

# TOWN OF BUCODA

P O Box 10 / 110 N Main Street  
 Bucoda, WA 98530  
 (360) 278-3525 FAX (360) 278-3526

PERMIT NO. ~~316~~ 349

24 HOUR NOTICE REQUIRED FOR ALL  
 INSPECTIONS: CALL (360) 278-3525

APPLICANT

Job Address <b>101 MARTINA ST SE BULODA, 98530</b>	Parcel # <b>64132600501</b>	Valuation <b>6,962<sup>50</sup></b>
Contact Person <b>Gale Culbert</b>	Mailing Address <b>5883 ST. HWY 303 NE STE 101 BULMERTON 98311</b>	Phone <b>360-698-0260</b>
Owner <b>DAN COFFMAN</b>	Mailing Address <b>P.O. BOX 21 BULODA, WA 98530</b>	Phone
Architect/Designer <b>N/A</b>	Mailing Address	Phone
Contractor <b>CleanSpace Northwest Inc.</b>	Mailing Address <b>5883 ST. HWY 303 NE STE 101 BULMERTON 98311</b>	Phone <b>360-698-0260</b>
Lender Information <b>NA</b>	Mailing Address	Phone

Type of Permit:  SFR  Commercial  Mechanical  Sign  Multi-Family  Church/School  Plumbing  Other

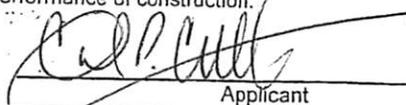
Class of Work:  New  Alteration  Move  Addition  Repair  Demo

DESCRIBE WORK: **INSTALL FLOOD VENTS IN SFR & DETACHED GARAGE**

Type of Construction	No. of Stories
Occupancy Group	Floor Area
Building Height	Use Zone
Occupant Load	

BUILDING	
Building Permit Fee	165.75
Plan Review Fee	107.74
State Surcharge	
Engineering Review	
Sign Permit Fee	4.50
Clearing/Grading	
Other	
<b>Total</b>	<b>277.99</b>

I hereby certify that I have read and examined this application and know that same to be true and correct. All provisions of law or ordinances governing this type of work will be complied with whether specified herein or not. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other State or Local law regarding construction of the performance of construction.

6/3/2016 Date  Applicant

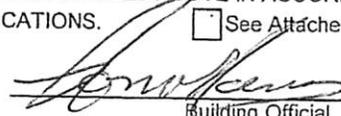
**NOTICE TO APPLICANT**

This permit becomes null and void if the work or construction authorized is not commenced within one year or if work construction is suspended or abandoned for one year at any time after work is commenced or if work is not completed within one year from date of issue.

All work shall be done in accord with the approved plans except where such approval is in conflict with other codes. The approved plans shall not be changed or modified without the prior approval of the Building Official.

It is the responsibility of the permittee to obtain the required inspections. Failure to notify this department that the work is ready for inspection may necessitate the removal of some of the construction material at the owners expense in order to perform such inspection.

PERMIT IS APPROVED FOR WORK DESCRIBED ABOVE IN ACCORD WITH THE APPROVED PLANS AND SPECIFICATIONS.  See Attached Conditions

6-6-16 Date  Building Official

PLUMBING		
NO.	ITEM	FEE
	Permit Fee	
	Water Closet-Urinal	
	Sink-Fountain	
	Tub-Shower	
	Clothes Washer-Diswasher	
	Lawn/Fire Sprinkler	
	Pool-Hot Tub	
	Plan Review Fee (65%)	
	<b>Total</b>	

MECHANICAL		
NO.	ITEM	FEE
	Permit Fee	
	Forced Air Heat BTU	
	Floor-Wall Heater	
	Boiler or Heat Pump	
	Air conditioner-Unit Cooler	
	Ventilation Sys-Exhaust Hoo	
	Wood Stove	
	Gas Piping	
	Water Heater-Floor Drain	
	Plan Review Fee (65%)	
	<b>Total</b>	

FOR INTERNAL USE ONLY			
RECEIPTS	Date	Amount	Receipt No.

Total Fees Due **277.99**  
 Paid to Date **277.99**  
 Balance Due **-**

Verified:  Business Lic  Copy L&I Contractor Lic#

DATE FINALED: 6-9-16

