Grant County Building Department P O Box 37, Ephrata, WA 98823 (509) 754-2011

Application #____

This is not a permit - No work to begin until permit is issued

Please fill out form completely and legibly.

Applicant / Agent	phone
(Owner's designated agent / contact for application submittal, project and process related questions and correspon	dence. If Owner is applicant, fill out this section also.
Mailing Addr/City/State/Zip	
e-mail	
Owner	phone
Mailing Addr/City/State/Zip	
Are you currently listed as the legal owner of the land? Yes No If no, list current legal	al owner(s):
Are you in the process of purchasing the land?	
Are you leasing the entire parcel of land?	
Are you leasing only a portion of the land or structure? Yes No	
MH / Building owner (if different than land owner)	phone
General Contractor	phone
WA State Labor & Industries General Contracting license #:	
Architect / Engineer / Designer	phone
Address of project site (if assigned by County)	
Parcel #:	Lot Dimensions x
Legal Description: (May not all apply) FU Block S	r
Lot Block Subdivision Name / Phase #	
Is this the only Building / Structure on this Parcel? Yes No Is this the only Residence (incldg MH's) on this parcel? Yes No	
Scope of Work: Residential Agriculture Commercial	
Structure/add/alter FAS / MH Plumbing Mechanical Grading	Demo Fire Marshal Other
Description:	
Specific Use of Structure:	
Footprint dimensions: Peak Height:	Year of MH / Modular
Basement sq.ft Main/1st sq.ft 2nd floor sq.ft 3rd floor	sq.ft Deck(s) sq.ft.
# New Bedrooms # New Bathrooms Existing Bedrooms	Existing Bathrooms

I hereby apply for a permit to do the work shown above and attest that the information provided is correct. If I am not the legal land owner, I certify that I am submitting the application with the permission and authority of the landowner and have included the required Agent Authorization(s).