



**CITY OF TUMWATER**  
 555 ISRAEL RD. SW, TUMWATER, WA 98501  
 (360) 754-4180 (360) 754-4126 (FAX)

**PERMIT APPLICATION**  
 (APPLICATION MUST BE COMPLETE)

A/P #	DATE STAMP
RCVD. BY	

**JOB ADDRESS:** \_\_\_\_\_ **PARCEL #:** \_\_\_\_\_

**OWNER:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**STATE CONTRACTOR'S LICENSE #:** \_\_\_\_\_ **EXPIRES:** \_\_\_\_ - \_\_\_\_ - \_\_\_\_ **CITY LICENSE #:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ARCHITECT / ENGINEER:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**LENDER / INSURER:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**LENDERS MAILING ADDRESS:** \_\_\_\_\_

**USE OF BUILDING:**  RESIDENCE  OFFICE  OTHER: \_\_\_\_\_

**PERMIT TYPE:**  BUILDING  PLUMBING  MECHANICAL  FIRE ALARM  FIRE SPRINKLER  GRADING  
 OTHER: \_\_\_\_\_

**CLASS OF WORK:**  NEW  ADDITION  ALTERATION  REPAIR  OTHER: \_\_\_\_\_

**WATER:**  CITY  PRIVATE

**SEWER:**  CITY  PRIVATE

**ESTIMATED VALUATION OF WORK: \$** \_\_\_\_\_

**SQUARE FOOTAGE (if applicable):** \_\_\_\_\_

**DESCRIPTION OF WORK TO BE PERFORMED:** \_\_\_\_\_

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**THREE (3) SETS OF PLANS ARE REQUIRED**

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT.

Signature of Applicant: \_\_\_\_\_

**NOTE:** (1) Washington State Law requires that lender information be disclosed at time of permit application. If lender information is not available at permit application, it shall be provided as soon as it is available. (2) Washington State Law requires that the City prior to permit issuance verify contractor registration. Verification will be either the original contractor card presented at permit application or a notarized copy of the contractor card.