



GENERAL

**BUILDING PERMIT APPLICATION**

500 E Division Street, Forks, WA 98331

360-374-5412 forks.washington.org info@forkswashington.org

Approved:  Yes  No Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Fee (City): \$ \_\_\_\_\_ Fee (State): \$ \_\_\_\_\_ Plan review: \$ \_\_\_\_\_ Total \$: \_\_\_\_\_ Permit #: \_\_\_\_\_ Receipt #: \_\_\_\_\_

**PROJECT INFORMATION**

Single-family residential  Multi-family residential  Commercial  Industrial  Public

Project address: \_\_\_\_\_

Tax parcel number (12-digit geographic ID; *application will not be approved w/out this number\**): \_\_\_\_\_

Primary contact: \_\_\_\_\_ Property owner:  Yes  No

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**OWNER INFORMATION**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ E-mail: \_\_\_\_\_

**CONTRACTOR INFORMATION**

Name: \_\_\_\_\_ License #: \_\_\_\_\_

Mailing address: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**ARCHITECT INFORMATION (if applicable)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PROJECT DESCRIPTION**

Project value (materials + labor): \$ \_\_\_\_\_

Summarize proposed work:

I have read and completed the application and know it to be true and correct. I am authorized to apply for this permit and understand that it is my responsibility to determine which permits are required and to obtain those permits prior to beginning work. I understand that additional information may be required when determined necessary by the building official, and that the application will be considered abandoned and fees forfeited if the permit is not picked up within 180 days of submittal. *\*The City of Forks does not maintain tax parcel number information. If you do not have this number, you can look it up by using the Property Search link on the Home page of the Clallam County website (www.clallam.net).*

Date \_\_\_\_\_ Print name \_\_\_\_\_ Signature (  Owner  Contractor  Representative ) \_\_\_\_\_