



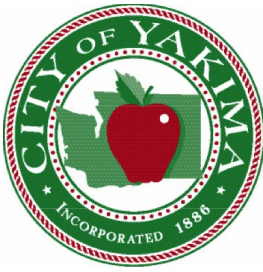
COMMUNITY DEVELOPMENT DEPARTMENT

Code Administration Division

129 North Second Street, 2nd Floor Yakima, Washington 98901

Phone (509) 575-6126 • Fax (509) 576-6576 Email: codes@yakima.wa.gov

NEW SINGLE-FAMILY RESIDENCE -OR- DUPLEX APPLICATION PACKET



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Residential Plan Review Checklist

- 1) Completed Building, Plumbing and Mechanical Permit Applications forms (as applicable)**
- 2) Two Copies of Each:**
 - ☐ Site plan (as outlined in the General Site Plan Checklist)
 - ☐ Foundation Plan
 - ☐ Floor construction layout plan w/associated engineering required, if using a manufactured floor system
 - ☐ Floor plan (for each floor)
 - ☐ Roof/Ceiling construction plan
 - ☐ Roof Truss Layout and associated engineering (required, if using manufactured roof trusses)
 - ☐ Typical Cross Section through structure from roof through foundation
 - ☐ Stair and Rail Detail (tread depth and riser height)
 - ☐ Completed Energy Forms

Minimally, the applicable Building Plan Review Fee must be paid prior to our office commencing plan review of the construction drawings. For questions regarding construction plan submittal and/or building code question, please contact the Office of Code Administration, 509-575-6126 or codes@yakimawa.gov.

For questions relating to site development and/or zoning requirements, please contact City Planning at 509-575-6183 or ask.planning@yakimawa.gov.



Community Development Department
Code Administration Division
129 N 2nd Street, 2nd Floor, Yakima, WA 98901
Phone: (509) 575-6126 * Fax: (509) 576-6576
codes@yakimawa.gov * www.buildingyakima.com

Revised 07/2023

Building Permit Application

Building Permit # _____

Site Address: _____ Parcel #: _____

Primary Contact Name: _____ Phone #: _____ Email: _____

Construction Type(s): _____ IBC/IRC Occupancy Classification: _____ Estimated Cost of Construction: _____

Change of building occupancy classification? ☐ Yes ☐ No New land use designation or change of land use designation proposed? ☐ Yes ☐ No
Will 1 acre or more be cleared or graded? ☐ Yes ☐ No Will this project create an Accessory Dwelling Unit per YMC 15.09.045? ☐ Yes ☐ No
Is this property within the flood area? ☐ Yes ☐ No Will temporary construction trailers be utilized? ☐ Yes ☐ No

Zoning District: _____

Description of Work (if lengthy, please attach on a separate document)

Building Information

☐ Single-Family New ☐ Single-Family Alteration ☐ Single-Family Addition
☐ Multifamily New ☐ Multifamily Alteration ☐ Multifamily Addition
☐ Commercial New ☐ Commercial Addition ☐ New Commercial Tenant ☐ Renovation for Existing Commercial Tenant

Square Footages of NEW Construction

1st Floor: _____ 2nd Floor: _____ 3rd Floor: _____ Basement: _____ Unfinished Attic Space: _____
Garage: _____ Carport: _____ Covered Porch: _____ Covered Patio: _____
of stories: _____ # of bathrooms: _____ # of bedrooms: _____ # of units (residential): _____ # of tenants (commercial): _____

Fire Sprinkler?: ☐ Yes ☐ No

City Water?: ☐ Existing ☐ New

City Sewer?: ☐ Existing ☐ New

Fire Alarm?: ☐ Yes ☐ No

Well?: ☐ Existing ☐ New

Septic System?: ☐ Existing ☐ New

Contact Information

Applicant Name: _____ Applicant Address: _____

Phone #: _____ Email: _____ Alt. Phone: _____

Contractor Name: _____ Contractor Address: _____

Phone #: _____ Email: _____ Contractor License #: _____

Registered Design Pro. Name: _____ Design Pro Address: _____

Phone #: _____ Email: _____ License #: _____

***If required by the International Building Code, will you be the design professional in responsible charge of this project? ☐ Yes ☐ No

Property Owner Name: _____ Owner Address: _____

Phone #: _____ Email: _____ Alt. Phone: _____

Lending Info Provided? ☐ N/A ☐ Not Provided ☐ To be provided at a later date

Lending Institution: _____ Phone #: _____ Address: _____

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.

Signature

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): \$ _____

Property Owner

Name: _____

Address: _____

City/State/Zip: _____

E-mail: _____

Phone: _____

Alt. Phone: _____

Contractor

Business Name: _____

Address: _____

City/State/Zip: _____

E-mail: _____

State Cont. Lic. #: _____ **exp.** _____

Phone: _____

ITEM	EXISTING QUANTITY	NEW QUANTITY
Atmospheric Breaker		
Backflow Device (RPBA or DCVA) <2"		
Backflow Device (RPBA or DCVA) >2"		
Bar Sink		
Bathtub		
Clothes Washer		
Dishwasher		
Drinking Fountain		
Floor Drain		
Hose Bib		
Kitchen Sink		
Kitchen Sink 3 Compartment		
Laundry Tray		
Lavatory (Basin)		
Miscellaneous:		

ITEM	EXISTING QUANTITY	NEW QUANTITY
Mop Sink		
Pretreatment Interceptor		
Repair/Alt. Drain/Vent Piping		
Roof Drain		
Sewage Pump		
Sewer Repair/Replacement		
Shower		
Sink		
Supplemental Permits		
Urinal		
Water Closet – Tank Type		
Water Closet – Flushometer Type		
Water Heater		
Water Piping/Service		
Sampling Port		

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MECHANICAL PERMIT APPLICATION

Permit# _____

Job Address: _____ Parcel Number: _____

Project Description: _____

Estimated cost of the work to be performed (materials and labor): \$ _____

Property Owner

Contractor

Name: _____

Business Name: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

E-mail: _____

E-mail: _____

Phone: _____

State Cont. Lic. #: _____ exp. _____

Alt. Phone: _____

Phone: _____

ITEM	QTY.
A/C Unit	
Air Handler – CFM: _____	
Commercial Incinerator	
Domestic Incinerator	
Dryer Vent	
Electric, Baseboard, or Suspended Heaters	
Evaporative Cooler	
Furnace/Heater – BTUs: _____	
Gas Boiler – BTUs: _____	
Gas Fireplace/Log/Heat Stove	
Gas Grill	
Gas Piping outlets	
Gas Range	

ITEM	QTY.
Haz Piping outlets	
Heat Pump	
Kitchen Exhaust Fan	
LP Tank/Residential <125 gal	
Miscellaneous: _____	
Non Haz Piping outlets	
Pellet Stove	
Repair/Alt./Addn. to a listed appliance: _____	
Type I/II Commercial Hood	
Vent Fan (laundry, bath)	
Vent Systems	
Wood Stove	

Declaration

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Signature

Print Name

Date



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NEW DOMESTIC WATER AND/OR NEW SEWER CONNECTION

PERMIT APPLICATION AND COST REQUEST

Permit #: W _____ WW _____

☐ **Cost Request Only**

Job Address: _____ Parcel Number: _____

Project Description: _____

Estimated cost of labor and materials for the installation: Water \$ _____ Sewer \$ _____

- This is the bid price from your contractor to do the actual work of installing a side sewer or water service from the meter to the structure. If the work will be performed by the property owner, the estimated cost you provide will be the cost of materials multiplied by two. This amount is separate and distinct from city connection fees and permit charges.

Property Owner

Name: _____

Address: _____

City/State/Zip: _____

E-mail: _____

Phone: _____

Alt. Phone: _____

Contractor

Business Name: _____

Address: _____

City/State/Zip: _____

E-mail: _____

State Cont. Lic. #: _____ exp. _____

Phone: _____

Water Connection:

Quantity of Meters Requesting: _____ List types and quantities of all fixtures to be served by each meter: _____

Irrigation water: ☐ Private Irrigation District ☐ City Irrigation ☐ Well ☐ Will Use City Water to Irrigate

Sewer Connection:

What will the sewer serve (e.g., apartments, duplex, single family residence, restaurant)?: _____

For commercial uses please provide the following information: Type of Business/use: _____

Will there be cooking? ☐ Yes ☐ No If yes, what type of cooking? _____

Size of Building: _____ Number of Seats: _____ Number of Employees: _____

- Once water connection fees are paid the Water Division will schedule the installation of the meter.
- If work will be performed in City right-of-way an Excavation Permit will be required. Excavation Permits are administered through the City's Engineering Dept. You can contact them at 509-575-6111 or refer to <https://www.yakimawa.gov/services/engineering/> for further information.
- Prior to any excavation a utility locate must take place. Dial 811 or visit www.call811.com for further information.
- If the sewer main must be tapped in order to install a sewer stub a specialty Side Sewer Installers license is required by the City of Yakima. Contact our office regarding this license, if applicable.

Declaration

I hereby certify that (please select one):

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- ☐ 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.

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Signature

Print Name

Date

All general site plans shall be drawn to scale and be legibly drawn, prepared, or printed on eight and one-half inches by eleven inches, unless otherwise requested. The scale of the drawing shall be a standard engineering scale and shall reasonably utilize the paper's size.

General Site Plan Checklist for Type (1) Review – YMC § 15.11.040 (B):

- () Parcel Number(s)
- () Property Address
- () Legal Description
- () North Arrow
- () Scale
- () Applicant Name
- () Project Name
- () Property Dimensions and Shape of Lot
- () Size and Location of Existing Structures
- () Size and Location of Proposed Structures
- () Distance(s) of Structures to Property Line and Centerline of Right-of-Way (YMC § Ch. 15.05, Table 5-1)
- () Location of Existing and Proposed Signage (YMC § Ch. 15.08)
- () Size and Location of Utilities
- () Parking Circulation Plan (YMC § Ch. 15.06.030)
- () Proposed Landscaping (YMC § Ch. 15.06.090)
- () Proposed SITESCREENING (YMC § Ch. 15.07)
- () Location of Ingress and Egress Points
- () Adjacent Rights-of-Way and Existing Frontage Improvements
- () Lot Coverage Calculation (YMC § Ch. 15.05.020(C))
- () Clearview Triangle – YMC § Ch. 15.05.040 – Vision Clearance
- () Dumpster and Screening Location
- () Per Section 15.05.020.K.2 of the Urban Area Zoning Ordinance, the area around a swimming pool shall be enclosed by a protective fence not less than four (4) feet in height.

The site plan shall also include any other information required by the Department or Administrative Official to clarify the proposal, assess its impacts, or determine compliance with this Title. Note: If you have any questions about this process, please contact City of Yakima Planning Division – 129 N. 2nd St., Yakima, WA or by phone at: (509) 575-6183.

Rev: 7/25/18

Design Criteria

Current Codes*:

- 2021 Washington State Building Code
- 2021 Washington State Residential Code
- 2021 Washington State Existing Building Code
- 2021 Washington State Fire Code
- 2021 Washington State Mechanical Code
- 2021 Washington State Fuel Gas Code
- 2021 Uniform Plumbing Code
- 2021 Washington State Commercial Energy Code
- 2021 Washington State Residential Energy Code
- 2021 Washington State Pool and Spa Code
- Accessible & Usable Buildings & Facilities ICC A117.1-2017

**In addition, see the Yakima Municipal Code for any amendments to the codes listed above*

Wind Speed=

Residential=110 mph (or, 85 mph for ASD)

Commercial=Reference ASCE 7-16 and IBC Chapter 16, usually 110 mph for category II

Earthquake Zone =

Residential (IRC Structures) = C

Commercial = D

Exception: If your plan is for a building or buildings in risk categories I, II, or III (2018 IBC Table 1604.5) *and* is of light frame construction per IBC chapter 23, the design may be according to Earthquake Zone C.

Frost Depth = 24” below grade

Ground Snow Load = 19 psf

Roof Snow Load = 20 psf for elevations 1,166 ft or under; 25 psf for elevations about 1,166 ft

Weathering = Severe

Termite Damage = Slight to Moderate

Winter Design Temperature = 11 deg.

Ice Barrier Underlayment Required = Yes

Flood Hazards = View current Flood Insurance Rate Map: <https://msc.fema.gov/portal/home>

Air Freezing Index = 1011

Mean Annual Temperature = 49.7 deg.

Electrical permits are applied for/issued by Washington State Labor & Industries: 509-454-3760.



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**ALLOWABLE CLEAR SPAN FOR
CONSTRUCTION GRADE LUMBER**

Member	Spacing	2x4	2x6	2x8	2x10	2x12
Floor joists without ceiling below	12"	N/A	10' 9"	14' 2"	17' 9"	20' 7"
	16"	N/A	9' 9"	12' 7"	15' 5"	17' 10"
	19.2"	N/A	9' 1"	11' 6"	14' 1"	16' 3"
	24"	N/A	8' 1"	10' 3"	12' 7"	14' 7"

Member	Spacing	2x4	2x6	2x8	2x10	2x12
Floor joists with ceiling below	12"	N/A	10' 6"	13' 3"	16' 3"	18' 10"
	16"	N/A	9' 1"	11' 6"	14' 1"	16' 6"
	19.2"	N/A	8' 3"	10' 6"	12' 10"	14' 10"
	24"	N/A	7' 5"	9' 5"	11' 6"	13' 4"

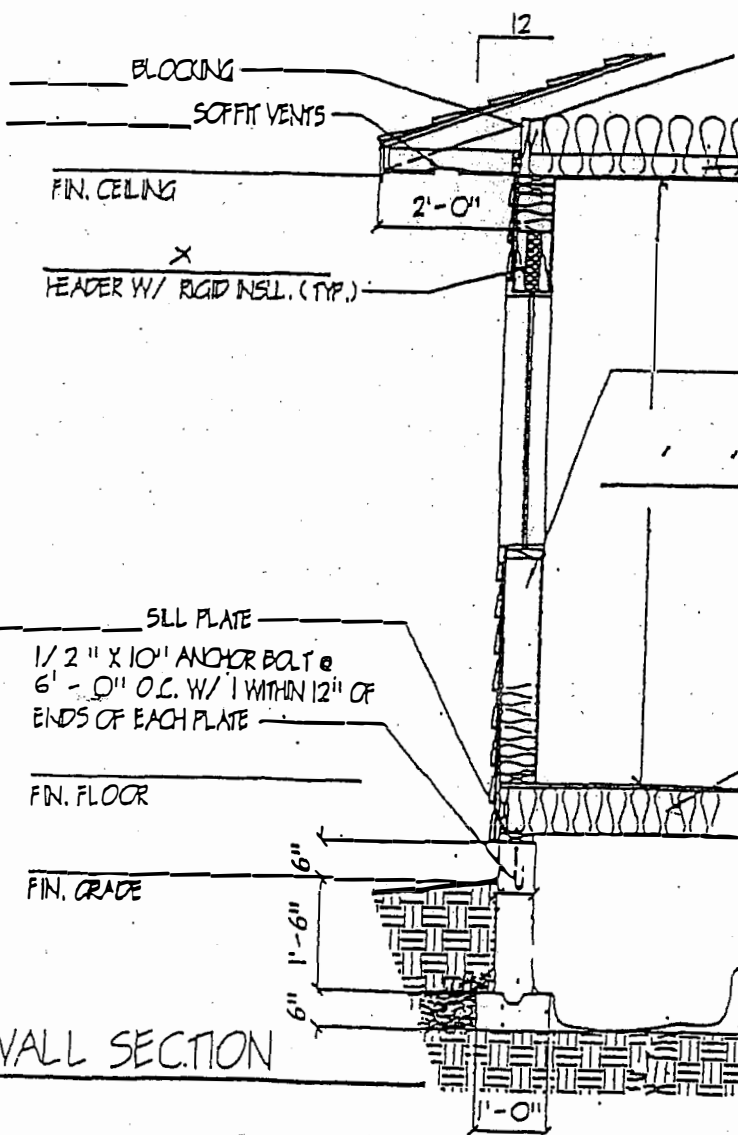
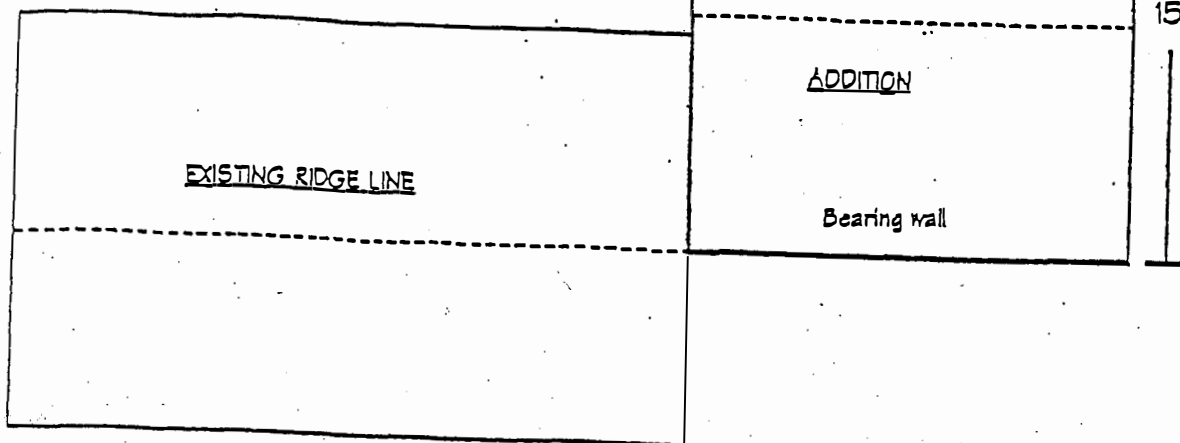
Member	Spacing	2x4	2x6	2x8	2x10	2x12
Ceiling joists with plaster or sheetrock, with no storage	12"	12' 5"	19' 6"	25' 8"	26+	N/A
	16"	11' 3"	17' 8"	23'	26+	N/A
	19.2"	10' 7"	16' 7"	21'	25' 8"	N/A
	24"	9' 10"	14' 10"	18' 9"	22' 11"	N/A

Member	Spacing	2x4	2x6	2x8	2x10	2x12
Roof rafters without finished ceiling	12"	7' 1"	10' 5"	13' 2"	16' 1"	18' 8"
	16"	6' 2"	9'	11'	13' 11"	16' 2"
	19.2"	5' 7"	8' 3"	10' 5"	12' 9"	14' 9"
	24"	5' 0"	7' 4"	9' 4"	11' 5"	13' 2"

Member	Spacing	2x4	2x6	2x8	2x10	2x12
Roof rafters with drywall ceiling	12"	7' 1"	10' 5"	13' 2"	16' 1"	18' 8"
	16"	6' 2"	9'	11' 5"	13' 11"	16' 2"
	19.2"	5' 7"	8' 3"	10' 5"	12' 9"	14' 9"
	24"	5'	7' 4"	9' 4"	11' 5"	13' 2"

The above dimensions are figured using #2 and better Douglas Fir only. If any other type or grade lumber is used, contact the Office of Code Administration at 509-575-6126 for the allowable span.

TYPICAL ROOF DESIGN EXAMPLE



ROOF CONSTRUCTION

SHEATHING
MANUFACTURED TRUSSES @ _____" O.C.
R-_____ BATT INSULATION
_____ SHINGLES
_____ " GWB CEILING

WALL CONSTRUCTION

_____ SHEATHING
X _____ STUDS @ _____" O.C.
R-_____ BATT INSULATION
_____ SIDING
6 MIL. MOISTURE BARRIER
(APPLIED TO WARM SIDE)
_____ " GWB WALLS

FLOOR CONSTRUCTION

_____ SUB FLOOR
_____ " FLOOR JOIST @ _____" O
R-_____ BATT INSULATION
FLOORING (CARPET, VINYL, TILE, ETC.)

BLOCKING
GIRDER
GUSSET (EACH SIDE)
POSTS
PIER PADS

6 MIL. POLYETHYLENE MOISTURE BARRIER
(BLACK)

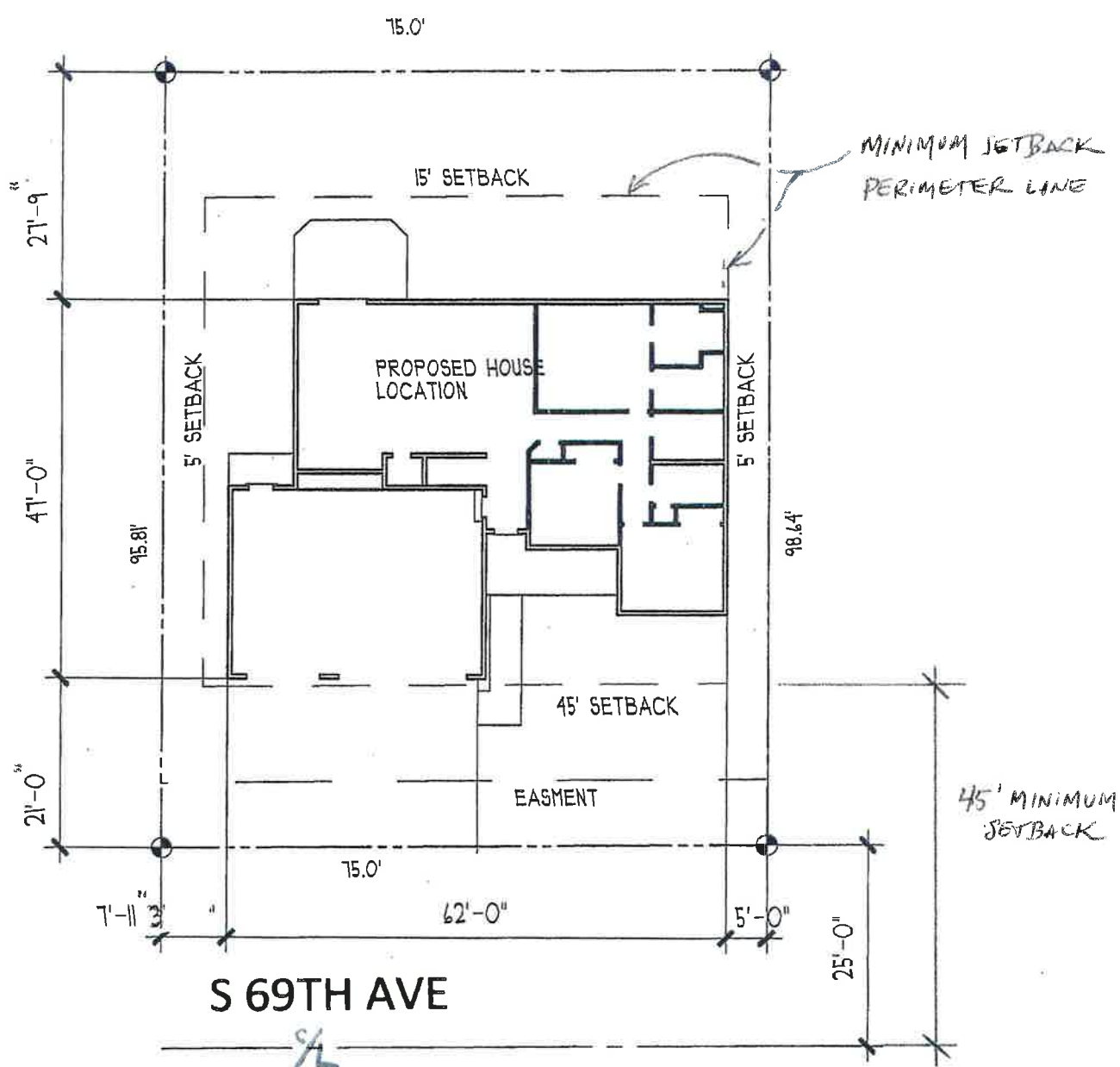
WALL SECTION

REQUIRED ATTACHMENT:
SITE PLAN

Note: Producing the site plan from this template is preferred, however, the template can be substituted for your own medium. (computer aided is acceptable.)

SAMPLE SITE PLAN

NEW SINGLE FAMILY RESIDENCE



SAMPLE USE ONLY

LOT COVERAGE CALCULATION

- | | | |
|--|-------------|-------|
| a) Footprint(s) of Existing Structure(s) | | SQ FT |
| b) Building Addition/New Structure(s) Footprint(s) | <u>7860</u> | SQ FT |
| c) Paved Area(s) (Driveways, Walkways, patios, etc.) Total | <u>700</u> | SQ FT |
| d) Proposed Paved Area(s) | | SQ FT |
| e) Total Impervious Surface (a+b+c+d = e) | <u>2560</u> | SQ FT |
| f) Lot Size | <u>7423</u> | SQ FT |
| g) Lot Coverage (e/f x 100 = g) | <u>34</u> | % |

MAP SCALE. (Please use the given scale, however, in some circumstances a different scale may work better.)

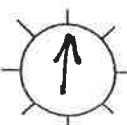
CHECK ONE

- ☐ Preferred Scale: 1 inch on the map = 20 feet on the ground
☒ Custom Scale: 1 inch = 20'
* Template tie marks are 1 inch apart

Produced by (print) John Doe

Date: 9-1-16

NORTH
ARROW



(Indicate North)

PARKING CALCULATION (Reference Table 6-1 of the Urban Area Zoning Ordinance)

- a) 3 space(s) required
b) 3 space(s) provided

LOT INFORMATION

Parcel #(s) 191618-44493
Site Address 129 N 2nd St.
Zoning R-1
Legal Description (brief) NE 1/4 Lot 2 Section Bonny
Blue Alder

BACKGROUND INFORMATION

APPLICANT INFORMATION

Applicant Name John Doe
Site Address 129 2nd St
Mailing Address PO Box 500 Yakima WA 98901
Contact Person John Doe Contact Phone: 509 9161-XXXX
Applicant Signature John Doe