



CITY OF PORT ORCHARD

Permit Center

Office located at 720 Prospect Street

Mailing address: 216 Prospect Street

Port Orchard, WA 98366

(360) 874-5533 • permitcenter@portorchardwa.gov

TEMPORARY USE PERMIT APPLICATION for CONSTRUCTION RESIDENCE

For Staff Use Only

File #:

Receipt #:

Incomplete Application Will Not Be Accepted

1. PROJECT INFORMATION.

Check all boxes to affirm the following:

- ☐ This application is for a temporary dwelling for the property owner(s) while the permanent residence is constructed.
- ☐ The temporary residence has adequate provision for sanitary sewer and water.
- ☐ A building permit application for a permanent dwelling on the site has been submitted.

Has a building permit been issued?

- ☐ No.
- ☐ Yes.

Building Permit No.: _____

Water Utility Provider: *(check the appropriate box)*

- ☐ City of Port Orchard
- ☐ West Sound Utility District
- ☐ Other *(list)*: _____

Sewer Utility Provider: *(check the appropriate box)*

- ☐ City of Port Orchard
- ☐ West Sound Utility District
- ☐ Other *(list)*: _____

Proposed date for beginning temporary use: _____

Projected date when the use shall be terminated and removed: _____

2. SUBMITTAL REQUIREMENTS.

Electronic submittals are required. See the Online Permitting website page for formatting and resolution requirements.

This application shall include the following items unless specifically waived by DCD:

Check the box for each item included with this application:

- ☐ **The Master Permit Application**, completed.
- ☐ **The Temporary Use Permit Application for Construction Residence** *(this form)*.
- ☐ Must include the **original** signed and notarized Owner Statement. *(page 2 of this application)*.
NOTE: We will accept the electronic copy of the Owner Statement as a placeholder when submitting the application. The **original** must be mailed in or dropped off before a Counter Complete application will be accepted.
- ☐ **A Project Narrative**, which includes a detailed description of the proposal.

Submittal Requirements continued on page 2.

2. SUBMITTAL REQUIREMENTS, *continued*.☐ **A Site Plan. Include:**

- ☐ Drawn to scale with North arrow and map scale.
- ☐ Ability to print to scale at 11" x 17".
- ☐ Nearest major streets, roads and waterways in the area.
- ☐ Existing and proposed parking and access.
- ☐ Location of water, sewer and utility lines.
- ☐ Distances from property lines and to permanent residence construction site.

OWNER**SELECT THE APPROPRIATE STATEMENT:**

- ☐ I affirm that the property affected by this application is in my exclusive ownership.
- ☐ I affirm that the property affected by this application is not in my exclusive ownership. This application is submitted with the consent of all owners of the affected property.

IF AN AGENT IS SUBMITTING THIS APPLICATION ON YOUR BEHALF, complete this verification statement:

As the record owner of the subject property, I authorize _____,
as my Authorized Agent to submit this application on my behalf.

The application as completed is true and correct to the best of my knowledge.

Signature of Owner (Must be notarized)

Print Name of Owner

Date

STATE OF WASHINGTON)
) SS
COUNTY OF KITSAP)

I certify that I know or have satisfactory evidence that _____
is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument.

WITNESS MY HAND AND OFFICIAL SEAL this _____ day of _____, 20____.

NOTARY PUBLIC in and for the
State of Washington, residing at

My appointment expires: