



Permit # _____

City of Milton

BUILDING PERMIT APPLICATION

Building Department
1000 Laurel Street
Milton, WA 98354
Phone: 253-922-8738
Fax: 253-922-3466
www.cityofmilton.net

#1 (Please check all that apply)

_____ Building _____ Mechanical _____ Plumbing _____ Reroof
_____ Fire Alarm _____ Fire Sprinkler _____ Demolition _____ Other

#2 - SITE LOCATION

Site Address: _____
Tax Parcel Number: _____ County: _____

#3 - TYPE OF WORK

Building Use Classification: _____

#4 - BUILDING PERMIT INFORMATION

Description of work to be done: _____

Project Name: _____

*Value of Construction: \$ _____

Tenant Number/Name (Location/Bldg/Unit/Floor/Suite Designation): _____

Gross Building Square Footage of Project: _____

#6 - PROPERTY OWNER

Owner Name: _____ Phone #: _____
Mailing Address: _____

#7 - CONTRACTOR INFORMATION

Company Name: _____

Mailing Address: _____

Contact Person: _____ Phone #: _____

Email Address: _____ Fax #: _____

State Contractor's License #: _____ Expiration Date: _____

City Business License #: _____ UBI #: _____

#7 - DESIGN PROFESSIONAL (Architect/Engineer)

Company Name: _____

Mailing Address: _____

Contact Person: _____ Phone #: _____

Email Address: _____ Fax #: _____

#8 - CONTACT PERSON (This person is designated to receive all project communications)

Name: _____ Phone #: _____

Mailing Address: _____

Email Address: _____

OVER →

UPDATED: 8/30/18

#9 - BUILDING PERMIT Commercial Residential

(Circle one below)

New **Addition** **Alteration** **Repair** **Tenant Improvement** **Change of Use**

Occupancy: _____ Gross Building Square Footage: _____

Use: _____ Height: _____

Construction Type: _____ Stories: _____

Change of Use: _____ Occupant Load: _____

Zone: _____

#10 - MECHANICAL PERMIT (New, Replacement or Relocated) Gas Elec Other

	Qty/Size		Qty/Size		Qty/Size
AC, Handler or Heat Pump	_____	Gas Pipe	_____	Ventilation Exhaust Fan	_____
Boiler, Refrigeration Sys., or Radiant Floor	_____	Gas Water Heater	_____	Solid Fuel Appliance (Wood or Pellet Stove Insert)	_____
Fire/Smoke Damper	_____	Gas, Log Insert or Fireplace	_____	Other Appliance/Equipment	_____
Furnace (Gas, Oil, Electric)	_____	Range Hood, Residential	_____	Other Pipe	_____
Gas Clothes Dryer	_____	Range Hood, Commercial	_____	Base Mechanical Fee	_____

***Must meet Washington State Requirements**
(Provide Efficiency Rating of all Heating, Cooling and Domestic Water Heating Equipment)

#11 - PLUMBING PERMIT (New, Replacement or Relocated)

	Quantity		Quantity		Quantity
Backflow Device	_____	Floor Drain / Sump	_____	Waste/Grease Interceptor	_____
Bathtub/Shower	_____	Hose Bibb	_____	Water Svc Line/Piping	_____
Clothes Washer	_____	Lavatory/Indirect Floor Sink	_____	Other Equipment, Fixtures or Devices	_____
Drinking Fountain	_____	Lawn Sprinkler/Irrigation Sys.	_____		
Electric Water Heater	_____	Toilet / Urinal / Bidet	_____	Base Plumbing Fee	_____

#12 - FIRE PERMIT (Fire Alarm, Fire Sprinkler and Other Fixed Fire Extinguishing System)

Fire Sprinkler System	_____	Number of Heads	_____
Fire Alarm	_____	Number of Devices	_____
Other Fixed Fire Extinguishing System	_____		

#13 - DEMOLITION PERMIT

Asbestos Survey Report _____ (Attach Copy) _____ Erosion & Sediment Control (ESC) Requirements for Demo Permits

Puget Sound Clean Air Agency (PSCAA) Report _____ (Attach Copy) _____ **(Applicant Must Sign)**

#14 - NOTICE

I hereby certify, under penalty of perjury, that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of the permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.

Signature of Owner/Contractor/Authorized Agent

#15 - STAFF COMMENTS
