

Sedro-Woolley Building Department  
Sedro-Woolley Municipal Building  
325 Metcalf Street  
Sedro-Woolley, WA 98284  
Phone (360) 855-0771  
Fax (360) 855-0733

## MIXED-USE BUILDING PERMIT APPLICATION

**APPLICATION No.** \_\_\_\_\_

This Mixed-Use Building Permit application must be accompanied by three (3) copies of the documents listed below. This application is for structures that will contain both commercial and residential uses. Failure to attach all the required submittal documents will result in an incomplete application and will not be accepted by City staff. Mixed-Use projects 4,000 sq. ft. or large must be drawn by a registered architect or design professional. A Plan Review Fee is required to be paid prior to beginning plan review. Plan review fees are 65% of the building permit fee as calculated by the methods set forth in the 2015 edition of the International Building Code.

### THIS PAGE TO BE COMPLETED BY CITY STAFF AT THE TIME OF APPLICATION

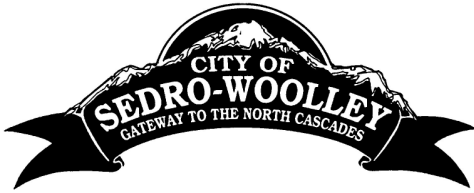
Received	Required Submittals
----------	---------------------

- 1  Completed Application Signed by Applicant
  
- 2  Three (3): **Scaled** construction drawings showing the following elements along with their dimensions:
  - (a) Typical Foundation Plan
  - (b) Typical Floor Plan
  - (c) Typical Cross Section
  - (d) Typical Elevation Drawing
  - (d) Sprinkler Plans (When required. May be submitted on a deferred basis as approved by the Building Official and/or Fire Chief)

**IMPORTANT!** Be sure to clearly identify the occupancy type, construction type and square footage of all new construction, tenant improvements additions or remodel work.
  
- 3  Three (3): **Scaled** site plans showing the following elements along with their dimensions (not required if no expansion of footprint or other site work):
  - (a) property boundaries & setbacks;
  - (b) proposed new building or addition;
  - (c) existing structures, easements, parking areas, driveways & right-of-ways;
  - (d) existing & proposed new utility lines such as sewer, water, gas, & power;
  - (e) proposed access points, driveways, parking areas & other impervious surfaces;
  - (f) existing significant trees, creeks, slopes, wetlands, etc; and
  - (g) amount (square feet) of existing & proposed impervious surfaces

**IMPORTANT!** Items (a)-(g) above must be **clearly marked** or the application cannot be accepted.
  
- 4  Plan Review and Critical Areas Checklist Fee Paid

Application accepted by: \_\_\_\_\_ Date: \_\_\_\_\_



Sedro-Woolley Building Department  
 Sedro-Woolley Municipal Building  
 325 Metcalf Street  
 Sedro-Woolley WA, 98284  
 Phone (360) 855-0771  
 Fax (360) 855-0733

## MIXED-USE BUILDING PERMIT APPLICATION

### SECTION I – PROPERTY AND BUILDING INFORMATION

Fill out completely. Attach legal descriptions and supporting documents as necessary. Please be sure to complete Sections I-IV. Failure to complete all sections will result in an incomplete application and will not be accepted by City staff.

Who should we contact with any questions about this application?  Applicant  Owner  Contractor

APPLICANT/CONTACT	OWNER (if different from applicant)	CONTRACTOR
Name: _____	Name: _____	Company: _____
Address: _____	Address: _____	Contact: _____
City: _____	City: _____	Address: _____
Zip Code: _____	Zip Code: _____	City: _____ Zip: _____
Day Phone: _____	Day Phone: _____	Day Phone: _____
Cell Phone: _____	Cell Phone: _____	Cell: _____
email: _____	email: _____	WA St. Registration Expiration: _____
		Registration#: _____
		City License Endorsement: <input type="checkbox"/> Yes <input type="checkbox"/> No

### PROJECT SITE IDENTIFICATION

Site Address: \_\_\_\_\_ Parcel I.D. #: \_\_\_\_\_

NEW or REMODEL (T.I.) COMMERCIAL CONSTRUCTION	RESIDENTIAL CONSTRUCTION Square Feet (sq. ft)
Project Description: _____	New/Addition: _____ Garage/Shop: _____
Occupancy Type/Use: _____/_____	Remodel: _____ Deck/Porch: _____
Construction Type: _____/_____	Post Frame/Carport: _____ Repair: _____
NEW Bldg Square Feet : _____	Other: _____
TI REMODEL Bldg Square Feet: _____	Bldg Square Feet: _____
Project Value : \$ _____	Project Value: \$ _____
Heated? Y / N    Sprinklers? Y / N	Year of Building? _____
	Asbestos Survey Required? YES/NO

PROJECT SITE INFORMATION	GRADING	NEW IMPERVIOUS SURFACES
Current zoning: _____	Cuts _____cy	Building _____sq. ft.
Are there any existing structures on the property? Yes/No	Fill _____cy	Drive/Parking _____sq. ft.
Will it be necessary to clear any trees or vegetation for this project? ..... Yes/No	Total _____cy	Sidewalk(s) _____sq. ft.
Do you own adjoining pieces of land? ..... Yes/No		Other _____sq. ft.
Is the property within 200 ft of a creek, ditch, surface water, steep slope or wet area? If Yes, describe. _____		Total Impervious _____sq. ft.
		Total lot coverage including proposed project: _____sq. ft.

## SECTION II – COMMERCIAL MECHANICAL AND PLUMBING INFORMATION-INSPECTIONS

Fill out completely. Mechanical/Plumbing plans must show the location and size of fixtures, equipment, sized fuel gas piping, medical gas piping/fixtures, ducts, shut offs, return air, exhaust fans, supply and drainage piping, valves, cleanouts, floor drains, vent risers, grease traps, commercial range hoods, extinguishing systems, duct and shaft construction and roof terminations.

MECHANICAL INFORMATION	
Equipment/Fixtures	Quantity
Mechanical Permit Fee	\$25.00
Furnace(s) <input type="checkbox"/> Gas <input type="checkbox"/> Electric (Btu/h: _____)	X _____
Boiler(s) <input type="checkbox"/> Gas <input type="checkbox"/> Electric (hp: _____)	X _____
Air Handler(s) (cfm: _____)	X _____
Ventilation Fan(s)	X _____
Appliance Vent (s)	X _____
Commercial Hood fire suppression system	X _____
Other:	X _____
Other:	X _____
PLUMBING INFORMATION	
Fixtures	Quantity
Plumbing Permit Fee	\$25.00
Hot water Heater <input type="checkbox"/> Gas <input type="checkbox"/> Electric	X _____
Bathroom Sinks	X _____
Toilets	X _____
Kitchen Sink(s)	X _____
Utility Sink(s)	X _____
Floor Drain(s)	X _____
Grease Trap(s)	X _____
Fuel Piping (number of fixtures)	X _____
Exterior Water Faucet(s)	X _____
Other:	X _____
Other:	X _____

**(COMMERCIAL) \$291 per EFU-See Fee Schedule attached-New fixtures**

**\*\*\*All debris from demolition must be disposed of through the City's Solid Waste Department.  
Call 360 855-0929 for delivery of waste containers\*\*\***

**\*\*\*\*All food & drink businesses will require grease traps or interceptors per SWMC  
section 13.24.130\*\*\*Call 360-856-1100 for more information. \*\*\*\*\***

**SECTION III – RESIDENTIAL MECHANICAL AND PLUMBING INFORMATION-INSPECTIONS**

MECHANICAL	
Mechanical Permit Fee	\$25.00 <input type="checkbox"/>
FURNACE <input type="checkbox"/> Gas <input type="checkbox"/> Electric	\$20.00 <input type="checkbox"/> x ____ = \$ ____
Fireplace or Wood/Gas Stove or Inserts	\$20.00 <input type="checkbox"/> x ____ = \$ ____
Floor Heater/Wall Heater/Suspended Heater	\$14.80 <input type="checkbox"/> x ____ = \$ ____
Range Hood	\$9.50 <input type="checkbox"/> x ____ = \$ ____
Laundry Fan	\$7.25 <input type="checkbox"/> x ____ = \$ ____
Bathroom Fan	\$7.25 <input type="checkbox"/> x ____ = \$ ____
Fuel Piping Fixtures (1-5 fixtures)	\$5.00 <input type="checkbox"/> x ____ = \$ ____
Fuel Piping Fixtures (each over 5)	\$2.00 <input type="checkbox"/> x ____ = \$ ____
Misc. (please write in):	\$10.65 <input type="checkbox"/> x ____ = \$ ____
Total Mechanical Fees	\$ _____
PLUMBING	
Plumbing Permit fee	\$25.00 <input type="checkbox"/>
Bathroom Sinks	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Toilets	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Bathtub	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Shower	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Bath/Shower Combo	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Kitchen Sink	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Utility Sink	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Dishwasher	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Clothes Washer	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Exterior Water Faucets	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Other fixtures or drains	\$10.00 <input type="checkbox"/> x ____ = \$ ____
Hot Water Heater <input type="checkbox"/> Gas <input type="checkbox"/> Electric	\$ 7.00 <input type="checkbox"/> x ____ = \$ ____
Total Plumbing Fees	\$ _____

**SECTION IV - SIGNATURE**

Complete for this application. Failure to sign the permit application will result in an incomplete application.

Application is hereby MIXED-USED BUILDING PERMIT. I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the officials of the City of Sedro-Woolley the right to enter the above-described property to inspect the property as part of the permit application review and approval process and/or the proposed or completed work.

**Signature (Required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

# COMMERCIAL GENERAL FACILITY CHARGE WORKSHEET

(SWMC 13.16.035 Table 1)

PERMIT #: \_\_\_\_\_

<b>Commercial General Facility Charge: \$291 per Fixture Unit (FU)</b>				
Fixture Type	FU	No. of Fixtures	Credits (If applicable)	Total FU
Bathtubs	2			
Bidets	2			
Clothes washers, private	2			
Clothes washers, public	6			
Dental Units or cuspidors	1			
Drinking fountains	1			
Floor Drains	2			
Interceptors for grease, oil, solids, etc.	3			
Interceptors for sand, auto wash, etc.	6			
Laundry tubs	2			
Receptors (floor sinks), indirect waste receptors for refrigerators, water stations, etc.	1			
Receptors, indirect waste receptors for commercial sinks, dishwashers, air- washers etc.	3			
Showers, single stalls	2			
Showers, gang (per head)	1			
Sinks and/or dishwashers (residential) (2" min. waste)	2			
Sinks, bar, commercial	2			
Sinks, bar, private	1			
Sinks, commercial or industrial, schools, etc., including dishwashers, wash up sinks and wash fountains	3			
Sinks, flushing rim, clinic	6			
Sinks, service	3			
Sinks, service (3" trap)	6			
Urinals, pedestal, trap arm only	6			
Urinals, stall, separate trap	2			
Urinals, wall-mounted, blowout, integral trap 2" trap arm only	3			
Urinals, wall-mounted, blowout, integral trap 3" trap arm only	6			
Urinals, wall-mounted, washdown or siphon jet, integral trap, trap arm only	2			
Urinals, wall-mounted, washdown, separate trap (2" min. waste)	2			
Wash basins in sets	2			
Wash basins, (lavatories) single	1			
Water closet, private installation	4			
Water closet, public installation	6			
		Total FUs:		
<b>Total FUs: _____</b>	<b>X</b>	<b>\$291 =</b>		