



SUPPORTING DOCUMENT REQUEST TO REVISE AN APPROVED PLAN

Kitsap County Code is available online at <http://www.codepublishing.com/wa/kitsapcounty/>
Title 14, Buildings and Construction

Property Owner Name: _____ Assessor Tax Parcel #: _____

Applicant Name: _____

Phone Number: _____ Permit Number: _____

Fees are due at the time of submittal. **All revisions to the previously approved plan will incur an additional plan review fee, based on our current hourly rate. See [DCD Fee Schedule](#)**
Please be aware that refund requests must be received postmarked within one year of the original payment date.

Accepted forms of payment:

- Cash
- Check/Cashier's Check - Make checks payable to Kitsap County Dept. of Community Development
- Electronic Checks - \$1.00 flat fee per electronic check
- Credit Cards: MasterCard, Discover, American Express or VISA - a third party convenience fee of approximately 2.5% will apply.



Section 1 –Submittal Requirements

Please be aware that permit application submittals can take 30 – 45 minutes for each application. This is to ensure application materials are complete and accurately prepared for a timely review from county staff. Use the column to the left to check off items included with your application.

✓	Required Submittal Items
<input type="checkbox"/>	1. Supporting Document Request to Revise an Approved Plan
<input type="checkbox"/>	2. Mechanical/Plumbing Supplemental App (if changes to mechanical or plumbing fixtures) - 1 original
<input type="checkbox"/>	3. Road Approach Supplemental App (if proposing changes to driveway/road approach) - 1 original
<input type="checkbox"/>	4. Stormwater Worksheet (if proposing changes to square footage or method of stormwater management) - 1 original
<input type="checkbox"/>	5. Engineered construction plans and calculations, if applicable - 2 sets (1 set to be 11"x17" or smaller and carry engineer's original stamp and signature).
<input type="checkbox"/>	6. Construction plans - 2 sets (1 set to be 11"x17" or smaller and carry design professional's original stamp and signature if prepared by a licensed professional).
<input type="checkbox"/>	7. Approved Plans to be revised - "Developers Copy" - 1 original
<input type="checkbox"/>	8. Energy Code Worksheet (if proposing new heated space or a change to heating or ventilation) 1 original
<input type="checkbox"/>	9. Site Plan



Section 2 – General Information

Please provide a complete, detailed description of the proposed revisions to the approved plan:

Are two sets (at least one of which is no larger than 11” x 17”) of the revised plans or addendum indicating the changes included? Yes: No:

Has the permit been issued? Yes: No:

- ✓ If yes, the original Approved “DEV” set of plans must be provided with this revision request.

Are the revisions clearly and accurately identified on the plans or addendum? Yes: No:

Does the plan contain an engineer’s or architect’s lateral or vertical analysis Yes: No:

- ✓ If yes, provide plans and calculations approved by the architect and/or engineer. Please provide one set with an original wet stamp and signature of the architect, engineer, or both.

Does the proposed revision modify the footprint or location of the structure? Yes: No:

- ✓ If yes, a revised site plan, drawn to scale, must be included with this request which has been approved by the Health District.

Is the total square footage changing? Yes: No:

- ✓ If yes, provide:

Original square footage: _____ New square footage: _____

If yes, provide Kitsap Public Health approval for increased bedroom load on septic system. Yes: No:

- ✓ If yes, provide Kitsap Public Health approval for increased bedroom load on septic system.

Applicant’s Signature: _____ Date: _____

