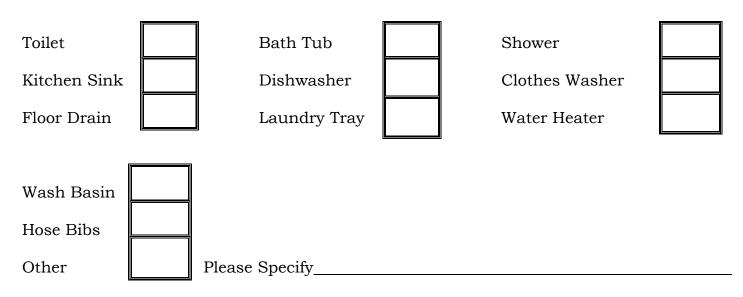


Building Department 207 W. 2nd St., Grandview, WA 98930 Ph. (509) 882-9225 Fax (509) 882-9232

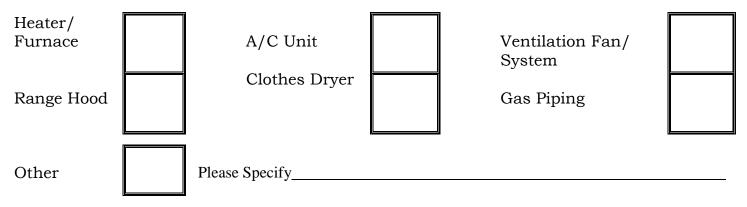
PLEASE READ THE FOLLOWING LIST CAREFULLY AND PROVIDE ALL REQUIRED MATERIAL WITH YOU APPLICATION. TWO (2) FULL SETS OF PLANS, TWO (2) SITE PLANS THAT INCLUDE CURB TO PROPERTY LINE DISTANCES. THREE (3) SETS OF PLANS ARE REQUIRED FOR NON-RESIDENTIAL PERMITS.

Project Address:		Parcel No
Type of Work:		
Owner/Builder Name		Contractor Name
Street Address		Street Address
City, State, Zip Code		City, State, Zip Code
Owner's Phone No.		Contractor's Phone No.
Bid for Project/Calculated Valuation		Contractor's License No.
Building Use		Expiration Date
Building Dimensions	:	
Main Floor:	Upper Floor:	Garage
Basement:	Decks:	Other:
Type of Heat to be in	nstalled:	
□ Natural Gas □	Electric 🛛 Propane	Other – Please explain
BTUTor	nage/KWMo	odelSHPF Rating
D W. 1		(OVER)
Il-Values of Doors an		

Plumbing Fixtures to be Installed: (Indicate total number of each fixture that will be installed under this permit)



Mechanical Fixtures to be Installed: (Indicate total number of each fixture that will be installed under this permit)



I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION TO KNOW THE SAME TO BE TRUE A ND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

SIGNATURE OF OWNER/AUTHORIZED AGENT

DATE