



**BUILDING DIVISION
MASTER APPLICATION**

OFFICE USE ONLY

TYPE	YR	PERMIT NUMBER			
BLD					
PUB					
FIR					
SGN					

CITY OF BLACK DIAMOND

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

Phone: (360) 886-5700
Fax: (360) 886-2592

DEPOSIT _____

PROJECT NAME		
JOB ADDRESS	LOT #	PARCEL #
OWNER	MAILING ADDRESS IF DIFFERENT	PROJECT VALUATION
EMAIL ADDRESS	PHONE	
CONTRACTOR	ADDRESS, CITY & ZIP	EMAIL/PHONE
CONTRACTOR LICENSE #/EXP DATE	BLK DIAMOND BUS LICENSE	
APPLICANT	ADDRESS, CITY & ZIP	EMAIL/PHONE
ARCHITECT/ENGINEER	ADDRESS, CITY, & ZIP	EMAIL/PHONE
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"/> PUBLIC WORKS <input type="checkbox"/> TREE REMOVAL <input type="checkbox"/> CHANGE OF USE <input type="checkbox"/> TENANT IMPR. <input type="checkbox"/> DEMO <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> FIRE ALARMS OR SPRINKLERS	
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

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