



PERMIT APPLICATION
BUILDING / MECHANICAL / PLUMBING / SIGN / SPRINKLER / DEMOLITION

CITY OF EVERETT PERMIT SERVICES
 3200 CEDAR STREET, EVERETT, WA 98201
 (P) 425-257-8810 | FAX 425-257-8857 | (E) everetteps@everettwa.gov | www.everettwa.gov/permits

(Blue or Black Ink Only Please) PROJECT SITE INFORMATION

PROJECT SITE ADDRESS:	PROPERTY TAX #:
LEGAL for new construction: Short Plat/subdivision _____ Lot No. _____ (attach copy of long legal description)	

CONTACT INFORMATION

OWNER NAME:		TENANT BUSINESS NAME (Commercial):	
OWNER MAILING ADDRESS: STREET _____			
CITY _____		STATE _____	ZIP _____
OWNER PHONE:		OWNER EMAIL:	
CONTRACTOR NAME:			
CONTRACTOR ADDRESS: STREET _____			
CITY _____		STATE _____	ZIP _____
CONTRACTOR PHONE:		CONTRACTOR EMAIL:	
CONTRACTOR LICENSE #(REQUIRED):		CITY OF EVERETT BUSINESS LICENSE #(REQUIRED):	
PRIMARY CONTACT: <input type="checkbox"/> OWNER <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> OTHER (Please Specify) _____			
CONTACT NAME:		CONTACT PHONE:	
		CONTACT EMAIL:	

BUILDING INFORMATION

Existing Use of Building:	Contract Price of Work: \$ _____
Proposed Use of Building:	Heat Source: <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
BUILDING USE: <input type="checkbox"/> SFR <input type="checkbox"/> Townhouse <input type="checkbox"/> Duplex <input type="checkbox"/> ADU <input type="checkbox"/> Multi-Family - # Units: _____ <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory Structure	
Type of Project: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> T.I. <input type="checkbox"/> Sign <input type="checkbox"/> Sprinkler <input type="checkbox"/> Demolition <input type="checkbox"/> Change of Use	
DESCRIPTION OF WORK:	
ASSOCIATED BUILDING PERMIT # (if applicable):	

MECHANICAL PERMIT APPLICATION	PLUMBING PERMIT APPLICATION
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Fixture Count	List of Fixtures	Fixture Count	List of Fixtures	Fixture Count	List of Fixtures
	A/C – Air Handling Units		Gas Piping		Backflow Preventer (Inside Bldg)
	Boiler		Gas Range		Clothes Washer
	Clothes Dryer		Heat Pump&Ductless		Dishwasher
	Duct System (Remodel)		Refrigeration		Drinking Fountain
	Exhaust Fans (Residential)		Commercial Ventilation (Not Heat/AC system)		Floor Drain
	Exhaust Hood (Type I)				Hose Bibb
	Exhaust Hood (Type II)		Water Heater		Interceptor-Grease
	Exhaust Hood (Residential)		Wood Stove		Interceptor-Sand/Oil
	Forced Air Systems		Other:		Medical Gas
	Gas Fireplace/Insert/Log				Roof Drains
SPRINKLER / SUPPRESSION SYSTEM					Sewage Ejector or Sump Pump
	Water Suppression System		No. of Heads		
	Chemical Suppression System		No. of Heads		

ACKNOWLEDGEMENT: I have reviewed this application and confirm the information contained herein is true and correct. Work done pursuant to this permit must comply with current federal, state, and local law. The granting of a permit only authorizes approved work and no deviations therefrom. Deviations must first be authorized in writing from the Building Official before being authorized under any circumstance. I am the owner, or I am authorized by the owner of this property to perform the work for which application is made, and I comply with the State Contractors Law 18.27 RCW and 296.200A WAC.

City of Everett Official Use Only

PERMIT #

Owner/Authorized Agent Signature _____ Date _____

(Revised 10/10/2018)