

129 North Second Street, 2nd Floor Yakima, Washington 98901 Phone (509) 575-6126 • Fax (509) 576-6576 Email: codes@yakimawa.gov

CHANGE OF OCCUPANCY APPLICATION PACKET

COMMUNITY DEVELOPMENT DEPARTMENT



Code Administration Division 129 North Second Street, 2nd Floor Yakima, Washington 98901 Phone (509) 575-6126 • Fax (509) 576-6576 Email: codes@yakimawa.gov

NOTE:

Prior to submitting this application, please verify with the City of Yakima Planning
Division if land use review/approval will be required:
(509) 575-6183 or ask.planning@yakima.gov.

Submittal Requirements:

- 1) Completed building permit application form.
- 2) If remodeling is planned, provide a BEFORE / AFTER Floor Plan. Refer to the "Building / Plan Review Permit Fee Schedule" for applicable fees. Also, please indicate if there are any adjacent businesses. There are separate forms/fees for Fire, Plumbing, Mechanical, Sign, etc. Permits.

If no remodeling is planned, provide a copy of the existing floor plan that shows the intended us of areas, such as: office, storage, restroom, etc. Also, please indicate if there are any adjacent businesses. *If no remodeling is proposed, the plan review and building permit fee is based on the minimum fee of:* \$13.94 Plan Review Fee / \$21.45 Building Permit Fee+ \$25.00 Washington State Surcharge = \$60.39

NOTE: A design professional, licensed under the provisions of RCW Chapter 18.08, RCW Chapter 18.43, and corresponding WAC regulations as now exist or are hereafter amended is required to prepare or oversee the preparation of construction documents for the construction, erection, enlargement, alteration, and/or repairs of any building or structure that contains or shall contain five or more residential dwelling units or for any commercial building or structure that is or shall be over four thousand square feet in size (YMC 11.04.050).

3) Provide a General Site Plan demonstrating compliance with the American Disabilities Act (ADA).

The above-referenced information will be used to:

- 1) Verify that the new occupancy is in compliance with applicable code requirements;
- 2) Verify that other existing occupancies have adequate fire separations, etc. (if applicable); and
- 3) Verify that the structure is compliant with the ADA for restrooms access/egress and parking.



Signature

| Building Perm | nit Application | | Buildir | ng Permit # |
|--|-----------------------------------|--------------------------------|----------------------------------|---|
| Site Address: | | Parcel #s: | | |
| Primary Contact Name: | | Phone#: | Ema | il |
| Construction Type(s): | IBC/IRC | Occupancy Classification_ | | ed Cost of Construction: |
| | | | (If cost of labo | or is not included, cost of materials will be doubled) |
| Change of building occup | pancy classification? Yes | No New land use design | gnation or change of land use | designation proposed? ☐ Yes ☐ No |
| Will 1 acre or more be | cleared or graded? ☐ Yes ☐ | No Will this project cre | eate an Accessory Dwelling Ur | nit per YMC 15.09.045? ☐ Yes ☐ No |
| Is this property wit | hin the flood area? 🗆 Yes 🗆 | No | | Zoning District: |
| Description of Work | (if lengthy, please attach on | a separate document) | | |
| | | | | |
| Building Informatio | n | | | |
| ☐ Single-Family New | ☐ Single-Family Alteration | ☐ Single-Family Add | ition | |
| ☐ Multifamily New | ☐ Multifamily Alteration | Multifamily Additi | _ | |
| ☐ Commercial New | ☐ Commercial Addition | ☐ New Commercial | Tenant \square Renovation | for Existing Commercial Tenant |
| Square Footages of N | | | | |
| 1 st Floor | | | | Attic, stairway-access |
| Garage | Carport | Covered Porch | Covered Patio | Attic, ladder-access |
| # of stories | # of bathrooms | # of bedrooms | # of units (residential) | # of tenants (commercial) |
| Fire Sprinkler?: Tyes | □ No City Water?: [| ☐ Existing ☐ New | City Sewer?: Existing | g 🗆 New |
| Fire Alarm?: 🛘 Yes | □ No Well?: [| ☐ Existing ☐ New | Septic System?: 🗌 Existin | g 🗆 New |
| Contact Information | | | | |
| Applicant Name: | | Applicant A | Address: | |
| | | | | Alt. Phone: |
| | | | | |
| | | | | License #: |
| | | | | |
| Registered Design Pro. Nar | ne: | Design Pro | Address: | |
| | | | | #: |
| | national Building Code, will you | u be the design professional | | oroject? □ Yes □ No |
| Property Owner Name: | | Owner A | Address: | |
| Phone #: | Email: | | Alt. | Phone: |
| Lending Info Provided? | N/A □ Not Provided □ T | o be provided at a later da | te | |
| Lending Institution: | | Phone #: | Address:_ | |
| Declaration | | | | |
| I hereby certify that (plead ☐ I am a CONTRACTOR of | | currently registered and prope | erly licensed as defined under R | CW 18.27.010 and 18.27.110 and am legally qualified |
| to perform the work soug | • | nd all work will be done by th | ne property owner or a properly | licensed contractor or specialty contractor as defined |
| under RCW 18.27.010 a | nd 18.27.110 and is legally quali | fied to perform the work soug | ght by this permit. | provisions and conditions of the exemption as stated. I |
| | | | | with the work to be performed under the permit applied |
| I hereby certify under per contained herein is true a | | he granting of a permit doe | s not authorize me in any way | ed this application and know that the information to violate or cancel any of the provisions of state, |

Print Name

Date



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PLUMBING PERMIT APPLICATION Permit# Job Address: _ Parcel Number: Project Description: Estimated cost of the work to be performed (materials and labor): \$ (If cost of labor is not included, cost of materials will be doubled) **Property Owner** Contractor Name: Business Name:____ Address: Address: City/State/Zip:____ City/State/Zip:____ E-mail: State Cont. Lic. #: exp. Phone: Alt. Phone: Phone: EXISTING **EXISTING** NEW NEW ITEM ITEM QUANTITY QUANTITY QUANTITY **QUANTITY** Atmospheric Breaker Mop Sink Backflow Device (RPBA or DCVA) <2" Pretreatment Interceptor (Grease/Oil) Backflow Device (RPBA or DCVA) >2" Repair/Alt. Drain/Vent Piping Bar Sink Roof Drain Bathtub Sewage Pump Clothes Washer Sewer Repair/Replacement Dishwasher Shower Drinking Fountain Sink Floor Drain Supplemental Permits Hose Bib Urinal Water Closet – Tank Type Kitchen Sink Kitchen Sink 3 Compartment Water Closet – Flushometer Type Laundry Tray Water Heater Water Piping/Service Lavatory (Basin) Miscellaneous: Sampling Port **Declaration** I hereby certify that (please select one): ☐ I am a **CONTRACTOR** or SPECIALTY CONTRACTOR currently registered and properly licensed as defined under RCW 18.27.010 and 18.27.110 and am legally qualified to perform the work sought by this permit. ☐ I am an AUTHORIZED AGENT of the property owner and all work will be done by the property owner or a properly licensed contractor or specialty contractor as defined under RCW 18.27.010 and 18.27.110 and is legally qualified to perform the work sought by this permit. ☐ I am **EXEMPT** from the requirements of the Contractor Registration laws, per RCW 18.27.090, and will abide by all provisions and conditions of the exemption as stated. I will do all of my own work or use all registered and licensed contractors and/or specialized contractors in connection with the work to be performed under the permit applied for herein. I hereby certify under penalty of perjury of the Laws of the State of Washington that I have read and examined this application and know that the information contained herein is true and correct. I understand that the granting of a permit does not authorize me in any way to violate or cancel any of the provisions of state, federal or local laws regulating the construction or performance of construction sought under this permit.

Print Name

Date

Signature



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MECHANICAL PERMIT APPLICATION

Permit#

| Job Addr | ess: | | Parcel Number: | | |
|---|--|--|---|--|--|
| Project D | escription: | | | | |
| Estimated | l cost of the work to be performed (mater | ials and la | bor): \$ | | |
| (If cost of | labor is not included, cost of materials will | be double | d) | | |
| | Property Owner | | Contract | or | |
| Name: | | Business Name: | | | |
| Address | | | Address: | | |
| | | | City/State/Zip: | | |
| City/State/Zip: | | | T | | |
| | | | | | |
| | ITEM | QTY. | ITEM | QTY. | |
| | A/C Unit | | Haz Piping outlets | | |
| | Air Handler – CFM: | | Heat Pump | | |
| | Commercial Incinerator | | Kitchen Exhaust Fan | | |
| | Domestic Incinerator | | LP Tank/Residential <125 gal | | |
| | Dryer Vent | | Miscellaneous: | | |
| | Electric, Baseboard, or Suspended Heaters | | Non Haz Piping outlets | | |
| | Evaporative Cooler | | Pellet Stove | | |
| | Furnace/Heater – BTUs: | | Repair/Alt./Addn. to a listed appliance: | | |
| | Gas Boiler – BTUs: | | Type I/II Commercial Hood | | |
| | Gas Fireplace/Log/Heat Stove | | Vent Fan (laundry, bath) | | |
| | Gas Grill | | Vent Systems | | |
| | Gas Piping outlets | | Wood Stove | | |
| | Gas Range | | | | |
| I am a CO am legally I am an A contractor I am EXE exemption to be performation | contify that (please select one): ONTRACTOR or SPECIALTY CONTRACTOR curqualified to perform the work sought by this permit AUTHORIZED AGENT of the property owner and as defined under RCW 18.27.010 and 18.27.110. MPT from the requirements of the Contractor Reas stated. I will do all of my own work or use all representations of the Laws of the contained herein is true and correct. I understations of state, federal or local laws regulating the desired and corrects. | it. d all work w and is legall egistration la egistered an he State of la nd that the g | ill be done by the property owner or a properly y qualified to perform the work sought by this pe aws, per RCW 18.27.090, and will abide by all d licensed contractors and/or specialized contractors and examined this granting of a permit does not authorize me in an | licensed contractor or specialt rmit. provisions and conditions of the ctors in connection with the works application and know that they way to violate or cancel any of the results in the contract of the co | |
| | Signature | | Print Name | Date | |



CITY OF YAKIMA SITE PLAN CHECKLIST



For Land Use Review & Building Permits

Site plans required for land use review and building permits shall include the items listed below.

Sections from the Yakima Municipal Code are referenced by some items to help guide applicants. This is not a comprehensive list. View the full Yakima Municipal Code here: https://www.codepublishing.com/WA/Yakima/

| ☐ Property address, parcel number, and zoning designation; |
|--|
| \Box Legal description of the land; |
| ☐ North arrow and scale of drawing; |
| \square Name of applicant, phone number, signature of property owner and project name; |
| ☐ Actual dimensions and shape of the lot to be built upon; |
| \square Sizes and location of existing structures on the lot to the nearest foot; |
| \Box Location and dimensions of proposed structures and uses; |
| ☐ All structure setbacks (<u>YMC § 15.05.030</u>); |
| \square Lot coverage calculations (<u>YMC § 15.05.020(C)</u>); |
| \Box Clearview triangle (<u>YMC § 15.05.040</u>); |
| \square Size and location of proposed and existing utility easements and other easements; |
| ☐ Location and size of required site drainage facilities including on-site retention; |
| ☐ Adjacent Right-of-Way dedication and frontage improvements; |
| \square Distance(s) of structures to property line and to the centerline of the Right-of-Way (YMC §15.05.030, Table 5-1); |
| \Box Location of ingress and egress, including curb cuts intersecting with streets and dimensions of proposed or existing driveways (YMC § 15.06.065); |
| ☐ Location and size of parking stalls with accessible parking spaces and aisles identified (YMC Ch. 15.06); |
| ☐ Location of electric vehicle (EV) infrastructure; |
| ☐ Parking circulation plan with proposed landscaping and sitescreening (YMC Ch. 15.06); |
| ☐ Location and size of new or existing loading spaces (<u>YMC § 15.06.130</u>); |
| ☐ Proposed and existing signage (YMC Ch. 15.08); and |
| ☐ Proposed or existing mailbox location. |
| A site plan for development in the floodplain overlay shall also include the following information: |
| \square Size and location of floodplain and floodway on the lot; |
| \square Elevation in relation to the one-hundred-year flood level of the lowest floor (including basement) of all structures; |
| \square Elevation in relation to mean sea level of any structure that has been floodproofed; |
| ☐ Certification by a registered professional engineer or architect that established floodproofing standards have been met; |
| ☐ Description of the extent to which any watercourse will be altered or relocated as a result of the proposed development; and |
| ☐ Any other site plan requirements identified in <u>YMC Ch. 15.27</u> Part Four. |

Additional information may be requested. Projects requiring work in the public right-of-way or involving city water main lines or sewer main lines will be required to submit civil plans to the Engineering Division for review.