

# GARFIELD COUNTY BUILDING AND PLANNING

## Permit Application Part 2

Garfield County, Washington  
19th and Arlington  
PO Box 160, Pomeroy, WA 99347  
Phone: (509) 843-1301 - Fax: (509) 843-1412

Permit # \_\_\_\_\_

Rec'vd By \_\_\_\_\_

Was this Application submitted due to a  
"Notice of Violation"?  
**YES**      **NO**      **N.O.V. #**

### Property Owner Information

**PLEASE PRINT CLEARLY**

### Licensed Contractor Information

**Name:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Name/Company:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_      **Cell:** \_\_\_\_\_  
**License #** \_\_\_\_\_

### OWNER/BUILDER INFORMATION

*I certify that I, as owner/builder, am exempt from the requirements of the state contractor's registration law, under **RCW 18.27.090**. I have read, understand and will comply with the terms of this Building Permit.*

► **Property Owner Signature:** \_\_\_\_\_

### CONTACT PERSON

**PERSON TO CONTACT:**  
**NAME:** \_\_\_\_\_      **PHONE #** \_\_\_\_\_

**\* ISSUED PERMITS & APPROVED PLANS NEED TO BE PICKED UP IN THE OFFICE UNLESS OTHERWISE REQUESTED \***

*If you would like your permit sent to you or an agent - priority postage fees may apply*

**Invoice Fees To:** \_\_\_\_\_ ( ) **Will Pick-Up** ( ) **Send To:** \_\_\_\_\_

### PROPERTY ADDRESS

**Parcel #** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_ **City/Zip** \_\_\_\_\_

### BUILDING INFORMATION

#### FOR OFFICE USE ONLY

**Valuation of Structure** \$ \_\_\_\_\_

**Contractor's Bid**

\$ \_\_\_\_\_

**Property Use**      **Residential** [ ]      **Non-Residential** [ ]

#### Type of Construction

[ ] House [ ] Garage [ ] Carport [ ] Storage [ ] Deck [ ] Addition [ ] Shop [ ] Barn  
[ ] Remodel [ ] Repair [ ] Move/Relocation  
[ ] Other (specify) \_\_\_\_\_

### PROJECT INFORMATION

**IS THIS CONSTRUCTION REPLACING  
A FORMER BUILDING?**      **YES**      **NO**

**Type of Structure**      [ ] Log [ ] Stick [ ] Pole [ ] Straw  
[ ] Masonry [ ] Other \_\_\_\_\_

**Existing # of Bd rms** \_\_\_\_\_ **Proposed # of Bd rms** \_\_\_\_\_ **Bldg Height** \_\_\_\_\_ **# of Stories** \_\_\_\_\_ **# of Baths** \_\_\_\_\_

#### **Building Dimensions of all new construction ( All floors including basement):**

\_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ SQ Ft Basement  
\_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ SQ Ft 1st Floor  
\_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ SQ Ft 2nd Floor  
\_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ SQ Ft Gar/Carport  
\_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ SQ Ft Other/Decks

**Total SQ Feet** \_\_\_\_\_

#### Heat Source

Furnace [ ] \_\_\_\_\_  
Electric [ ] \_\_\_\_\_  
Heat Pump [ ] \_\_\_\_\_  
Propane [ ] \_\_\_\_\_  
Wood [ ] \_\_\_\_\_  
Other [ ] (describe below) \_\_\_\_\_

I hereby apply for a Plan Review and Building Permit. I have read all application materials and submitted two sets of Complete Plans. The above information is true and correct to the best of my knowledge.

► **Owner's Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

► **Applicant/Agent Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\*\* THIS SIDE FOR OFFICE USE ONLY \*\*\*** **Permit #** \_\_\_\_\_

Need Septic NO [ ] YES [ ]	Reviewed By: _____	Occupancy Classification: _____
Need Water NO [ ] YES [ ]	Plans Taken in By: _____	Type of Construction: _____
Need Planning NO [ ] YES [ ]	Fees Figured By: _____	Maximum Occupancy: _____

**BUILDING & PLANNING DEPARTMENT AND REQUIRED APPROVALS (Public Works)**

**Building Department:** \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Conditions to be added to Building Permit:  
 \_\_\_\_\_  
 \_\_\_\_\_

	<b>Addition/Adding Bedroom?</b>	<b>YES / NO</b>
	<b>Total # of Bedrooms on-site?</b>	

**Special Instructions:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ROAD DEPARTMENT AND REQUIRED APPROVALS (Public Works)**

**ROAD DEPARTMENT:** \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Conditions to be added to Building Permit:  
 \_\_\_\_\_  
 \_\_\_\_\_

	<b>Additional Road Needs</b>	<b>YES / NO</b>
	<b>Requirements:</b>	

**Special Instructions:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**HEALTH DISTRICT AND REQUIRED APPROVALS**

**Health District:** \_\_\_\_\_ Date: \_\_\_\_\_

Septic Site Approved? <b>YES</b> <b>NO</b>	Date: _____	# of Bedrooms Approved: _____
Water Approved? <b>YES</b> <b>NO</b>	Date: _____	Health Sheet Enclosed

Comments/Conditions to be added to Building Permit: \_\_\_\_\_

Approved Via Phone Call by : \_\_\_\_\_ Date: \_\_\_\_\_ YES NO Initials: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**SHERIFFS DEPARTMENT AND REQUIRED APPROVALS**

**Sheriffs Department:** \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Conditions to be added to Building Permit:  
 \_\_\_\_\_  
 \_\_\_\_\_

	<b>Additional Road Needs</b>	<b>YES / NO</b>
	<b>Requirements:</b>	

**Special Instructions:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**FEE INVOICE**

Permit # \_\_\_\_\_

**PLEASE NOTE THAT PLAN REVIEW FEES MUST BE PAID PRIOR TO REVIEW BEING COMPLETED.**

RECEIPT # \_\_\_\_\_ DATE: \_\_\_\_\_

PERMIT FEE \$ \_\_\_\_\_

CHECK # \_\_\_\_\_

STATE FEE (\$4.50) \$ \_\_\_\_\_

**TOTAL FEES \$ \_\_\_\_\_**

LESS PAYMENT RECEIVED - \$ \_\_\_\_\_

**TOTAL FEES DUE AT ISSUE \$ \_\_\_\_\_**

RECEIPT # \_\_\_\_\_ DATE: \_\_\_\_\_

CHECK # \_\_\_\_\_

**Invoice Fees to:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Permit Process #:** \_\_\_\_\_



**Make Check Or Money Order Payable To:**  
Garfield County Auditor  
PO Box 278  
Pomeroy, WA 99347  
(509) 843-1301

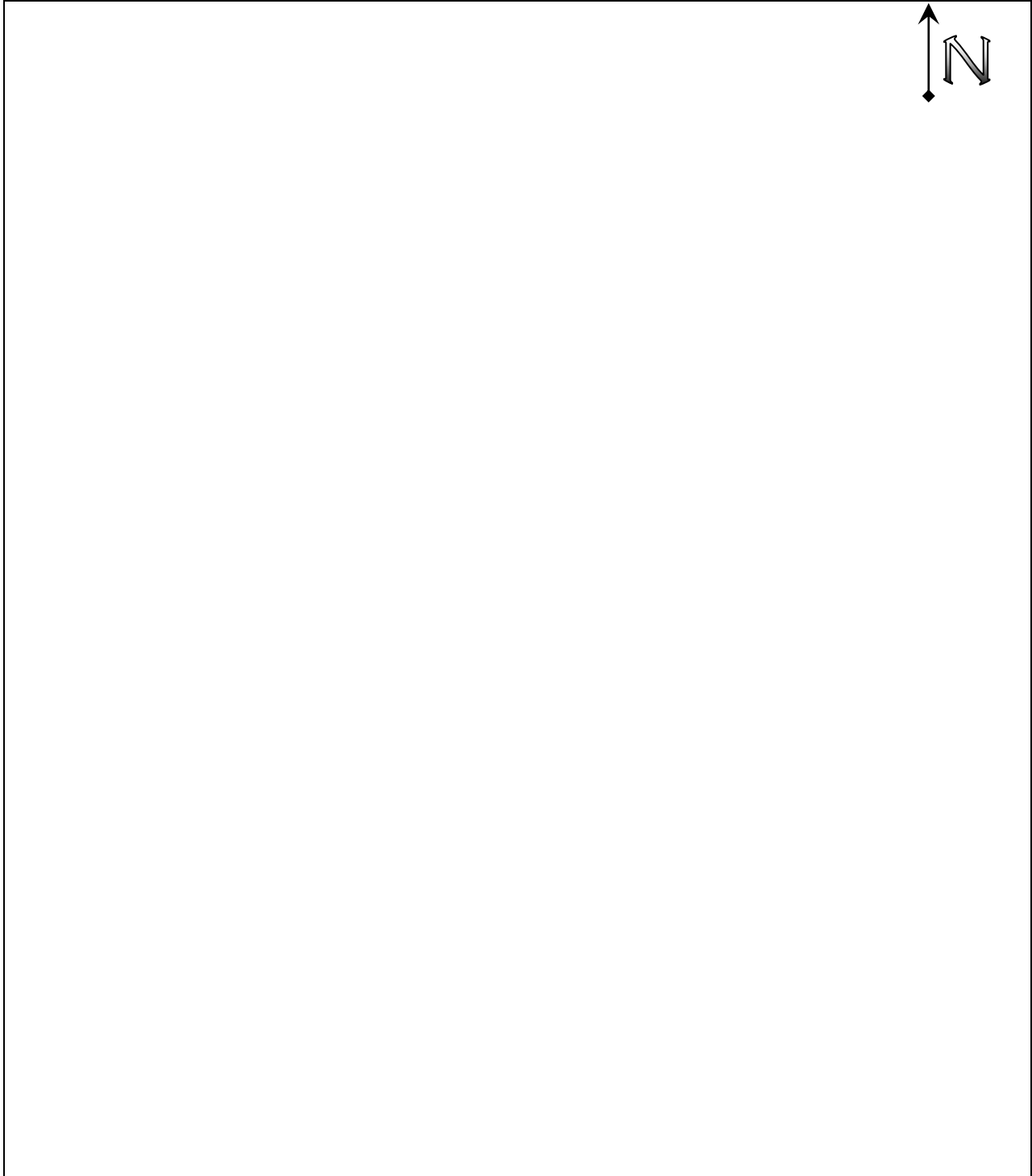
# HOW TO GET TO THE BUILDING SITE

Directions to the site: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Use the space below to provide a detailed drawing showing the location of your building project. Show all roads and road names leading to the project. Show mileage. Start from closest town.



A large empty rectangular box for drawing, with a north arrow in the top right corner. The north arrow consists of a vertical line with an upward-pointing arrowhead and a large letter 'N' to its right.

Name On  
Project:

**THIS FORM MUST BE FILLED OUT AND  
ACCOMPANY PERMIT APPLICATION AT  
TIME OF SUBMISSION**

Permit #

Staff Initials:

**PLAN REQUIREMENT CHECK LIST**

**\*\*\*\*INCOMPLETE PLANS WILL NOT BE ACCEPTED\*\*\*\***  
**PLANS MUST BE DRAWN TO SCALE AND LEGIBLE (1/4" = 1')**  
**MARK N/A IF DOES NOT APPLY**

**FOUNDATIONS**

<input type="checkbox"/>	<b>FOOTINGS</b>	DEPTH/ WIDTH/ REBAR	<input type="checkbox"/>	<b>FRAMING ANCHORS</b>	SIZE/ PLACEMENT
<input type="checkbox"/>	<b>WALLS</b>	WIDTH/ HEIGHT/ REBAR	<input type="checkbox"/>	<b>CRAWLSPACE</b>	VENTILATION/ ACCESS
<input type="checkbox"/>	<b>SLABS</b>	RESIDENTIAL/ RADON REQUIREMENTS	<input type="checkbox"/>	<b>GROUND COVER</b>	6 MIL BLACK PLASTIC REQ'D
<input type="checkbox"/>	<b>PIERS</b>	DEPTH/ WIDTH/ HEIGHT/ REBAR	<input type="checkbox"/>	<b>PRESSURE TREATED SILL PLATE</b>	SIZE
<input type="checkbox"/>	<b>ANCHOR BOLT</b>	PLACEMENT/ SIZE	<input type="checkbox"/>	<b>CROSS SECTION</b>	DETAILS

**FRAMING**

<input type="checkbox"/>	<b>DETAILS</b>	SHOW CROSS SECTIONS DETAILS			
	<b><u>FLOORS 1<sup>ST</sup> &amp; 2<sup>ND</sup></u></b>			<b><u>WALLS - 1<sup>ST</sup> &amp; 2<sup>ND</sup> FLOORS</u></b>	
<input type="checkbox"/>	<b>SUPPORT BEAM</b>	SIZE/ SPACING/ SPANS/ GRADE & SPECIES	<input type="checkbox"/>	<b>STUDS</b>	SIZE/ SPACING/ HEIGHT/ SPECIES/ GRADE
<input type="checkbox"/>	<b>PONY WALLS</b>	HEIGHT/ SIZE/ SPACING	<input type="checkbox"/>	<b>SHEARWALLS</b>	LOCATION/ NAILING
<input type="checkbox"/>	<b>JOISTS</b>	SIZE/ SPACING/ SPANS/ SPECIES/ GRADE	<input type="checkbox"/>	<b>EXTERIOR SHEATHING</b>	SIZE/ MATERIAL
<input type="checkbox"/>	<b>FLOOR SHEATHING</b>	SIZE/ MATERIAL	<input type="checkbox"/>	<b>HOUSE WRAP</b>	TYPE
			<input type="checkbox"/>	<b>SIDING</b>	TYPE
			<input type="checkbox"/>	<b>WALL BRACING</b>	DETAILS/ NAILING
			<input type="checkbox"/>	<b>HEADERS</b>	DOOR/WINDOW/ SIZE/ SPAN

**LOAD BEARING POINTS**

<input type="checkbox"/>	<b>ATTACHMENT</b>	CONNECTIONS	<input type="checkbox"/>	<b>GLULAM HEAVY BEAMS LOGS</b>	SIZE/ SPACING/ SPAN/ GRADE/ SPECIES
<input type="checkbox"/>	<b>HANGERS</b>	NAILING/ TYPE	<input type="checkbox"/>	<b>CROSS SECTIONS</b>	DETAILS
<input type="checkbox"/>	<b>BRACKETS</b>	TYPES			

## FLOOR PLANS

[ ]	<b>DOOR/ WINDOW</b>	PLACEMENT/ SIZE	[ ]	<b>ROOMS</b>	SIZE/ TYPE (KITCHEN, BEDROOM, LIVING ROOM, ETC)
[ ]	<b>BEDROOMS</b>	SMOKE ALARMS/ EGRESS WINDOWS	[ ]	<b>ROOM CEILING HEIGHTS</b>	MIN 7 FT/ MIN 6' 8" ABOVE BATHROOM FIXTURES
[ ]	<b>SAFETY GLASS</b>	WITHIN 24" OF DOORS/ CHECK ALL OTHER LOCATIONS	[ ]	<b>LOCATIONS OF</b>	WOOD STOVES/ PROPANE STOVES/ HVAC/ WH/ APPLIANCES/ PLUMBING FIXTURES
[ ]	<b>GARAGE SEPARTATIONS</b>	DOOR THICKNESS/ MIN 1- 3/8"/ 1/2 " SHEETROCK	[ ]	<b>CEILING</b>	ACCESS
[ ]	<b>LIVING SPACE ABOVE GARAGE</b>	5/8 TYPE X SEPARATION	[ ]	<b>STAIRS</b>	LOCATION/ CROSS SECTION/ RISE/ RUN/ HEADROOM/ WIDTH/ HANDRAILS/ GUARD RAILS/ HEIGHT/ SPACING

## ROOFS

[ ]	<b>CEILING JOIST</b>	SIZE/ SPACING/ SPANS/	[ ]	<b>SHEATHING</b>	SIZE/ MATERIAL
[ ]	<b>RAFTERS</b>	DETAIL/ SPACING/ TRUSSES/ STICK FRAME	[ ]	<b>ATTIC</b>	VENTILATION
[ ]	<b>BEARING</b>	LOCATIONS/ POINTS	[ ]	<b>RIDGE/ VALLEY/ HIP</b>	BOARD SIZE/ BEAM
[ ]	<b>SLOPES</b>	PITCH	[ ]	<b>ROOFING</b>	TYPE

## WSEC REQUIREMENTS

[ ]	<b>SLAB/ FOUND WALLS</b>	R- VALUE EXTERIOR R-10 INTERIOR R-21	[ ]	<b>WHOLE HOUSE VENTILATION</b>	FRESHAIR/ EXHAUST FANS/ WHOLE HOUSE FAN/ FURNACE/ FRESH AIR TO RETURN SIDE
[ ]	<b>FLOOR</b>	R-30	[ ]	<b>VAPOR BARRIERS</b>	MIN 4 MIL CLEAR PLASTIC – OR – PVA PRIMER KRAFT FACED/ FACE STAPLED
[ ]	<b>WALL</b>	R-21	[ ]	<b>CAULK</b>	ALL PENETRATIONS INTO UNCONDITIONED SPACES
[ ]	<b>CEILINGS</b>	R-30 / VAULT R-38 / FLAT CEILING	[ ]	<b>PROVIDE</b>	MIN 1" AIRSPACE ABOVE ROOF INSULATION
[ ]	<b>WINDOW</b>	U- VALUES	[ ]	<b>ALL PLUMBING</b>	WATER LINES INSULATED IN UNCONDITIONED SPACES
[ ]	<b>HEATSOURCE</b>				

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**ELEVATIONS OF STRUCTURE – NORTH/SOUTH/EAST WEST**

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- |  |   |
|--|---|
| <input type="checkbox"/> <u>WINDOWS/ DOORS</u> | <input type="checkbox"/> <u>SLOPE/ ROOF PITCH</u>     |
| <input type="checkbox"/> <u>FINAL GRADE</u>    | <input type="checkbox"/> <u>DECKS/ PATIO/ PORCHES</u> |
| <input type="checkbox"/> <u>FIREPLACES</u>     | <input type="checkbox"/> <u>SKYLITES</u>              |
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**ENGINEERED AND ARCHITECT PLANS**

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- |  |   |   |                                 |
|--|---|---|---------------------------------|
| <input type="checkbox"/> <b>ENGINEERED</b> | PROVIDE<br>CALCULATIONS/ EACH<br>PAGE STAMPED AND<br>SIGNED | <input type="checkbox"/> <b>ARCHITECTURAL</b> | EACH PAGE STAMPED<br>AND SIGNED |
|--|---|---|---------------------------------|
- 

**REMODELS**

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- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> <b>SHOW EXISTING</b> | STRUCTURAL DETAILS<br>FOUNDATION DETAILS | <input type="checkbox"/> <b>FRAMING/<br/>ROOFING ON</b> | REMODELS/ ADDITIONS                           |
| <input type="checkbox"/> <b>FLOOR PLAN</b>    | WINDOW/ DOORS/<br>ROOMS                  | <input type="checkbox"/> <b>DISTINGUISH</b>             | <b><u>NEW</u></b> FROM <b><u>EXISTING</u></b> |
- 

**ALL CHANGES OR REVISIONS TO  
APPOVED PLANS MUST BE APPROVED  
PRIOR TO CONSTRUCTION**

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