



Permit No: _____

CHELAN COUNTY
DEPARTMENT OF COMMUNITY DEVELOPMENT
316 WASHINGTON STREET, SUITE 301, WENATCHEE, WA 98801
TELEPHONE: (509) 667-6225 FAX: (509) 667-6475

RESIDENTIAL BUILDING PERMIT APPLICATION
SINGLE FAMILY RESIDENCE, ACCESSORY DWELLING UNIT, ACCESSORY
STRUCTURE, TWO FAMILY DWELLING UNITS & TOWNHOUSES

Parcel Number (APN): _____ **Lot Size:** _____ (Acres)
Parcel Address: _____ **City/Zip:** _____
Abbreviated Legal Description: _____
Property Owner(s): _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____ *Copy of Recorded Deed is required as an attachment.*

Applicant: _____ **Company Name:** _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____

Contractor's Name: _____
Contractor's License Number: _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____

Application For: New Remodel Addition Fire Repair/Replacement Destruction Date: _____
 Single Family Residence Accessory Dwelling Unit Accessory Structure Two Family Dwellings (Duplex) Townhouse(s)
Proposed use of structure: _____
Will this structure be used as a Vacation/Transient Rental for less than 30 days? Yes No
Development/Structure Details: Dimensions of Building Footprint: _____ (ft.) Building Height: _____ (ft.)
 Label Existing/Finished Grade on all 4 elevation views of Building Plans
Impervious Surface (IS) Information in Square Feet: Propane Tank Size: _____ (gallons)
Refer to Chelan County Code Section 13.16.020 (16) for the definition of "Impervious Surface."
Existing IS (Include existing roof, driveway, etc.): _____ **New IS (Include new roof, driveway, etc.):** _____
Total Impervious Surface (Existing Impervious Surface plus New Impervious Surface): _____ (sq. ft.)
Floor Area(s)—check all that apply and indicate the area in Square Feet:
 Basement: _____ Main/1st Floor: _____ 2nd Floor: _____ 3rd Floor: _____ Decks: _____
 Covered Porches/Decks: _____ Carport: _____ Garage: _____ Other: _____
Existing Bedrooms: _____ **Proposed New Bedrooms:** _____ **Total Bedrooms:** _____
Existing Bathrooms: _____ **Proposed New Bathrooms:** _____ **Total Bathrooms:** _____
 Retaining Wall(s): Length: _____ (ft.) Height: _____ (ft.) Const.Valuation(labor & material): _____

Ⓞ FOR OFFICIAL USE ONLY Ⓞ

Received By & Date:	Zoning Approval & Date:	Building/Fire Approval & Date:	Intake Fees Paid:	Final Fees Paid:
Plans: File / Large / E	UGA:	Zoning:	Snow Load:	FP / FW:

Sanitation Disposal:

N/A Septic Permit #: _____ Sewer District: _____

Water Source:

N/A Single Private Well Shared Private Well Public Water Supplier: _____

NOTE: Prior to permit issuance a Letter of Availability is required from the Sewer District or Public Water Supplier. Prior to Certificate of Occupancy a letter verifying Sewer/Water connection is required and a final Septic as-built/inspection must be approved by the Chelan-Douglas Health District.

Please Complete the Following:

1.	What is the current use of the property? _____
2.	List all existing structures on the property, the year constructed, and the Building Permit Number (if applicable): _____ _____ _____ <input type="checkbox"/> Label and identify on site plan.
3.	Please identify legal access to the subject property and list Auditor's File # (AFN) if applicable: _____ _____
4.	List and attach all Easements, Deed Restrictions, or other Encumbrances restricting the use of the property. (Refer to your subdivision, deed and/or Title Report) List by auditor's file number (AFN) and identify easement type: _____ _____ _____ <input type="checkbox"/> Label and identify on site plan.
5.	*Is the property within 200 feet of a river, stream, wetland, drainage way, other water body? <input type="checkbox"/> Yes <input type="checkbox"/> No, If yes please identify: _____
6.	*Are there any geologically hazardous areas on property or within 250 feet? For example: avalanche areas, landslide areas, areas of soil erosion, or areas of historic slope failure? <input type="checkbox"/> Yes <input type="checkbox"/> No, (Circle applicable)
7.	Please list any other applicable applications or approvals (file numbers) from Federal, State or Local Agencies for any structures, construction, or other activities necessary for approval of this building permit application: _____

***May involve height restrictions, a wetland delineation, a geologic site assessment, and additional setback requirements. Inquire with Chelan County Department of Community Development.**

If applicable: (Required by RCW 19.27.095)

Lending Agency Name: _____ Phone: _____
Address: _____
Contractor's Bonding Firm: _____ Phone: _____
Address: _____

I (We) certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true, correct and complete to the best of my (our) knowledge. I (We) further certify (or declare) that all Easements, Deed Restrictions, other encumbrances, and/or issues restricting or affecting the use or condition of the property have been accurately disclosed to the best of my (our) knowledge and are shown on the site plan submitted with this application. I (We) understand that encroachment and/or building into easements, deed restrictions or other encumbrances are my (our) responsibility and not Chelan County's. I (We) further affirm that by my (our) signature below that I (we) have obtained legal permission to build within or encumber all easements on this property. Owner hereby releases, discharges, indemnifies and holds harmless the County from and against any and all claims, demands, causes of action, suits or judgments (including costs and expenses incurred in connection therewith) by both the easement holder or encumbered person(s) arising out of or in connection with the County's issuance of a building permit. I (We) certify (or declare) that I (We) am the owner of the property or have been given authorization from the property owner to obtain this permit. I (We) further agree to comply with the International Building, Residential, Fire, Mechanical, Plumbing, and all applicable Chelan County/City Codes. Applicant/Owner(s) assumes all risk and liability for any claims and liabilities.

Owner/Applicant Signature: _____ Date: _____

SHORELINE SUPPLEMENTAL INFORMATION

1.	<p>Per the Chelan County Shoreline Master Program (SMP), Section 5.16(B)(4), all residential development requiring fill and/or excavation shall comply with Section 5.9 Fill and Excavation, excluding single-family residential development. Additionally, appurtenances may be exempt if not exceeding two hundred fifty cubic yards and not placing fill in any wetland or waterward of the ordinary high water mark.</p> <p>Please provide calculations on a separate piece of paper demonstrating the total cubic yards being removed/added from the site. This is a cumulative total, and will need to include all structures on the property, except for the residence. To calculate the total cubic yards being removed, please use the following formula:</p> <p style="text-align: center;">(Length x Height x Width)/27= Total Cubic Yards</p> <p>Total cubic yards being removed/added from the property: _____</p>
2.	<p>Are you proposing to remove any existing vegetation from the property? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, please label which vegetation will be removed on the site plan.</p>
3.	<p>Are you proposing to remove any existing vegetation from the property for the purpose of a view corridor? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Per the Chelan County Shoreline Master Program (SMP), Section 4.5(G), one view corridor, limited to 25% of the width of the lot frontage, or 25', whichever distance is less, may be permitted per privately owned lot, when consistent with the provisions of Section 4.2, Ecological Protection; Appendix B, Critical Areas Regulations; and this Section. A mitigation and management plan, as required by section 4.2 Ecological Protection, must be submitted for review and approval.</p> <p>Width of the property: _____</p> <p>Width x 25%: _____</p> <p>Allowable View Corridor Width (not to exceed 25') _____</p>
4.	<p>Shoreline Jurisdiction: _____</p> <p>Required Buffer Width: _____</p>

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Print Owner/Applicant Name: _____

Signature: _____ **Date:** _____

SITE PLAN CHECKLIST

- TWO COPIES OF SITE PLAN ARE REQUIRED TO BE SUBMITTED EITHER IN PAPER FORMAT OR ELECTRONICALLY THROUGH THE ELECTRONIC SUBMITTAL PROCESS. THE COUNTY REQUESTS THAT ALL SITE PLANS BE DRAWN TO SCALE TO AVOID ANY DISCREPANCIES AND TO SPEED UP THE REVIEW PROCESS. SITE PLANS SHOULD BE SCALED TO THE STANDARD ENGINEERING SCALE (1" = 10', 1" = 20', ETC.).**
- INDICATE ALL PROPERTY LINES/BOUNDARIES, DIMENSIONS, AND AREA OF LOT/PARCEL IN SQUARE FEET OR ACREAGE.**
- INDICATE THE LOCATION AND USE OF ALL PROPOSED AND EXISTING STRUCTURES, WHICH INCLUDE ACCESSORY STRUCTURES, DECKS, PROPANE TANKS AND PORCHES.**
- INDICATE AND LABEL ALL WATER FEATURES TO INCLUDE, PONDS, SPRINGS, RAVINES, STREAMS, CREEKS, LAKES, RIVERS, WETLANDS AND IDENTIFY THE DISTANCE TO THE ORDINARY HIGH-WATER MARK (OHWM), IF KNOWN.**
- INDICATE THE NAME OF ALL ROADS AND WIDTHS THAT BORDER THE PROPERTY AND WHETHER THE ROAD IS PUBLIC OR PRIVATE.**
- INDICATE PROPOSED DRIVEWAY ACCESS AND WIDTH AND WHETHER THE ACCESS IS OVER A DRAINAGE DITCH, CULVERT, STREAM, ETC.**
- INDICATE COMPLIANCE WITH REQUIRED PARKING SPACES (2 SPACES PER DWELLING) AND THAT THE PARKING AREA WILL BE DURABLE AND DUST FREE, I.E. PAVED OR CONCRETE.**
- INDICATE ALL LOCATION(S) OF ANY EASEMENTS AND EASEMENT TYPE(S) INCLUDING WIDTHS AND ANY RESTRICTIONS.**
- IDENTIFY LOCATION OF ALL WELL(S), SEPTIC/PUMP TANK, DRAIN FIELD, RESERVE AREA AND TIGHT LINE INVOLVING THE PROPOSED STRUCTURE(S). SHOW THE DISTANCE FROM PROPOSED STRUCTURE(S) TO SEPTIC TANK, DRAIN FIELD, DRINKING WATER WELL SOURCE(S), AND ANY WATER BODY, WETLAND AREA AND/OR FLOOD PLAIN TO ENSURE THEY MEET THE REQUIRED HORIZONTAL SETBACKS FROM EACH OTHER AND PROPERTY LINES. SEE CHELAN-DOUGLAS HEALTH DISTRICT HORIZONTAL SETBACK TABLE FOR DETAILS. IF APPLICABLE, THE APPROVED HEALTH DISTRICT AND COUNTY SITE PLAN MUST BE IDENTICAL.**

NOTE: PLEASE CALL 1-509-661-8400 TO LOCATE ANY PUD EASEMENTS PRIOR TO ANY DEVELOPMENT!

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Print Owner/Applicant Name: _____

Signature: _____ Date: _____

RESIDENTIAL BUILDING & ZONING SUBMITTAL CHECKLIST

SINGLE FAMILY RESIDENCE, ACCESSORY DWELLING UNIT, ACCESSORY STRUCTURE

THIS IS NOT A REVIEW. This list is used to assure that your submittal includes at least the minimum information needed to start the zoning/building review process. **Building permit applications will not be accepted until ALL requirements have been satisfied.**

APPLICANT SUBMITTAL ITEMS			
	YES	N/A	
1.	<input type="checkbox"/>	<input type="checkbox"/>	Complete Application
	<input type="checkbox"/>	<input type="checkbox"/>	Previous Building Permits and Status?
	<input type="checkbox"/>	<input type="checkbox"/>	Have Easements Been Disclosed?
2.	<input type="checkbox"/>	<input type="checkbox"/>	Deed / Legal Description (<i>Attached</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Legal Lot of Record (<i>See Chelan County Code, Section 14.98.1090</i>)
3.	<input type="checkbox"/>	<input type="checkbox"/>	Copy of Legal Access Attached? (<i>Please Circle the Access Type, Below</i>) County, State, Primitive County Road, Private, Access Easement, Forest Service Road Driveway Permit (<i>Attached</i>)
4.	<input type="checkbox"/>	<input type="checkbox"/>	Zoning: County or Urban Growth Area (<i>Check with Department Staff for Setbacks, Zoning, and Critical Area Restrictions</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Have Subdivision Notes and/or Land Use Conditions of Approval Been Achieved? (<i>Refer to Respective Files – i.e. Conditional Use Permit, Variance, etc.</i>)
5.	<input type="checkbox"/>	<input type="checkbox"/>	CRITICAL AREAS AND REPORTS
	<input type="checkbox"/>	<input type="checkbox"/>	Airport Overlay District
	<input type="checkbox"/>	<input type="checkbox"/>	Aquifer Recharge Area
	<input type="checkbox"/>	<input type="checkbox"/>	Geologic Hazard(s) and Geologic Site Assessment
	<input type="checkbox"/>	<input type="checkbox"/>	Wetland(s) and Wetland Delineation
	<input type="checkbox"/>	<input type="checkbox"/>	Shoreline of the State (<i>Call the Department if unsure</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Stream(s) and/or Lake(s)
	<input type="checkbox"/>	<input type="checkbox"/>	Flood Plain and/or Floodway (<i>Flood Development Permit may be required for all development</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Habitat
	<input type="checkbox"/>	<input type="checkbox"/>	Resource Land (<i>e.g. AC, FC or MC zoning</i>)
6.	<input type="checkbox"/>	<input type="checkbox"/>	BUILDING PLANS IN ARCHITECTUAL SCALE
	<input type="checkbox"/>	<input type="checkbox"/>	Foundation Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Floor Plan (<i>each floor level</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Means of Egress Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Floor Framing (<i>each floor & decks</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Roof Framing Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Engineering Calculations (<i>Verify design criteria w/the Building Division</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical and Plumbing systems
	<input type="checkbox"/>	<input type="checkbox"/>	Cross-section(s)
	<input type="checkbox"/>	<input type="checkbox"/>	Elevation Drawings (<i>All four sides</i>)
	<input type="checkbox"/>	<input type="checkbox"/>	Finished & Existing Grade shown and labeled
	<input type="checkbox"/>	<input type="checkbox"/>	Elevation of Building Site: _____(ft.)
	<input type="checkbox"/>	<input type="checkbox"/>	Residential or Commercial Energy Code Compliance Form
	<input type="checkbox"/>	<input type="checkbox"/>	Heat Loss Calculations
	<input type="checkbox"/>	<input type="checkbox"/>	Stormwater Plan (<i>If Applicable</i>)
7.	<input type="checkbox"/>	<input type="checkbox"/>	Copy of Contractor's License (<i>Unexpired</i>)
8.	<input type="checkbox"/>	<input type="checkbox"/>	Vicinity Map
9.	<input type="checkbox"/>	<input type="checkbox"/>	Site Plan (<i>Please refer to site plan checklist</i>)
10.	<input type="checkbox"/>	<input type="checkbox"/>	Submittal Fees Paid
11.	<input type="checkbox"/>	<input type="checkbox"/>	Water Availability Letter—or—CDHD Well Approval
12.	<input type="checkbox"/>	<input type="checkbox"/>	Sewer Availability Letter—or—CDHD Septic Permit

**APPLICATIONS ARE REVIEWED FOR ZONING, SETBACKS AND BUILDING PLAN COMPLIANCE.
THE DEPARTMENT WILL NOTIFY THE APPLICANT ONCE THE APPLICATION IS READY FOR ISSUANCE.**

STRUCTURAL PLANS CHECKLIST

Applications for building permits will not be accepted unless the following items are supplied with your application for a permit. Complete and submit two sets of building plans drawn to a legible architectural scale on legible size paper. You may contact the building department with your parcel number in order to determine the required snow load, or information may also be found at <https://maps.co.chelan.wa.us/chelancountyGIS>. Buildings must comply with the correct design criteria.

APPLICANT SUBMITTAL ITEMS			
	YES	N/A	
1.	<input type="checkbox"/>	<input type="checkbox"/>	FOUNDATION PLAN: <input type="checkbox"/> 8' max height on foundation walls, otherwise engineering is required. <input type="checkbox"/> All pads and dimensions (<i>deck, porches, patios</i>) <input type="checkbox"/> Girders, posts, floor joists, slabs <input type="checkbox"/> Access and ventilation <input type="checkbox"/> Slab insulation location (<i>if applicable</i>)
2.	<input type="checkbox"/>	<input type="checkbox"/>	Building plans must be drawn to a legible architectural scale on legible size paper. FLOOR PLANS: <input type="checkbox"/> All spaces labeled by use (<i>bedroom, bathroom, etc.</i>) <input type="checkbox"/> New vs. existing (<i>if addition or remodel</i>) <input type="checkbox"/> All door and window sizes including door swing <input type="checkbox"/> Bedroom & basement windows meet egress requirements <input type="checkbox"/> Stairs with direction (<i>up or down</i>) <input type="checkbox"/> Location and fuel source for appliances <input type="checkbox"/> Decks and patios <input type="checkbox"/> Unheated spaces clearly marked <input type="checkbox"/> Guardrail and handrail details <input type="checkbox"/> Attic access <input type="checkbox"/> Smoke detector locations FRAMING PLANS: <input type="checkbox"/> Floor framing plans (<i>each floor</i>) <input type="checkbox"/> Roof framing plans <input type="checkbox"/> Decks and patio framing
3.	<input type="checkbox"/>	<input type="checkbox"/>	ENGINEERING (<i>if applicable</i>): <input type="checkbox"/> Engineering shall be stamped and signed by an Engineer or Architect and be transferred to both sets of building plans and calculations. Submit two sets of engineering and calculations. <input type="checkbox"/> Retaining walls over four ft. in height require engineering (<i>measured from the bottom of the footing to the top of the wall</i>). <input type="checkbox"/> Lateral bracing (<i>if it doesn't comply with IRC prescriptive construction provisions</i>) <input type="checkbox"/> Overhangs or cantilevers beyond conventional construction provisions or beyond those recommended by product manufacturer. <input type="checkbox"/> Beams or columns having unusual loads require calculations. <input type="checkbox"/> Soils/geotechnical reports where applicable. Refer to the report for specific requirements.
4.	<input type="checkbox"/>	<input type="checkbox"/>	PLUMBING: <input type="checkbox"/> List the number of each type of plumbing fixture to be installed. Pressure reducer on water supply is required where pressure exceeds 80 lbs. <input type="checkbox"/> Kitchen Sink(s)/Laundry sink(s) <input type="checkbox"/> Lavatory Sink <input type="checkbox"/> Shower(s)/Bathtub(s) <input type="checkbox"/> Toilet(s) <input type="checkbox"/> Water Heater <input type="checkbox"/> Washing Machines

Continued on Next Page

STRUCTURAL PLANS CHECKLIST

(Continued)

5.	<input type="checkbox"/>	<input type="checkbox"/>	<p>MECHANICAL SYSTEM:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check types of mechanical systems being installed. Forced Air Heating systems need to be provided with chases for supply and returns so structural walls are not cut. <input type="checkbox"/> Duct work in garage minimum 26 gauge with no openings in garage. <input type="checkbox"/> Supply and return are provided with adequate chase to upper floors, are shown on plans. <input type="checkbox"/> Heat Pump <input type="checkbox"/> Central Furnace <input type="checkbox"/> Wood stove / Fireplace <i>(cannot be the primary heat source)</i>. <input type="checkbox"/> Other
6.	<input type="checkbox"/>	<input type="checkbox"/>	<p>CROSS SECTION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Foundation Dimensions <input type="checkbox"/> Reinforcement steel shown or noted as specification on plans. <input type="checkbox"/> Insulation <i>(walls, floors, ceiling, slab)</i> <input type="checkbox"/> Framing Details <input type="checkbox"/> Stair and Landings <input type="checkbox"/> Roof Details <i>(include roofing materials)</i> <input type="checkbox"/> Lateral Bracing
7.	<input type="checkbox"/>	<input type="checkbox"/>	<p>ELEVATIONS <i>(four views are required, and must be drawn to scale)</i>:</p> <ul style="list-style-type: none"> <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West <input type="checkbox"/> Existing grades must be accurately shown and labeled on each view if located on a shoreline. <input type="checkbox"/> Final grades must be accurately shown and labeled on each view. <input type="checkbox"/> Clearly label the new proposed area vs. the existing portion of the structure.
8.	<input type="checkbox"/>	<input type="checkbox"/>	<p>WASHINGTON STATE ENERGY/VENTILATION CODE COMPLIANCE:</p> <p>Energy code forms must be submitted with building plans. Prescriptive forms are available at this office or on the internet at http://www.energy.wsu.edu/code.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Heat Loss Calculations <input type="checkbox"/> Glazing Schedule <input type="checkbox"/> Energy Credit(s) Form