



107 - 5th Street, Gold Bar, WA 98251

BUILDING PERMIT APPLICATION AND INSTRUCTIONS

This checklist is provided as a guide for the items required to be submitted for permitting the types of projects listed. Please be aware the city staff, planners or inspectors may require additional information beyond the items list below.

Addition/Remodel or Shed	Single	/Multi Family Residense	;	
Completed Application 2 Copies of Site Plan Including any easements, existing structures, existing septic, drainfield, reserve, raindrain location and addition location. Include dimensions from all property lines, structures and septic system. Setbacks (Site must be stacked). 2 Copies of construction drawings of proposed addition / structure. 2 Copies of structural engineering calculations Copy of Valid Contractor's License. All information above is required The City of Gold Bar Municipal and a standard the Washington	C C C C C C C C C C	completed Application Copies of Site Plan cluding any easements, sisting structures, existing septic, drainfield, reserve, indrain location and addition cation. Include dimensions om all property lines, ructures and septic system. etbacks (Site must be stacked). Copies of building plan or structure(s). Copies of structural ngineering calculations Copies of approved eptic/drainfield plan. opy of Valid ontractor's License. oplications submitted with outlines Building and	fo n missing or incomplet	formation. The city has
adopted the Washington S Code and Uniform Mecha	•	•	•	
SNOW LOAD: 25		WIND SPEED: 1		SEISMIC ZONE: 3
Site Address or Prop	erty Location:			
Size of Site (acre/squ	are feet):	Area Zone	ed: Commercia	Residential
Snohomish County A	ssessor's Tax Pa	rcel Number (14 d	igits)	
Septic Approval Date	(if required)			
	. ,			
PAGE 1 OF 3 Applicati	on Complete	Official Use Only	Date Received:	

BUILDING PERMIT APPLICATION CONTRACTOR, OWNER INFORMATION





107 - 5th Street, Gold Bar, WA 98251

Applicant / Contractor:	Contractor Lic. #:		
*Signature	Printed Name:		
Mailing Address:			
	State: Zip:		
Phone:	Fax: Email:		
Property Owner:			
	Printed Name:		
	State: Zip:		
Phone:	Fax: Email:		
2nd Property Owner:			
	Printed Name:		
Mailing Address:			
	State: Zip:		
Phone:	Fax: Email:		

Attach a seperate sheet for additional property owners / additional addresses.

- * Applicant / Agent: By your signature above, you herby certify that the information submitted on this applicantion is true and correct and that you are authorized by the property owner(s) to take action on their behalf.
- ** Property Owners: By your signature above, you herby certify that you have authorized the above applicant and/or agent to make applications on behalf for this application.

-THIS APPLICATION MUST BE COMPLETED BEFORE ACCEPTANCE-

It is the responsibility of the permit holder to notify the Building Department and ensure that the required inspections are made. This permit may be revoked if the work is not in conformance with laws, rules and regulations of the City of Gold Bar. The duty to ensure conformance rests with the builder, developer and permit applicant, not the City. The approval of construction plans and satisfactory inspections do not guarantee that all provisions of applicable codes have been met. All plans submitted to the City become public record and are available for public inspection and copying. All contractors performing work authorized by this permit must be a registered as required by state law.

2 OF 3	PAGE 2 OF 3	Official Use Only	Date Received:	
--------	----------------	-------------------	----------------	--

BUILDING PERMIT APPLICATION Scope of Work Details





107 - 5th Street, Gold Bar, WA 98251

All information below is REQUIRED. Applications submitted with missing or incomplete information will not be accepted.

Brief Description of Work:					
Owners Est. of Job Valuation:		Revised Est. of Job	Valuation:		
SETBACKS: (Front) (Rear_			(Side B)
BUILDING HEIGHT:		MINIMUM FLOOR E	LEVATION:	Feet	
BUILDING USES:		TYPE OF CONSTR	RUCTION:		
# OF STORIES:			_	CUPANCY LOAD:	
TYPE OF HEATING SYSTEM:					
				Tivat Ctam	
BUILDING AREA: Basement Lev				First Story	
Second Story Miscell	aneous	Other Stories	1	TOTAL NEW AREA:	
Please ind	icate the num	ber of fixtures/equipment that applies	to your proje	ect below.	
NO. PLUMBING FIXTURE Price		MECHANICAL EQUIPMENT		NO. MECHANICAL EQUIPMENT	Price
WATER CLOSETS (TOILETS) \$9.8	30	AIR CONDITIONING UNITS < 100k BTU	\$14.70	AIR HANDING	\$10.65
BATHTUB/SHOWER \$9.8		AIR CONDITIONING UNITS >100k BTU	•		\$10.65
LAVATORY (WASH BASIN) \$9.8		AIR CONDITIONING UNITS >500k BTU	•	METAL FIREPLACE/	,
SHOWER (ONLY) \$9.8		REFRIG UNITS <100K BTU	\$14.70		\$10.65
KITCHEN SINK & DISP \$9.8		REFRIG UNITS >100K BTU	\$27.15		\$10.65
DISHWASHER \$9.8		REFRIG UNITS >500K BTU	\$37.25	GAS PIPING 1ST 5	\$8.15
LAUNDRY TRAY\$9.80 \$9.8		BOILERS <100K BTU	\$14.70	GAS OUTLET >5	\$1.10
CLOTHESWASHER \$9.8		BOILERS >100K BTU	\$27.15		\$10.65
WATER HEATER* \$12.3		BOILERS >500K BTU	\$37.25		\$10.65
URNIAL \$9.8		GAS FIRED AC <100K BTU	\$14.70		\$10.65
DRINKING FOUNTAIN \$9.8		GAS FIRED AC >100K BTU	\$27.15		\$14.70
FLOOR DRAIN \$9.8		GAS FIRED AC >500K BTU	\$37.25	BASE MECH (REQUIRED FOR ALL)	
VACUUM BREAKERS \$9.8		FORCED AIR <100K BTU	\$14.80	BAGE INLOTT(MECH. APPLICATIONS)	Ψ20.00
ROOF DRAINS/RAINHEADERS \$9.8		FORCED AIR >100K BTU	\$14.00		
SINK (SERVICE, BAR, ECT.) \$9.8		WALL HEATERS	\$14.80	* All new hot water	
BACKFLOW DEVICE \$9.8		UNIT HEATERS <100K BTU	\$14.80	heaters require the	
GREASE INTERCEP. \$9.8		UNIT HEATERS >100K BTU	\$14.00	addition of an	
BLDG DRAIN \$24.6		EVAPORATED COOLERS	\$10.20 \$10.65	expansion tank if not	
OTHER \$9.8		CLOTHES DRYER	\$10.65	already installed.	
ICEMAKER \$9.8		VENT FANS	\$7.25		
BASE PLBG (REQUIRED FOR ALL PLUMBING APPLICATIONS) \$23.5		_ VENT FANS _ COMMERCIAL RANGE HOODS	\$10.65		
TOTAL PLUMBING FIXTURES		-		TOTAL MECHANICAL EQUIP	MENT
				_	
Official Use Only		,	Date Receive	ed:	
Plan Check Fee \$		Receipt#:	Receiv	ved By:	
PAGE Building Inspector		Date	Accep	ted/Denied	