



CITY OF PORT ORCHARD
Permit Center

MASTER PERMIT APPLICATION FORM

For Title 20 permit types. Check the boxes on page 2 for all permits applied for at this time.

AN INCOMPLETE APPLICATION WILL NOT BE ACCEPTED

| | |
|--|---|
| 1. PROJECT INFORMATION: | |
| Project Name: | Parcel Size: |
| Site Address/ Location: | |
| Tax Parcel Number(s): | |
| Existing Use of Property: | |
| Project Description / Scope of Work: <i>(Be specific)</i> | |
| List any permits or decisions previously obtained for this project: | |
| Is your project served by public water and/or public sanitary sewer systems? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Sewer Provider: _____ Water Provider: _____ If no: Kitsap Public Health District approval documentation must be submitted with this application. | |
| Is the project within the floodplain? <input type="checkbox"/> Yes <input type="checkbox"/> No | Is the project within 200' of the shoreline? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Zoning Designation: | Overlay District Designation: |
| These surface waterbodies are on or adjacent to the property: <i>(check all that apply)</i> <input type="checkbox"/> Saltwater <input type="checkbox"/> Creek <input type="checkbox"/> Pond <input type="checkbox"/> Wetland <input type="checkbox"/> None | |
| Does the project include new construction within 200' of a geologically hazardous area? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Was there a Pre-Application meeting with Staff for this project? <input type="checkbox"/> No <input type="checkbox"/> Yes: date _____ | |
| 2. WATER, SEWER, AND TRANSPORTATION CAPACITY VERIFICATION. <i>Check the box below that applies:</i> | |
| <input type="checkbox"/> Concurrency is not required. This permit type is exempt per POMC 20.180.004. <i>List the code reference (a – t) and permit type: _____</i> | |
| <input type="checkbox"/> A Capacity Reservation Certificate (CRC) Application for Water, Sewer and Transportation is included. <i>Use the CRC Application form for submittal requirements.</i> | |
| <input type="checkbox"/> A previously issued and unexpired city-issued CRC for Water, Sewer, and Transportation is included. <i>(Provide two copies)</i> | |
| <input type="checkbox"/> A combination of documents from the City, and/or other Utility Districts (West Sound, Bremerton) and/or the Health District (well/septic) which verifies concurrency for water, sewer, and transportation capacity for the project is included. | |
| <input type="checkbox"/> Demolition of an existing building or termination of previous use was within the last five years. There is no net impact increase by the proposed new structure or land use on city's water, sewer, or road facilities. <i>(Demolition permit or prior use records are required)</i> | |
| 3. DESIGN STANDARDS. <i>POMC 20.127 Check the box below that corresponds with this project:</i> | |
| <input type="checkbox"/> An exception listed below applies to this project. Design Standards do not apply. <i>Check exception:</i> | |
| <input type="checkbox"/> This application is for a Single-Family Residence or a Duplex. | |
| <input type="checkbox"/> This project is located in the Old Clifton Industrial Park. | |
| <input type="checkbox"/> This project is in an Industrial zone, and the Director has waived Design Standards. <i>(Provide a copy of the Waiver)</i> | |
| <input type="checkbox"/> This project is a Tenant Improvement or other interior work within an existing building that does not: | |
| <ul style="list-style-type: none"> <input type="checkbox"/> include site improvement. <input type="checkbox"/> change the building footprint. <input type="checkbox"/> change the exterior of the building. <input type="checkbox"/> increase the gross floor area of the structure. | |
| <input type="checkbox"/> Design Standards apply to this project. | |

4. PERMIT TYPES. Check all types that you are applying for at this time.

Land Use / Planning:

| | | |
|---|--|---|
| <input type="checkbox"/> Accessory Dwelling Unit | <input type="checkbox"/> Final Plat | <input type="checkbox"/> Shoreline (check all that apply): |
| <input type="checkbox"/> Administrative Interpretation | <input type="checkbox"/> Final Plat, Alteration | <input type="checkbox"/> Substantial Development, Hearing |
| <input type="checkbox"/> Binding Site Plan, Preliminary | <input type="checkbox"/> Final Plat, Vacation | <input type="checkbox"/> Substantial Development, Admin. |
| <input type="checkbox"/> Binding Site Plan, Alteration of Prelim. | <input type="checkbox"/> Non-conforming Use | <input type="checkbox"/> Conditional Use Permit, Hearing |
| <input type="checkbox"/> Binding Site Plan, Final | <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Conditional Use Permit, Admin. |
| <input type="checkbox"/> Binding Site Plan, Alteration of Final | <input type="checkbox"/> Preliminary Plat, Minor Modifications | <input type="checkbox"/> Variance, Hearing |
| <input type="checkbox"/> Binding Site Plan, Vacation of Final | <input type="checkbox"/> Preliminary Plat, Major Modifications | <input type="checkbox"/> Variance, Admin. |
| <input type="checkbox"/> Boundary Line Adjustment | <input type="checkbox"/> Pre-submittal Design Review | <input type="checkbox"/> Short Plat, Preliminary |
| <input type="checkbox"/> Comprehensive Plan Map Amend. | <input type="checkbox"/> Rezone, Site Specific | <input type="checkbox"/> Short Plat, Modifications to Preliminary |
| <input type="checkbox"/> Comprehensive Plan Text Amend. | <input type="checkbox"/> Rezone, View Protection | <input type="checkbox"/> Short Plat, Final |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> SEPA | <input type="checkbox"/> Short Plat, Alteration of Final |
| <input type="checkbox"/> Critical Areas Review | <input type="checkbox"/> Shoreline Exemption | <input type="checkbox"/> Short Plat, Vacation of Final |
| <input type="checkbox"/> Design Review Board Project Review | <input type="checkbox"/> Sign (Land Use regulations) | <input type="checkbox"/> Temporary Use Permit |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Statement of Restrictions | <input type="checkbox"/> Temporary Use Permit Extension |
| | | <input type="checkbox"/> Variance, Administrative |
| | | <input type="checkbox"/> Variance, Hearing |

Public Works:

| | | |
|---|--|--|
| <input type="checkbox"/> Capacity Reservation Certificate | <input type="checkbox"/> Right-of-Way Permit | <input type="checkbox"/> Stormwater Drainage Permit |
| <input type="checkbox"/> Land Disturbing Activity Permit | <input type="checkbox"/> Street Use Permit | <input type="checkbox"/> Water and/or Sewer Connection |

Building:

| | | |
|--|---|---|
| <input type="checkbox"/> Commercial, New building / Addition | <input type="checkbox"/> Demolition | <input type="checkbox"/> Residential Plumbing |
| <input type="checkbox"/> Commercial, Alteration / Repairs | <input type="checkbox"/> Manufactured Home | <input type="checkbox"/> Residential Mechanical |
| <input type="checkbox"/> Commercial Tenant Improvement | <input type="checkbox"/> Multi-family (3 units or more) | <input type="checkbox"/> Re-roof |
| <input type="checkbox"/> Commercial Plumbing | <input type="checkbox"/> Residential, New | <input type="checkbox"/> Sign (Construction of) |
| <input type="checkbox"/> Commercial Mechanical | <input type="checkbox"/> Residential, Addition / Alteration | <input type="checkbox"/> Siding, Windows and/or Doors |

Fire Code:

| | | |
|--|--|---|
| <input type="checkbox"/> Fire Sprinkler | <input type="checkbox"/> Fireworks Display | <input type="checkbox"/> Hot Work |
| <input type="checkbox"/> Fire Alarm | <input type="checkbox"/> Fireworks Sales | <input type="checkbox"/> Motor Fuel-dispensing/ Repair Garage |
| <input type="checkbox"/> Fire Suppression System | <input type="checkbox"/> High Pile Storage | <input type="checkbox"/> Temporary Tent / Membrane Structure |
| | | <input type="checkbox"/> Tank Install / Decommission |

Other:

| | | |
|---|--|---|
| <input type="checkbox"/> Address Request | <input type="checkbox"/> Floodplain Development Permit | <input type="checkbox"/> Site Plan Checklist |
| <input type="checkbox"/> Design Standards Departure Request | <input type="checkbox"/> Road Name Request | <input type="checkbox"/> Variation from Engineering Standards |
| | | |
| | | |

5. CONTACT INFORMATION.

Applicant (Company and contact name): _____

Relationship to the Property: Owner Authorized agent

Mailing Address (street, city, state, zip): _____

Phone: _____ **E-mail:** _____

Property Owner (if different than Applicant): _____

Mailing Address (street, city, state, zip): _____

Phone: _____ **E-mail:** _____

Engineer (Company and contact name): _____

Mailing Address (street, city, state, zip): _____

Phone: _____ **E-mail:** _____

Note: Both the Surveyor and the Engineer must be listed for plats.

Surveyor (Company and contact name): _____

Mailing Address (street, city, state, zip): _____

Phone: _____ **E-mail:** _____

Other (list type, company and contact name): _____

Mailing Address (street, city, state, zip): _____

Phone: _____ **E-mail:** _____

Contractor: _____ **Contact Name:** _____

Phone: _____ **E-mail:** _____

Contractor's Mailing Address: _____

Contractor's License/Registration #: _____ **Expiration Date:** _____

City Business License: Yes No (Apply online at: bls.dor.wa.gov) **Revenue Tax# (UBI):** _____

I certify that the contractor(s) (general or specialty) who will perform any of the services for which this permit is issued, is registered with the State of Washington, Department of Labor & Industries, in compliance with chapter 18.27 RCW (law of 1963) under certificate number. _____

Applicant initial here

Authorized Agent Signature: The authorized agent, listed as the Applicant above, is the primary contact for all project-related questions and correspondence. The Permit Center will email or call the Authorized Agent with requests and/or information about the application. The Authorized Agent is responsible for communicating information to all parties involved with the application. It is the responsibility of the Authorized Agent to ensure their contact information is accurate and that their email account accepts email from the Permit Center.

I affirm that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge.

X _____ **DATE:** _____
Authorized Agent Signature

Owner Signature (select one):

The legal owner of the property is submitting this application, acting as the Agent/Contact for this Project. Sign and date below.

The legal owner of the property authorizes the Applicant to act on his/her behalf as the Agent/Contact for this Project. Sign and date below, or submit a separate signed and dated authorization letter with this application.

OWNER: _____ **DATE:** _____