



**CITY OF TUKWILA**  
 Community Development Department  
 Public Works Department  
 Permit Center  
 6300 Southcenter Blvd., Suite 100  
 Tukwila, WA 98188  
<http://www.TukwilaWA.gov>

<b>Building Permit No.</b> _____ Project No. _____ Date Application Accepted: _____ Date Application Expires: _____ (For office use only)
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## CONSTRUCTION PERMIT APPLICATION

Applications and plans must be complete in order to be accepted for plan review.  
 Applications will not be accepted through the mail.  
 \*\*Please Print\*\*

### SITE INFORMATION

King Co Assessor's Tax No.: \_\_\_\_\_

Site Address: \_\_\_\_\_ Suite Number: \_\_\_\_\_ Floor: \_\_\_\_\_

Tenant Name: \_\_\_\_\_ **New Tenant:**  . Yes  ..No

PROPERTY OWNER			
Name:			
Address:			
City:	State:	Zip:	

CONTACT PERSON – person receiving all project communication			
Name:			
Address:			
City:	State:	Zip:	
Phone:			
Email:			

DESIGN PROFESSIONAL IN RESPONSIBLE CHARGE			
*Letter from owner (on company letter head) designating			
Name:			
Address:			
City:	State:	Zip:	
Phone:			
Email:			

GENERAL CONTRACTOR INFORMATION			
Company Name:			
Address:			
City:	State:	Zip:	
Phone:			
St Contr Reg No.:		Exp Date:	
Tukwila Business License No.:			

ARCHITECT OF RECORD			
Company Name:			
Address:			
City:	State:	Zip:	
Phone:			
Email:			

ENGINEER OF RECORD			
Company Name:			
Address:			
City:	State:	Zip:	
Phone:			
Email:			

LENDER – WHO IS FUNDING THE PROJECT			
(required for projects \$5,000 or greater per RCW 19.27.095)			
Name:			
Address:			
City:	State:	Zip:	

MONTHLY SERVICE BILLING -or- WATER METER REFUND/BILLING			
Name:			
Address:			
City:	State:	Zip:	
Phone:			

**BUILDING DIVISION INFORMATION – 206-431-3670**

Valuation of Project (contractor's bid price): \$ \_\_\_\_\_ Existing Building Valuation: \$ \_\_\_\_\_

Describe the scope of work (please provide detailed information): \_\_\_\_\_

Will there be new rack storage? .. Yes .. No If yes, a separate permit and plan submittal will be required.

**Provide All Building Areas in Square Footage Below**

	Existing	Interior Remodel	Addition to Existing Structure	New	Type of Construction per IBC	Type of Occupancy per IBC
1 <sup>st</sup> Floor						
2 <sup>nd</sup> Floor						
3 <sup>rd</sup> Floor						
Floors _____ thru _____						
Basement						
Accessory Structure*						
Garage <input type="checkbox"/> Attached <input type="checkbox"/> Detached						
Carport <input type="checkbox"/> Attached <input type="checkbox"/> Detached						
Covered Deck						
Uncovered Deck						

**PLANNING DIVISION INFORMATION – 206-431-3670**

Single family building footprint (area of the foundation of all structures, plus any decks over 18 inches and overhangs greater than 18 inches) \_\_\_\_\_

\*For an Accessory dwelling, provide the following:

Lot Area (sq ft): \_\_\_\_\_ Floor area of principal dwelling: \_\_\_\_\_ Floor area of accessory dwelling: \_\_\_\_\_

\*Provide documentation that shows that the principal owner lives in one of the dwellings as his or her primary residence.

Number of Parking Stalls Provided: Standard: \_\_\_\_\_ Compact: \_\_\_\_\_ Handicap: \_\_\_\_\_

Will there be a change in use? ..... Yes ..... No If "yes", explain: \_\_\_\_\_

**FIRE PROTECTION/HAZARDOUS MATERIALS – 206-575-4407**

.....Sprinklers .....Automatic Fire Alarm .....None .....Other (specify) \_\_\_\_\_

Will there be storage or use of flammable, combustible or hazardous materials in the building? ..... Yes .....No  
If "yes", attach list of materials and storage locations on a separate 8-1/2" x 11" paper including quantities and Material Safety Data Sheets.

**PUBLIC WORKS INFORMATION – 206-433-0179**

...Permanent Water Meter Size (1) \_\_\_\_\_" WO # \_\_\_\_\_ (2) \_\_\_\_\_" WO # \_\_\_\_\_ (3) \_\_\_\_\_" WO # \_\_\_\_\_  
 ...Temporary Water Meter Size (1) \_\_\_\_\_" WO # \_\_\_\_\_ (2) \_\_\_\_\_" WO # \_\_\_\_\_ (3) \_\_\_\_\_" WO # \_\_\_\_\_  
 ...Water Only Meter Size....." WO # \_\_\_\_\_ .....Deduct Water Meter Size \_\_\_\_\_"  
 ...Sewer Main Extension.....Public  Private  ...Water Main Extension Public  Private

**PERMIT APPLICATION NOTES –**

**Value of Construction** – In all cases, a value of construction amount should be entered by the applicant. This figure will be reviewed and is subject to possible revision by the Permit Center to comply with current fee schedules.

**Expiration of Plan Review** – Applications for which no permit is issued within 180 days following the date of application shall expire by limitation.

The Building Official may grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated. Section 105.3.2 International Building Code (current edition).

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE UNDER PENALTY OF PERJURY BY THE LAWS OF THE STATE OF WASHINGTON, AND I AM AUTHORIZED TO APPLY FOR THIS PERMIT.

**BUILDING OWNER OR AUTHORIZED AGENT:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Day Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City State Zip