

Ferry County
PLANNING DEPARTMENT
 Post Office Box 305
 Republic, WA 99166-0305
 Phone (509) 775-5225 Ext 3101
 Fax (509) 775-5240

**PLUMBING & MECHANICAL
 PERMIT APPLICATION**

PERMIT FEE

Owner _____
 Address _____
 City _____
 State, Zip _____
 Phone _____
 Location _____
 Street Address _____
 Sec _____ Twn _____ Rng _____
 Tax Parcel # _____
 Subdivision & Lot # _____
 Starting Date _____
 Contractor _____
 Mailing Address _____

Basic Fee \$ 30.00
 Plan Review @ \$30/hr \$ _____
 Other Inspection @\$30.00/hr \$ _____
 Total Fee \$ _____

Rec'd by _____
 Date _____

This permit will not be finished without a Building Officials' signature. This permit becomes void if construction has not started within 12 months of issuance.

I hereby certify that I have read and examined this application and know the Same to be true and correct. All provisions or laws and ordinances governing this type of work will be complied with whether specified herein or not.

TYPE OF INSPECTION

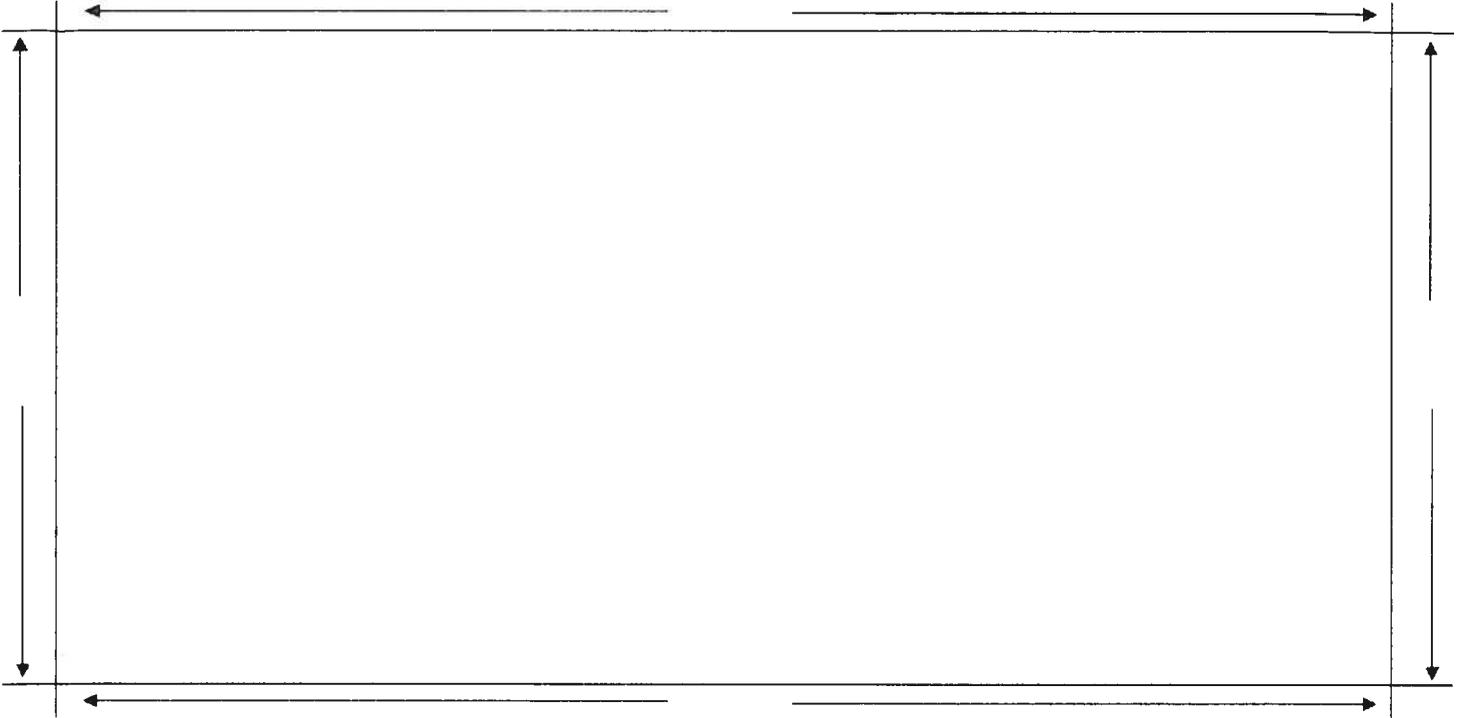
- _____ Plumbing
- _____ Mechanical
- _____ Wood Stoves
- _____ Fireplaces/Chimneys
- _____ Other
- _____ Propane Tanks

 APPLICANT'S SIGNATURE

 BUILDING INSPECTOR/OFFICIAL

Please complete the reverse side for propane tanks only.

DRAW YOUR PROPERTY



EXAMPLE

