



# Town of Eatonville

INCOMPLETE APPLICATIONS WILL BE RETURNED- RCW 19.27.095

## RESIDENTIAL Permit Application

**CALL BEFORE  
YOU DIG!  
1-800-424-5555**

Type of Permit  Building  Plumbing  Mechanical  Demolition  Other

Applicant Name (person/CO applying for permit) \_\_\_\_\_

Contact PH Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ **Project Valuation:** \_\_\_\_\_

Site Address: \_\_\_\_\_

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**\*\*Property Owner** \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**\*\*\*\*\*ALL CONTRACTORS / SUB CONTRACTORS MUST HAVE A TOWN BUSINESS LICENSE\*\*\*\*\***

**\*\*Contractor** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ State Contractors License # \_\_\_\_\_

**Plumbing Contractor** \_\_\_\_\_ Cell # \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ State Contractor's License # \_\_\_\_\_

**Mechanical Contractor** \_\_\_\_\_ Cell # \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ State Contractor's License # \_\_\_\_\_

**\*\*Lender / Issuer of Payment Bond** \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Project Information:**

Residential: SFR  Duplex  Multi-Family  Remodel  Addition  Deck  Other

**Describe project/work to be done. Include Site Plan. Include Site Survey/Cross Connection Questionnaire and provide Construction, Mechanical, Plumbing specs as applicable:**

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

\*\*\*\*\*

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_ Lot Sq. Ft: \_\_\_\_\_  
Height \_\_\_\_\_ Stories \_\_\_\_\_ Dwelling Units \_\_\_\_\_ Building 1st Floor Sq. ft \_\_\_\_\_  
2nd Floor Sq. ft \_\_\_\_\_ Garage Sq. ft: \_\_\_\_\_ Deck/Porch Sq. ft \_\_\_\_\_ Covered? \_\_\_\_\_  
Number of Bedrooms: \_\_\_\_\_ Number of Baths \_\_\_\_\_ Fireplace: Wood / Propane / Electric  
Type of Heat (if available) Propane / Electric Heating Mode: \_\_\_\_\_  
Size of any out building(s) Built: \_\_\_\_\_ X \_\_\_\_\_; \_\_\_\_\_ X \_\_\_\_\_; \_\_\_\_\_ X \_\_\_\_\_

**Utility**

**Information:** Water \_\_\_\_\_ Sewer \_\_\_\_\_ Electrical \_\_\_\_\_ Irrigation \_\_\_\_\_

**Manufactured and Modular Homes:**

Make: \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Size: \_\_\_\_\_

*I hereby certify that I have read and examined this application and know the same to be true and correct. I further certify that I have read the Town of Eatonville Builders Packet and know that this submittal is in accordance with the information supplied therein. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.*

**EMC 8.11.110 Construction Hours: 7 AM – 7 PM Mon-Fri; 9 AM to 6 PM, Sat – Sun**

**Proof of Town of Eatonville Business License is required**

**PLEASE NOTE: IF APPLICATION REQUIRES OUTSIDE REVIEW FROM CONTRACTED PLANNER OR ENGINEERING FIRM, THOSE FEES INCURRED BY THE TOWN WILL BE PASSED THROUGH TO APPLICANT PRIOR TO ISSUANCE OF PERMIT.**

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Per RCW 19.27.095, applications must include information on the lender administrating interim construction financing, if any, or information on the issuer of a payment bond on behalf of the prime contractor for the protection of the owner, if the bond is for an amount not less than 50% of the total amount of the construction project.*

**No site work shall begin until the permit is issued, and all fees are paid.**

Town of Eatonville Building / Planning Dept. 201 Center St W. Eatonville, WA 98328 / 360-832-3361