



**City of Fife**  
**Building Permit Application**

Permit # \_\_\_\_\_

(Please Check All That Apply)

\_\_\_\_\_ **BUILDING**                      \_\_\_\_\_ **MECHANICAL**                      \_\_\_\_\_ **PLUMBING**  
\_\_\_\_\_ **SPRINKLER**                      \_\_\_\_\_ **DEMOLITION**                      \_\_\_\_\_ **OTHER**

**PROJECT** \_\_\_\_\_ **Valuation** \_\_\_\_\_

Address \_\_\_\_\_

**PARCEL(S) #** \_\_\_\_\_

**APPLICANT** \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

**CONTACT** \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Company \_\_\_\_\_ e-mail \_\_\_\_\_

**PROPERTY OWNER** \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

**LIEN HOLDER** \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

**CONTRACTOR** \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

**CONTRACTOR'S LICENSE #** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**ARCHITECT/DESIGNER** \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

**ENGINEER** \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

**DESCRIBE WORK:** \_\_\_\_\_

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

Permit \$	Plan Check \$	Permit Total \$
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**BUILDING PERMIT**

Commercial  Residential

Occupancy Group \_\_\_\_\_ Floor Area \_\_\_\_\_ New \_\_\_\_\_ TI \_\_\_\_\_  
Add \_\_\_\_\_ Alt \_\_\_\_\_  
Construction Type \_\_\_\_\_ Height \_\_\_\_\_ Use \_\_\_\_\_ Zone \_\_\_\_\_  
Occupancy Load \_\_\_\_\_ Stories \_\_\_\_\_ Other \_\_\_\_\_  
SEPA YES \_\_\_\_\_ NO \_\_\_\_\_ # \_\_\_\_\_

State Code Fee: \$4.50

Permit fee for TI/ALT based on project valuation

Permit fee for new construction based on square footage by Occupancy Group and Construction Type

**MECHANICAL PERMIT**

Item	# of / Size	Item	# of / Size	Item	# of
HVAC Unit		Cooler		Vent Fans	
>100,000 BTU		Air Conditioner		Exhaust Hood	
Heater		Boiler		Appliance Vent	
Other		Air Handler		Gas Piping	

Permit Fee Based on Equipment/Size: Contact permit coordinator for quote.

**PLUMBING PERMIT**

Item	# of	Item	# of	Item	# of	Item	# of
Water Closet		Clothes Washer		Backflow Device		Water Heater	
Urinal		Dish Washer		>2"		Eff. Rating	
Sinks/Fountains		Floor Drain		Oil Water Sep.		Other:	
Showers/Tub		Refrig Drain		Grease Intercept			

Permit Fee Based on Fixtures: Contact permit coordinator for quote.

**SPRINKLER PERMIT**

Type of System \_\_\_\_\_ # of Heads \_\_\_\_\_

Permit Fee Based on Valuation: Contact permit coordinator for quote.

**DEMOLITION PERMIT**

Asbestos Abatement Report \_\_\_\_\_ (a copy attached)

Clean Air Agency Report \_\_\_\_\_ (a copy attached)

Permit Fee: \$100

Type:

SFR \_\_\_\_\_

Tank \_\_\_\_\_

Other \_\_\_\_\_

**OTHER**

Type \_\_\_\_\_

**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 or the performance of construction.**

Signature of Owner/Contractor/Authorized Agent

Date