



TOWN OF SOUTH PRAIRIE

121 WASHINGTON STREET PO Box #870
SOUTH PRAIRIE, WASHINGTON 98385
(509) 834-3187 WWW.TOWNOFSP.COM

BUILDING APPLICATION

Commercial Residential

Building Plumbing Mechanical

Parcel Number _____

Owner's Name _____

Phone _____

Owner's Mailing Address _____

Site Address _____

List Existing Buildings on Property _____

Building Contractor _____ Plumbing Contractor _____

Contractor Address _____ Mechanical Contractor _____

City, State, ZIP _____ Phone _____

Contractor License Number _____ Expiration Date _____

Proposed Building & Type of Use _____

Manufactured Home _____ / _____ / _____ / _____ / _____ / _____
Make Model Year Serial No. Installers License No. Length & Width

Type of Heat Gas Electric Other _____ Energy Code Path (circle one) CHPT4 CHPT5 CHPT6

Existing Sq. Footage _____ / _____ / _____ / _____ / _____ / _____
Main Floor Second Floor Basement Garage Carport Deck/Porch

New Square Footage _____ / _____ / _____ / _____ / _____ / _____
Main Floor Second Floor Basement Garage Carport Deck/Porch

Building Height _____ Number of Stories _____ Fire Sprinklers Yes No

Number of Bedrooms _____ Number of Bathrooms _____

New Residence New Business Deck/Porch Remodel Acc. Building Manufactured

Addition Tenant Improvement Garage/Carport Other _____

FOR DEMOLITION PERMIT GOOD FAITH INSPECTION PROVIDED

I understand that applications for which no permit is issued within 180 days following the date of application shall expire by limitation. Plans and other data submitted for review may thereafter be returned to the applicant or destroyed by the building official. IRC 105.5

Owner/ Agent _____

Date _____

OFFICIAL USE ONLY

Miscellaneous Approval

Building Site Elevation _____

Lowest Floor Elevation _____

Sewer Availability Letter

Water Availability Letter

School Impact Fees

Valuation...\$ _____

Building Permit Fee...\$ _____

Plan Check Fee ...\$ _____

Knox Box...\$ _____

Mechanical...\$ _____

Plumbing...\$ _____

State Building Code Fee...\$ _____

Energy Code Fee...\$ _____

Utility, Park & Street Fees...\$ _____

Total Fees...\$ _____

Payment Date ____ / ____ / ____ Payment...\$ _____

Balance Due...\$ _____

Approved Yes No

Approved by: _____

Signature: _____

Date: _____

Permit Number ____ / ____
Year Number

TO BE FILLED OUT BY APPLICANT