

## PLUMBING PERMIT APPLICATION

Garfield County
Public Works
300 S 19<sup>th</sup> Street
PO Box 160
Pomeroy, WA 99347
509-843-1301

	RESIDENTIAL COMM	MERCIAL
PROJECT LOCATION		
SITE ADDRESS		
TAX PARCEL#		
APPLICANT	□ OWNER □ CONTRACTOR □ OTHER:	
Name:		Day Phone
Mailing Address:		
E-mail:		Cell Phone
PROPERTY OWNER		
Name:		Day Phone
Mailing Address:		
E-mail:		Cell Phone
CONTRACTOR	□ YES □ N/A	
Name:		Day phone
Mailing Address:		
E-mail:		Cell Phone
Contractor License #		Expiration Date
PERSON PERFORMING	THE WORK	
and am legally qualified to p  I am an AUTHORIZED AG defined under RCW 18.27.0: I am EXEMPT from the re the exemption as stated. I w	and properly licensed as a CONTRACTOR or SPECIALITY CONTRACTOR as overform the work sought by this permit; or ENT of the property owner and all work will be done by a properly license 10 and 18.27.110 and is legally qualified to perform the work sought by the equirements of the Contractor Registration laws, per RCW 18.27.090, and will do all of my own work or use all registered and licensed contractors an ander the permit applied herein.	d contractor or a specialty contractor as is permit; or: will abide by all provisions and conditions of
Signature:		Date:
Print Name:		
Labor & Industries at 1-50	ntractor Licensing and Registration Requirements, please contact 09-735-0100 (or) <a href="http://www.lni.wa.gov/">http://www.lni.wa.gov/</a> (or)	

Accessory Structure Permit Revised April, 2019

TROSECT IN ORINATION	Description of Work.
Duciest Voluntier	
Project Valuation	
(Based on Fair Market Value of Labor and	Materials): \$

Description of Work

	Quantity
Toilet	
Sink: Kitchen/Bath/Laundry/Misc.	
Shower	
Bathtub	
Bath/Shower Combo	
Floor Drain	
Clothes Washer	
Dishwasher	
Disposal	
Building Sewer	
Water Piping	
Backflow - Lawn Sprinkler	

	Quantity
Drinking Fountain	
Hose Bib	
Water Heater (Electric)	
Sump Pump	
Gas Piping	
Urinal	
Miscellaneous Fixtures	
Drain-Waste-Vent System	
Grease Trap	
Eye Wash Units	
Trench Drains	
Backflow – Premises Isolation	

## **APPLICANT CERTIFICATION**

\* I certify that I am the <u>owner</u> of the property described above (or) the owner(s) <u>authorized agent</u> and I have been given express permission by the owner(s) of the property to submit this application for permit and that I am authorized by the owner(s) of this property to perform the work for which the application is made and I comply with the requirements of the Washington State Contractors Act, per RCW 18.27. I certify that to the best of my knowledge, the information submitted in support of this permit application is true and correct. I understand that issuance of this permit does not remove the owner's responsibility for compliance with local, state or federal laws regulating construction, land use or environmental laws. This application is not deemed filed until fees are paid.

application is not deemed their rees are paid.		
Signature of Applicant:		
Owner (or) Authorized Agent	Date:	

## **Print Name:**

**NOTICE:** An application for a permit for any proposed work shall be deemed to be abandoned 180 days after the date of filing unless an application has been pursued in good faith or a permit has been issued.

**PAYMENTS**: Make check payable to Garfield County.

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