



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

<b>Plumbing/Gas Permit No.</b> _____ Project No. _____ Date Application Accepted: _____ Date Application Expires: _____ (For office use only)
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## PLUMBING / GAS PIPING PERMIT APPLICATION

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

### SITE LOCATION

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

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

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

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

PLUMBING CONTRACTOR INFORMATION	
Company Name: _____	
Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	Fax: _____
Contr Reg No.: _____	Exp Date: _____
Tukwila Business License No.: _____	

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

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

Scope of Work (please provide detailed information):

Building Use (per Int'l Building Code): \_\_\_\_\_

Occupancy (per Int'l Building Code): \_\_\_\_\_

Utility Purveyor: Water: \_\_\_\_\_ Sewer: \_\_\_\_\_

Indicate type of plumbing fixtures and/or gas piping outlets being installed and the quantity below:

Fixture Type	Qty
Bathtub or combination bath/shower	
Dishwasher, domestic with independent drain	
Shower, single head trap	
Sinks	
Rain water system – per drain (inside building)	
Grease interceptor for commercial kitchen (>750 gallon capacity)	
Each additional medical gas inlets/outlets greater than 5	
Atmospheric-type vacuum breakers not included in lawn sprinkler backflow protections (1-5)	

Fixture Type	Qty
Bidet	
Drinking fountain or water cooler (per head)	
Lavatory	
Urinal	
Water heater and/or vent	
Repair or alteration of water piping and/or water treatment equipment	
Backflow protective device other than atmospheric-type vacuum breakers 2 inch (51 mm) diameter or smaller	
Atmospheric-type vacuum breakers not included in lawn sprinkler backflow protections over 5	

Fixture Type	Qty
Clothes washer, domestic	
Food-waste grinder, commercial	
Wash fountain	
Water closet	
Industrial waste treatment interceptor, including trap and vent, except for kitchen type grease interceptors	
Repair or alteration of drainage or vent piping	
Backflow protective device other than atmospheric-type vacuum breakers over 2 inch (51 mm) diameter	
Gas piping outlets	

Fixture Type	Qty
Dental unit, cuspidor	
Floor drain	
Receptor, indirect waste Building sewer and each trailer park sewer	
Each grease trap (connected to not more than 4 fixtures - <750 gallon capacity)	
Medical gas piping system serving 1-5 inlets/outlets for a specific gas	
Each lawn sprinkler system on any one meter including backflow protection devices	

**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 extension of time for an additional period not to exceed 180 days. The extension shall be requested in writing and justifiable cause demonstrated. Section 103.4.3 International Plumbing 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