

Plumbing Permit

City of White Salmon
 PO Box 2139 | 100 N. Main
 White Salmon, WA 98672
 (509) 493-1133 | Fax (509) 493-1231

Date Issued:

09/06/2019

Permit #:

2019.0217.PP0033

Applied Date: 09/06/2019

Issue Date: 09/06/2019

Expiration Date 03/04/2020

Proposed Use: Plumbing Permit for single family home, 5 Bathrooms

Physical Address: 269 SW WESTWINDS RD
Parcel #: 03102418030100
Subdivision:
Zoning: SF-1
Load:
Use: R-1 Single Family Residence
Occupancy: R-3 Residential, One and Two Family

Require Sprinklers: No
Structures:
Stories:
Bedrooms:
Construction Type: 5B
Code Edition: 2015
Service Location:

Heating:
Roofing:
Bathrooms:

Legal Desc: LOT 1 WS-BLA 2018-003; 24-3-10

Applicant

Arborgast Stephanie
 1121 5th Street

 Hood River, OR 97031

Contact: Greg Gottlieb
Phone: () -
Fax: () -
Email: stephaniearbo@gmail.com

Contractor

Alpine Plumbing Sercies,
 PO Box 448

 Brush Praire, WA 98606

Contact: Luke Ek
Phone: (360) 606-1833
Fax: () -
Bus Lic:
Cont Lic:
UBI: 604-120-442

Fees	Qty	Rate	Amount	Date Fully Paid	Invoice #	Amount
New Single Family-1 Bath	1.00	210.00	210.00	09/06/2019	4433	510.00
Additional Bath	4.00	75.00	300.00			
			<u>510.00</u>			<u>510.00</u>

Estimated Balance Due:

Inspections

- Water Heater (Electrical)
- Sewer Line
- Water Service Line
- Shower Pan Liners
- Rough Plumbing
- Rough Heat & Vent Duct
- Gas Line
- Fireplace Chase
- Exhaust Fan
- Rough Plumbing
- Final

PLUMBING PERMIT APPLICATION



City of White Salmon
 P.O. Box 2139 / 100 N Main
 White Salmon, WA 98672
 509-493-1133 fax 509-493-1231

PERMIT #	
DATE RECEIVED:	
DATE ISSUED:	
Zoning approval verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sanitation approval verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

CONSTRUCTION CATEGORY	
<input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Government <input type="checkbox"/> Commercial
JOB SITE INFORMATION & LOCATION	
Job site address: <u>209 SW West Winds</u>	
City/State/Zip: <u>White Salmon WA 98672</u>	
Project Name: <u>Arbogast Residence</u>	
Directions to job site:	
Subdivision: _____ Lot#: _____	
DESCRIPTION OF WORK	
PROPERTY OWNER INSTALLATION	
Name: <u>Stephanie Arbogast</u>	
Address:	
City/State/Zip:	
Phone: () _____	Fax: () _____
e-mail:	
<input type="checkbox"/> The installation is being made on residential or farm property owned by me or a member of my immediate family	
Signature: _____	
CONTRACTOR INSTALLATION	
Business Name: <u>Alpine Plumbing Services</u>	
Address: <u>16921 NE 196th St</u>	
City/State/Zip: <u>Brush Prairie WA 98606</u>	
Phone: <u>509 606-1833</u>	Fax: () _____
e-mail: <u>luke@alpineplumbing.com</u>	
<input type="checkbox"/> Contractor CCB License #:	
<input type="checkbox"/> BCD License #:	
Signature: <u>[Signature]</u>	
Print Name: <u>Luke BK</u>	

FEE SCHEDULE			
	Fee	# of Items	Total
Residential			
New Single Family Dwelling 1 bath (includes 100' water/serwer)	\$210.00	1	210
Add'l Bath	\$ 75.00	4	*
Add'l Kitchen	\$ 50.00		
Add'l 100' of sewer/water	\$ 30.00		
Remodel/alteration per fixture	\$ 20.00		
Commercial, Industrial & Dwellings other than (1) or (2) Family			
Base fee (incl. up to (3) fixtures	\$ 60.00		
Each fixture beyond the first (3)	\$ 20.00		
Site utilities ea. 100' or part thereof	\$ 30.00		
Miscellaneous Fees			
Residential fire sprinkler	\$150.00		
Indirect wastes	\$ 50.00		
Specialty fixtures	\$ 50.00		
Backflow devices	\$ 50.00		
Re- Inspection	\$ 85.00		
Special requested inspection(s)/hr	\$ 85.00		
Medical Gas Piping			
Base fee	\$225.00		
Each inlet/outlet	\$ 1.00		
Sub-Total (add up above fees - minimum fee \$50.00):			_____ (A)
Investigative Fee (equal to [A])			_____ (B)
Plan review, if required (50% of [A])			_____ (C)
Other Miscellaneous fees			_____ (D)
TOTAL			_____



City of White Salmon
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Arbrogast Stephanie
 1121 5th Street
 Hood River, OR, 97031

Account Information	
Cust #:	3733
Date:	09/06/2019 Due: 10/06/2019
Invoice #:	4433
For:	Building Permits
Permit:	2019.0217.PP0033

Item	Taxed	Quantity	Amount	Total
Plumbing Permit - CE-Plumbing Permit - 09/06/2019	N	1.0000	510.00	510.00
Plumbing Permit - 269 SW Westwinds Rd			Non Taxed:	510.00
			Taxed:	0.00
			Tax @ 0.00%:	0.00
			Payments:	0.00
			Total:	510.00

Please pay upon receipt.

Please call City of White Salmon at 509.493.1133 if you have any questions.

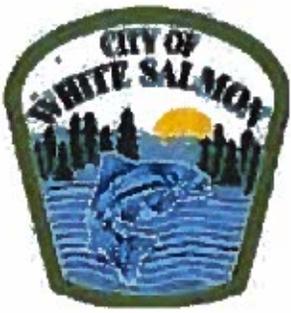
Receipt: 77478 09/06/2019
 Acct #: 3733 COPY
 City Of White Salmon
 PO Box 2139
 White Salmon, WA 98672
 509-493-1133

Arbrogast Stephanie
 1121 5th Street
 Hood River, OR 97031

Building Permits
 Inv#: 4433 Amt Paid: 510.00
 Plumbing Permit - 269 SW
 Westwinds Rd

Non Taxed Amt: 510.00
 Total: 510.00
 CC: 6102 510.00
 Ttl Tendered: 510.00
 Change: 0.00

Issued By: *R. Little*
 09-03-2019 08:32:15



City of White Salmon
 PO Box 2139 | 100 N. Main
 White Salmon, WA 98672
 (509) 493-1133 | Fax (509) 493-1231

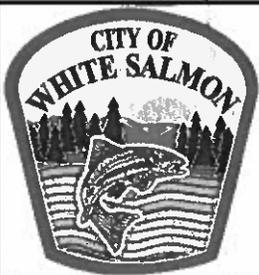
Arborgast Stephanie
 1121 5th Street
 Hood River, OR, 97031

Account Information			
Cust #:	3733		
Date:	09/06/2019	Due:	10/06/2019
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For:	Building Permits		
Permit:	2019.0217.PP0033		

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Plumbing Permit - 269 SW Westwinds Rd			Non Taxed:	510.00
			Taxed:	0.00
			Tax @ 0.00%:	0.00
			Payments:	0.00
			Total:	510.00

Please pay upon receipt.

Please call City of White Salmon at 509.493.1133 if you have any questions.



Building Permit

City of White Salmon

PO Box 2139 | 100 N. Main
White Salmon, WA 98672
(509) 493-1133 | Fax (509) 493-1231

Date Issued:

06/28/2019

Permit #:

2019.0149.BP0025

Applied Date: 05/08/2019

Issue Date: 06/28/2019

Expiration Date 12/25/2019

Proposed Use: New Construction of Single Family

Physical Address: 269 SW WESTWINDS RD

Parcel #: 03102418030100

Subdivision:

Zoning: SF-1

Load:

Use: R-1 Single Family Residence

Occupancy: R-3 Residential, One and Two Family

Require Sprinklers: No

Structures:

Stories:

Bedrooms:

Construction Type: 5B

Code Edition: 2015

Service Location:

Heating:

Roofing:

Bathrooms:

Valuation

Occupancy	Construction Class	Sq. Feet	Cost per Sq. Foot	Value
R-3 Residential, One and Two Family	5B	3768	122.46	461,429.28
U Utility and Misc	5B	728	48.73	35,475.44
U Utility and Misc	Decking	544	24.37	13,257.28
R-3 Residential, One and Two Family	5B	1934	122.46	236,837.64
		6974		746,999.64

Legal Desc: LOT 1 WS-BLA 2018-003; 24-3-10

Applicant

Arbogast Stephanie
1121 5th Street

Hood River, OR 97031

Contact: Greg Gottlieb

Phone: () -

Fax: () -

Email: stephanicarbo@gmail.com

Contractor

TBD

Contact:

Phone: () -

Fax: () -

Bus Lic:

Cont Lic:

UBI:

Fees	Qty	Rate	Amount	Date Fully Paid	Invoice #	Amount
Valuation Fee	1.00	4,407.00	4,407.00	05/08/2019	4055	2,135.90
Plan Check Fee	4407.00	0.65	2,864.55	07/03/2019	4211	5,142.15
State Fee	1.00	6.50	6.50			
			7,278.05			7,278.05

Estimated Balance Due:

Inspections

Firewall

Footings

Framing

Footings

Insulation

Deck Footings/Pier Pads

Rebar

Shear Wall

Initials _____



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Arborgast Stephanie
 1121 5th Street
 Hood River, OR, 97031

Account Information	
Cust #:	3733
Date:	06/28/2019 Due: 07/28/2019
Invoice #:	4211
For:	Building Permits
Permit:	2019.0149.BP0025

Item	Taxed	Quantity	Amount	Total
Permit Deposit (#4055 05/08/2019)	N	1.0000	-2,135.90	-2,135.90
Building Permit - CE-Building Permit - 06/28/2019	N	1.0000	4,407.00	4,407.00
Building Permit - CE-Plan Review Fees - 06/28/2019	N	1.0000	2,864.55	2,864.55
Building Permit - Remit-Bldg Surcharges - 06/28/2019	N	1.0000	6.50	6.50
Building Permit - 269 SW Westwinds Rd			Non Taxed:	5,142.15
			Taxed:	0.00
			Tax @ 0.00%:	0.00
			Payments:	0.00
			Total:	5,142.15

Please pay upon receipt.

Please call City of White Salmon at 509.493.1133 if you have any questions.

Receipt: 7652 07/03/2019
 Acct #: 3733 COPY
 City Of White Salmon
 PO Box 2139
 White Salmon, WA 98672
 509-493-1133

Arborgast Stephanie
 1121 5th Street
 Hood River, OR 97031

Building Permits
 Inv#: 4211 Amt Paid: 5,142.15
 Non Taxed Amt: 5,142.15
 Total: 5,142.15
 Chk: 1060 5,142.15
 Ttl Tendered: 5,142.15
 Change: 0.00
 Issued By: _____
 10:53:58



Erika Castro-Guzman <erikac@ci.white-salmon.wa.us>

City of White Salmon: Business License

1 message

Erika Castro-Guzman <erikac@ci.white-salmon.wa.us>

Fri, Jun 28, 2019 at 3:54 PM

To: tim@huberddesign.com, City of White Salmon Finance <finance@ci.white-salmon.wa.us>

Hello Tim!

Building plan review is complete for 269 SW Westwinds Rd, and prior to issuing the city will require an active business license from you as the general contractor.

Friendly reminder we have not received the plumbing or mechanical permit (which may be done at a later time, but before the permits first inspection). Additionally, we advise you forward the application to those contractors as they will also have to obtain a city business license.

If you may please see attached for the application that may be completed and emailed to us. Thereafter you are welcome to contact Katie at 509-493-1133x 204 for payment processing.

Kindly,

Erika Castro Guzman, *Associate Planner*
City of White Salmon (509) 493-1133 ext 209
100 N Main Street, White Salmon WA 98672

 **business_license_application.pdf**
457K

Notice of Plan Review

Plans Examiner: Bill Hunsaker
Phone: (509)493-1133

City of White Salmon Building Department
100 N. Main Ave./ PO Box 2139
White Salmon, WA. 98672

Project Address: 269 SW Westwinds
Arch./Designer:

Permit Number:
Plan:

Owner: Arbogast/Gottlieb
Address: PO Box 209, Washougal, WA

Date Received: 5/8/2019
Date Completed: 6/25/2019

Project Description: R-3

Type of Construction: VB Occupancy Residential Valuation: \$760,241.00

Floor Area:	Main level	3768	Lower level	1934	Basement	
	Garage		728	Deck	544	Porch:

Ground Snow: 52psf
Wind: 85mph-3 second gust
Frost: 18"
Seismic: D1
Exposure: B

The submitted plans have been reviewed for conformity with the 2015 International Residential Building Code, 2015 Washington Energy Code and other statutes and regulations of Washington as administered by the City of White Salmon. **APPROVAL OF SUBMITTED PLANS IS NOT AN APPROVAL OF OR OMISSIONS OR OVERSIGHTS BY THIS OFFICE OR OF NONCOMPLIANCE WITH ANY APPLICABLE REGULATIONS OF ANY STATE OR FEDERAL LAW, RULE, CODE OR REGULATION OR ANY LOCAL ORDINANCE.** Please contact this office for any requirements you question or do not understand. Deviations from the submitted and hereby conditionally approved plans during construction, exclusive of those necessary to comply with requirements as listed herein, are prohibited without the written authorization of the Building Department.

This list is considered part of the plans and shall remain attached to them. Items on this list are applicable code requirements. These items shall be complied with during the construction. Plans are not to be changed without authorization of the Building Department and the Plans Examiner. This plan review shall not prevent the correction of errors or violations that are discovered during required inspections.

Note: The following list of items are standard plan review comments made in an effort to be of assistance to the builder. The items listed are not meant to imply that these plans do not comply with code requirements. This list is based on the 2015 International Codes. Liberties have been taken with code language for the sake of readability. If the exact Code text is required, see the referenced Code sections.

Applicant/Owner Contractor Bill To

Account #: 738
 Name: Arborgast Stephanie
 Address 1: 1121 5th Street
 Address 2:
 CSZ: Hood River, OR 97031
 Email: stephaniearbo@gmail.com

Contact: Greg Gottlieb
 Phone: () -
 Fax: () -

Permit Info
 Permit Type: Building Permit
 Permit #:
 Applied: 05/08/2019
 Issue-Expire: - 11/04/2019
 Project # N/A
 269 SW WESTWINDS RD
 Parcel #: 03102418030100
 Building: Primary
 Valuation: 746,999.64 Chk 0.650

CoO Issued
 Temp CoO Issued

Permit Fees Approvals -0- Inspections -18- Conditions -0- Work Orders -0- Invoices -0- Additional Contacts Parcel Proposed U

Add Fee Repeat Delete Selected Only Selected Total 7,278.05 Show Invalid BARS

Description	Quantity	Rate	Fixed	Total	Updated	Receipt To
<input checked="" type="checkbox"/> Valuation Fee	1.00	4,407.00		4,407.00		CE-Build
<input checked="" type="checkbox"/> Plan Check Fee	4,407.00	0.65		2,864.55		CE-Plan
<input checked="" type="checkbox"/> State Fee	1.00		6.50	6.50		Remit-BI



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 White Salmon, WA 98672
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Arbogast Stephanie
 1121 5th Street
 Hood River, OR, 97031

Account Information	
Cust #:	3733
Date:	05/08/2019 Due: 06/07/2019
Invoice #:	4055
For:	Building Permits
Permit:	

Item	Taxed	Quantity	Amount	Total
Permit Deposit	N	1.0000	2,135.90	2,135.90
Deposit for Plan Check Fee - 269 SW Westwinds Rd			Non Taxed:	2,135.90
			Taxed:	0.00
			Tax @ 0.00%:	0.00
			Payments:	0.00
			Total:	2,135.90

Please pay upon receipt.

Please call City of White Salmon at 509.493.1133 if you have any questions.

Receipt: 05/08/2019
 Acct #: 3733 COPY
 City Of White Salmon
 PO Box 2139
 White Salmon, WA 98672
 509-493-1133

Arbogast Stephanie
 1121 5th Street
 Hood River, OR 97031

Building Permits
 Inv#: 4055 Amt Paid: 2,135.90
 Non Taxed Amt: 2,135.90
 Total: 2,135.90
 Chk: 1054 2,135.90
 Ttl Tendered: 2,135.90
 Change: 0.00
 Issued By: Eric CG 3:31:20



BUILDING PERMIT APPLICATION

City of White Salmon
 P.O. Box 2139
 White Salmon, WA 98672
 Phone (509)493-1133
 Fax (509) 493-1231

PERMIT#
DATE RECEIVED:
DATE ISSUED:

PHYSICAL ADDRESS 269 SW WESTWINDS					
LEGAL DESCR	LOT NO.	BLK	TRACT	<input type="checkbox"/> SEE ATTACHED SHEET	
OWNER Greg Stephanie Arbogast Gottlieb	MAIL ADDRESS 1121 5th St Hood River		ZIP 97031	PHONE 543-788-2821	
CONTRACTOR THORP DESIGN + CONSTRUCTION	MAIL ADDRESS PO BOX 827 Hood River OR		PHONE 543-310-0444	LICENSE NO. TBD	
ARCHITECT OR DESIGNER SAME	MAIL ADDRESS		PHONE	LICENSE NO.	

Owner
Greg Stephanie Arbogast
 Physical Address
**269 SW Westwinds Rd
 White Salmon**

<input checked="" type="checkbox"/> Single/Multi-Family Dwelling	<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Sign
<input type="checkbox"/> Commercial/Industrial	<input type="checkbox"/> Reroof	<input type="checkbox"/> Change of Use/Occ
<input type="checkbox"/> Addition/alteration/repair	<input type="checkbox"/> Move/Remove	<input type="checkbox"/> Other

Describe work **NEW RESIDENTIAL CONSTRUCTION**

Change of use from:

Change of use to:

SPECIAL CONDITIONS

THIS SECTION FOR OFFICE USE ONLY			
Fire Zone	Use Zone	No. of Dwelling Units	
OFF STREET PARKING SPACES			
Covered:		Uncovered:	
Special Approvals	Required	Received	Not Required
ZONING			
PUBLIC WORKS			
FIRE DEPT.			
SOIL REPORT			
OTHER (Specify)			

Washington State Building Code, 2015 IBC 105.5 Expiration. Every permit issued shall become invalid unless the work on the site authorized by such permit is commenced within 180 days after its issuance, or if the work authorized on the site by such permit is suspended or abandoned for a period of 180 days after the time the work is commenced.

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 herein 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.

 SIGNATURE & DATE OF CONTRACTOR OR AUTHORIZED AGENT

 SIGNATURE & DATE OF OWNER (IF OWNER BUILDER)

Square footage of New Construction/ Valuation of Work - for addn/alt/repair, sprinklers, signs, and "other" - incl. equip., mtrls, labor, & overhead and profit.

\$

Fees (Fees are an estimate until plans appvd) Plan Check Fee due at submittal - All fees must be paid prior to issuance of all permits, unless an emergency situation exists.

Structural Permit Fee	\$
Plan Check Fee (65% of Struct.)	\$
WA State Fee (\$6.50)*	\$
*Additional units (\$2.00) ea	\$
Fire/Life/Safety (40% of Struct.)	\$
Other Fee	\$
TOTAL	\$
TOTAL PAID	\$
BALANCE DUE	\$



City of White Salmon Building Department

1. **Required to meet 2015 Washington State Energy Code.**
2. **Must provide Table 406.2 Energy Credit form.**
3. **Generally, the city stormwater runoff control standards are based on low impact development (LID) techniques that minimize impervious surfaces and infiltrate stormwater on site. Tight line conveyance of stormwater onto adjacent property will be allowed only if there is no other feasible alternative and only if the proposed location and volume of runoff will not change.**
4. **If the development proposes less than two thousand square feet of impervious area, the developer shall provide for and install industry standard LID facilities to control runoff from all impervious surfaces.**
5. **Any private driveway shall be required to be paved for the final twenty feet including the full apron width where the driveway meets the public or private road.**
6. **Smoke detectors required in all sleeping areas. Carbon Monoxide and smoke detectors required outside all sleeping areas.**

**PO Box 2139
100 N. Main Ave.
White Salmon, WA 98672**

**Office: (509) 493-1133
Fax: (509) 493-1231
Web Site: white-salmon.net**