



# **SUPPLEMENTAL APPLICATION** **MECHANICAL AND PLUMBING** **RESIDENTIAL**



Is this application for use in a Mobile/Manufactured Home?

- ✓ **If Yes:** A permit from [Washington State Department of Labor and Industries](#), **not** Kitsap County, is required for appliances installed within a mobile/manufactured home.
- ✓ **If No:** Continue

The purpose behind issuing permits over the counter is to reduce plan review time. All permits issued over the counter are subject to field inspection with the understanding that applicants are ultimately responsible for code compliant construction practices.

### **Section 1 – General Information**

Site Address: \_\_\_\_\_

Assessor Tax Parcel Number(s): \_\_\_\_\_

### **Section 2 –Permit Fee**

For Mechanical/Plumbing only permit. If this application is accompanying another application (i.e. a Single Family Residence application, Garage application, etc.) skip to section 3.

1. Enter quantity of fixtures in the table below
2. Determine cost of fixtures
2. Determine cost of installation
3. Add cost of fixtures and installation to enter Project Valuation. Please enter a separate valuation for mechanical work and plumbing work.

<b>Project Valuation</b>	<b>Permit Fee</b>
\$0.0 - \$500	= \$75.75
\$501 - \$1,000	= \$101.00
Over \$1,000	= \$207.05

**Mechanical Project Valuation: \$** \_\_\_\_\_

**Plumbing Project Valuation: \$** \_\_\_\_\_

**Total Permit Fee: \$** \_\_\_\_\_

**Total Permit Fee: \$** \_\_\_\_\_

### **Section 3 –Property Owner Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

I affirm, under penalty of perjury, that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge. I also affirm that I am the owner of the subject site. Further, as owner, I grant permission to any and all employees and representative of the County of Kitsap and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application. I understand, in accordance with Community Development fee policies, the base fee is determined by an average processing time. If staff hours required to process the permit exceeds the base fee, additional charges may be incurred, and I agree to pay all fees of the County that apply to this application. I understand, refunds may also be issued for those permits that require less processing time.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Section 4 – Mechanical

Contractor Name: \_\_\_\_\_

Phone: \_\_\_\_\_

License No: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Primary Fuel Source:

- Electric
  Oil
  Natural Gas
  Propane\*

### Indicate Quantity and Fixture Types Below

Quantity	Fixture Type	Description
	Clothes Dryer	Clothes Dryer with Exhaust Vent
	Cook Stove	Cook Stove, Range Hood Exhaust
	Fan	Bath Fan and/or Exhaust Fan
	Fireplace-Gas	Fireplace-Gas or Gas Log Insert
	Fireplace-Wood	Fireplace-Wood, Wood Stove, or Pellet Stove
	Furnace, Electric	Electric Furnace or HP +/- Ducting
	Furnace, LP Gas	Propane Furnace +/- Ducting
	Furnace, Natural	Natural Gas Furnace +/- Ducting
	Gas Pipe System	Gas Pipe System LPG/NATL/Oil
	Generator	
	Heat Pump	
	LP Tank	LP Fuel Tank (# of gallons: _____)
	Miscellaneous	
	Water Heater-Gas	Gas WH Vent and Combustion Air

\*Propane is prohibited in hazardous locations such as basements or pits or anywhere "heavier-than-air" gas can unsafely collect.

\*Propane tanks over 125 gallons require a minimum setback of 10 ft. from property line and buildings, and a site plan must be submitted with the application showing the setbacks. If propane tank is over 500 gallons, a site plan is required to accompany this application, and a separate Fire Code Permit is also required.

## Section 5 – Plumbing

Contractor Name: \_\_\_\_\_

Phone: \_\_\_\_\_

License No: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Water Source:

- Public
  Private Well
  Multi-Party Well

Sewage Disposal\*

- Public Sewer
  Private Septic
  Other \_\_\_\_\_

### Indicate Quantity and Fixture Types Below

Quantity	Fixture Type	Description
	Clothes Washer	Clothes Washing Machine
	Dishwasher	Dishwasher
	Drain	Floor Drain
	Hose Bib	Hose Bibb
	Lawn Sprinkler	Sprinkler System w/backflow prevention
	Sinks	Lavatory, Kitchen, Mop & Bar Sinks
	Tub/Shower	Tubs and/or Showers
	Water Closet	Water Closet / Urinal
	Water Heater	Water Heater
	Other	

Kitsap County mechanical permits are required for gas line and fuel tank installations.

\* An accepted Building Site Application or Building Clearance may be required from the Bremerton-Kitsap County Health District.