

BUILDING APPLICATION - RESIDENTIAL



Planning & Building Department
201 Center St. W
Eatonville, WA 98328
360-832-3361 Ext. 114
planningadmin@eatonville-wa.gov

**PERMIT
NUMBER:** _____

WORK TYPE: _____ NEW _____ ADDITION _____ REMODEL _____ OTHER: _____

SITE ADDRESS				PROJECT VALUATION	
PARCEL NUMBER					
APPLICANT		PHONE		EMAIL	
ADDRESS (Street, City, State, Zip)					
PROPERTY OWNER		PHONE		EMAIL	
ADDRESS (Street, City, State, Zip)					
CONTRACTOR		PHONE		EMAIL	
ADDRESS (Street, City, State, Zip)					
CONTRACTOR LICENSE #			EXP DATE		
PROJECT DESCRIPTION					
CONSTRUCTION DETAILS					
Existing _____ New _____					
1st floor:			Garage/Carport:		Is the House Sprinkled?
2nd floor:			Covered Deck/Patio:		_____ Yes _____ No
Basement:			Uncovered Deck:		Is the Property Served by:
# Bedrooms:			# Bathrooms:		
				_____ Sewer _____ Septic	
Lot Size (sf):		Total Structure Lot Coverage (sf):		Total Impervious Surface (SF):	

An application for a permit for any proposed work shall be deemed to have been abandoned 180 day after date of filing, unless such application has been pursued in good faith or a permit has been issued.

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit. All provisions of law and ordinances governing this type of work will be complied with whether specified herein or not.

Print Name: _____

Owner _____ Agent/Other _____

Signature: _____

Date: _____

(If you are not the property owner and are submitting on the owner's behalf, an Owner Authorization Form is required.)