



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: _____

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.