

Inspection Services | Building Division 525 N 3<sup>rd</sup> Ave, Pasco, WA 99301 P: 509.543.5726

www.pasco-wa.gov | permittech@pasco-wa.gov

FOR STAFF USE ONLY Permit #

Commercial Construction Permit Application					
Permit Type (check one):  New Building  Addition  Tenant Improvement  Sign (s)  Change of Occupancy  Demolition  Other (use description line below)					
Site Address: Parcel No.:		Pr		Project/Construction Value:	
Applicant is (check one): Owner Contractor Architect Other:					
Applicant Contact Name:		Pho	one#:	Email:	
Legal Property Owner:		Phone #:			
Mailing Address:		Email:			
Contractor:		Phone#:			
Mailing Address:		Email:			
State Contractors License#:		City of Pasco Business License #:			
Architect/Engineer:		Phone #:			
Mailing Address:		Email:			
Detailed Description of Work:					
Whole Building Square Footage:	#of Stories:	Construction Type:			
Sq.Ft. of area being Modified:	# of Units:	A B IIA IIB IIIA IIIB IV VA VB  Occupancy Type:			
Select the dust control method that will be used. The approved methods of dust control are as follows:					
Hydro-seed Chemical/Physical Soil Binder Sprinklers Contract withfor water truck					
Select the litter control measures that will be in place for the duration of construction:					
Onsite Container through Contract with BDI Will provide own trailer/ haul daily as needed					
I certify the information furnished by me is true and correct and that I am the owner of the subject property or I have been given express permission by the owner of the subject property, to submit this application for permit. I will comply with all provisions of law, code and ordinances governing this type of construction work, including state contractor registration laws. I understand that once accepted, this application is valid for 30 days. If the permit is not obtained within 30days, the permit application and all submitted building and site plans will be destroyed.					
Applicant Name (please print)					
Applicant Signature				Date	



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## **Utility Service Connection Application**If this property is within city limits, this application would be in addition to the Building Permit Application.

Property & Owner Information:	
Site Address: F	Parcel:
Legal Property Owner Name:	
Lot Width:feet Lot Depth:fe	eet
If lot is irregular shaped, provide lot square footage:	sq.ft.
Site/Field Contact:	
Name: Phone/Ema	ail:
Utility Billing Information:	
Billing Name:	
Billing Address:	<u></u>
City, State & Zip:	
Services Requested:	
_ ·	desired services does not guarantee availability of those services.
Water Meter Size Requested: inches	,
When the water meter is set, do you want to defer the activation of the	ne account by having it locked off? Yes D No D
Locked Meter: Selecting this option means that, once the water met irrigation (if applicable) utility base fees while the meter is locked. How to submit a written request to Utility Billing to unlock the meter and the	er is installed, you will only be billed for storm drain and vever, please be aware that to access services, you will need
<b>Unlocked Meter:</b> Opting for an unlocked meter installation means the ambulance, and irrigation, which are tied to the meter and the final unmeter. This ensures immediate access to services without any additional contents.	se of the parcel, will be billed upon the installation of the water
If your water meter is being used for irrigation purposes the meter wi	ll be locked automatically.
Utility Connection Acknowledgement	
The applicant's signature is accepted understanding applicant has pern this application and is acting in the property owner's interest. Applicant further agrees to conform to all ordinances, rules, and regulat supplemented governing the Water/Sewer utilities.	
Applicant further agrees that the City of Pasco shall have the right to she for repairs, extensions, nonpayment of rates, or for other good cause, any damage caused by breaking, bursting or collapsing of any boilers, the water supply, the shutting off of the water as a condition precedent Applicants for water service who are converting to the city utility from w residence prior to connection of city water service to prevent contaminate.	and that the City of Pasco shall not be responsible for bipes or fixtures or by the stoppage or interruption of to receiving water service . ell service must disconnect their well water to their
Name of Applicant (print):	
Signature of Applicant:	Date