



General Application for Construction

City of Union Gap Community Development
3106 South 1st Street
Union Gap, WA 98903
Phone: 509.575.3638 Fax: 509.248.6494

PROJECT INFORMATION:

Application Type: New Construction Repair Alteration Sign Fence

Project Address: _____ Parcel Number: _____

Zoning: R-1 R-2 R-3 R-4 C-1 C-2 CBD W/W L-I

Description:

Total Square Footage: _____ Construction Type: _____

Construction Valuation Estimate: _____ OCC Class: _____

OWNER:

Applicant: _____ Phone: _____

Mailing Address: _____ Mobile: _____

City: _____ State: _____ Zip: _____ Fax: _____

Signature: _____ Email: _____

APPLICANT:

Applicant: _____ Phone: _____

Mailing Address: _____ Mobile: _____

City: _____ State: _____ Zip: _____ Fax: _____

Signature: _____ Email: _____

CONTRACTOR:

Applicant: _____ Phone: _____

Mailing Address: _____ Mobile: _____

City: _____ State: _____ Zip: _____ Fax: _____

License Number: _____ Email: _____

Signature: _____

DESIGN PROFESSIONAL:

Applicant:			Phone:
Mailing Address:			Mobile:
City:	State:	Zip:	Fax:
Signature:			Email:

AGENT FOR APPLICANT:

Applicant:			Phone:
Mailing Address:			Mobile:
City:	State:	Zip:	Fax:
Signature:			Email:

This Section to Be Completed for Construction Permits Only

Pursuant to RCW 19.27.095 (2)(i-ii). The requirements for a fully completed construction application shall include.

1. The name, address, and phone number of the office of the lender administering the interim construction financing, if any; or
2. The name and address of the firm that has issued a payment bond, if any, on behalf of the prime contractor for the protection of the owner, if the bond is for an amount not less than 50% of the total amount of the construction project.

If for any reason the information requested below is not available at the time of the application, the applicant shall provide the information as soon as it can be reasonably obtained.

Lending Agency Name: _____ Phone: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____

I acknowledge by checking this box that this project has no bonding agency.

If you are the Owner and Acting As your Own Contractor, please complete the following declaration:

I acknowledge that I am applying for a construction permit thru the Union Gap Community Development Department.

I also acknowledge that I am not a licensed contractor, specialty or general, or that I am not acting as a contractor and wish to be exempt from the requirements of the Washington State Contractor's Act, per RCW 18.27.090, and will abide by all provisions and conditions of the exemption as stated. I agree that if I use the assistance of any person(s) to provide labor and/or assistance, I will retain only contractors registered and currently licensed as required under the laws of the State of Washington.

I (print name) _____ certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signature: _____ Date: _____