

BENTON COUNTY BUILDING PERMIT APPLICATION

5600 W. CANAL DRIVE, SUITE C
 KENNEWICK, WA 99336
 FROM TRI-CITIES (509) 735-3500 FROM PROSSER (509) 786-5622

APPLICATION # _____

Please complete in full and legibly. Incomplete information may slow down the review process.

BUILDING OWNER _____ **PHONE (HM)** _____
MAILING ADDRESS _____ **PHONE (WK)** _____
LEGAL PROPERTY OWNER _____ **PHONE** _____
MAILING ADDRESS _____ **CITY** _____
TAX PARCEL NUMBER 1- _____
CONTACT PERSON _____ **PHONE** _____ **EMAIL** _____
PROJECT LOCATION: _____ **CITY** _____
DIRECTIONS TO JOB SITE _____

CONTRACTOR _____ **MAILING ADDRESS** _____
PHONE _____ **L&I LICENSE #** _____ **EXP. DATE** _____
LENDING FIRM _____ **PHONE** _____
MAILING ADDRESS _____
BUILDING USE: RESIDENTIAL _____ **AGRICULTURAL (USE)** _____ **COMMERCIAL** _____
SPECIFIC USE OF BUILDING: _____

VALUATION OF WORK: _____ **LOT SIZE:** _____
SQUARE FOOTAGE: MAIN FLOOR: _____ UPPER FLOOR: _____ GARAGE: _____
BASEMENT: _____ **HEATED:** YES NO **OTHER:** _____
NUMBER OF: **STORIES:** _____ **BEDROOMS:** _____ **BATHROOMS:** _____
IF BUILDING IS CONDITIONED PROVIDE AN ENERGY CODE COMPLIANCE REPORT
 IS THERE AN EXISTING ADDRESS POST ONSITE? YES NO

PLUMBING (NEW ONLY)

QTY	TYPE OF FIXTURE OR ITEM	QTY	TYPE OF FIXTURE OR ITEM
	WATER CLOSET (TOILET)		HOSE BIBBS
	SHOWER		WATER HEATER
	BATHTUB		FLOOR DRAIN OR FLOOR SINK
	LAVATORY (WASH BASIN)		CLOTHES WASHER
	KITCHEN SINK & DISPOSAL		LAUNDRY TRAY
	DISHWASHER		OTHER
	OTHER		OTHER

MECHANICAL (NEW ONLY)

QTY	TYPE OF FIXTURE OR ITEM	QTY	TYPE OF FIXTURE OR ITEM
	HEATER-FURNACE		GAS FIXTURES
	EXHAUST FAN		PROPANE TANK
	DRYER		OTHER

I hereby certify that I have read and examined this application to know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All structures located within a Floodplain are subject to the requirements of BCC 3.26, including certification by a Washington State Registered Surveyor and/or Engineer.

SIGNATURE OF OWNER/AUTHORIZED AGENT: _____ **DATE:** _____

****An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing****

FOR OFFICE USE ONLY

PERMIT FEE

SQUARE FT. VALUATION/PLUMBING/MECHANICAL:

PLUMBING FEE

MECHANICAL FEE

OTHER FEES

PLAN REVIEW FEE

SUBTOTAL

PROCESSING FEE

ADDRESS POST

MISC FEES

STATE BLDG CODE FEE

TOTAL

TOTAL VALUATION:

SPECIAL CONDITIONS/ADDITIONAL INFORMATION:

DATE RECEIVED:

ACCEPTED BY:

PLAN CHECK/APPROVED BY & NOTIFIED DATE:

**To be completed by property/building owner.
Please initial applicable items where marked "INT" and
complete bottom signature area in full.**

1. DECLARATION OF OCCUPANCY USE (Accessory buildings only, i.e., garages, shops, barns, etc.)

INT _____ I understand the structure for which a building permit is being requested does not permit the occupancy of the building for any use that does not comply with the requirements for the zone in which it is placed (unless approved by Conditional Use Permit # _____, if applicable). This structure will not be used or occupied for any use not permitted as outlined in the **2015 International Residential Code Section R105 Permits**. Violations will result in a **\$500.00 civil citation** as outlined in **Benton County Code 3.04.065 Violations-Penalties**, including but not limited to applicable building permit fees.

2. DECLARATION OF ACCESS CONSTRUCTION AND MAINTENANCE (NOT REQUIRED for accessory buildings)

INT _____ Said structure is served by perpetual non-exclusive access easement, auditor's file number _____, a private driveway in excess of 200' or an unimproved county right of way (contact B.C. Public Works for construction details) and the responsibility for construction and maintenance of this access to the location that the building will be constructed on shall be vested with the property owner and not Benton County.

Said structure is served by an access easement, private driveway or unimproved county right of way not reflected by an auditor's file number, but one of the following applies.
(Initial one statement only)

INT _____ The following access easement, unimproved county right of way or private driveway has been granted a trail access permit to utilize the unimproved county right of way (access permit attached): _____

INT _____ The following access easement, or private driveway is graded and compacted with two (2) inches of base course crushed surfacing; the base course (1 1/2" minus) is to be in accordance with the specifications set forth in Standard Specifications for Road, Bridges and Municipal Construction published by the Washington State Department of Transportation. A minimum improved turning radius of 45' is provided for private driveways in excess of 200'. BCC 3.18.045: _____

INT _____ The following access easement, or private driveway will be graded and compacted with two (2) inches of base course crushed surfacing; the base course (1 1/2" minus) is to be in accordance with the specifications set forth in Standard Specifications for Road, Bridges and Municipal Construction published by the Washington State Department of Transportation: _____

3.

INT _____ Is your property accessed across a private bridge? YES _____ NO _____

4. DECLARATION OF OWNER BUILDER

INT _____ There will not be a general contractor (required to be registered) performing any work on the structure. Sub-contractor(s) license registration will be verified by the owner.

I, _____, certify under penalty of perjury under the laws of
(PRINT NAME)
the State of Washington that the foregoing initialed statement(s) for the proposed structure is (are) true and correct.

Property parcel number _____ for proposed structure location.

Signature of property/building owner

Date

City, State (where signed)