



## CITY OF WHITE SALMON PLUMBING PERMIT APPLICATION

PO Box 2139 | 100 N Main Street  
White Salmon, WA 98672  
(509) 493-1133 | Erikac@ci.white-salmon.wa.us

|                |  |
|----------------|--|
| PERMIT NUMBER: |  |
| DATE RECEIVED: |  |
| DATE ISSUED:   |  |

| Construction Category                      |   |                                     | Fee Schedule  |     |           |       |
|--|---|-------------------------------------|---|-----|-----------|-------|
| <input type="checkbox"/> Residential       | <input type="checkbox"/> Government         | <input type="checkbox"/> Commercial | Description   | QTY | Fee       | Total |
| <input type="checkbox"/> New               | <input type="checkbox"/> Accessory Building |                                     | <b>Residential</b>  |     |           |       |
| <input type="checkbox"/> Addition          | <input type="checkbox"/> Alteration/ Repair |                                     |   |     |           |       |
| <b>Description of Work</b>                 |   |                                     | New Single Family Dwelling, 1 bath, Includes 100' water/sewer |     | 210.00    |       |
|  |   |                                     | Additional Bath   |     | \$75.00   |       |
|  |   |                                     | Additional Kitchen  |     | \$50.00   |       |
|  |   |                                     | Additional 100' of sewer/water                                |     | \$30.00   |       |
|  |   |                                     | Remodel/ Alteration (per fixture)                             |     | \$20.00   |       |
| <b>Job Site Information</b>                |   |                                     | <b>Commercial, Industrial &amp; Multi-Family</b>              |     |           |       |
| Street Address:                            |   |                                     | Base Fee, incl. up to 3 fixtures                              |     | \$60.00   |       |
| City / State / Zip: White Salmon, WA 98672 |   |                                     | Each fixture beyond the first 3                               |     | \$20.00   |       |
| <b>Property Owner</b>                      |   |                                     | Site utilities each 100' or part thereof                      |     | \$30.00   |       |
| Name:                                      |   |                                     | <b>Miscellaneous Fees</b>                                     |     |           |       |
| Mailing Address:                           |   |                                     | Residential fire sprinkler                                    |     | \$150.00  |       |
| City / State/ Zip:                         |   |                                     | Indirect wastes   |     | \$50.00   |       |
| Phone:                                     |   |                                     | Specialty fixtures  |     | \$50.00   |       |
| Email:                                     |   |                                     | Backflow devices  |     | \$50.00   |       |
| Signature:                                 |   |                                     | Re-Inspection   |     | \$85.00   |       |
|  |   |                                     | Special requested inspection(s)/hr.                           |     | \$85.00   |       |
| <b>Contractor Installation</b>             |   |                                     | <b>Medical Gas Piping</b>                                     |     |           |       |
| Company:                                   |   |                                     | Base Fee  |     | \$225.00  |       |
| Primary Contact:                           |   |                                     | Each inlet/outlet   |     | \$1.00    |       |
| Mailing Address:                           |   |                                     |   |     |           |       |
| City / State/ Zip:                         |   |                                     |   |     |           |       |
| Phone:                                     |   |                                     | <b>[A] Sum of Total Applicable Fees</b>                       |     | <b>\$</b> |       |
|  |   |                                     | (Minimum Fee \$50.00)   |     |           |       |
| Email:                                     |   |                                     | Investigative Fee (equal to [A])                              |     | <b>\$</b> |       |
| Signature:                                 |   |                                     | Plan review, if required (50% of [A])                         |     | <b>\$</b> |       |
|  |   |                                     | <b>Total</b>  |     | <b>\$</b> |       |

Permits are required to be posted on site.

All provision of laws and ordinances governing this work will be complied with, whether specified herein or not.

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