



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

RESIDENTIAL MECHANICAL / PLUMBING PERMIT APPLICATION

APPLICATION No. _____

SECTION I – RESIDENTIAL APPLICATION (NON-COMMERCIAL / NON-INDUSTRIAL)

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

APPLICANT / HOMEOWNER INFORMATION

Name: _____

Project Site Address: _____

Applicant Mailing Address (if different): _____

Email: _____ Parcel # _____

Home #: () Work #: () Fax #: ()

CONTRACTOR INFORMATION

CONTRACTOR NAME / COMPANY: _____

CONTACT: _____

WA. Contractor's No. (Required) _____

WA. Contractor's Expiration Date (Required) _____ / _____ / _____

Sedro-Woolley Business License Endorsement: Yes No

Contractor Mailing Address: _____

Work #: () Fax # ()

3. Describe the work you are seeking an application for:

INSPECTION: _____ / _____
Approved/Signature **Date**

SECTION II – INSPECTION FEES -

MECHANICAL PERMITS AND INSPECTIONS		FEE
Mechanical Permit Fee	\$25.00	<input type="checkbox"/>
Furnace <input type="checkbox"/> Gas <input type="checkbox"/> Electric	\$20.00	<input type="checkbox"/> x _____ = \$ _____
Fireplace, Gas or Wood Stoves/Insert	\$20.00	<input type="checkbox"/> x _____ = \$ _____
Fuel Piping Fixtures up to five fixtures	\$5.00	<input type="checkbox"/> x _____ = \$ _____
For each additional fixture over five	\$2.00	<input type="checkbox"/> x _____ = \$ _____
Exhaust Fan(s)	\$7.25	<input type="checkbox"/> x _____ = \$ _____
Range Hood-residential	\$9.50	<input type="checkbox"/> x _____ = \$ _____
Misc. (please write in):	\$	<input type="checkbox"/> x _____ = \$ _____
Total Mechanical Fees		\$ _____
PLUMBING PERMITS AND INSPECTIONS		FEE
Plumbing Permit fee	\$25.00	<input type="checkbox"/>
Plumbing Fixtures –Sinks, Toilets, Bathtub, etc.	\$10.00 per fixture	<input type="checkbox"/> x _____ = \$ _____
Hot Water Tanks <input type="checkbox"/> Gas <input type="checkbox"/> Electric	\$7.00	<input type="checkbox"/> x _____ = \$ _____
Misc. Plumbing <input type="checkbox"/> (please write in)		= \$ _____
Total Plumbing Fees		\$ _____

SECTION III - SIGNATURE

Application is hereby made for a permit to authorize the activities described herein. 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 location to inspect the proposed or completed work.

Date: _____

Signature of Applicant or Designated Agent (REQUIRED)

The IBC, IRC, IMC and UPC and require the City of Sedro-Woolley to make the following inspections. It shall be the duty of the permit applicant to cause the work to remain accessible, on test and exposed for inspection purposes. Neither the City Building Official nor the Jurisdiction shall be liable for expense entailed in the removal or replacement of any material required to allow inspection. It shall be the duty of the person doing the work . . . “to notify the Building Official that such work is ready for inspection (and) to provide access to (a ladder when necessary) and means for inspection of such work” (IBC/IRC Sec. 109.).

The following is a brief description of WHEN inspections are required.

PLUMBING

1. After rough-in, with drains and supply installed and on test, and before covering
2. Final inspection

MECHANICAL

1. After rough-in, with gas-piping installed and on test, and before covering vents or ducts
2. Final inspection

WHEN SUBMITTING PERMIT APPLICATIONS VIA MAIL SEND APPLICATIONS TO:

City of Sedro-Woolley
Building Department
Attn: Permit Technician
325 Metcalf Street
Sedro-Woolley, WA 98284

CALL (360)855-0139 FOR INSPECTIONS

When you call for an inspection, please supply the following information:

- **Permit number**
- **Site address**
- **Type of inspection**
- **Contact Name and Phone Number**
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