River Carb	Entek Corp	36	\$9,800.00	\$95.00			\$ 95.00
214-073	507680100	Mechanical	6/12/14	1981 Schurman Way	USNR	Entek Corp	36	\$4,900.00	\$101.00			\$ 101.00

214-070	50235041	Reroof	6/5/14	282 Cedar	Sandra Morkert	Allred Roofing	34	\$8,325.00	\$ 59.50			\$ 59.50
214-025	507060166	SFR	6/2/14	1774 Meriwether	Karlsen Development	Same	1	\$229,976.25	\$2,945.39	\$11,711.39	\$4,280.00	\$ 18,936.78
214-026	507060166	Plumb/Mech	6/2/14	1774 Meriwether	Karlsen Development	Same	36	\$15,000.00	\$355.00			\$ 355.00
214-033	504219636	Res. Remodel	6/2/14	1717 Foxtail Circle	Josh Adams	Self	2	\$6,400.00	\$234.26			\$ 234.26
214-068	5025301	Reroof	6/2/14	1030 Park St	Marcia Miller	Self	34		\$59.50			\$ 59.50
								\$669,336.33	\$16,128.16	\$20,467.39	\$8,560.00	\$ 45,155.55



RECEIVED
APR 24 2014

One and Two Family Building Permit Application

Building Department, 230 Davidson Ave., Woodland, WA 98674
Phone: (360) 225-7299
PRINT IN INK OR TYPE

FOR OFFICE USE ONLY
Permit No. 214-025
Date Received: 4/24/14 at

City of Woodland (Separate Mechanical & Plumbing Permits Required)

①

Lot 66

APPLICANT Building Dept Name: Carlson Development LLC
 Planning Dept: _____
 Mailing Address: _____
PROPERTY OWNER Name: Same
 Mailing Address, City State, Zip: _____ Email Address: _____

GENERAL CONTRACTOR Business Name: Carlson Development LLC Contact Person: Diane Carlson
 Mailing Address, City State, Zip: 9704 NE 117th Ave Vancouver WA 98662 Phone: 947-1405
 City Business License #: 14-0001267 State Contractors License #: KARLSON 930LE Email Address: Diane@carlsondev.com

Property Address: 1774 Meriwether LN Parcel Number: 507060166
 Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: _____ CY Type of Project: New Add On Demolition
 Remodel Repair Other _____
 Occupancy (uses): _____ No. of Units: _____ No. of Bedrooms: 3 No. of Bathrooms: 2
New construction single family No. of Stories: 1 Building Height: 19 Total Square Feet: 2000
garage 625 SF

Describe Project and Specific Use in Detail:
New construction single family w/ attached garage
229, 976.25

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT: \$ 150,000.00
NOTICE: Setback, permit, and labor costs may be required for this project. This permit is void if work does not commence within 180 days of approval or if work is suspended for more than 90 days. Insurance or a permit does not constitute any work in public works or utility easements. The applicant is responsible for obtaining all necessary permits from other agencies and for all fees required.

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: 4-23-14
 Applicant's Signature: _____ Date: 4-23-14

DO NOT WRITE BELOW - FOR OFFICE USE ONLY
 Setbacks: Front: 25 Side: 5 & 5 Back: 15 Zone: LDR7.2 Permit Type: PAID Flood Zone: A15

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

APR 24 2014

CITY OF WOODLAND

Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>1721.75</u>	001 322 10 00	Water Assessment	<u>3,087</u>	421 368 10 10
Plan Review Pre-payment	<u>000.00</u>	001 322 10 20	Meter Deposit	<u>662</u>	401 389 00 00
Plan Review Balance	<u>519.14</u>	001 322 10 20	Sewer Assessment	<u>4686</u>	422 368 10 00
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection	<u>221</u>	402 369 90 10
Grading/Excavating	<u>0</u>	001 322 10 00	Roadway Access	<u>110</u>	104 322 40 00
Floodplain Mgt.	<u>100.00</u>	001 345 89 00	TOTAL Due	<u>15,391.39</u>	
School Impact Fees	<u>2750.00</u>	350 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	<u>95578</u>	<u>600.00</u>	<u>4-24-14</u>
Park Impact Fees	<u>0 letter</u>	352 345 85 00	<u>9161227</u>	<u>15,391.39</u>	<u>6-2-14</u>
Transp. Impact Fees	<u>0</u>	353 345 85 00			

Plumbing & Mechanical Permit Application

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

FOR OFFICE USE ONLY
 Permit No. 214-026
 Date 4/24/14

Applicant Name <u>Karlson Development LLC</u>		Title (if owner, state OWNER) <u>Owner</u>	
Property Owner <u>Same</u>		Business Address, City, State & Zip <u>Same</u>	
Contractor <u>Same</u>		Daytime Phone:	
City of Woodland Business License Number <u>14-000176.7</u>		Washington State Labor & Industries Number and Expiration Date <u>KARSON 7-27-14</u>	
Project Address <u>1774 Meriwether LN</u>		Subdivision/Legal Description <u>Meriwether Estates</u>	Parcel Number <u>5-07060166</u>
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input checked="" type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

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

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

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APR 24 2014

City of Woodland
Building Dept
Planning Dept

PAID

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 15,000.00 JUN 02 2014

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 on the permit may be revoked.

APPLICANT'S SIGNATURE

4-23-14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1774 Meriwether</u>		<input type="checkbox"/> First Plumbing Permit		Permit Type: 36	Flood Zone: A-15		
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	<u>WW</u>	<u>5/30/14</u>					
Plumbing	<u>WW</u>	<u>5/30/14</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>189.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>166.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date: <u>6-2-14</u>	Receipt Number: <u>96228</u>	Total Due: <u>\$ 355.00</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)

④

FOR OFFICE USE ONLY	
Permit No.	214-028
Date Received:	4/28/14

APPLICANT	Name: River Mist Homeowners Association	
Mailing Address, City, State Zip	[REDACTED]	
PROPERTY OWNER	Name: same	Phone:
Mailing Address, City State, Zip	[REDACTED]	
GENERAL CONTRACTOR	Business Name: Ricks Custom Fencing	Contact Person: Darren Fleck
Mailing Address, City State, Zip	11516 NE 66th St., Vancouver, Wa. 98662	
City Business License #	State Contractors License # rickscf099kb	Phone: 360-253-3792
Property Address	253 Misty Drive (closes 7 lot)	Parcel Number: 504214443
Fill & Grade/Excavation with this project?	Type of Project	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: CY	<input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses): Residential subdivision of 42 lots	No. of Units: 42 lots	No. of Bedrooms: No. of Bathrooms:
Gate	No. of Stories:	Building Height: Total Square Feet:

Describe Project and Specific Use in Detail:
Install electronic gate for River Mist Subdivision within the subdivisions private road easement. Gate will be located at end of block wall at the entrance to the subdivision.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 29,057.00 approximately
 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.*

River Mist Homeowners Association
 Owner's Signature: [Signature] Pres. Date: 4-25-14
 Applicant's Signature: [Signature] Pres. Date: 4-25-14

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: Side: Back: Zone: UDR Permit Type: 31 Flood Zone: A-15

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department	<u>[Signature]</u>	<u>10/25/14</u>	
Drainage/Erosion Control			
Fire/Life Safety	<u>WW</u>	<u>6-25-14</u>	
Building	<u>WW</u>	<u>6-25-14</u>	

Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>441.75</u>	001 322 10 00	Water Assessment	<u>0</u>	421 368 10 10
Plan Review Pre-payment	<u>150.00</u>	001 322 10 20	Meter Deposit	<u>0</u>	401 388 00 00
Plan Review Balance	<u>137.14</u>	001 322 10 20	Sewer Assessment	<u>0</u>	422 368 10 00
Surcharge	<u>0</u>	001 322 10 00	Sewer Inspection	<u>0</u>	402 369 90 10
Grading/Excavating	<u>0</u>	001 322 10 00	Roadway Access	<u>0</u>	104 322 40 00
Floodplain Mgt.	<u>0</u>	001 345 89 00	TOTAL Due	<u>578.89</u>	
School Impact Fees	<u>0</u>	350 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees	<u>0</u>	351 345 85 00	<u>*95627</u>	<u>150.00</u>	<u>6-25-14</u>
Park Impact Fees	<u>0</u>	352 345 85 00	<u>96461</u>	<u>578.89</u>	<u>6-26-14</u>
Transp. Impact Fees	<u>0</u>	353 345 85 00			

Form Revised 5/2013
 * transferred payment from 214-027

Permit: Cancelled. Fee Transferred to 214-028



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 # 214-027 Parcel #: 504214443 Fire Marshal # FRI201

Job Address: Misty Drive

Occupant: River Mist Homeowners Association

Owner: River Mist Homeowners Association Address: 242 Misty Dr., Woodland, Wa 98674

Contractor: Ricks Custom Fencing Business License # _____

Address: 11516 NE 66th St., Vancouver, Wa. 98662

E-mail: _____ Mobile: _____

Contact: _____

E-mail: same Phone: _____ Mobile: _____

Zone: LDR-6 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

WW
6-25-14

PAID

APR 28 2014

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.

River Mist Homeowners Association

Applicant: X Fred Jackson Pres.

Phone: Rick Haddock at 360-696-4571

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.

Date submitted: 4-25-14

E-mail: haddockr@fbrrealty.com

Comments: This permit is for the installation of an electronic gate at the entrance to River Mist Subdivision.

Amount	Type	ACCOUNT	Receipt #	Date Paid	Initials
\$ 150.00	Pre Payment	001 386 00 00 01	95627	4-28-14	SM
\$	Fees - Pre Payment	001 386 00 00 01			
\$	Admin (10% fee)	001 341 42 00 00			
\$	BALANCE	NA			

Form Revised 6/13/2013

Apply \$150. TO permit # 214-028.



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 214-033

Date Received: 5/6/14

APPLICANT		Name: <u>JOSH ADAMS</u>	
Mailing Address, City, State Z		[REDACTED]	
PROPERTY OWNER		Name: <u>JOSH ADAMS</u>	
Mailing Address, City State, Z		[REDACTED]	
GENERAL CONTRACTOR		Business Name: <u>Self</u>	Contact Person: [REDACTED]
Mailing Address, City State, Zip		Phone: [REDACTED]	
City Business License #	State Contractors License #	Email Address: [REDACTED]	
Property Address <u>1717 FOXTAIL CIRCLE, WOODLAND, WA 98674</u>		Parcel Number <u>504219636</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"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses): <u>OFFICE ADDITION / PORCH ENCLOSURE</u>		No. of Units	No. of Bedrooms
			<u>0</u>
		No. of Stories	Building Height
			Total Square Feet
Describe Project and Specific Use in Detail: <u>ENCLOSE BACK PORCH. BUILD FOUNDATION, FLOOR AND TWO EXTERIOR WALLS, ADD ELECTRICAL. OFFICE SPACE.</u>			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>6400⁰⁰</u>			
NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project.			
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is 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: <u>[Signature]</u>		Date: <u>5/6/14</u>	
Applicant's Signature: <u>[Signature]</u>		Date: <u>5/6/14</u>	
DO NOT WRITE BELOW - FOR OFFICE USE ONLY			
Setbacks: Front: <u>25</u>	Side: <u>5</u>	Back: <u>15</u>	Zone: [REDACTED] Permit Type: <u>2</u> Flood Zone: <u>A-15</u>
Approvals	Initial	Date	Comments
Civil Plans			PAID JUN 02 2014
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building			
Fees Due	Amount	Account	Fees Due
Building Permit	<u>139.25</u>	001 322 10 00	Water Assessment
Plan Review Pre-payment	<u>0</u>	001 322 10 20	Meter Deposit
Plan Review Balance	<u>90.51</u>	001 322 10 20	Sewer Assessment
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection
Grading/Excavating	<u>0</u>	001 322 10 00	Roadway Access
Floodplain Mgt.	<u>0</u>	001 345 89 00	TOTAL
School Impact Fees		350 345 85 00	Amount: <u>234.26</u>
Fire Impact Fees		351 345 85 00	Receipt Number: <u>96233</u>
Park Impact Fees		352 345 85 00	Amount: <u>6.24</u>
Transp. Impact Fees		353 345 85 00	Date: <u>6-2-14</u>
			Initial: <u>JM</u>



@

City of Woodland
PO Box 9 / 230 Davidson
Woodland, WA 98674
360-225-7299

Fire & Life Safety Permit Application

www.ci.woodland.wa.us

Permit # 214-032 Parcel #: _____ Fire Marshal # FRI2014-00228

Job Address: 1500 DIKE ACCESS RD

Occupant: WOODLAND HS

Owner: CITY OF WOODLAND Address: _____

Contractor: HYDRO TECH FIRE PROTECTION Business License # 000157.1

Address: 15218 NE CAPLES RD BRUSH PRIMAIE, WA 98606

E-mail: JOSH@HYDROTECHFIRE.COM Phone: 360-256-2816 Mobile: _____

Contact Person: JOSH SMITH Address: _____

E-mail: _____ Phone: _____ Mobile: _____

Zone: B Special Flood Hazard Zone: Yes No

508 540100

An application is hereby made for the following review:

Fire Protection

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

Special Hazards

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

Other Review

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

PAID

MAY 06 2014

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 defined 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 adopted the Clark County Fire Marshal's fee schedule. A 10% administrative cost will be added to all permits.

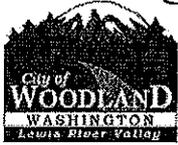
Applicant: JOSH SMITH
Phone: 360-256-2816

Date submitted: 5/6/14
E-mail: JOSH@HYDROTECHFIRE.COM

Comments:

Amount	Type	ACCOUNT	Receipt #	Date Paid	Initials
\$ 160.00	Pre Payment	001 386 00 00 01	95748	5-6-14	JM
\$ 4118.00	Fees - Pre Payment	001 386 00 00 01	96368	6-16-14	LC
\$ 427.80	Admin (10% fee)	001 341 42 00 00			
\$ 4545.80	BALANCE	NA			

For Inspection
Call 360 397-2186 x 3395



City of Woodland
PO Box 9 / 230 Davidson
Woodland, WA 98674
360-225-7299

Fire & Life Safety Permit Application

www.ci.woodland.wa.us

Permit # 214-036 Parcel #: _____ Fire Marshal # FRI2014-00247
 Job Address: 1500 DIKE ACCESS
 Occupant: WOODLAND HS - GRANDSTAND
 Owner: CITY OF WOODLAND Address: _____
 Contractor: HYDRO TECH FIRE PROTECTION Business License # 000157.1
 Address: 15218 NE CAPLES RD BRUSH PRIZIE, WA 98606
 E-mail: JOSH@HYDROTECHFIRE.COM Phone: 360-256-2816 Mobile: _____
 Contact Person: JOSH SMITH Address: _____
 E-mail: _____ Phone: _____ Mobile: _____
 Zone: B Special Flood Hazard Zone: Yes No

An application is hereby made for the following review:

Fire Protection

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

Other Review

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

Special Hazards

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

PAID

MAY 13 2014

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.

PAID

MAY 13 2014

CITY OF WOODLAND

Applicant: JOSH SMITH
 Phone: 360-256-2816

Date submitted: 5/13/14
 E-mail: JOSH@HYDROTECHFIRE.COM

Comments: _____

Amount	Type	ACCOUNT	Receipt#	Date Paid	Initials
\$160.00	Pre Payment	001 386 00 00 01	95881	5-13-14	JM
\$414.00	Fees - Pre Payment	001 386 00 00 01	96369	6-16-14	IC
\$57.40	Admin (10% fee)	001 341 42 00 00			
\$471.40	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. 214-037

Date Received: 5/13/14

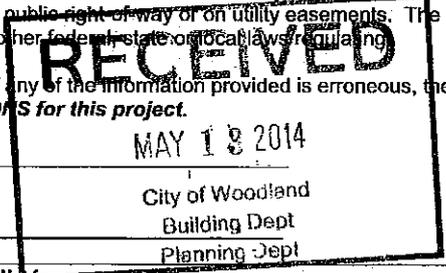
APPLICANT		Name: <u>Ben Kopman</u>		[Redacted]	
Mailing Address, City State Zip		[Redacted]		[Redacted]	
PROPERTY OWNER		Name: <u>same as applicant</u>		[Redacted]	
Mailing Address, City State Zip		[Redacted]		Email Address:	
GENERAL CONTRACTOR		Business Name		Contact Person	
Mailing Address, City State Zip		[Redacted]		Phone:	
City Business License #		State Contractors License #		Email Address:	
Property Address		<u>310 Scott Hill Rd, Woodland WA</u>		Parcel Number <u>588840100</u>	
Fill & Grade/Excavation with this project?		Type of Project		[] New [] Add On [] Demolition	
Yes [] No [] Total Quantity of Earthwork: <u>CY</u>		[] Remodel [] Repair [] Other			
Occupancy (uses):		No. of Units		No. of Bedrooms	
				No. of Bathrooms	
		No. of Stories		Building Height	
				Total Square Feet	

Describe Project and Specific Use in Detail: Add New Foundation + Basement.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 15,000

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: [Signature]
Applicant's Signature: [Signature]

Date: _____
Date: _____

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front:	Side:	Back:	Zone:	Permit Type: <u>2</u>	Flood Zone: <u>B</u>
Approvals		Initial	Date	Comments	
Civil Plans					
Planning Department				<u>JUN 20 2014</u>	
Drainage/Erosion Control					
Fire/Life Safety				CITY OF WOODLAND	
Building		<u>WK</u>	<u>6-20-14</u>		
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>472.05</u>	001 322 10 00	Water Assessment	<u>0</u>	421 368 10 10
Plan Review Pre-payment	<u>0</u>	001 322 10 20	Meter Deposit	<u>0</u>	401 389 00 00
Plan Review Balance	<u>306.83</u>	001 322 10 20	Sewer Assessment	<u>0</u>	422 368 10 00
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection	<u>0</u>	402 369 90 10
Grading/Excavating	<u>0</u>	001 322 10 00	Roadway Access	<u>0</u>	104 322 40 00
Floodplain Mgt.	<u>0</u>	001 345 89 00	TOTAL	<u>783.38</u>	
School Impact Fees	<u>0</u>	350 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees	<u>0</u>	351 345 85 00	<u>010422</u>	<u>783.38</u>	<u>6-20-14</u>
Park Impact Fees	<u>0</u>	352 345 85 00			Initial <u>JM</u>
Transp. Impact Fees	<u>0</u>	353 345 85 00			<u>(P)</u>



Commercial & Multifamily Building Permitt. Application

Building Department, 230 Davidson Ave., Woodland, WA 98674
 Phone: (360) 225-7299
PRINT IN INK OR TYPE

FOR OFFICE USE ONLY
 Permit No. 214-0124
 Date Received: 4/18/14

879557 PO 03XC125
 (Separate Mechanical & Plumbing Permits Required)

APPLICANT		Name <u>SANDRA WALDEN</u>	
Mailing Address, City, State Zip		[REDACTED]	
PROPERTY OWNER		Name <u>COLUMBIA RIVER CARBONATES</u>	
Mailing Address, City State, Zip		<u>PO BOX 2350, WOODLAND, WA 98674</u>	
GENERAL CONTRACTOR		Business Name <u>TBD</u>	Contact Person
Mailing Address, City State, Zip		Phone:	
City Business License #		State Contractors License # <u>PROVIDED WHEN ISSUED</u>	
Property Address <u>289 N. PEKIN RD, WOODLAND, WA 98674</u>		Parcel Number <u>507350116</u>	
Fill & Grade/Excavation with this project? Yes [] 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 type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other	
Occupancy (uses): <u>UNMANNED</u>		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	

Describe Project and Specific Use in Detail:
MODIFICATION OF EXIST. TELECOM FACILITY @ INSTALLATION OF THREE (3) PANEL ANTENNAS & 3 RRH'S W/ ANCILLARY EQUIP & CABLING.

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. Utility service requests and associated fees are processed by the City of Woodland Public Works Department. For information on application and rates, contact (360) 225-7999.

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

Owner's Signature: [Signature] Date: 4.16.14
 Applicant's Signature: SANDRA WALDEN, CONTRACTOR @ CROWNCASTLE.COM

DO NOT WRITE BELOW - FOR OFFICE USE ONLY
 Setbacks: Front: Side: NA Back: Zone: Permit Type: 31 Flood Zone: B

Approvals	Initial	Date	Comments			
Civil Plans						
Planning Department						
Drainage/Erosion Control						
Fire/Life Safety						
Building		<u>WW 6-26-14</u>				
Fees Due	Amount	Account	Fees Due	Amount	Account	
Building Permit	<u>321.25</u>	001 322 10 00	Fire Impact Fees	<u>0</u>	351 345 85 00	
Plan Review Pre-payment	<u>0</u>	001 322 10 20	Park Impact Fees	<u>0</u>	352 345 85 00	
Plan Review Balance	<u>208.81</u>	001 322 10 20	Roadway Access	<u>0</u>	104 322 40 00	
Surcharge	<u>0</u>	001 322 10 00	TOTAL	<u>530.06</u>		
Grading/Excavating	<u>0</u>	001 322 10 00	Receipt Number	Amount	Date	Initial
Floodplain Mgt.	<u>0</u>	001 345 89 00	<u>06535</u>	<u>530.06</u>	<u>6/30/14</u>	<u>LC</u>
School Impact Fees	<u>0</u>	350 345 85 00	PAID			
Transp. Impact Fees	<u>0</u>	353 345 85 00				

Form Revised 5/2013

JUN 30 2014

CITY OF WOODLAND

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. 817-060
 Date 5/29/14

Applicant Name <small>REQUIRED</small> <u>Karlson Development LLC</u>		Title (if owner, state OWNER) <u>owner</u>	
Property Owner <small>REQUIRED</small> <u>same</u>		Daytime Phone:	
Contractor <small>REQUIRED</small> <u>same</u>		Business Address, City, State & Zip <u>same</u>	
Daytime Phone:		Daytime Phone:	
City of Woodland Business License Number <small>REQUIRED</small> <u>14-00017617</u>		Washington State Labor & Industries Number and Expiration Date <small>REQUIRED</small> <u>KARLSONSOLE 7-27-14</u>	
Project Address <small>REQUIRED</small> <u>1803 clatsop st</u>		Subdivision/Legal Description <small>REQUIRED</small> <u>Merwether Estates</u>	Parcel Number <small>REQUIRED</small> <u>5-02060158</u>
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input checked="" type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/>	

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

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

RECEIVED

MAY 29 2014

City of Woodland
Building Dept
Planning Dept

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

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

APPLICANT'S SIGNATURE

S-20-14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1803 clatsop</u>		<input checked="" type="checkbox"/> First Plumbing Permit		Permit Type: <u>36</u>		Flood Zone: <u>A-5-15</u>	
		<input checked="" type="checkbox"/> First Mechanical Permit				PAID	
Permit Approval	Initial	Date	COMMENTS				
Mechanical	<u>WV</u>	<u>6-13-14</u>	JUN 17 2014				
Plumbing	<u>WV</u>	<u>6-13-14</u>					
Fire/Life Safety			CITY OF WOODLAND				
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>199</u>	001 322 10 00	Other			
Mechanical Permit		<u>166</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date: <u>6-17-14</u>	Receipt Number: <u>96395</u>		Total Due: <u>\$365</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. 214-068

Date Received: 5/28/14

9

APPLICANT		Name:		Phone:	
Mailing Address, City, State Zip				Email Address:	
PROPERTY OWNER		Name <u>Marcia Miller</u>			
Mailing Address, City State, Zip					
GENERAL CONTRACTOR		Business Name <u>Self</u>		Contact Person	
Mailing Address, City State, Zip				Phone:	
City Business License #		State Contractors License #		Email Address:	
Property Address <u>1030 Park St</u>				Parcel Number <u>5025301</u>	
Fill & Grade/Excavation with this project? Yes [] No [X]		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	
Total Quantity of Earthwork: <u>CY</u>		<u>roof</u>			
Occupancy (uses):		No. of Units	No. of Bedrooms	No. of Bathrooms	
		No. of Stories	Building Height	Total Square Feet	
Describe Project and Specific Use in Detail:					
<u>I want to put a second layer of asphalt shingles on my existing roof</u>					
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>8000.00</u>					
<small>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.</small>					
<small>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.</small>					
<u>Marcia Miller</u> Owner's Signature				<u>5-28-14</u> Date	
<u>Same</u> Applicant's Signature					
DO NOT WRITE BELOW - FOR OFFICE USE ONLY					
Setbacks: Front:	Side:	Back:	Zone: <u>LDR</u>	Permit Type: <u>34 PAID</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments		
Civil Plans			JUN 02 2014 CITY OF WOODLAND		
Planning Department					
Drainage/Erosion Control					
Fire/Life Safety					
Building	<u>WM</u>	<u>5/30/14</u>			
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>55</u>	001 322 10 00	Water Assessment		421 368 10 10
Plan Review Pre-payment		001 322 10 20	Meter Deposit		401 389 00 00
Plan Review Balance		001 322 10 20	Sewer Assessment		422 368 10 00
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection		402 369 90 10
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00
Floodplain Mgt.		001 345 89 00	TOTAL	<u>59.50</u>	
School Impact Fees		350 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees		351 345 85 00	<u>16223</u>	<u>\$59.50</u>	<u>6/2/14</u>
Park Impact Fees		352 345 85 00			<u>JM</u>
Transp. Impact Fees		353 345 85 00			

9

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. 211-0169

Date 6/2/14

Applicant Name <u>Renaud Electric Co</u>		Title (if owner, state OWNER)	
Property Owner <u>Carlyce Shepherd</u>			
Contractor <u>Renaud Electric Company</u>		Business Address, City, State & Zip <u>2300 Valley Way Kelso WA 98626</u>	
City of Woodland Business License Number <u>14-000255.7</u>		Washington State Labor & Industries Number and Expiration Date <u>200.400-00-0 12/1/2016</u>	
Project Address <u>255 Madrona Dr</u>		Subdivision/Legal Description <u>River Pointe Lot 19</u>	Parcel Number <u>5-04215019</u>

Type of Facility: Residential Commercial Educational Industrial Institutional _____

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

PLUMBING:	MECHANICAL:
Fixtures (or set) on one trap	Furnace up to 100,000 BTU
Building or Trailer Park Sewer	Furnace over 100,000 BTU
Rainwater System Drains (Inside)	Floor Furnace installation or relocation
Private Sewage System	Heater (suspended, recessed or floor)
Water Heaters and/or Vents	Vent not included with appliance
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)
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 <u>1</u>
	• 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

PAID

JUN 25 2014

Describe Project and Specific Use in Detail: Install Mitsubishi Ductless Heat pump system

CITY OF WOODLAND

All EQUIPMENT SHALL BE ABOVE Base Flood Elevation.

RECEIVED

JUN 02 2014

City of Woodland
Building Dept
Planning Dept

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 7,400

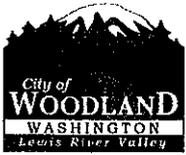
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

Marlene Allen
APPLICANT'S SIGNATURE

6/2/14
DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>255 Madrona Dr.</u>		<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	<u>WW</u>	<u>6/2/14</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>85.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date <u>6-25-14</u>	Receipt Number <u>96443</u>	Total Due \$ <u>85.00</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. 214-070
 Date Received: 6/3/14

APPLICANT		Name: <u>Allred Roofing</u>	
PROPERTY OWNER		Name: <u>Sandra Markert</u>	
GENERAL CONTRACTOR		Business Name: <u>Allred Roofing</u>	Contact Person: <u>Mike Allred</u>
Mailing Address, City State, Zip		Phone:	
<u>1327 California way Longview WA 98632</u>		<u>360-630-9505</u>	
City Business License #		State Contractors License #	
<u>14-000019.7</u>		<u>ALLRPT0810R+</u>	
PROPERTY ADDRESS		Lot #	Parcel Number
<u>282 Cedar Ave Woodland WA</u>			<u>50235041</u>
Fill & Grade/Excavation with this project?		Type of Project	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ CY		<input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Other <u>RE ROOF</u>	
Occupancy (uses):		No. of Units	No. of Bedrooms
		No. of Stories	Building Height
			Total Square Feet
Describe Project and Specific Use in Detail:			
<u>Tear off & haul away old Roofing & Replace with 28 squares of Pabco Premier Shingles & 9 New vents</u>			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>8,325.00</u>			
<small>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.</small>			
<small>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.</small>			
<u>[Signature]</u> Owner's Signature		<u>2 JUN 14</u> Date	
<u>Debi Marek</u> Applicant's Signature		<u>6-3-14</u> Date	
PAID JUN 05 2014			
DO NOT WRITE BELOW - FOR OFFICE USE ONLY			
Setbacks: Front:	RT Side:	LT Side:	Back: Zone:
Approvals	Initial	Date	Comment
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building	<u>WV</u>	<u>6/3/14</u>	
Fees Due	Amount	Account	Fees Due
Building Permit	<u>35.00</u>	001 322 10 00	Water Assessment
Plan Review Pre-payment		001 322 10 20	Meter Deposit
Plan Review Balance		001 322 10 20	Sewer Assessment
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection
Grading/Excavating		001 322 10 00	Roadway Access
Floodplain Mgt.		001 345 89 00	TOTAL
School Impact Fees		350 345 85 00	<u>59.50</u>
Fire Impact Fees		351 345 85 00	Receipt Number
Park Impact Fees		352 345 85 00	Amount
Transp. Impact Fees		353 345 85 00	Date
			Initial
			<u>96240</u>
			<u>59.50</u>
			<u>6-5-14</u>
			<u>JM</u>

RECEIVED
 JUN 03 2014
 City of Woodland
 Building Dept
 Planning Dept

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. 214-073
 Date 6/5/14

Applicant Name FRED WILLSON	Title (if owner, state OWNER)	Daytime Phone:
Property Owner USNR		
Contractor ENTEK CORP	Business Address, City, State & Zip 1021 COLUMBIA BLVD LV 98683	
City of Woodland Business License Number 0000390	Washington State Labor & Industries Number and Expiration Date ENTEK C * 893 WE 1-7-15	
Project Address 1981 Schuerman Wy 558 ...	Subdivision/Legal Description	Parcel Number 5-07680100

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

Describe Project and Specific Use in Detail:

**TAP OFF OF EXISTING LUNCHROOM SYSTEM TO
 CONDITION NEW CNC OFFICE SPACE**

MOVE LOCATION OF THERMOSTAT

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 4,900.00

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

APPLICANT'S SIGNATURE

10-5-14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 1981 Schuerman Way		<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B PAID			
Permit Approval	Initial	Date	COMMENTS				
Mechanical	WW	6-10-14	JUN 12 2014				
Plumbing			CITY OF WOODLAND				
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		101	001 322 10 00	Other			
Other				Other			
Received By: JM	Date: 6-12-14	Receipt Number: 96357	Total Due \$ 101.00				

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. 214-074
 Date 6/5/14

Applicant Name FRED WILLSON		Business Address, City, State & Zip 1021 COLUMBIA, LV WA 98632	
Property Owner COLUMBIA RIVER CAB		Washington State Labor & Industries Number and Expiration Date ENTEK C * 893WE 1-7-15	
Contractor ENTEK CORP		City of Woodland Business License Number 000034.0	
Project Address 300 N. PERLIN		Parcel Number 5-0735	

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

Describe Project and Specific Use in Detail:

REPLACE BROKEN ST AK WITH LIKE REPLACEMENT.
UNIT SERVES MCC #4 IN ROLLER MILL.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 9,800.00

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.

J. Willson
 APPLICANT'S SIGNATURE

6-5-14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 300 N. PERLIN		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: PAID			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	<u>lw</u>	<u>6-10-14</u>	JUN 12 2014				
Plumbing			CITY OF WOODLAND				
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00	Other			
Mechanical Permit		<u>95.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date: <u>6-12-14</u>	Receipt Number: <u>96358</u>	Total Due \$ <u>95.00</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. 214-075

Date Received: 6-16-14

ⓐ

APPLICANT		Name: <u>RICHARD TAPANI</u>	
Mailing Address, City, State Zip			
PROPERTY OWNER	Name: <u>Same</u>	Phone: <u>11</u>	
Mailing Address, City State, Zip		<u>Same</u>	Email Address:
GENERAL CONTRACTOR	Business Name	Contact Person	
Mailing Address, City State, Zip		Phone:	
City Business License #	State Contractors License #	Email Address:	
PROPERTY ADDRESS <u>1804 Clatsop St</u>		Lot #	Parcel Number <u>507006137</u>
Fill & Grade/Excavation with this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Quantity of Earthwork: _____ CY		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition	<input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Other
Occupancy (uses): <u>N/A</u>		No. of Units	No. of Bedrooms
		No. of Stories	Building Height
			No. of Bathrooms
			Total Square Feet

Describe Project and Specific Use in Detail: I plan to build a stained cedar fence that will be 4' tall adjacent to the street and the 15' setbacks where it will then be 6' tall. This fence is for privacy and safety of kids

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 1200

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: [Signature] Date: 5-2-14
 Applicant's Signature: [Signature] Date: 5-2-14

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front: _____ RT Side: _____ LT Side: _____ Back: _____ Zone: LDR Permit Type: 32 PAID Flood Zone: _____

Approvals	Initial	Date	Comments
Civil Plans			
Planning Department			
Drainage/Erosion Control			
Fire/Life Safety			
Building	<u>WW</u>	<u>6-16-14</u>	

JUN 16 2014

Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>\$ 55.00</u>	001 322 10 00	Water Assessment		421 368 10 10
Plan Review Pre-payment		001 322 10 20	Meter Deposit		401 389 00 00
Plan Review Balance		001 322 10 20	Sewer Assessment		422 368 10 00
Surcharge		001 322 10 00	Sewer Inspection		402 369 90 10
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00
Floodplain Mgt.		001 345 89 00	TOTAL	<u>\$ 55.00</u>	
School Impact Fees		350 345 85 00	Receipt Number	<u>96386</u>	Amount: <u>855.00</u> Date: <u>6-16-14</u> Initial: <u>JM</u>
Fire Impact Fees		351 345 85 00			
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

9

FOR OFFICE USE ONLY
 Permit No. 214-078
 Date 6/17/14

Applicant Name MAT JACOBS		Title (if owner, state OWNER) OWNER	
Property Owner MAT JACOBS		Mailing Address, City, State & Zip	
Contractor Full throttle / self-plumbing		Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number 1280	Washington State Labor & Industries Number and Expiration Date	REQUIRE	
Project Address 720 Beechwood St		Subdivision/Legal Description	Parcel Number 5-0094023
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 checked="" type="checkbox"/> Addition <input checked="" type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING:		MECHANICAL:	
Fixtures (or set) on one trap 3	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)	_____
Gas Piping Systems of 1 to 5 vents	Repair/Alteration/Addition to Appliance	Hood w/ mechanical exhaust	_____
Gas Piping Systems over 5 vents	Boilers/Compressors to 3hp (heat pump)	Incinerator, domestic type	_____
Industrial Waste Interceptors	• from 3 to 15 hp	• commercial or industrial	_____
Installations/Alterations/ Repairs of:	• from 15 to 30 hp	Appliance/Equipment Item (UMC)	_____
• Water Piping 1	• from 30 to 50 hp	Fuel-Gas Piping System Outlets	_____
• Water Treating Equipment	• over 50 hp	Haz. Process Piping System Outlets	_____
• Medical Gas Piping	Absorption Systems to 100,000 BTU/h	Non-Haz. Proc. Piping System Outlets	_____
Fixtures with drain/vent repairs or alterations	• from 100,000 to 500,000 BTU/h	Commercial Hood Type 1	_____
Lawn Sprinkler System with Backflow Device	• from 500,000 to 1,000,000 BTU/h	Dust Collection System	_____
Vacuum Breakers not with Sprinkler	• from 1,000,000 to 1,750,000 BTU/h	Other	_____
Backflow Protective Devices to 2" diameter	• over 1,750,000 BTU/h		_____
Backflow Protective Devices over 2" diameter			_____

Describe Project and Specific Use in Detail: Plumbing for New Bathroom

PAID

JUN 17 2014

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 2,000.00 **CITY OF WOODLAND**

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

[Signature]
 APPLICANT'S SIGNATURE

6-17-14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 720 Beechwood		<input type="checkbox"/> First Plumbing Permit		Permit Type: 36		Flood Zone: B	
<input type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical							
Plumbing	WW	6-17-14					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		80.00	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Received By: JM	Date: 6-17-14	Receipt Number: 96400	Total Due \$ 80.00				

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

4

FOR OFFICE USE ONLY
 Permit No. 214-079
 Date 6/17/14

Applicant Name BLAIRCO INC		Title (if owner, state OWNER) HVAC contractor	
Property Owner DEL SWANSON		Mailing Address, City, State & Zip 115 Davidson Ave Woodland 98674	
Contractor BLAIRCO INC		Business Address, City, State & Zip 7609 MacArthur Blvd W 98664	
City of Woodland Business License Number 49.1		Washington State Labor & Industries Number and Expiration Date BLAIRCO 08751	
Project Address 115 Davidson Ave Woodland		Subdivision/Legal Description REQUIRE	Parcel Number 5-0450
Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input checked="" type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING:	MECHANICAL:
Fixtures (or set) on one trap _____	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 _____

Describe Project and Specific Use in Detail: Existing 2-ton split system heat pump. Heat pump
Locates on the roof, Air Handler above t-bar ceiling in office area.
We are replacing with like in kind with 15-SEER cooling and
8.5- HSPF heating, programmable thermostat with outdoor sensor.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 6305.00 JUN 17 2014

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.

Steve Voreis
 APPLICANT'S SIGNATURE

6-17-14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 115 Davidson Ave		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: B			
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	WV	6-17-14					
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		90.00	001 322 10 00	Other			
Other				Other			
Received By: Cash	Date: 6-17-14	Receipt Number: 96401	Total Due \$ 90.00				

Plumbing & Mechanical Permit Application

City of Woodland, Washington - Building Department
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FOR OFFICE USE ONLY
 Permit No. 214-081
 Date 6/23/14

Applicant Name ^{REQUIRED} ALKOR CONSTRUCTION N.W. F.N.K.		Title (if owner, state OWNER) OWNER	
Property Owner ^{REQUIRED} Becky Bjur		Daytime Phone:	
Contractor ^{REQUIRED} Merriman Plumbing / All Around Mechanical		Business Address, City, State & Zip	
Daytime Phone:		Daytime Phone:	
City of Woodland Business License Number ^{REQUIRED} 205.0 / 22.0		Washington State Labor & Industries Number and Expiration Date ^{REQUIRED}	
Project Address ^{REQUIRED} 931 Dale St.		Subdivision/Legal Description ^{REQUIRED}	
Parcel Number ^{REQUIRED} 5-0298			
Type of Facility: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input checked="" type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING: Fixtures (or set) on one trap <u>7</u> Building or Trailer Park Sewer <u>1</u> Rainwater System Drains (inside) _____ Private Sewage System _____ Water Heaters and/or Vents <u>1</u> Gas Piping Systems of 1 to 5 vents _____ Gas Piping Systems over 5 vents _____ Industrial Waste Interceptors _____ Installations/Alterations/ Repairs of: • Water Piping <u>1</u> • Water Treating Equipment _____ • Medical Gas Piping _____ Fixtures with drain/vent repairs or alterations _____ Lawn Sprinkler System with Backflow Device <u>1</u> Vacuum Breakers not with Sprinkler _____ Backflow Protective Devices to 2" diameter _____ Backflow Protective Devices over 2" diameter _____	MECHANICAL: Furnace up to 100,000 BTU <u>1</u> Furnace over 100,000 BTU _____ Floor Furnace installation or relocation _____ Heater (suspended, recessed or floor) _____ Vent not included with appliance _____ Repair/Alteration/Addition to Appliance _____ Boilers/Compressors to 3hp (heat pump) _____ • 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 _____
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Air Handling Units up to 10,000 CFM <u>X</u> • over 10,000 CFM _____ Evaporative Cooler (non portable) _____ Ventilation Fan w/ single duct <u>04</u> Ventilation System (not heat or a/c) _____ Hood w/ mechanical exhaust _____ Incinerator, domestic type _____ • commercial or industrial _____ Appliance/Equipment Item (UMC) _____ Fuel-Gas Piping System Outlets _____ Haz. Process Piping System Outlets .. _____ Non-Haz. Proc. Piping System Outlets _____ Commercial Hood Type 1 _____ Dust Collection System _____ Other _____
--

Describe Project and Specific Use in Detail: Single Family Residence.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 12,000.00

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

Becky Bjur ^{REQUIRED}
 APPLICANT'S SIGNATURE

6/23/14 ^{REQUIRED}
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>931 Dale</u>		<input checked="" type="checkbox"/> First Plumbing Permit <input checked="" type="checkbox"/> First Mechanical Permit		Permit Type: 36	Flood Zone: B PAID		
Permit Approval	Initial	Date	COMMENTS				
Mechanical	<u>WW</u>	<u>6-25-14</u>	JUN 26 2014 CITY OF WOODLAND				
Plumbing	<u>WW</u>	<u>6-25-14</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>\$ 159.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>96.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date <u>6-26-14</u>	Receipt Number <u>96474</u>	Total Due <u>\$ 255.00</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. 214-082
 Date 6-24-14

Applicant Name Doug Koloman		Title (if owner, state OWNER) General Manager	
Property Owner Sunlight Supply			
Contractor SSM Mechanical Services		Business Address, City, State & Zip 740 N Knott Road Woodland OR 97236	
City of Woodland Business License Number REQUIRED		Washington State Labor & Industries Number and Expiration Date REQUIRED STREISM 336 RA	
Project Address Woodland wa 98674 1560 Down River Dr		Subdivision/Legal Description REQUIRED	Parcel Number REQUIRED 5-0607
Type of Facility: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input checked="" 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	_____
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	_____

Describe Project and Specific Use in Detail:
Replacement of a 3 ton RTU w/curb adapter

PAID
JUN 24 2014

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 4,200.00 **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.

Doug Koloman
 APPLICANT'S SIGNATURE

6/24/14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 1560 Down River Dr		<input type="checkbox"/> First Plumbing Permit		Permit Type: 36		Flood Zone: B	
		<input type="checkbox"/> First Mechanical Permit					
Permit Approval	Initial	Date	COMMENTS				
Mechanical	lw	6-24-14					
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		\$ 65.00	001 322 10 00	Other			
Other				Other			
Received By: JM	Date	Receipt Number		Total Due			
	6/24/14	96434		\$ 65.00			

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. 214-084
 Date 6/24/14

Applicant Name HOWARD M. WEILL	Title (if owner, state OWNER) MARKETING MANAGER	
Property Owner HOWARD M. WEILL		
Contractor PLUMBING SYSTEMS SOLUTIONS/NC	Business Address, City, State & Zip PO BOX 1612, WOODLAND, WA 98674	
City of Woodland Business License Number 14-0000 40.1	Washington State Labor & Industries Number and Expiration Date PLUMBS5 902LD 6-4-16	Parcel Number 5-012 8000-8
Project Address 211 5th Street	Subdivision/Legal Description REQUIRED	
Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____	Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING: Fixtures (or set) <u>3</u> Building or Trailer Park Sewer Rainwater System Drains (inside) Private Sewage System Water Heaters and/or Vents <u>2</u> Gas Piping Systems of 1 to 5 vents Gas Piping Systems over 5 vents Industrial Waste Interceptors Installations/Alterations/ Repairs of: • Water Piping <u>1</u> • Water Treating Equipment • Medical Gas Piping Fixtures with drain/vent repairs or alterations <u>2</u> Lawn Sprinkler System with Backflow Device Vacuum Breakers not with Sprinkler Backflow Protective Devices to 2" diameter Backflow Protective Devices over 2" diameter	MECHANICAL: 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:

WE ARE ADDING 2- HAND SINKS W/ TANKLESS WATER HEATERS & SEWAGE PUMPS IN WARE HOUSE

WE ARE REMOVING 1- EXISTING SINK + RELOCATING INTO AREA WITH EXISTING PLUMBING

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 16,700

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

6/23/14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 211 5th St	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B PAID				
Permit Approval	Initial	Date	COMMENTS				
Mechanical			JUN 25 2014				
Plumbing	WL	6-25-14	CITY OF WOODLAND				
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		120.00	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Received By: JM	Date: 6-25-14	Receipt Number: 96445	Total Due \$ 120.00				

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. 214-085
 Date 6-23-14

Applicant Name PAUL EDWIN LLC		Title (if owner, state OWNER) CONTRACTOR	
Property Owner HSP PROPERTIES / STAVE OLIVA			
Contractor PAUL EDWIN LLC		Business Address, City, State & Zip PO BOX 876 WOODLAND, WA 98074	
City of Woodland Business License Number 000241.4		Washington State Labor & Industries Number and Expiration Date PROFELE88800	
Project Address 1365 Lewis River Rd, Woodland, WA 98074		Subdivision/Legal Description REQUIRED	Parcel Number 5-0015
Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input checked="" type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input checked="" type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING: Fixtures (or set) on one trap <u>8</u> 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 <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	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:

Replace water pipe system in "Hi-School Pharmacy" Building
8 fixtures. Bad copper piping being replaced.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 10,000.00

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

Paul Edwin REQUIRED
 APPLICANT'S SIGNATURE

06/23/14
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 1365 Lewis River Rd		<input type="checkbox"/> First Plumbing Permit	Permit Type: 36	Flood Zone: B			
		<input type="checkbox"/> First Mechanical Permit		PAID			
Permit Approval	Initial	Date	COMMENTS				
Mechanical			JUN 26 2014				
Plumbing	<u>WV</u>	<u>6-25-14</u>					
Fire/Life Safety			CITY OF WOODLAND				
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>130</u>	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Received By: <u>JM</u>	Date <u>6-26-14</u>	Receipt Number <u>96476</u>	Total Due <u>\$ 130.00</u>				



Commercial & Multifamily Building Permit Application

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

FOR OFFICE USE ONLY

Permit No. 214-086

Date Received: 5-21-14

9

APPLICANT		Name City of Woodland	Phone: 360-225-7999
Mailing Address, City, State Zip PO Box 9, Woodland, WA 98674		Email Address: steppb@ci.woodland.wa.us	
PROPERTY OWNER		Name SAME AS ABOVE	Phone:
Mailing Address, City State, Zip		Email Address:	
GENERAL CONTRACTOR		Business Name NA - Work done by property owner	Contact Person
Mailing Address, City State, Zip		Phone:	
City Business License #		State Contractors License #	Email:
PROPERTY ADDRESS		Parcel Number #508800100	
NA <u>Scott Hill Park - Permit is under 300 E Scott in ASP</u>			
Fill & Grade/Excavation with this project?		Type of Project	
Yes [x] No [] Total Quantity of Earthwork: <u>1,200</u> CY		<input type="checkbox"/> New <input type="checkbox"/> Add On <input type="checkbox"/> Demolition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Other Fill hole	
Occupancy (uses):		No. of Units	No. of Bedrooms
Land to be developed as a park in the future.		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	
Describe Project and Specific Use in Detail: An approximately 100' x 200' x 10' deep hole was dug out on this property 7-8 years ago as fill for the road grade to this property by a developer. Project consists of placing up to 1,200 cubic yards of excess fill City currently has at the shop to partially fill the hole.			

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 24,000 (\$20/cubic yard)

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

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

Owner's Signature: Bart Stepp Date: 5/21/14

Applicant's Signature: Bart Stepp Date: 5/21/14

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:		Zone: <u>P/Q-P/E</u>	Permit Type: <u>39</u>	Flood Zone: <u>B</u>
Application Complete:		Comments:		
Approvals	Initial	Date		
Civil Plans				
Planning Department				
Drainage/Erosion Control				
Fire/Life Safety				
Building	<u>WW</u>	<u>6-26-14</u>		
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>0</u>	001 322 10 00	Fire Impact Fees	<u>0</u>
Plan Review Pre-payment	<u>0</u>	001 322 10 20	Park Impact Fees	<u>0</u>
Plan Review Balance	<u>49.25</u>	001 322 10 20	Roadway Access	<u>0</u>
Surcharge	<u>0</u>	001 322 10 00	TOTAL	<u>258.25</u>
Grading/Excavating	<u>209.00</u>	001 322 10 00	Receipt Number	Amount
Floodplain Mgt.	<u>0</u>	001 345 89 00	<u>96466</u>	<u>258.25</u>
School Impact Fees	<u>0</u>	350 345 85 00	Date	Initial
Transp. Impact Fees	<u>0</u>	353 345 85 00	<u>6-26-14</u>	<u>LC</u>
			<u>96464</u>	<u>LC</u>
			<u>258.25</u>	<u>6-26-14</u>
			<u>6-26-14</u>	<u>LC</u>



Commercial & Multifamily Building Permit Application

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

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

367307/Woodland

FOR OFFICE USE ONLY

Permit No. 214-087

Date Received: 6-24-14

APPLICANT Name: Nicole Eoi for McDaniel Cellular Telephone Company

PROPERTY OWNER Name: Columbia River Carbonates

GENERAL CONTRACTOR Business Name: Pilgrim Communications, Inc. Contact Person: Rick Johnson

City Business License # _____ State Contractors License # _____

PROPERTY ADDRESS: 289 N. PEKIN Rd. Woodland, WA Parcel Number: 507350110

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

Occupancy (uses): U occupancy

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 (2) new antennas and (4) new coax to an existing cell tower. Remove (1) microwave and (2) antennas from the tower.

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

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

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

Owner's Signature: Redacted lease attached Date: _____

Applicant's Signature: [Signature] Date: 6/18/14

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Comments:	Application Complete:	Zone:	Permit Type: <u>31</u>	Flood Zone: <u>B</u>
Civil Plans	Initial	Date	Comments: PAID	
Planning Department			JUN 27 2014	
Drainage/Erosion Control				
Fire/Life Safety				
Building	<u>LV</u>	<u>6-26-14</u>		
Fees Due	Amount	Account	Fees Due	Amount
Building Permit	<u>251.25</u>	001 322 10 00	Fire Impact Fees	<u>0</u>
Plan Review Pre-payment	<u>0</u>	001 322 10 20	Park Impact Fees	<u>0</u>
Plan Review Balance	<u>163.31</u>	001 322 10 20	Roadway Access	<u>0</u>
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL	\$ 419.06
Grading/Excavating	<u>0</u>	001 322 10 00	Receipt Number	Amount
Floodplain Mgt.	<u>0</u>	001 345 89 00	<u>96492</u>	<u>419.06</u>
School Impact Fees	<u>0</u>	350 345 85 00	Date	<u>6/27/14</u>
Transp. Impact Fees	<u>0</u>	353 345 85 00	Initial	<u>JM</u>

Plumbing & Mechanical Permit Application

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

FOR OFFICE USE ONLY
 Permit No. 214-088
 Date 6/25/14

Applicant Name <u>Joel Leminger</u>	Title (if owner, state OWNER) <u>Twin City</u>
Property Owner <u>McDonalds</u>	
Contractor <u>Twin City Service Co. INC</u>	Business Address, City, State & Zip <u>PO 567 Kelso wa 98626</u>
City of Woodland Business License Number <u>14 000 305.6</u>	Washington State Labor & Industries Number and Expiration Date <u>984 667 TWIN CSC 000135</u>
Project Address <u>1601 Pacific Ave</u>	Subdivision/Legal Description <u>REQUIRED</u>
	Parcel Number <u>5-04219102</u>

Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____	Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> <u>replace</u>
---	---

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 _____ <input checked="" type="checkbox"/>	• 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) _____
Gas Piping Systems of 1 to 5 vents _____	Repair/Alteration/Addition to Appliance _____	Hood w/ mechanical exhaust _____
Gas Piping Systems over 5 vents _____	Boilers/Compressors to 3hp (heat pump) _____	Incinerator, domestic type _____
Industrial Waste Interceptors _____	• from 3 to 15 hp _____ <input checked="" type="checkbox"/>	• commercial or industrial _____
Installations/Alterations/ Repairs of:	• from 15 to 30 hp _____	Appliance/Equipment Item (UMC) _____
• Water Piping _____	• from 30 to 50 hp _____	Fuel-Gas Piping System Outlets _____
• Water Treating Equipment _____	• over 50 hp _____	Haz. Process Piping System Outlets .. _____
• Medical Gas Piping _____	Absorption Systems to 100,000 BTU/h _____	Non-Haz. Proc. Piping System Outlets _____
Fixtures with drain/vent repairs or alterations _____	• from 100,000 to 500,000 BTU/h _____	Commercial Hood Type 1 _____
Lawn Sprinkler System with Backflow Device _____	• from 500,000 to 1,000,000 BTU/h _____	Dust Collection System _____
Vacuum Breakers not with Sprinkler _____	• from 1,000,000 to 1,750,000 BTU/h _____	Other _____
Backflow Protective Devices to 2" diameter _____	• over 1,750,000 BTU/h _____	
Backflow Protective Devices over 2" diameter _____		

Describe Project and Specific Use in Detail:
Replace older roof top packaged Air
Conditioner with gas heat, new unit of same make
+ model 1 7/8 ton AC
like for like replacement.

PAID

JUN 27 2014

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 10500

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.

Joel Leminger
REQUIRED
 APPLICANT'S SIGNATURE

6-25-14
REQUIRED
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1601 Pacific Ave</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>B</u>
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Permit Approval	Initial	Date	COMMENTS
Mechanical	<u>WV</u>	<u>6-26-14</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>\$ 105.00</u>	001 322 10 00	Other			
Other				Other			

Received By: <u>JM</u>	Date: <u>6/27/14</u>	Receipt Number: <u>96500</u>	Total Due: <u>\$ 105.00</u>
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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. 214-089
 Date 6/25/14

Applicant Name BOB MONTGOMERY		Title (if owner, state OWNER) GENERAL CONTRACTOR	
Property Owner WSCO		Daytime Phone:	
Contractor MONTGOMERY DEVELOPMENT		Business Address, City, State & Zip 2870 HWY 212 BERING 0297009	
City of Woodland Business License Number 14-000212-1		Washington State Labor & Industries Number and Expiration Date CCMONTGDC096K3	
Project Address 1155 HOFFMAN		Subdivision/Legal Description REQUIRE	Parcel Number 5-0249
Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____		Work Type: <input type="checkbox"/> Demolish <input checked="" type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING:		MECHANICAL:	
Fixtures (or set) on one trap <u>1</u>	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) .. _____	
Gas Piping Systems of 1 to 5 vents _____	Repair/Alteration/Addition to Appliance _____	Hood w/ mechanical exhaust _____	
Gas Piping Systems over 5 vents _____	Boilers/Compressors to 3hp (heat pump) _____	Incinerator, domestic type _____	
Industrial Waste Interceptors _____	• from 3 to 15 hp _____	• commercial or industrial _____	
Installations/Alterations/ Repairs of:	• from 15 to 30 hp _____	Appliance/Equipment Item (UMC) _____	
• Water Piping <u>1</u>	• from 30 to 50 hp _____	Fuel-Gas Piping System Outlets _____	
• Water Treating Equipment _____	• over 50 hp _____	Haz. Process Piping System Outlets .. _____	
• Medical Gas Piping _____	Absorption Systems to 100,000 BTU/h _____	Non-Haz. Proc. Piping System Outlets _____	
Fixtures with drain/vent repairs or alterations <u>1</u>	• from 100,000 to 500,000 BTU/h _____	Commercial Hood Type 1 _____	
Lawn Sprinkler System with Backflow Device _____	• from 500,000 to 1,000,000 BTU/h _____	Dust Collection System _____	
Vacuum Breakers not with Sprinkler _____	• from 1,000,000 to 1,750,000 BTU/h _____	Other _____	
Backflow Protective Devices to 2" diameter <u>1</u>	• over 1,750,000 BTU/h _____		
Backflow Protective Devices over 2" diameter _____			

Describe Project and Specific Use in Detail:

1-FLOOR SINK 1-3/4" RP 009 BACKFLOW

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 650.00

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


 APPLICANT'S SIGNATURE

6-25-2014
 DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: 1155 Hoffman		<input type="checkbox"/> First Plumbing Permit		Permit Type: 36		Flood Zone: B	
<input type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical			PAID				
Plumbing	WW		JUN 26 2014				
Fire/Life Safety			CITY OF WOODLAND				
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		85.00	001 322 10 00	Other			
Mechanical Permit			001 322 10 00	Other			
Other				Other			
Received By: JM	Date 6-26-14	Receipt Number 96477	Total Due \$85.00				