City of Kelso

Building Permit Application

FOR OFFICE USE ONLY

Permit #:	Zoning:	RV:

Questions and applications can be directed to the following:	Building and Planning 203 S. Pacific Ave., Suite 208 Kelso, WA 98626	360.423.9922 (office) 360.423.6591 (fax) building@kelso.gov (email)

PROJECT SITE INFORMATION

Address/Location:	Parcel #:

PROPERTY OWNER

Business Name:	Contact Name		
Mailing/Billing Address:	City:	State:	Zip:
Phone:	Email:		

APPLICANT (If different from property owner listed above)

Business Name:	Contact Name		
Mailing/Billing Address:	City:	State:	Zip:
Phone:	Email:		

CONTRACTOR

Business Name:	Contact Name:		
Mailing/Billing Address:	City:	State:	Zip:
Phone:	Email:		
WA State License # (Not UBI#):		Expiration Date:	
City of Kelso Business License # (Permit cannot be issued until one is obtained):		Expiration Date:	

DETAILED PROJECT DESCRIPTION

PERMIT INFORMATION – CHECK ALL THAT APPLY

Building Type: ❑ Residential ❑ Commercial

Total Project Valuation (Fair Market Value Labor + Materials):

Project details*:

❑ New Construction	sq. ft. _____	❑ Remodel/Tenant Improvement	sq. ft. _____
❑ Addition	sq. ft. _____	❑ Mfg. Home	sq. ft. _____
❑ Garage	sq. ft. _____	❑ Foundation Only	sq. ft. _____
❑ Shed	sq. ft. _____	❑ Re-Roof Residential squares:	# _____
❑ Carport/Patio Cover	sq. ft. _____	❑ Re-Roof Commercial bid price:	$ _____
❑ Deck/Ramp	sq. ft. _____	❑ Fire/Life Safety	

*Supplemental/checklist forms may be available. Demolition, Sign, Plumbing, and Mechanical permits are issued separately.

Critical Areas on the Site – Please Check All That Apply: ❑ Slopes ❑ Wetlands ❑ Streams ❑ Shorelines

PROPERTY OWNER OR AUTHORIZED AGENT

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit.

Signature: Printed Name: Date: