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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 213-084
Date 5-30-13

Applicant Name <i>Chris Conrad</i>	Title (if owner, state OWNER) <i>Contractor</i>	Daytime Phone: [REDACTED]
Property Owner <i>USNR</i>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <i>ENTERK Corp.</i>	Business Address, City, State & Zip <i>1021 Columbia</i>	Daytime Phone: <i>(360) 423-3079</i>
City of Woodland Business License Number <i>34.0</i>	Washington State Labor & Industries Number and Expiration Date <i>ENTERCK*893WE</i>	Expiration Date <i>7/14/15</i>
Project Address <i>1981 Schurman Way</i> <i>558 Robinson Rd.</i>	Subdivision/Legal Description <i>REQUIRED</i>	Parcel Number <i>5-07880100</i>

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 _____	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 _____	• 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: *Like for Like replacement of existing Split Heat Pump System.*

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 9,100

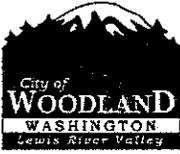
I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.

[REDACTED SIGNATURE]

5/30/2013
DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <i>1981 Schurman Way</i>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: 36	Flood Zone: B
Permit Approval	Initial	Date	COMMENTS
Mechanical	<i>lw</i>		
Plumbing			
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		<i>65.00</i>	001 322 10 00
Other			Other
Received By: <i>cash</i>	Date: <i>5-30-13</i>	Receipt Number: <i>40887</i>	Total Due: \$ 65.00



PAID

**One and Two Family Building
Permit Application**

MAY 3 Building Department, 230 Davidson Ave., Woodland, WA 98674
Phone: (360) 225-7299

PRINT IN INK OR TYPE

CITY OF WOODLAND (Separate Mechanical & Plumbing Permits Required)

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FOR OFFICE USE ONLY

Permit No. 213-083

Date Received: 5-30-13

APPLICANT		Name: <u>PERRY SCHURMAN</u>	Phone: [REDACTED]
Mailing Address, City, State, Zip		[REDACTED]	Email Address:
PROPERTY OWNER		Name: <u>PERRY SCHURMAN (contract)</u>	Phone: [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	Email Address:
GENERAL CONTRACTOR		Business Name: <u>Self</u>	Contact Person
Mailing Address, City State, Zip		[REDACTED]	Phone:
City Business License #		State Contractors License #	Email Address:
Property Address		<u>431 Bozarth St Woodland, WA 98674</u>	Parcel Number <u>50178</u>
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: <u>CY</u>		Type of Project [] New [] Remodel [X] Add On [] Demolition [] Other	
Occupancy (uses): <u>residential</u>		No. of Units	No. of Bedrooms
		<u>1</u>	<u>2</u>
		No. of Stories	Building Height
		<u>1</u>	<u>18'</u>
			Total Square Feet
			<u>2600'</u>
Describe Project and Specific Use in Detail:			
<u>Subfloor/Decking & Wall Fire damage repairs in utility room (frame, joint & beams) + Rafters repair</u>			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>1000-</u>			
<p>NOTICE: Separate permits and approvals may be required for this project. This permit may expire if work does not commence within 180 days of approval or if work is suspended or abandoned for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project.</p> <p>I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is erroneous, the permit or approval may be revoked. It is the responsibility of the applicant to arrange for ANY INSPECTIONS for this project.</p>			
Owner's Signature		Date <u>5-30-13</u>	
Applicant's Signature		Date <u>5-30-13</u>	

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					
Drainage/Erosion Control					
Fire/Life Safety					
Building					
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>104.75</u>	001 322 10 00	Water Assessment		421 368 10 10
Plan Review Pre-payment	<u>-</u>	001 322 10 20	Meter Deposit		401 389 00 00
Plan Review Balance	<u>-</u>	001 322 10 20	Sewer Assessment		422 368 10 00
Surcharge	<u>4.50</u>	001 322 10 00	Sewer Inspection		402 369 90 10
Grading/Excavating		001 322 10 00	Roadway Access		104 322 40 00
Floodplain Mgt.		001 345 89 00	TOTAL	\$109.25	
School Impact Fees		350 345 85 00	Receipt Number	Amount	Date
Fire Impact Fees		351 345 85 00	<u>90885</u>	<u>109.25</u>	<u>5/30/13</u>
Park Impact Fees		352 345 85 00			<u>MG</u>
Transp. Impact Fees		353 345 85 00			

\$109.25

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

FOR OFFICE USE ONLY
Permit No. 213-081
Date 5/23/13 By CJ

Applicant (sign below): Portland Mechanical Contractors	Title/Relationship Subcontractor	Daytime Phone [REDACTED]
Property Owner: N/O Properties	Mailing Address, City, State, & Zip [REDACTED]	Daytime Phone
Contractor:	Business Address, City, State, & Zip	Business Phone
City of Woodland Business License No.: 13-000244.5	Washington State Dept. of Labor & Industries License PORTLMC024KA	Expiration Date 2/27/14
Project Address: Dollar Tree 629 Goerig Street	Subdivision/Legal Desc.: Lot Block	Parcel No.: 5-0127

Type of Facility: <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Other (specify)	Work Type: <input type="checkbox"/> New <input checked="" type="checkbox"/> Remodel/Alter	
<input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational	<input type="checkbox"/> Demolish <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> Add'n	
PLUMBING: #	EQUIPMENT: #	
Fixtures (or set) on one trap	Furnace up to 100,000 Btu	Air Handling Units up to 10,000 CFM
Building or Trailer Park Sewer	Furnace over 100,000 Btu	Over 10,000 CFM
Rainwater System Drains (inside)	Floor Furnace installation or relocation	Evaporative Cooler (non-portable)
Private Sewage System	Heater (suspended, recessed or floor)	Ventilation fan w/ single duct
Water Heaters and/or Vents	Vent not included w/ appliance	Ventilation System (not heat or A/C)
Gas Piping Systems of 1 to 5 vents	Repair/Alteration/Add'n to appliance	Hood w/ mech exhaust
over 5 vents	Boilers/Compressors up to 3 hp	Incinerator, domestic type
Industrial Waste Interceptors	from 3 to 15 hp	commercial or industrial
Installations/Alterations/Repairs of	from 15 to 30 hp	Appliance/Equipment Item (UMC)
water piping	from 30 to 50 hp	Fuel-Gas Piping System Outlets
water treating equipment	over 50 hp	Haz. Process Piping System Outlets
Fixtures w/ drain/vent repair/alteration	Absorption Systems up to 100,000 Btu/h	Non-Haz. Proc. Piping System Outlets
Lawn Sprinkler System w/ backflow dev.	from 100,000 to 500,000 Btu/h	
Vacuum Breakers not w/ sprinkler	from 500,000 to 1,000,000 Btu/h	
Backflow Protective Devices to 2"	from 1,000,000 to 1,750,000 Btu/h	
over 2" diameter	over 1,750,000 Btu/h	

Describe Project and Specific Use in Detail:
Install new (1) 2-door cooler; (1) 3-door freezer; (1) 4-door freezer reach-ins. Install new (1) walk-in freezer and (1) walk-in cooler. All units are self-contained, have evapo-way pans and less than 10lbs of refrigerant. No remote condensers, no external piping, no floor drain.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 7000.⁰⁰

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

APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>629 Goerig</u>	<input type="checkbox"/> First Plumb. Permit Application	Date: <u>5/23/13</u>
	<input type="checkbox"/> First Mech. Permit	Reviewed by: <u>CJ</u>
Permit Approval	Initial	Date
Mechanical		
Plumbing		
Fire/Life Safety		
FEES DUE	R'qd	Amount
Account	FEES DUE	R'qd
Amount	Account	Amount
Plumbing Permit	001 322 10 00	Fire/Life Safety
Mechanical Permit	95.00	001 322 10 20
	Account	Plan Review
	Account	001 322 10 20
	Receipt # <u>90810</u>	Date <u>5/23/13</u>

Per Webb Wilbanks - Permit fee = \$95.00. Permit Type = 36

P.C.G.

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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. 213-075
Date 5/22/13 *(initials)*

Applicant Name <u>Errett Bates</u>	Title (if owner, state OWNER) <u>Owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>United Investors</u>	Mailing Address, City, State & Zip	Daytime Phone: [REDACTED]
Contractor <u>Bates Plumbing</u>	Business Address, City, State & Zip <u>1020 Atlantic Woodland WA</u>	Daytime Phone:
City of Woodland Business License Number <u>000039.9</u>	Washington State Labor & Industries Number and Expiration Date <u>100,506-00</u>	
Project Address <u>1020 Atlantic Ave</u>	Subdivision/Legal Description <u>REQUIRED</u>	Parcel Number <u>5-0050</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 checked="" type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input checked="" type="checkbox"/> Addition <input type="checkbox"/> New <input checked="" type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

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

Describe Project and Specific Use in Detail:
Add waterheater in back room. Cap 3 primer lines and relocate 2 trap primers. Cut cap mop basin and floor drains in floor and ceiling. Water Heater previously removed.

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

I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit may be revoked.
[REDACTED SIGNATURE] S/23/2013
APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1020 Atlantic Ave</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>B</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical			
Plumbing	<u>WW</u>	<u>5-22-13</u>	
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>70.00</u>	001 322 10 00
Mechanical Permit			001 322 10 00
Other			Other
Received By: <u>SR</u>	Date: <u>5/22/13</u>	Receipt Number: <u>90794</u>	Total Due: <u>\$ 70.00</u>

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

2.00

FOR OFFICE USE ONLY
 Permit No. 313069
 Date 5/21/13

Applicant Name REQUIRED STEVE SLACK		Title (if owner, state OWNER) CONTRACTOR		Property Owner REQUIRED DAN HERRMANN	
Mailing Address, City, State & Zip			Phone #		Mobile #
Contractor REQUIRED ADVANCED PACIFIC SIGN INC.		Contact Person/Title REQUIRED STEVE SLACK			
Mailing Address, City, State & Zip 1550 DOWN RIVER DRIVE WOODLAND WA			Phone # 225 5826		Mobile # 901 4200
City of Woodland Business License Number 12-000053		Washington State Labor & Industries Number and Expiration Date REQUIRED ADVANCE 507108 7-19-13			
Property Address REQUIRED 1421 PACIFIC AVE		Subdivision/Legal Description REQUIRED		Parcel Number REQUIRED 5-04270923	
Will this structure be within the 100 year floodplain? <input type="checkbox"/> YES If YES, attach a Floodplain Worksheet. <input type="checkbox"/> NO		Is any part of this property within 200 feet of a shoreline of statewide significance? <input type="checkbox"/> YES If so, a shoreline permit may be required (single family residential lots are exempt). <input type="checkbox"/> NO			
Is there or has there been any filling, grading, or excavation associated with this project? <input type="checkbox"/> YES If YES, and over 100CY, complete and attach an Excavation & Grading Worksheet <input type="checkbox"/> NO		Total Quantity of Earthwork: _____ CY			
Type of Building <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Type of Project <input type="checkbox"/> New <input type="checkbox"/> Add-on <input type="checkbox"/> Change in Use <input type="checkbox"/> Remodel <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> Demolish			
Occupancy (uses):		Sq. Feet of Use	Class/Type	No. of Units	No. of Bedrooms
			/		
			/	No. of Stories	Building Height
			/		Total Square Feet
Energy Code Compliance Residential (SFD/Duplex):		Non-Residential Envelope:		Non-Residential Mechanical:	
Type of Heating: <input type="checkbox"/> Prescriptive Path <input type="checkbox"/> Institutional <input type="checkbox"/> Educational		<input type="checkbox"/> Prescriptive Option <input type="checkbox"/> Component Design <input type="checkbox"/> System Analysis		<input type="checkbox"/> Simple System <input type="checkbox"/> Complex System <input type="checkbox"/> System Analysis	
<input type="checkbox"/> Residential <input type="checkbox"/> Industrial				<input type="checkbox"/> Prescriptive Lighting <input type="checkbox"/> Light Power Allowance <input type="checkbox"/> System Analysis	
Describe Project and Specific Use In Detail: <u>INSTALLATION OF ONE 28 SQ.FT. ILLUMINATED WALL SIGN</u>					
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ <u>2357</u> REQUIRED					

NOTICE: Separate permits and approvals may be required for this project. Every permit issued by the Administrative Authority under the provisions of the City of Woodland Municipal Code shall expire by limitation and become null and void if the work authorized by such permit is not commenced within 180 days from the date of issuance of such permit, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. All provisions of laws and ordinances governing the type of project shall be complied with whether specified herein or not. The granting of a permit or an approval does not presume to give authority to violate or cancel the provisions 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, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for a FINAL INSPECTION for this project.**

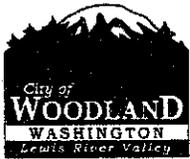
Applicant's Signature: _____ Date: May 21, 2013

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Address: <u>1421 Pacific Ave.</u>		Permit Type: <u>35</u>	Flood Zone: <u>B</u>
Other Permits Required: Plumbing Permit YES () NO () Mechanical Permit YES () NO () Fire/Life Safety YES () NO () Other YES () NO ()		Land Use Application Number: Zone: <u>C-2</u> Comp. Plan Designation:	<input type="checkbox"/> Permitted Use <input type="checkbox"/> Conditional Use <input type="checkbox"/> Other
Setbacks: Front: _____ Back: _____ Side: _____	SEPA Determination:	Action:	Issued:
	Floodplain: ()	Critical Areas: ()	Shorelines: ()

APPROVALS	Initial	Date	SPECIAL COMMENTS
Water/Sewer			
Public Works			
Planning/Environmental	<u>all</u>	<u>5/21/13</u>	
Drainage & Erosion Control			
Fire/Life Safety			
Building	<u>WA</u>	<u>5/21/13</u>	

FEES DUE		Amount	Account	FEES DUE		Amount	Account
Building Permit		<u>100.00</u>	001 332 10 00	Water Assessment		102 388 10 10	
Plan Review			001 332 10 20	Sewer Assessment		102 388 10 00	
Surcharge			001 332 10 00	Sewer Inspection		102 369 20 00	
Grading/Excavation			001 332 10 00	Roadway Access		104 322 40 00	
Fire/Light Safety			001 332 10 10				
Floodplain Mgt			001 343 39 00				
Fire Impact Fees			351 345 35 10	Receipt Number:		Amount	Date
School Impact Fees			350 345 35 00	<u>90828</u>	<u>100.00</u>	<u>5/28/13</u>	
Park Impact Fees			352 345 35 00				



Commercial & Multifamily Building Permit Application

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

Phone: (360) 225-7299

PRINT IN INK OR TYPE

(Separate Mechanical & Plumbing Permits Required)

FOR OFFICE USE ONLY

Permit No. 213-065

5-14-2013 (E.G)

E. GJ

APPLICANT		Name <u>Chilton Logging Inc.</u>	Phone: [REDACTED]
Mailing Address, City, State Zip		[REDACTED]	Email Address: [REDACTED]
PROPERTY OWNER		Name <u>Craig Chilton</u>	Phone: [REDACTED]
Mailing Address, City State, Zip		[REDACTED]	Email Address: [REDACTED]
GENERAL CONTRACTOR	Business Name <u>Chilton Logging Inc.</u>	Contact Person <u>Randy Larson</u>	Phone: [REDACTED]
Mailing Address, City State, Zip <u>115 BUTTE HILL RD Woodland wa 98674</u>		Phone: <u>360-921-1202</u>	Email: <u>Chiltonlogging@aol.com</u>
City Business License #	State Contractors License # <u>Chilton 91304</u>		
Property Address <u>1700 Down River Drive</u>		Parcel Number <u>5-06800181</u>	
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: _____ CY		Type of Project	[] New [] Add On [] Demolition [X] Remodel [] Repair [] Other
Occupancy (uses):		No. of Units	No. of Bedrooms
		No. of Bathrooms	
		No. of Stories	Building Height
		Total Square Feet	

Describe Project and Specific Use in Detail: Install three overhead garage doors at East Cable End

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 24,000.00

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 _____ Date 5/14/13
 Applicant's Signature _____ Date 5/14/13

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Setbacks: Front	Side	Back	Zone: <u>I-2</u>	Permit Type: <u>22</u>	Flood Zone: <u>B</u>
Approvals	Initial	Date	Comments		
Civil Plans					
Planning Department					
Drainage/Erosion Control					
Fire/Life Safety					
Building	<u>Wk</u>	<u>5-23-13</u>			
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	<u>377.25</u> 622.46	001 322 10 00	Fire Impact Fees		351 345 85 00
Plan Review Pre-payment	<u>0</u>	001 322 10 20	Park Impact Fees		352 345 85 00
Plan Review Balance	<u>245.21</u>	001 322 10 20	Roadway Access		104 322 40 00
Surcharge	<u>4.50</u>	001 322 10 00	TOTAL	<u>626.96</u>	
Grading/Excavating		001 322 10 00	Receipt Number	Amount	Date
Floodplain Mgt.		001 345 89 00	<u>90812</u>	<u>626.96</u>	<u>5/23/13</u>
School Impact Fees		350 345 85 00			<u>8R</u>

Commercial Building Permit Application

City of Woodland, Washington – Building Department

PRINT IN INK OR TYPE

225-7299

C.J.

FOR OFFICE USE ONLY

Permit No. **213-063**

Date Received: **5-7-13** (C.J.)

APPLICANT		Name ADK ELECTRIC INC	Phone: [REDACTED]
Mailing Address, City, State Zip		[REDACTED]	Email Address:
PROPERTY OWNER		Name UNITED INVESTMENT ONE LLC	Phone:
Mailing Address, City State, Zip		[REDACTED]	
GENERAL CONTRACTOR		Business Name ADK ELECTRIC INC.	Contact Person DEREK WILSON
Mailing Address, City State, Zip		9000 NE 90TH ST VANCOUVER WA 98662	Phone: 360-546-5155
City Business License # PENDING - Paid 5-7-13		State Contractors License # AD141E191323	Email: DEREKW@ADKELECTRICINC.COM
Property Address 1020 ATLANTIC AVE WOODLAND WA 98674		Parcel Number 50054	
Fill & Grade/Excavation with this project? Yes [] No [X] Total Quantity of Earthwork: CY		Type of Project [] New [] Add On [] Demolition [] Remodel [] Repair [] Other PAVING LOT	
Occupancy (uses): Light Pole + Footings 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: INSTALL NEW PAVING LOT POLE BASES & LIGHTS			
TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ 22,000⁰⁰			

NOTICE: Separate permits and approvals may be required for this project. Every permit issued by the Administrative Authority under the provision of the City of Woodland Municipal Code shall expire by limitation and become null and void if the work authorized by such permit is not commenced within 180 days from the date of issuance of such permit, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. All provision of laws and ordinances governing the type of project shall be complied with whether specified herein or not. The granting of a permit or an approval does not presume to give authority to violate or cancel the provision of any other federal, state or local laws regulating construction, the performance of construction, and/or operation of the project.

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

Owner's Signature: [REDACTED] Date: **5/7/2013**
 Applicant's Signature: [REDACTED] Date: **5/7/2013**

DO NOT WRITE BELOW FOR OFFICE USE ONLY

Address: 1020 Atlantic		Setbacks: Front: Side: Back:	Zone: C2	Permit Type: 15	Flood Zone: B
Approvals	Initial	Date	Comments		
Civil Plans					
Planning Department	C.J.	5-7-13			
Drainage/Erosion Control					
Fire/Life Safety					
Building	WW	5-7-13			
Fees Due	Amount	Account	Fees Due	Amount	Account
Building Permit	349.25	001 322 10 00	Fire Impact Fees		351 345 85 00
Plan Review Pre-payment	0	001 322 10 20	Park Impact Fees		352 345 85 00
Plan Review Balance	227.01	001 322 10 20	Roadway Access		104 322 40 00
Surcharge	4.50	001 322 10 00	TOTAL	580.76	
Grading/Excavating	0	001 322 10 00	Receipt Number	Amount	Date
Floodplain Mgt.	0	001 345 89 00	90494	580.76	5/9/13
School Impact Fees	0	350 345 85 00			SR

E.C.J

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. 213-061
Date 5-2-2013 *(WJW)*

Applicant Name <u>Karlsen Development LLC</u>	Title (if owner, state OWNER) <u>owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>same</u>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone:
Contractor <u>same</u>	Business Address, City, State & Zip	Daytime Phone:
City of Woodland Business License Number <u>000176.7</u>	Washington State Labor & Industries Number and Expiration Date <u>KARLSOL 9806E 7-14</u>	
Project Address <u>1761 Meriwether Ln 324 Loto Tract Apc c.g.</u>	Subdivision/Legal Description <u>Lot #19 Meriwether estates</u>	Parcel Number <u>507060119 5-07060106 c.g.</u>
Type of Facility: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____	Work Type: <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING:	MECHANICAL:	
Fixtures (or set) on one trap <u>2</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>X</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:
New construction single family

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.
[REDACTED SIGNATURE] 4-30-13
APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1761 Meriwether 324 Loto Tract</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>A</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical	<u>WJW</u>	<u>5-16-13</u>	
Plumbing	<u>WJW</u>	<u>5-16-13</u>	
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>159.00</u>	001 322 10 00
Mechanical Permit		<u>166.00</u>	001 322 10 00
Other			Other
Receipted By: <u>Loash</u>	Date: <u>5-16-13</u>	Receipt Number: <u>90706</u>	Total Due \$ <u>325.00</u>

Residential Building Permit Application

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

FOR OFFICE USE ONLY
 Permit No. 213-060
 Date 5-2-2013 (WW)

Applicant Name <u>Karlson Development Inc. owner</u>		Title (if owner, state OWNER) <u>owner</u>		Property Owner <u>Same</u>	
Mailing Address, City, State & Zip <u>Same</u>				Phone # <u>Same</u>	Mobile # <u>Same</u>
Contractor <u>Same</u>			Contact Person/Title <u>Same</u>		
Mailing Address, City, State & Zip <u>Same</u>				Phone # <u>Same</u>	Mobile # <u>Same</u>
City of Woodland Business License Number <u>000126.7</u>		Washington State Labor & Industries Number and Expiration Date <u>Ka-15069806E 7-14</u>			
Property Address <u>1761 Merimether Ln.</u>		Subdivision/Legal Description <u>Lot #19 Merimether Estates</u>		Parcel Number <u>507060119</u>	
Will this structure be within the 100 year floodplain? <input checked="" type="checkbox"/> YES If YES, attach a Floodplain Worksheet. <input type="checkbox"/> NO		Is any part of this property within 200 feet of a shoreline of statewide significance? <input type="checkbox"/> YES If so, a shoreline permit may be required (single family residential lots are exempt). <input type="checkbox"/> NO			
Is there or has there been any filling, grading, or excavation associated with this project? <input type="checkbox"/> YES If YES, and over 100CY, complete and attach an Excavation & Grading Worksheet <input type="checkbox"/> NO				Total Quantity of Earthwork: CY	
Type of Building <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Add-on <input type="checkbox"/> Change in Use <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/>			
Occupancy (uses): <u>Single family</u>		Sq. Feet of Use <u>1506</u>	Class/Type <u>1</u>	No. of Units <u>3</u>	No. of Bedrooms <u>2</u>
<u>Garage</u>		<u>452</u>	<u>1U</u>	No. of Stories <u>1</u>	Building Height <u>16 ft</u>
Energy Code Compliance Residential (SFD/Duplex): Type of Heating: <input type="checkbox"/> Residential <input type="checkbox"/> Industrial		Non-Residential Envelope: <input type="checkbox"/> Prescriptive Path <input type="checkbox"/> Institutional <input type="checkbox"/> Educational	Non-Residential Mechanical: <input type="checkbox"/> Prescriptive Option <input type="checkbox"/> Component Design <input type="checkbox"/> System Analysis	Non-Residential Lighting: <input type="checkbox"/> Simple System <input type="checkbox"/> Complex System <input type="checkbox"/> System Analysis	Non-Residential Lighting: <input type="checkbox"/> Prescriptive Lighting <input type="checkbox"/> Light Power Allowance <input type="checkbox"/> System Analysis

Describe Project and Specific Use in Detail, Also Include All Fixtures Related to Plumbing and Mechanical Uses:

New construction Single family

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

172,452.26 (w.w.)
\$45,000.00

NOTICE: Separate permits and approvals may be required for this project. Every permit issued by the Administrative Authority under the provisions of the City of Woodland Municipal Code shall expire by limitation and become null and void if the work authorized by such permit is not commenced within 180 days from the date of issuance of such permit, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. All provisions of laws and ordinances governing the type of project shall be complied with whether specified herein or not. The granting of a permit or an approval does not presume to give authority to violate or cancel the provisions 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, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for a FINAL INSPECTION for this project.**

Applicant's Signature


Date
4-30-13

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Address: <u>C.g. 324 Lola Trail 1761 Merimether Ln</u>		Permit Type: <u>1</u>	Flood Zone: <u>A</u>
Other Permits Required: Plumbing Permit YES () NO () Mechanical Permit YES () NO () Fire/Life Safety YES () NO () Other YES () NO ()		Land Use Application Number: Zone: Comp. Plan Designation:	<input type="checkbox"/> Permitted Use <input type="checkbox"/> Conditional Use <input type="checkbox"/> Other
Setbacks: Front: Back: Side:		SEPA Determination Floodplain ()	Action: Critical Areas ()
		Issued: Shorelines ()	

APPROVALS	Initial	Date	SPECIAL COMMENTS
Water/Sewer			
Public Works			
Planning/Environmental			
Drainage & Erosion Control			
Fire/Life Safety			
Building	<u>WW</u>	<u>5/16/13</u>	

FEES DUE	Amount	Account	FEES DUE	Amount	Account
Building Permit	<u>1402.55</u>	001 332 10 00	Water Assessment	<u>2940.00</u>	302 388 10 10
Plan Review	<u>311.66 + 600⁰⁰</u>	001 332 10 20	Meter Deposit	<u>630.00</u>	401 389 00 00
Surcharge	<u>4.50</u>	001 332 10 00	Sewer Assessment	<u>4463.00</u>	302 388 10 00
Grading/Excavation		001 332 10 00	Sewer Inspection	<u>210.00</u>	402 369 90 00
Fire/Light Safety		001 332 10 10	Roadway Access	<u>100.00</u>	104 322 40 00
Floodplain Mgt	<u>100.00</u>	001 345 89 00	Mechanical/Plumbing		001 322 10 00
School Impact Fees	<u>2750.00</u>	350 345 85 10	Receipt Numbers Amount Date		
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	<u>90390</u>	<u>400.00</u>	<u>5-2-13</u>
Park Impact Fees	<u>1116.00</u>	352 345 85 00	<u>90707</u>	<u>15,557.71</u>	<u>5-13-13</u>

Balance Due = 15,557.71

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. 213-056
 Date 4-23-2013 (CG)

Applicant Name <u>Karlsen Development LLC</u>	Title (if owner, state OWNER) <u>Owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>Same</u>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>Same</u>	Business Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
City of Woodland Business License Number <u>00017607</u>	Washington State Labor & Industries Number and Expiration Date <u>Karls DL 9601E 7-14</u>	REQUIRED
Project Address <u>329 Lolo trail Ave</u>	Subdivision/Legal Description <u>Menard estates Lot # 38</u>	Parcel Number <u>5-07060138</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>8</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>24</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: 10700 PAID
New construction single family MAY 16 2013
CITY OF WOODLAND

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 10,700.00

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

[REDACTED SIGNATURE] 4-22-13
 APPLICANT'S SIGNATURE DATE

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>329 Lolo Trail</u>		<input type="checkbox"/> First Plumbing Permit		Permit Type: <u>36</u>	Flood Zone: <u>A</u>		
<input type="checkbox"/> First Mechanical Permit							
Permit Approval	Initial	Date	COMMENTS				
Mechanical	<u>WW</u>	<u>5.2.13</u>					
Plumbing	<u>WW</u>	<u>5.2.13</u>					
Fire/Life Safety							
FEES DUE	Req'd	Amount	Account	FEES DUE	Req'd	Amount	Account
Plumbing Permit		<u>169.00</u>	001 322 10 00	Other			
Mechanical Permit		<u>168.00</u>	001 322 10 00	Other			
Other				Other			
Received By: <u>SR</u>	Date: <u>5/16/13</u>	Receipt Number: <u>90445</u>		Total Due \$ <u>335</u>			

Residential Building 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. 213-055
 Date 4-23-2013 (eg)

Applicant Name <u>Karlson Development</u>		Title (if owner, state OWNER) <u>owner</u>		Property Owner <u>Same</u>	
Mailing Address, City, State & Zip [REDACTED]			Phone # [REDACTED]	Mobile # [REDACTED]	
Contractor <u>Same</u>		Contact Person/Title <u>Diane Karlson Member</u>			
Mailing Address, City, State & Zip [REDACTED]			Phone # [REDACTED]	Mobile # [REDACTED]	
City of Woodland Business License Number <u>0001767</u>		Washington State Labor & Industries Number and Expiration Date <u>KAR501980LE 2-14</u>			
Property Address <u>329 Lolo Trail Ave</u>		Subdivision/Legal Description <u>Merweth estates Lot 38</u>		Parcel Number <u>507060138</u>	
Will this structure be within the 100 year floodplain? <input type="checkbox"/> YES If YES, attach a Floodplain Worksheet. <input type="checkbox"/> NO		Is any part of this property within 200 feet of a shoreline of statewide significance? <input type="checkbox"/> YES If so, a shoreline permit may be required (single family residential lots are exempt). <input type="checkbox"/> NO			
Is there or has there been any filling, grading, or excavation associated with this project? <input type="checkbox"/> YES If YES, and over 100CY, complete and attach an Excavation & Grading Worksheet <input type="checkbox"/> NO		Total Quantity of Earthwork: CY			
Type of Building <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Add-on <input type="checkbox"/> Change in Use <input type="checkbox"/> Demolish <input type="checkbox"/> Remodel <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/>			
Occupancy (uses): <u>Single family</u>		Sq. Feet of Use <u>1608</u>	Class/Type <u>1</u>	No. of Units <u>1</u>	No. of Bedrooms <u>3</u>
<u>Garage</u>		<u>435</u>	<u>1</u>	<u>1</u>	Building Height <u>16</u>
					Total Square Feet <u>1608</u>
Energy Code Compliance Residential (SFD/Duplex): Type of Heating: <input type="checkbox"/> Residential <input type="checkbox"/> Industrial		Residential (SFD/Duplex): <input type="checkbox"/> Prescriptive Path <input type="checkbox"/> Institutional <input type="checkbox"/> Educational	Non-Residential Envelope: <input type="checkbox"/> Prescriptive Option <input type="checkbox"/> Component Design <input type="checkbox"/> System Analysis	Non-Residential Mechanical: <input type="checkbox"/> Simple System <input type="checkbox"/> Complex System <input type="checkbox"/> System Analysis	Non-Residential Lighting: <input type="checkbox"/> Prescriptive Lighting <input type="checkbox"/> Light Power Allowance <input type="checkbox"/> System Analysis

Describe Project and Specific Use in Detail, Also Include All Fixtures Related to Plumbing and Mechanical Uses:
New construction single family residence

185,000 (WW)

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. Every permit issued by the Administrative Authority under the provisions of the City of Woodland Municipal Code shall expire by limitation and become null and void if the work authorized by such permit is not commenced within 180 days from the date of issuance of such permit, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. All provisions of laws and ordinances governing the type of project shall be complied with whether specified herein or not. The granting of a permit or an approval does not presume to give authority to violate or cancel the provisions 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, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for a FINAL INSPECTION for this project.**

Applicant's Signature: [REDACTED] Date: 4-22-13

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Address: <u>329 Lolo Trail Ave</u>		Permit Type: <u>1</u>	Flood Zone: <u>A</u>
Other Permits Required: Plumbing Permit: YES () NO () Mechanical Permit: YES () NO () Fire/Life Safety: YES () NO () Other: YES () NO ()		Land Use Application Number: Zone: Comp. Plan Designation:	<input type="checkbox"/> Permitted Use <input type="checkbox"/> Conditional Use <input type="checkbox"/> Other
Setbacks: Front: Back: Side:		SEPA Determination: Action: Issued:	Floodplain () Critical Areas () Shorelines ()

APPROVALS	Initial	Date	SPECIAL COMMENTS			
Water/Sewer						
Public Works						
Planning/Environmental						
Drainage & Erosion Control						
Fire/Life Safety						
Building	<u>WW</u>	<u>5-2-13</u>				
FEES DUE	Amount	Account	FEES DUE	Amount	Account	
Building Permit	<u>1475.35</u>	001 332 10 00	Water Assessment	<u>2940.00</u>	302 388 10 10	
Plan Review	<u>358.98 + 600.00</u>	001 332 10 20	Meter Deposit	<u>630.00</u>	401 389 00 00	
Surcharge	<u>1.50</u>	001 332 10 00	Sewer Assessment	<u>4467.00</u>	302 388 10 00	
Grading/Excavation		001 332 10 00	Sewer Inspection	<u>210.00</u>	402 369 90 00	
Fire/Light Safety		001 332 10 10	Roadway Access	<u>130.00</u>	104 322 40 00	
Floodplain Mgt	<u>100.00</u>	001 345 89 00	Mechanical/Plumbing		001 322 10 00	
School Impact Fees	<u>2750.00</u>	350 345 85 10	Receipt Number: Amount: Date:			
Fire Impact Fees	<u>1530.00</u>	351 345 85 00	<u>902165</u>	<u>600.00</u>	<u>4-23-13</u>	
Park Impact Fees	<u>1116.00</u>	352 345 85 00	<u>904410</u>	<u>15707.83</u>	<u>5-16-13</u>	

Total = \$16,307.83 - \$600 Deposit = \$15,707.83 Total Owning

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. 213-043
 Date 4-5-13 c.g.

Applicant Name <u>Renaud Electric Company</u>	Title (if owner, state OWNER) <u>owner</u>	Daytime Phone: [REDACTED]
Property Owner <u>Kester Development</u>	Mailing Address, City, State & Zip [REDACTED]	Daytime Phone: [REDACTED]
Contractor <u>Renaud Electric Company</u>	Business Address, City, State & Zip <u>2300 Talley Way Kelso, WA 98626</u>	Daytime Phone: <u>360-423-1420</u>
City of Woodland Business License Number <u>255.7</u>	Washington State Labor & Industries Number and Expiration Date <u>200.400-00-0</u>	REQUIRED
Project Address <u>1230 Lewis River Road</u>	Subdivision/Legal Description REQUIRED	Parcel Number REQUIRED <u>5-0470031</u>
Type of Facility: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> _____	Work Type: <input type="checkbox"/> Demolish <input checked="" type="checkbox"/> Remodel/Alter <input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> _____	

PLUMBING:	MECHANICAL:	
Fixtures (or set) on one trap _____	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 _____	• 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 _____	<u>WALK-IN COOLER</u>
Backflow Protective Devices over 2" diameter _____		

Describe Project and Specific Use in Detail:
INSTALL ONE 10'x20' WALK IN COOLER BOX WITH NEW REFRIGERATION EQUIPMENT

RECEIVED
 APR 05 2013
 City of Woodland
 Building Dept
 Planning Dept

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PERMIT \$ 28,000 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 incorrect, the permit may be revoked.
 [REDACTED SIGNATURE]
 APPLICANT'S SIGNATURE DATE 4/3/13

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Project Address/Location: <u>1230 Lewis River Rd.</u>	<input type="checkbox"/> First Plumbing Permit <input type="checkbox"/> First Mechanical Permit	Permit Type: <u>36</u>	Flood Zone: <u>A</u>
Permit Approval	Initial	Date	COMMENTS
Mechanical	<u>LW</u>		<u>PAID</u>
Plumbing			<u>MAY 14 2013</u>
Fire/Life Safety			
FEES DUE	Req'd	Amount	Account
Plumbing Permit			001 322 10 00
Mechanical Permit		<u>65.00</u>	001 322 10 00
Other			Other
Received By: <u>Cash</u>	Date: <u>5-14-13</u>	Receipt Number: <u>90583</u>	Total Due: <u>\$ 65.00</u>

Commercial Building 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. 213-041
 Date 3/27/13

Applicant Name REQUIRED <u>Chris Lilley/ Michael Architect./ Sup.</u>		Title (if owner, state OWNER) <u>Woodland School District</u>	
Mailing Address, City, State & Zip <u>600 3rd Street Green Woodland, WA.</u>		Phone # <u>360-841-2700</u> Mobile #	
Contractor REQUIRED <u>cg. F&B Nutter Corp.</u>		Contact Person/Title <u>Todd Cameron - Project Manager</u>	
Mailing Address, City, State & Zip <u>7211 NE 43rd Ave Vancouver 98661</u>		Phone # <u>360-573-2000</u> Mobile #	
City of Woodland Business License Number REQUIRED <u>230.9</u>		Washington State Labor & Industries Number and Expiration Date <u>601407344</u>	
Property Address REQUIRED <u>NW Corner Dike Access & Robinson Rd.</u>		Subdivision/Legal Description REQUIRED <u>5-08540100</u>	
Will this structure be within the 100 year floodplain? <input type="checkbox"/> YES If YES, attach a Floodplain Worksheet. <input checked="" type="checkbox"/> NO		Is any part of this property within 200 feet of a shoreline of statewide significance? <input type="checkbox"/> YES If so, a shoreline permit may be required (single family residential lots are exempt). <input checked="" type="checkbox"/> NO	
Is there or has there been any filling, grading, or excavation associated with this project? <input checked="" type="checkbox"/> YES If YES, and over 100CY, complete and attach an Excavation & Grading Worksheet <input type="checkbox"/> NO		Total Quantity of Earthwork: <u>230,000</u> CY	
Type of Building <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/>		Type of Project <input checked="" type="checkbox"/> New <input type="checkbox"/> Add-on <input type="checkbox"/> Change in Use <input type="checkbox"/> Remodel <input type="checkbox"/> Move <input type="checkbox"/> Repair <input type="checkbox"/> Demolish	
Occupancy (uses): <u>N/A</u>		Sq. Feet of Use Class/Type /	
Energy Code Compliance Residential (SFD/Duplex): Type of Heating: <input type="checkbox"/> Prescriptive Path <input type="checkbox"/> Residential <input type="checkbox"/> Institutional <input type="checkbox"/> Educational		Non-Residential Envelope: <input type="checkbox"/> Prescriptive Option <input type="checkbox"/> Component Design <input type="checkbox"/> System Analysis	
		Non-Residential Mechanical: <input type="checkbox"/> Simple System <input type="checkbox"/> Complex System <input type="checkbox"/> System Analysis	
		Non-Residential Lighting: <input type="checkbox"/> Prescriptive Lighting <input type="checkbox"/> Light Power Allowance <input type="checkbox"/> System Analysis	

Describe Project and Specific Use In Detail: Building pad preparation; installation of rammed aggregate piers under building footprint, placing of soil over building footprint to induce pre construction settlement. This permit is for fill & grade only, not aggregate piers.

TOTAL FAIR MARKET VALUE OF WORK TO BE DONE UNDER THIS PROJECT \$ \$3.0 m **REQUIRED**

NOTICE: Separate permits and approvals may be required for this project. Every permit issued by the Administrative Authority under the provisions of the City of Woodland Municipal Code shall expire by limitation and become null and void if the work authorized by such permit is not commenced within 180 days from the date of issuance of such permit, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the work is commenced. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. All provisions of laws and ordinances governing the type of project shall be complied with whether specified herein or not. The granting of a permit or an approval does not presume to give authority to violate or cancel the provisions 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, the permit or approval may be revoked. **It is the responsibility of the applicant to arrange for a FINAL INSPECTION for this project.**

REQUIRED _____ **REQUIRED** 3-27-13
 Applicant's Signature Date

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Address: <u>NW Corner Dike Access + Robinson</u>		Permit Type: <u>39</u>	Flood Zone: <u>B</u>
Other Permits Required: Plumbing Permit YES () NO () Mechanical Permit YES () NO () Fire/Life Safety YES () NO () Other YES () NO ()		Land Use Application Number: Zone: _____ Comp. Plan Designation: _____	<input type="checkbox"/> Permitted Use <input type="checkbox"/> Conditional Use <input type="checkbox"/> Other
Setbacks: Front: _____ Back: _____ Side: _____		SEPA Determination: _____ Action: _____	Issued: _____
		Floodplain ()	Critical Areas () Shorelines ()

APPROVALS	Initial	Date	SPECIAL COMMENTS
Water/Sewer			
Public Works			
Planning/Environmental			
Drainage & Erosion Control			
Fire/Life Safety			
Building			

FEES DUE	Amount	Account	FEES DUE	Amount	Account
Building Permit	<u>1310.50</u>	001 332 10 00	Water Assessment		302 388 10 10
Plan Review	<u>409.50</u>	001 332 10 20	Sewer Assessment		302 388 10 00
Surcharge	<u>4.50</u>	001 332 10 00	Sewer Inspection		402 369 90 00
Grading/Excavation	<u>1730.00</u>	001 332 10 00	Roadway Access		104 322 40 00
Fire/Light Safety		001 332 10 10	Total Due	<u>1734.50</u>	
Floodplain Mgt		001 345 89 00			
Fire Impact Fees		351 345 85 10	Receipt Number:	Amount	Date
School Impact Fees		350 345 85 00	<u>901193</u>	<u>1734.50</u>	<u>3/9/13</u>
Park Impact Fees		352 345 85 00			