



Permit No: _____

CITY OF CHELAN
DEPARTMENT OF COMMUNITY DEVELOPMENT
135 E JOHNSON AVE., PO Box 1669, CHELAN, WA 98816
TELEPHONE: (509) 682-8017 FAX: (509) 682-8050

PLUMBING PERMIT APPLICATION

Parcel Number (APN): _____ **Lot Size:** _____ (Acres)
Parcel Address: _____ **City/Zip:** _____
Abbreviated Legal Description: _____
Property Owner(s): _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____ **Notarized Ownership form is required as an attachment.**

Applicant: _____ **Company Name:** _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____

Contractor's Name: _____
Contractor's License Number: _____ **Email:** _____
Mailing Address: _____ **City/State/Zip:** _____
Phone: _____ **City Business License No.:** _____

Application For: Residential Commercial New Plumbing Fixture(s) New Water Heater(s)
Project Description: _____

Number of Fixtures: _____ x \$7.00 = \$ _____
Number of Water Heaters: _____ x \$7.00 = \$ _____
+ Base Fee for Plumbing Permit = \$ 20.00
Total Plumbing Permit Fees = \$ _____

I hereby certify that I will pay all fees as required by law. I also hereby certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I understand that the lead agency is relying on them to make its decision.

_____ Date Submitted: _____
Applicant Signature Authorized Agent Signature
Print Name _____
Place Where Signed: _____, WA Place Where Signed: _____, WA

FOR OFFICIAL USE ONLY:

Received By & Date:	Building Approval & Date:	Final Fees Paid: \$	
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Complete applications will be accepted Monday-Friday 8am to 4pm

PLUMBING SUBMITTAL REQUIREMENTS FOR MULTI-FAMILY, AND COMMERCIAL
(Including Additions to Existing Buildings)

APPLICATION DOCUMENTS (Submit 1 set of electronic plans)

Please place check marks by completed items and write N/A by those that do not apply.

WRITTEN DOCUMENTS:

- Plumbing Permit Application (1 original)
- Copy of Deed with legal description of property (1 copy)
- Completed Ownership Certification Form (1 original with notary)
- Copy of contractors' registration number (1 copy)
- Current City Business license number
- Plumbing sizing calculations (2 copies required)
- Manufactures cut sheet and installation requirements (2 copies required)
- Specifications (2 copies if applicable)

FEES: Approximate permit fees are due at the time of application submittal.

REQUIRED PLANS AND DRAWINGS: (See attached pages for specific requirements)

- Site & Utilities Plan
- Floor Plans
- Details, Interior cross sections, & elevations
- Exterior elevations
- Plumbing DWV
- Water supply and distribution
- Roof and roof decks
- Drawings of plumbing
- Details of fire stop protection and locations of fire-resistance rated assemblies

SPECIFIC REQUIREMENTS FOR PLANS AND DRAWINGS: Either format will be accepted

PAPER - Include drawing title and drawing numbers on all plans. All plans shall be submitted on one of the following sizes of paper: 11" X 17"; 18"X 24"; 24"X 36"; 30"X 42"; or 36"X48".

ELECTRONIC FILES - Submission of an electronic format will be accepted if attached to an e-mail, fees are paid, and forms are filled out and attached. All files and attachments shall be readable by using Word 97-2003 Doc (or newer) or Adobe Acrobat 6.0 (or newer).

SCALE:

- drawing scale shall be indicated using a bar-scale symbol for plan reduction integrity. The symbol must appear on all sheets. (Important for submission of electronic files and when the City utilizes electronic storage).
- Unless the site size dictates a different scale, site drawings are to be in an engineer's scale and should be at a scale of 1"=20', or 1"=30'; architectural floor plans are preferred to be 1/8"=1' or 1/4"=1' scale. Details may utilize larger scales as deemed appropriate.
- North Arrow – all site drawings and site related drawings (i.e., vicinity map, detail enlargements, etc.) shall include a north arrow.

_____ Vicinity Map – One shall be included in the drawing set sufficient to identify the project location.

ENERGY CODE DATA:

_____ Show efficiency of proposed equipment (submit equipment cut sheets showing the efficiency rating of proposed equipment such as water heaters, boilers, & dishwashers)

LICENSING REQUIREMENTS: (Required for Commercial Property)

_____ Include copy of contractor’s license as required for work in Washington State Law

_____ Include copy of business license number for work within Chelan City limits

ARCHITECT/ENGINEER REVIEW:

_____ Point Loads - the architect or engineer of record shall provide design calculations and review of point loads.

_____ Plumbing Review - plans must be reviewed, wet stamped, and signed by an architect or engineer in Washington State unless otherwise approved by the Building Department.

SITE & UTILITY PLAN: Include a site plan if any proposed plumbing is located on the exterior

_____ Property lines

_____ Streets and alleys

_____ Easements

_____ Existing and proposed structures

_____ Existing or proposed utilities

_____ LPG tanks

_____ Proposed slope, size, and material to be installed

_____ Standard detail of trench cross section (include trench compaction, tracer wire, & locator tape)

_____ Parking lots, driveways, and paved areas

_____ General topography, spot elevations or contours

_____ Pools, hot tubs, and spas

_____ Existing or proposed screening and fences

_____ Existing or proposed plumbing & equipment

_____ Backflow prevention (location and type utilized)

_____ Details of dry wells used for site drainage, roof drains, or condensate drainage (include details of construction or reference City Standard number)

GENERAL BUILDING DATA:

_____ Type of construction

_____ Fire sprinkled or non-sprinkled

_____ Number of stories

_____ Floor area

_____ Building height

_____ Flood zone

FLOOR PLANS:

_____ Floor Plan – label all areas, windows & doors, sq. ft., basements, decks, and roof decks.

_____ Fire Rated Walls & Floors – show locations of rated assemblies on plans.

_____ Plumbing fixture locations - show location of existing and proposed plumbing fixtures. Include water closets, sinks and lavatories, grease traps, interceptors, floor drains, floor sinks, urinals,

P&T drains, bar sinks, hose bibs, drinking fountains, bath tubs, showers, washing machines, backflow preventers, bidets, water heaters, boilers, and water supplies.

_____ Point Loads – show equipment loads greater than 200 pounds

_____ Handicapped Accessible - show areas that are required to be handicapped accessible. Comply with ICC/ANSI A117.1 – 2003 requirements for plumbing elements and facilities. Provide dimensions to show compliance, provide details as needed)

DETAILS, INTERIOR CROSS SECTIONS, & ELEVATIONS:

_____ Show details for compliance with accessibility of IBC Chapter 11 and ANSI A117.1-2003 (typical details for water closet heights & locations, grab bars, urinal heights, lavatory heights, faucet requirements/lever handle, roll-in or transfer-type showers and bath tubs, hand-held showers, etc.)

_____ Seismic strapping of water heaters (provide detail for seismic strapping gas or electric water heaters within Zone-D or higher)

_____ P&T for water heaters and boilers to drain with air gap to a floor sink indirectly, or drained by gravity to an approved exterior location @ 6”-24” above grade or a sloping concrete surface such as the garage floor

_____ Provide trap primers at floor drains (floor drains at bathrooms, washing machine drains, floor sink drains for P&T indirectly drained, basement floor drains, etc.)

_____ The Building Department has several Standard details that can be utilized. These details are available at the front counter.

EXTERIOR ELEVATIONS:

_____ Include a copy of exterior elevations from architectural plans

ROOF & ROOF DECK PLANS:

_____ Roof & Roof Deck Plan - provide a copy of plan showing the slope to drain.

_____ Location of Plumbing - existing and proposed plumbing vents, roof drains, scuppers, condensate drains, & mechanical equipment.

_____ Roof Drains & Overflow - provide details of drains and scuppers, specify type of material, and include calculations for sizing the drain and overflow piping.

DRAWINGS OF PLUMBING:

_____ Water lateral & mains – single line diagram on site plan, materials, trench detail, size, valves, sizing calculations, backflow prevention, inspector to witness water test at city pressure or a 50 psi air test for a minimum of 15 minute test

_____ Sewer lateral & mains – single line diagram on site plan, materials, trench detail, size, clean outs & access boxes, sizing calculations, grade, trench compaction, inspector to witness test @ 5 psi air or 10’ high water above highest outlet for a minimum of 15 minute test

_____ Domestic water interior – isometric drawing, materials, valves, specify equipment served, specify hot and cold, sizing calculations, length, size, support spacing, water heater size, pressure reducers, filters, booster pumps, water softener, backflow prevention, flushometer valves, gate valves, ball valves, air gap, hammer arrestors, inspector to witness water test at city pressure or a 50 psi air test for minimum of 15 minute test

_____ LPG piping exterior and interior – single line or isometric drawing, signage-no smoking, include size of tank, locations of outlets, quick disconnect valves, sediment traps, type of piping & manufactures installation instructions, sizing calculations, cut sheets showing BTU’s of

equipment or standard BTU used, valve locations, unions, support spacing, service pressure – low/med./high, inspector to witness test @ 15 psi for a minimum of 10 minute test

_____ DWV piping @ interior – isometric drawing, sizing calculations, materials, drains, venting, fixture or equipment served, exceptions to code, clean outs, type of fittings, support spacing, trap size or indirect waste, inspector to witness 5 psi air test or 10’ high water test above highest fixture connection for 15 minute test

_____ Roof drains – isometric drawing, materials, type of fittings, sizing calculations, clean outs, cut-sheets, overflow sizing and location, inspector to witness 5 psi air test or 10’ high water test above the highest fixture connection for 15 minute test

FIRE STOP PROTECTION & FIRE RESISTANCE RATED ASSEMBLIES:

_____ Show typical wall and floor assemblies and fire ratings

_____ Show fire protection for all rated plumbing penetrations (reference fire rated material, installation instructions, testing laboratory, include material cut-sheets with this submittal)



CITY OF CHELAN

Cross Connection Control Survey

FOR NEW CONSTRUCTION OR PLUMBING PERMIT APPLICATIONS ONLY

1. What is the site address? _____

2. Your water meter serves how many homes? _____ How many buildings? _____

3. Do you have any of the following?

a. Swamp cooler connected to piping	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b. Hot tub (fills with a hose or automatic filler)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c. Swimming pool	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d. Underground sprinkler system	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e. Drip irrigation system	Yes <input type="checkbox"/>	No <input type="checkbox"/>
f. Greenhouse	Yes <input type="checkbox"/>	No <input type="checkbox"/>
g. Solar water heating system	Yes <input type="checkbox"/>	No <input type="checkbox"/>
h. Water makeup lines (boiler, hydronic heating)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
i. Utility sink with threaded faucet (hose attachment)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
j. Fire sprinkler system	Yes <input type="checkbox"/>	No <input type="checkbox"/>
k. Unknown, unidentifiable or complicated piping	Yes <input type="checkbox"/>	No <input type="checkbox"/>

4. Do you use:

a. Antifreeze flush kits with your automobile	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b. Insecticide sprayers (that attach to a garden hose)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c. Darkroom or photo developing equipment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d. Fill adapters for waterbed, fish tank or other	Yes <input type="checkbox"/>	No <input type="checkbox"/>

5. Does anyone on the premise use a portable dialysis machine? Yes No

6. Do you have a bathtub/Jacuzzi that fills from the bottom *or* does not have an overflow drain or the fill spout is not above the tub rim? Yes No

7. Do you have a water softener or any other water treatment system connected to your drinking water supply? Yes No

8. Do you have auxiliary water supply (i.e. well, pond) on your premises? Yes No

9. Do you have livestock (i.e., horses, cows, etc.) that use a water trough? Yes No

10. Is the water piping that enters your home more than 10 feet above your water meter? Yes No

11. Does a creek, river, or spring run near your property?

a. Do you pump or draw water from this source?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

12. Do you have a booster pump, well pump, or any other type of water pump? Yes No

13. Do you receive irrigation water from a different source? Yes No
14. Do you have a backflow preventer on your property now? Yes No
If yes, where? _____
15. Do you have any situation that you are aware of that could create a connection between your drinking water and any other substance? Yes No
16. Do you have any other water using equipment on your property not mentioned above? Yes No

Comments: _____

Please notify the City of Chelan if any of the above conditions change on your property such as remodeling, changes or additions to your water piping system.

Signature of Water Customer/ Owner

Phone Number

Print Your Name

Best time to call or alternate contact

Today's Date

Your mailing address:

Physical address of property (if different):

Please answer all of the above questions and return it to the City of Chelan Planning Department. This form will be kept on file at the City of Chelan. If you have any questions please call us at (509) 682-5919 or Lee Reynolds at (509) 630-0921