

Building / Plumbing / Mechanical Permit Application

Permit No. _____



152 W Cedar Street
 phone 360-683-4908
 fax 360-681-0552
www.sequimwa.gov

PROJECT LOCATION & DETAILS

Address _____ Geographic ID No. (Parcel #) _____
 Legal Description _____
 Project Description in Detail _____

- | | | | |
|-------------------------|------------------|-------------------|--------------------|
| Accessory Dwelling Unit | Addition | Change of Use | Demolition |
| Fire Alarm/Sprinkler | Fire Suppression | New Construction | Relocation |
| Remodel/Replace/Repair | Reroof | Sign Installation | Tenant Improvement |

PROPERTY OWNER

Name _____
 Address _____
 City _____ State _____ ZIP _____
 Phone _____ Email _____

CONTRACTOR

Name _____
 Address _____
 City _____ State _____ ZIP _____
 Phone _____ Email _____
 State Business License No. _____ Exp. Date _____
 UBI No. _____ City Business License Exp. Date _____

PROPOSED CONSTRUCTION

Stories _____ Units _____
 Bedrooms _____ Bathrooms _____
 1st Floor sq. ft. _____ 2nd Floor sq. ft. _____
 Garage sq. ft. _____ Attached Detached
 Carport sq. ft. _____ Attached Detached
 Porch/deck sq. ft. _____ Attached Detached
 Basement sq. ft. _____ Attached Detached

Value of Work and Materials \$ _____

CONSTRUCTION FINANCING LENDER

Name _____
 Address _____
 City _____ State _____ ZIP _____
 Phone _____ Email _____

Utility Connections

New Water Service

City	PUD #1
Private Well	Community Well

If private or community well, is property located in Dungeness Water Rule area? Yes No
 (If yes, provide Mitigation Certificate from Washington Water Trust)

City Water Meters—Potable	5/8"	1"	1-1/2"	2"
Irrigation Meter - City	5/8"	1"	1-1/2"	2"
Irrigation Meter - Ditch	5/8"	1"	1-1/2"	2"

New Sewer Service City Private Septic Community Septic

Plumbing

	Quantity		Quantity
Toilet		Kitchen Sink	
Shower		Dishwasher	
Bathtub		Grease Trap	
Sink		Sewer	
Urinal		Slop Sink	
Water Heater		Clothes Washer	
Water Fountain		Lawn Sprinkler System	

Mechanical

Air Condition Unit	Wall Heater	
Air Handling Unit	Unit Heater	
Ventilation Fan	HVAC	
Heat Pump	Range Hood	
Ductless Heat Pump	Clothes Dryer	
Fireplace/Stove/Range	Propane	Wood
Propane Tank	(No. of Gallons)	
Type of Heat		

I hereby certify that the information provided is correct, that I am either the owner or authorized to act on behalf of the owner and that all activities associated with this permit will be in accordance with State laws and the City of Sequim Municipal Code. All sales tax paid to the State Dept. of Revenue on labor and materials used for construction with the Sequim City limits are to be reported under Location Code #0503. By signing below I agree to the applicable utility charges which will begin in 6 months or on the date of final inspection, whichever comes first.

Owner/Agent Signature _____ Date _____

OFFICE USE ONLY

Approval: _____ Date _____
(Building Official)

Approval: _____ Date _____
(City Planner)

Approval: _____ Date _____
(City Engineer)

Approval: _____ Date _____
(Cross Connection Control Specialist)