



**BUILDING DIVISION
MASTER APPLICATION**

OFFICE USE ONLY

TYPE	YR	PERMIT NUMBER			

CITY OF BLACK DIAMOND

24301 Roberts Drive P.O. Box 599
Black Diamond, Washington 98010

Phone: (360) 886-2560
Fax: (360) 886-2592

DEPOSIT

PROJECT NAME		
JOB ADDRESS	LOT #	PARCEL #
OWNER	MAILING ADDRESS IF DIFFERENT	PROJECT VALUATION
EMAIL ADDRESS	PHONE	FAX
CONTRACTOR	ADDRESS	PHONE
CONTRACTOR LICENSE #	EXP DATE	BLK DIAMOND BUS LICENSE
ARCHITECT/ENGINEER/APPLICANT	ADDRESS	PHONE/FAX
TYPE OF USE <input type="checkbox"/> S.F. RESIDENCE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> MFG HOME <input type="checkbox"/> MULTI-FAMILY <input type="checkbox"/> DUPLEX		
TYPE OF WORK <input type="checkbox"/> NEW <input type="checkbox"/> MECHANICAL <input type="checkbox"/> PLUMBING <input type="checkbox"/> REPAIR <input type="checkbox"/> FIRE ALARMS <input type="checkbox"/> TREE REMOVAL <input type="checkbox"/> TENANT IMPR. <input type="checkbox"/> ALTERATION <input type="checkbox"/> ADDITION <input type="checkbox"/> DEMO <input type="checkbox"/> FIRE SPRINKLERS <input type="checkbox"/> PUBLIC WORKS		
DESCRIBE WORK		

CERTIFICATION OF APPLICANT

I hereby certify under the penalty of perjury of the laws of the State of Washington, that I have read and examined this application and know that the information contained herein is true and correct. I will comply with all provisions of law and ordinances governing this type of construction work, whether specified herein or not. I understand that granting a permit does not authorize me in any way to violate or cancel any of the provisions of Federal, State or local law regulating the construction or performance of construction sought under this permit. I further certify, as applicant, that I am one of the two following general categories of applicants as indicated.

- I am currently registered and properly licensed as a general contractor or specialty contractor as defined under RCW 18.27.010 and 18.27.110 and am legally qualified to perform the work sought by this permit;

OR

- I am exempt from the requirements of the Contractor Registration laws, RCW 18.27.010 and 18.27.110 and will do all my own work or use all registered and licensed subcontractors in connection with the work to be performed under the permit applied of herein.

_____ Signature of Owner/Contractor/Agent	_____ Date
_____ Printed Name of Owner/Contractor/Agent	_____ Date
_____ Contact Person	_____ Phone

NOTICE TO APPLICANT

- ELECTRICAL PERMITS ARE OBTAINED FROM THE DEPARTMENT OF **LABOR AND INDUSTRIES (425) 990-1400.**
- IT IS THE APPLICANT'S RESPONSIBILITY TO CALL FOR INSPECTIONS.
- ISSUANCE OF PERMITS DO NOT AUTHORIZE ANY WORK IN A PUBLIC RIGHT-OF-WAY OR ON UTILITY EASEMENTS.

CHANGES TO APPROVED APPLICATION WILL CONSTITUTE A NEW APPLICATION AND WILL BE SUBJECT TO FULL APPLICATION FEE'S.

Complete All Information Below

AREA	Square Footage		
	New	Remodel	
Main Floor			Fence or retaining wall: Lin ft.
2 nd Floor			Lot Size: Sq ft.
3 rd Floor			Total hard surfaces on site: (structures, driveways, walkways, parking areas, etc. new & existing) Sq ft.
Garage			
Deck/Balcony			
Covered Porch			Lot Coverage (%): %
Basement, unfinished			Building/Fence/Wall Height
Basement, finished			# Bedrooms
Storage (unfin) Garage 2 nd floor or attic			# Bathrooms
Other:			# Dwelling Units
Total of all area(s) sq. ft.			Construction Value: \$ _____