



**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*

**PLUMBING 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	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		
Shower		
Side Sewer		
Sink		
Supplemental Permits		
Urinal		
Water Closet – Tank Type		
Water Closet – Flushometer Type		
Water Heater		
Water Piping/Service		
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.*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**