



CITY OF HOQUIAM

Building Department
609 8th Street
Hoquiam WA 98550

PERMIT APPLICATION

DESCRIPTION OF WORK			
TYPE of WORK		SCOPE of WORK	
<input type="checkbox"/> Building <input type="checkbox"/> Electrical* <input type="checkbox"/> Gas <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Other _____ <small>* Electrical permitting and inspections are administered by the Washington State Department of Labor & Industries. 415 W. Wishkah Suite 1-B (360) 533-8200</small>		<input type="checkbox"/> New Construction <input type="checkbox"/> Enlargement <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Change of Use or Occupancy <input type="checkbox"/> Fill / Grade <input type="checkbox"/> Other _____	
Provide a brief narrative description of the work covered by this permit application:			
LAND DESCRIPTION			
Parcel Number	Situs		Legal Description
	Street Address*	Street Name	
<small>* If an address has not previously been assigned to the property or this application is for a new structure on a previously developed site leave blank and the Building Official will assign a new street address to the property.</small>			
ZONING DESIGNATION			
<input type="checkbox"/> R-1 Low Density Residential <input type="checkbox"/> R-2 High Density Residential		<input type="checkbox"/> C-1 General Commercial <input type="checkbox"/> C-2 Downtown Commercial <input type="checkbox"/> I Industrial	
USE and OCCUPANCY			
<input type="checkbox"/> Assembly	<input type="checkbox"/> Educational	<input type="checkbox"/> High Hazard	<input type="checkbox"/> Duplex or Multi-Family
<input type="checkbox"/> Business	<input type="checkbox"/> Factory or Industrial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Single Family Residence
			<input type="checkbox"/> Storage <input type="checkbox"/> Utility
SEPA (State Environmental Policy Act) EXEMPT			
<input type="checkbox"/> YES		<input type="checkbox"/> NO	
			SEPA Case# _____
SUBMITTAL DOCUMENTS			
<input type="checkbox"/> Construction Drawings <input type="checkbox"/> Development Drawings <input type="checkbox"/> Schematic Drawings		<input type="checkbox"/> Sketches <input type="checkbox"/> Written Scope of Work <input type="checkbox"/> Verbal Scope of Work	
		<input type="checkbox"/> Request Deferred Submittals <input type="checkbox"/> Request Phased Approval <input type="checkbox"/>	
Building Code in effect: 2015 International Building / Residential Codes and 2015 Uniform Plumbing Code Submittal documents. Construction drawings, special inspection and structural observation programs, and other data shall be submitted in two or more sets with each application for a permit. Required information on construction drawings. Construction drawings shall be dimensioned and drawn upon suitable material. Construction drawings shall be of sufficient clarity to indicate the location, nature and extent of the proposed work and show in detail that it will conform to the provisions of this code and relevant laws, ordinances, rules and regulations, as determined by the Building Official.			



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VALUATION

Building permit valuations. The permit applicant shall provide an estimated valuation or Contractor's bid of the proposed work at time of application. Valuation is the total value of materials and labor for work which the permit is being applied. For structures located in the Special Flood Hazard Zone: If the total value of proposed work exceeds 50% of the market value of the structure, then the structure shall be modified to be in compliance with Section 322 of the 2015 IRC (*Flood-resistant construction*) and Chapter 11.16 of the Hoquiam Municipal Code.

If, in the opinion of the Building Official, the valuation is underestimated on the application, the permit shall be denied, unless the applicant can show detailed estimates to meet the approval of the Building Official. Final building permit valuation shall be set by the Building Official.

Estimated total value of work: \$ _____ based on: Contractor's bid Provided by owner
 Square foot calculation Architect estimate

(Value of work does not include gas, mechanical, plumbing or demolition)

PROPERTY OWNER

Name: _____

Mailing Address _____

City _____

State _____

Zip _____

Phone _____

Phone _____

Fax _____

Signature _____

Date _____

CONTRACTOR

Company Name: _____

Contractor License Number _____

Yes No
Hoquiam Business License

Mailing Address _____

City _____

State _____

Zip _____

Phone _____

Phone _____

Fax _____

Signature _____

Date _____

AGENT OR REPRESENTATIVE (If other than PROPERTY OWNER)

Name: _____

Mailing Address _____

City _____

State _____

Zip _____

Phone _____

Phone _____

Fax _____

Signature _____

Date _____