



Skamania County

Community Development Department

Building/Fire Marshal ♦ Environmental Health ♦ Planning

Skamania County Courthouse Annex

Post Office Box 1009

Stevenson, Washington 98648

Phone: 509-427-3900 Inspection Line: 509-427-3922

MISCELLANEOUS PERMIT INTAKE CHECKLIST

*Includes (*but not limited to*): Equipment Storage Shed, Shop, Barn, Carport, Garage, Deck, etc. If your project will include mechanical or plumbing fixtures, please use the standard Building Permit Application.

- Complete Equipment Storage Shed & Barns Permit Application including a detailed project description and square footage of building.
- Site Plan; submit a complete site plan, with all requirements of the Site Plan Checklist. Also include the completed Site Plan Checklist.
- Submit **three (3)** sets of building plans and Engineering.

This form must be completed and submitted with all required documents for the application to be considered complete. Review will not begin on the project until all of the requirements above are submitted.

Reviewed by _____ Complete: Yes _____ No _____ Date: _____



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MISCELLANEOUS PERMIT APPLICATION

***Includes (but not limited to): Equipment Storage Shed, Shop, Barn, Carport, Garage, Deck, etc. If your project will include mechanical or plumbing fixtures, please use the standard Building Permit Application.**

SITE & PERMITEE INFORMATION: **DATE:** _____

Owner Name: _____ **Jobsite Address:** _____

Mailing Address: _____ **Jobsite City:** _____

City: _____ **Parcel number:** _____

State/Zip: _____ **Email Address:** _____

Home Phone: _____ **Cell Phone:** _____

CONTRACTOR INFORMATION:

Contractor: _____ **Business Phone:** _____

Contractor's License# _____ **Cell Phone:** _____

PROJECT INFORMATION:

<u>USE OF BUILDING:</u>	<u>SQUARE FOOTAGE:</u>	<u>BRIEF DESCRIPTION OF PROJECT:</u>
Equipment Storage Shed	_____	_____
Barn	_____	_____
Private Garage	_____	_____
OTHER(specify):	_____	_____

This application/permit is null & void if the work or construction is not commenced within 180 days, or if the work or construction is suspended or abandoned for 180 days of anytime after work is commenced, or if work is not completed within two years from date of issue.

All work shall be done in accord with the approved plans, except such approval is in conflict with other codes. The approved plans shall not be changed or modified without the prior approval of the Building Official.

It is the owners/contractors responsibility to comply with all applicable laws, codes and regulation. SKAMANIA COUNTY makes no assurances or guarantees that the site, lot, soil, grade or other conditions are suitable for the proposed project. Please be advised that, due to the instability of mountainous areas, SKAMANIA COUNTY makes no assurance as to the suitability of any lot or parcel for building purposes.

I HEREBY CERTIFY 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 OR NOT. THE GRANTING OF A 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.

_____ **Owner Name (Please Print)** _____ **Owner Signature**

(If applicable) I, _____, as shown by my signature hereto, designates

_____ **Owner Name**

_____ , to act as their agent concerning all issues having to do with this building permit application

_____ **Print name of agent**

_____ **Date**

Site Plan Checklist

The application will NOT be accepted unless all points below are addressed. This checklist MUST be submitted with the site plan and application. The site plan must be drawn in ink.

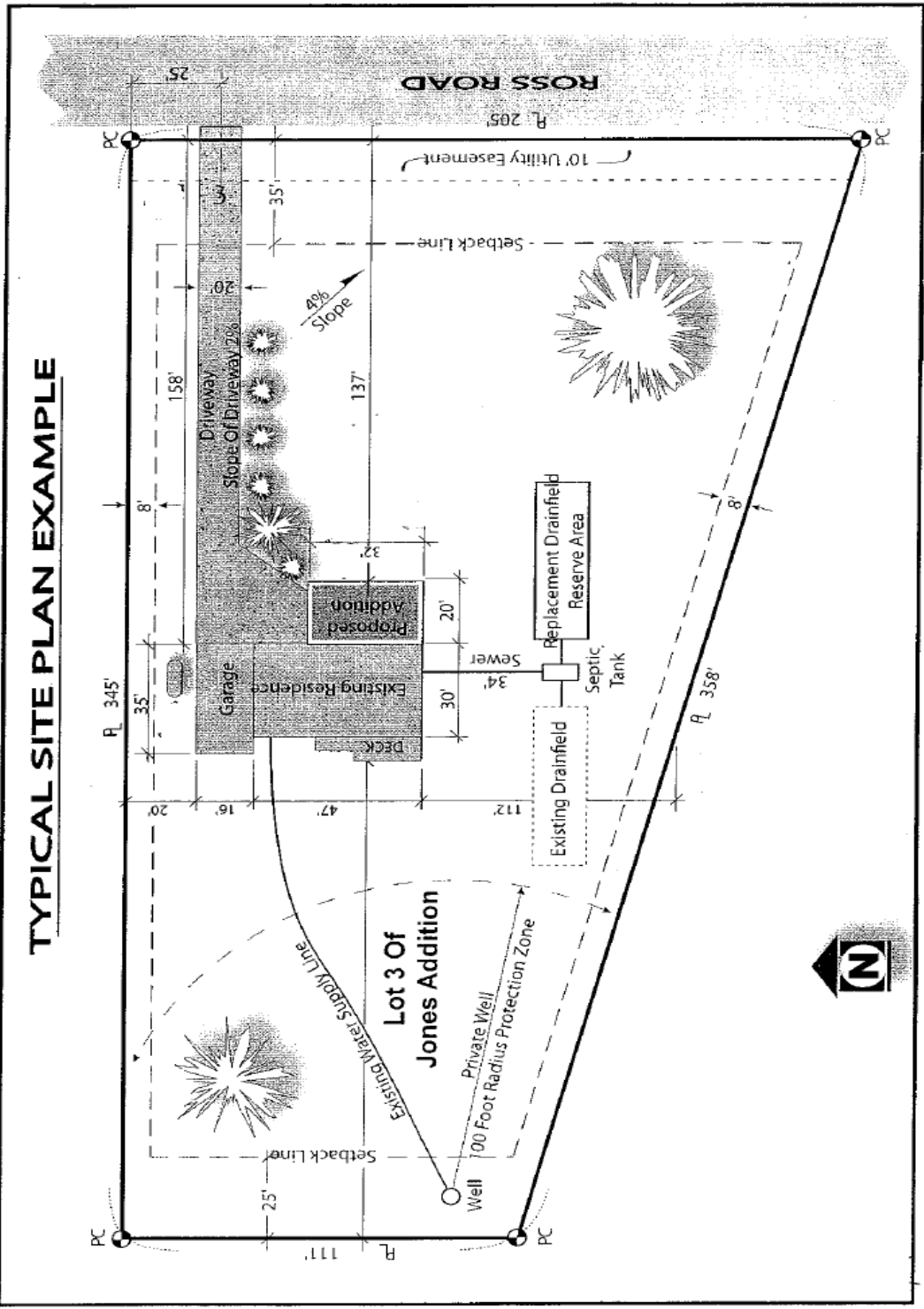
The applicant may also submit (in addition to the site plan showing the entire parcel(s)), a more detailed drawing of the area(s) that will be affected by the proposal. Site plans that are overcrowded with information and those that are illegible will be returned to the applicant to be redrawn.

STAFF	APPLICANT	STAFF	APPLICANT		
<input type="checkbox"/>	<input type="checkbox"/>	North arrow	<input type="checkbox"/>	<input type="checkbox"/>	Property address
<input type="checkbox"/>	<input type="checkbox"/>	Tax parcel number(s) for all affected parcels	<input type="checkbox"/>	<input type="checkbox"/>	Site plan scale (ex: 1"=50')
<input type="checkbox"/>	<input type="checkbox"/>	Name of applicant and property owner (if different)	<input type="checkbox"/>	<input type="checkbox"/>	Location, depth, and extent of all clearing, grading & filling
<input type="checkbox"/>	<input type="checkbox"/>	Boundaries, lines showing the dimensions, and size of subject parcel(s)	<input type="checkbox"/>	<input type="checkbox"/>	Location and dimensions of any dedicated easements on or adjacent to the property
<input type="checkbox"/>	<input type="checkbox"/>	Location of all existing and proposed structures, including dimensions and distances from property lines, other structures and critical areas (measurement is from the eave of the structure).	<input type="checkbox"/>	<input type="checkbox"/>	Location of existing on-site septic system components, including tanks, drainfields (include dimensions for primary and reserve), pretreatment units and their distance to structures and property lines
<input type="checkbox"/>	<input type="checkbox"/>	Show general topography of the property and direction of natural drainage, significant terrain features or landforms (ex: top/toe of slope, rock outcroppings).	<input type="checkbox"/>	<input type="checkbox"/>	Location of all proposed wells and the 100' wellhead protection area radius for each
			<input type="checkbox"/>	<input type="checkbox"/>	Show all existing and proposed underground or above ground storage tanks.
<input type="checkbox"/>	<input type="checkbox"/>	Clearly identify and label the location and names of all existing and proposed roads, on or bordering the property. Show all proposed and existing driveways, trails, and parking areas on the parcel.	<input type="checkbox"/>	<input type="checkbox"/>	Any critical areas designated under the County's Critical Areas Ordinance, if known, located on or adjacent to the property (ex: landslides, wetlands, water bodies, watercourses, or possible flood zones)
<input type="checkbox"/>	<input type="checkbox"/>	Location of all wells or drinking water sources and their well head protection areas within 100 feet of the property lines (if known)	<input type="checkbox"/>	<input type="checkbox"/>	Any additional information which the applicant feels will assist in evaluating the proposal (ex: maps, drawings, photos, and plans.

PLEASE SEE NEXT PAGE FOR ADDITIONAL SITE PLAN REQUIREMENTS FOR:

- On-site Septic
- National Scenic Area
- Shorelines
- Boundary Line Adjustments

TYPICAL SITE PLAN EXAMPLE



Name:	JOHN R. DOE	Address:	12345 Ross Road Stevenson, WA	Scale:	1" = 40'
Site Address:	12345 ROSS ROAD	Property ID#:	02-12-01-0-0-0111-00	Date:	10/4/2006

SITE PLAN

*Use this template or attach a separate site plan drawing.

				Name:	
Mailing Address:		Site Address:		Date:	
		Tax Parcel Number:			