



ADAMS COUNTY
BUILDING AND PLANNING
 449 E CEDAR BLVD, OTHELLO WA, 99344
 TELEPHONE: (509) 488-9441

RESIDENTIAL BUILDING
PERMIT APPLICATION
SINGLE FAMILY RESIDENCE, ACCESSORY DWELLING UNIT, ACCESSORY STRUCTURE

Permit No: _____

Parcel Number: ---- _____ **Lot Size:** _____ (Acres)
Parcel Address: _____ **City/Zip:** _____
Abbreviated Legal Description: _____
Property Owner(s): _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____ *Copy of Recorded Deed required if part of a recent sale*

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

Contractor's Name: _____
Contractor's License Number: _____
Mailing Address: _____
City/State/Zip: _____ **Phone:** _____
E-mail: _____

Application For: New Remodel Addition Fire Repair/Replacement Destruction Date: _____
 Single Family Residence Accessory Dwelling Unit Accessory Structure Other: _____
Proposed use of structure: _____
Construction Value \$ _____
Development/Structure Details: Dimensions of Building Footprint: _____ (ft.) Building Height: _____ (ft.)
 Label Existing/Finished Grade on all 4 elevation views of Building Plans
Impervious Surface (IS) Information in Square Feet:
Refer to Adams County Code Section 17.04.470 for the definition of "Impervious Surface."
 Existing IS (Include existing roof, driveway, etc.): _____ New IS (Include new roof, driveway, etc.): _____
 Total Impervious Surface (Existing Impervious Surface plus New Impervious Surface): _____ (sq. ft.)
Floor Area(s)—check all that apply and indicate the area in Square Feet:
 Basement: _____ Main/1st Floor: _____ 2nd Floor: _____ 3rd Floor: _____ Decks: _____
 Covered Porches/Decks: _____ Carport: _____ Garage: _____ Other: _____
 Existing Bedrooms: _____ Proposed New Bedrooms: _____ Total Bedrooms: _____
 Existing Bathrooms: _____ Proposed New Bathrooms: _____ Total Bathrooms: _____
 Retaining Wall(s): Length: _____ (ft.) Height: _____ (ft.) Propane Tank Size: _____ (gallons)

Ⓞ FOR OFFICIAL USE ONLY Ⓞ

Received By & Date:	Zoning Approval & Date:	Building/Fire Approval & Date:	Intake Fees Paid:	Final Fees Paid:
Plans: File / Large			FP / FW:	FP / FW:

Sanitation Disposal:

N/A Septic Permit #: _____ Sewer District: _____

Water Source:

N/A Single Private Well Shared Private Well Public Water Supplier: _____

NOTE: Prior to permit issuance a Letter of Availability is required from the Sewer District or Public Water Supplier. Prior to Certificate of Occupancy a letter verifying Sewer/Water connection is required and a final Septic as-built/inspection must be approved by the Adams County Environmental Health Department.

Please Complete the Following:

1.	What is the current use of the property? _____
2.	List all existing structures on the property, the year constructed, and the Building Permit Number (if applicable): _____ _____ _____ <input type="checkbox"/> Label and identify on site plan.
3.	Identify legal access to the subject property and list Adams County Public Works Access Permit # if applicable: _____ _____
4.	List and attach all Easements, Deed Restrictions, or other Encumbrances restricting the use of the property. (Refer to your subdivision, deed and/or Title Report) List by auditor's file number (AFN) and identify easement type: _____ _____ <input type="checkbox"/> Label and identify on site plan.
5.	Is your parcel protected by the voluntary stewardship program (VSP)? (If yes, your site plan shall be approved by the local conservation district.) <input type="checkbox"/> Yes <input type="checkbox"/> No
6.	*Is the property within 200 feet of a river, stream, wetland, drainage way, other water body? <input type="checkbox"/> Yes <input type="checkbox"/> No, if yes please identify: _____
7.	*Are there any geologically hazardous areas on property or within 250 feet? For example: landslide areas, areas of soil erosion, or areas of historic slope failure? <input type="checkbox"/> Yes <input type="checkbox"/> No, (Circle applicable)
8.	Please list any other applicable applications or approvals (file numbers) from Federal, State or Local Agencies for any structures, construction, or other activities necessary for approval of this building permit application: _____

***May involve height restrictions, a wetland delineation, a geologic site assessment, and additional setback requirements. Inquire with Adams County Building and Planning.**

If applicable: (Required by RCW 19.27.095)

Lending Agency Name: _____ Phone: _____
Address: _____
Contractor's Bonding Firm: _____ Phone: _____
Address: _____

I (We) certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true, correct and complete to the best of my (our) knowledge. I (We) further certify (or declare) that all Easements, Deed Restrictions, other encumbrances, and/or issues restricting or affecting the use or condition of the property have been accurately disclosed to the best of my (our) knowledge and are shown on the site plan submitted with this application. I (We) understand that encroachment and/or building into easements, deed restrictions or other encumbrances are my (our) responsibility and not Adams County's. I (We) further affirm that by my (our) signature below that I (we) have obtained legal permission to build within or encumber all easements on this property. Owner hereby releases, discharges, indemnifies and holds harmless the County from and against any and all claims, demands, causes of action, suits or judgments (including costs and expenses incurred in connection therewith) by both the easement holder or encumbered person(s) arising out of or in connection with the County's issuance of a building permit. I (We) certify (or declare) that I (We) am the owner of the property or have been given authorization from the property owner to obtain this permit. I (We) further agree to comply with the International Building, Residential, Fire, Mechanical, Plumbing, and all applicable Adams County/City Codes. Applicant/Owner(s) assumes all risk and liability for any claims and liabilities.

Owner/Applicant Signature: _____ **Date:** _____

SITE PLAN CHECKLIST

- Two copies of site plan are required. Must be drawn to standard engineering scale (1" =10', 1" =20', 1" =30', 1" =40', 1" =50', 1" =60', or 1" =100'), not to exceed 1" =100'. Indicate the scale used. Must include North arrow, and be drawn on grid paper or engineering plan format. For large parcels, applicant may submit a two-page site plan, the first page depicting the entire lot at a convenient scale and the second page depicting an enlargement of the developed area at a larger scale.
- Label all property lines/boundaries, dimensions, and area of lot/parcel (square feet or acreage).
- Label the location, size, and use of all existing building(s). Identify the distance between property lines and buildings. Label structures with previous building permit number(s) issued if applicable.
- Label the location, size, and use of all proposed structure(s) (temporary or permanent) to include dimensions of all decks, porches, cantilevers, bay windows, roof overhangs, retaining walls, patios, chimneys, landings and stairs.
- Identify the location, dimensions and volume of all existing and proposed propane tanks, fuel tanks, etc., both above ground and underground, as well as setback from property lines.
- Identify land features such as top and bottom of slopes, direction of slope and any areas of erosion.
- Identify and label all water features to include, ponds, springs, ravines, streams, creeks, lakes, rivers, irrigation laterals, canals, ditches, wetlands, bogs, areas of saturated ground, flood plain, floodway. Identify the closest distance between the ordinary high-water mark and proposed/existing structures.
- Label the name and width of roads bordering the property and indicate whether they are public or private.
- Locate the width of existing and proposed driveways/accesses serving each structure. Include stormwater control facilities such as drains, detention ponds, connection lines, catch basins, etc.
- Label all existing and proposed parking spaces/areas. Parking in residential districts is typically not allowed in the front yard setback area. All parking shall have durable and dustless surfaces suited to all weather use, unless required otherwise. If applicable, show handicapped parking and accessible routes to the structure and within the site to other structures and features.
- Identify and label all easements and widths, deed restrictions, other encumbrances, and/or issues restricting or affecting the use or condition of the property, including but not limited to access, utilities, railroads, irrigation and overhead power. Include the Auditor's file number(s).
- Show the location of all existing and proposed overhead and underground utilities including, but not limited to water, sewer, gas, and electrical.
- Identify location of water lines, well and sanitary control radius. Note: A sanitary control radius around an off-site well may impact your project if it overlaps onto your parcel.
- Identify location of all well(s), septic/pump tank, drain field, reserve area and tight line involving the proposed structure(s). Show the distance from proposed structure(s) to septic tank, drain field, drinking water well source(s), and any water body, wetland area and/or flood plain to ensure they meet the required horizontal setbacks from each other and property lines. Contact the Adams County Environmental Health Dept. for details. If applicable, the approved AC Environmental Health Dept. and County site plan must be identical.
- If drinking water wells, septic tank/drain field is off site, please show the location of these systems on the adjacent property or properties and provide a copy of the easement agreement(s).
- Identify existing and proposed landscaping, screening and/or fencing. Must be shown for properties located within 200 feet of a shoreline and/or floodplain. (Show type of landscaping, size, spacing, and provisions for irrigation).

I (We) certify under penalty of perjury and under the laws of the State of Washington the foregoing is true, correct and complete to the best of my (our) knowledge. I (We) further certify that all Easements, Deed Restrictions, other encumbrances, and/or issues restricting or affecting the use or condition of the property have been disclosed to the best of my (our) knowledge and are shown on the site plan submitted with this application. I (we) further affirm that by my (our) signature below that I (we) have obtained legal permission to build within or encumber all easements on this property. Applicant/Owner(s) assumes all risk and liability for any claims and liabilities.

Print Owner/Applicant Name: _____

Signature: _____ Date: _____

RESIDENTIAL BUILDING & ZONING SUBMITTAL CHECKLIST

SINGLE FAMILY RESIDENCE, ACCESSORY DWELLING UNIT, ACCESSORY STRUCTURE

THIS IS NOT A REVIEW. This list is used to assure that your submittal includes at least the minimum information needed to start the zoning/building review process. **Building permit applications will not be accepted until ALL requirements have been satisfied.**

APPLICANT SUBMITTAL ITEMS			STAFF VERIFICATION / INTAKE COMMENTS
	YES	N/A	
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes BP #'s: _____ <input type="checkbox"/> Yes
	<input type="checkbox"/>	<input type="checkbox"/>	Complete Application
	<input type="checkbox"/>	<input type="checkbox"/>	Previous Building Permits and Status?
	<input type="checkbox"/>	<input type="checkbox"/>	Have Easements Been Disclosed?
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes; Date Created: _____
	<input type="checkbox"/>	<input type="checkbox"/>	Deed / Legal Description (Attached)
	<input type="checkbox"/>	<input type="checkbox"/>	Legal Lot of Record
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes Road: _____ ROW: _____ Road: _____ ROW: _____ Road: _____ ROW: _____ <input type="checkbox"/> No <input type="checkbox"/> Yes; Notice to Title Submitted for Primitive Rd?
	<input type="checkbox"/>	<input type="checkbox"/>	Copy of Legal Access Attached? (Please Circle the Access Type, Below) County, State, Primitive County Road, Private, Access Easement, Forest Service Road
	<input type="checkbox"/>	<input type="checkbox"/>	Driveway Permit (Attached)
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> UGA Name: _____ <input type="checkbox"/> Additional Requirements for UGA <input type="checkbox"/> Land Use Permit Conditions of Approval attached Violations <input type="checkbox"/> No <input type="checkbox"/> Yes; File #: _____
	<input type="checkbox"/>	<input type="checkbox"/>	Zoning: County or Urban Growth Area (Check with Department Staff for Setbacks, Zoning, and Critical Area Restrictions)
	<input type="checkbox"/>	<input type="checkbox"/>	Have Subdivision Notes and Conditions of Approval Been Achieved? (Refer to Respective Files)
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Conical <input type="checkbox"/> Horizontal <input type="checkbox"/> Notice to Title <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Form Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Geologic Site Assessment Attached <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Wetland Delineation Attached <input type="checkbox"/> Yes <input type="checkbox"/> No Name: _____ <input type="checkbox"/> Height Restriction: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No Name: _____ <input type="checkbox"/> Setback: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Official FEMA Map Verification Required <input type="checkbox"/> Yes <input type="checkbox"/> No Type: _____ <input type="checkbox"/> DFW Referral Required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Setback Waiver Required
	<input type="checkbox"/>	<input type="checkbox"/>	CRITICAL AREAS AND REPORTS
	<input type="checkbox"/>	<input type="checkbox"/>	Airport Overlay District
	<input type="checkbox"/>	<input type="checkbox"/>	Aquifer Recharge Area
	<input type="checkbox"/>	<input type="checkbox"/>	Geologic Hazard(s) and Geologic Site Assessment
	<input type="checkbox"/>	<input type="checkbox"/>	Wetland(s) and Wetland Delineation
	<input type="checkbox"/>	<input type="checkbox"/>	Shoreline of the State (Call the Department if unsure)
	<input type="checkbox"/>	<input type="checkbox"/>	Stream(s) and/or Lake(s)
	<input type="checkbox"/>	<input type="checkbox"/>	Flood Plain and/or Floodway
	<input type="checkbox"/>	<input type="checkbox"/>	Habitat
	<input type="checkbox"/>	<input type="checkbox"/>	Resource Land (e.g. AC, FC or MC zoning)
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Yes <input type="checkbox"/> No Existing: _____ Proposed: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No Existing: _____ Proposed: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No Existing: _____ Proposed: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No Existing: _____ Proposed: _____
	<input type="checkbox"/>	<input type="checkbox"/>	ADDITIONAL COMMERCIAL ITEMS
	<input type="checkbox"/>	<input type="checkbox"/>	SEPA (Environmental Checklist)
	<input type="checkbox"/>	<input type="checkbox"/>	Landscape Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Traffic Impact Study
	<input type="checkbox"/>	<input type="checkbox"/>	Stormwater Drainage Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Parking; Existing: _____ Proposed: _____
	<input type="checkbox"/>	<input type="checkbox"/>	ADA Compliant Parking; # of spaces: _____
	<input type="checkbox"/>	<input type="checkbox"/>	Employees; Existing: _____ Proposed: _____
	<input type="checkbox"/>	<input type="checkbox"/>	Restaurant; Existing seats: _____ Proposed: _____
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No Scale Utilized: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No: Snow Load: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No: Designed for Wind, Snow, Seismic and Frost? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Building Height: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Zoning Height: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Shoreline Height: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Submittal at Framing Inspection <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Attached
	<input type="checkbox"/>	<input type="checkbox"/>	BUILDING PLANS IN ARCHITECTURAL SCALE
	<input type="checkbox"/>	<input type="checkbox"/>	Foundation Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Floor Plan (each floor level)
	<input type="checkbox"/>	<input type="checkbox"/>	Means of Egress Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Floor Framing (each floor & decks)
	<input type="checkbox"/>	<input type="checkbox"/>	Roof Framing Plan
	<input type="checkbox"/>	<input type="checkbox"/>	Engineering (Original wet-stamp required) (Verify design criteria w/the Building Division)
	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical and Plumbing systems
	<input type="checkbox"/>	<input type="checkbox"/>	Cross-section(s)
	<input type="checkbox"/>	<input type="checkbox"/>	Elevation Drawings (All four sides)
	<input type="checkbox"/>	<input type="checkbox"/>	Finished & Existing Grade shown and labeled
	<input type="checkbox"/>	<input type="checkbox"/>	Elevation of Building Site: _____(ft.)
	<input type="checkbox"/>	<input type="checkbox"/>	Northwest Energy Efficiency Council Compliance Form
	<input type="checkbox"/>	<input type="checkbox"/>	Heat Loss Calculations
	<input type="checkbox"/>	<input type="checkbox"/>	Stormwater Plan (If Applicable)
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Yes; Expiration date: _____
	<input type="checkbox"/>	<input type="checkbox"/>	Copy of Contractor's License (Unexpired)
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes
	<input type="checkbox"/>	<input type="checkbox"/>	Vicinity Map
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> Required Parking shown on site plan
	<input type="checkbox"/>	<input type="checkbox"/>	Site Plan (Please refer to site plan checklist)
11.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/>	<input type="checkbox"/>	Submittal Fees Paid
BUILDING PERMITS ARE NOT ISSUED UNTIL THE DEPARTMENT RECIEVES VERIFICATION FOR WATER & SEWER/SEPTIC			
12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> Pending
	<input type="checkbox"/>	<input type="checkbox"/>	Water Availability Letter—or—ACHD Well approval
13.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> Pending
	<input type="checkbox"/>	<input type="checkbox"/>	Sewer Availability Letter—or—ACHD Septic Permit

STRUCTURAL PLANS CHECKLIST

Applications for building permits will not be accepted unless the following items are supplied with your application for a permit. Complete and submit two sets of building plans drawn to 1/4" scale and printed on 24" x 36" paper. [Building Design Criteria](#). Buildings must comply with the Adams County design criteria.

APPLICANT SUBMITTAL ITEMS			
	YES	N/A	
1.	<input type="checkbox"/>	<input type="checkbox"/>	FOUNDATION PLAN: <input type="checkbox"/> 8' max height on foundation walls, otherwise engineering is required. <input type="checkbox"/> All pads and dimensions (<i>deck, porches, patios</i>) <input type="checkbox"/> Girders, posts, floor joists, slabs <input type="checkbox"/> Access and ventilation <input type="checkbox"/> Slab insulation location (<i>if applicable</i>)
2.	<input type="checkbox"/>	<input type="checkbox"/>	BUILDING PLANS MUST BE DRAWN AT 1/4 SCALE AND PRINTED ON 24" X 36" PAPER FLOOR PLANS: <input type="checkbox"/> All spaces labeled by use (<i>bedroom, bathroom, etc.</i>) <input type="checkbox"/> New vs. existing (<i>if addition or remodel</i>) <input type="checkbox"/> All door and window sizes including door swing <input type="checkbox"/> Bedroom & basement windows meet egress requirements <input type="checkbox"/> Stairs with direction (<i>up or down</i>) <input type="checkbox"/> Location and fuel source for appliances <input type="checkbox"/> Decks and patios <input type="checkbox"/> Unheated spaces clearly marked <input type="checkbox"/> Guardrail and handrail details <input type="checkbox"/> Attic access <input type="checkbox"/> Smoke detector locations FRAMING PLANS: <input type="checkbox"/> Floor framing plans (<i>each floor</i>) <input type="checkbox"/> Roof framing plans <input type="checkbox"/> Decks and patio framing
3.	<input type="checkbox"/>	<input type="checkbox"/>	ENGINEERING (<i>if applicable</i>): <input type="checkbox"/> Engineering shall be stamped and signed by an Engineer or Architect and be transferred to both sets of building plans and calculations. Submit two sets of engineering and calculations. <input type="checkbox"/> Retaining walls over four ft. in height require engineering (<i>measured from the bottom of the footing to the top of the wall</i>). <input type="checkbox"/> Lateral bracing (<i>if it doesn't comply with IRC prescriptive construction provisions</i>) <input type="checkbox"/> Overhangs or cantilevers beyond conventional construction provisions or beyond those recommended by product manufacturer. <input type="checkbox"/> Beams or columns having unusual loads require calculations. <input type="checkbox"/> Soils/geotechnical reports where applicable. Refer to the report for specific requirements.
4.	<input type="checkbox"/>	<input type="checkbox"/>	PLUMBING: <input type="checkbox"/> List the number of each type of plumbing fixture to be installed. Pressure reducer on water supply is required where pressure exceeds 80 lbs. <input type="checkbox"/> Kitchen Sink(s)/Laundry sink(s) <input type="checkbox"/> Lavatory Sink <input type="checkbox"/> Shower(s)/Bathtub(s) <input type="checkbox"/> Toilet(s) <input type="checkbox"/> Water Heater <input type="checkbox"/> Washing Machines

Continued on Next Page

STRUCTURAL PLANS CHECKLIST

(Continued)

5.	<input type="checkbox"/>	<input type="checkbox"/>	<p>MECHANICAL SYSTEM:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Check types of mechanical systems being installed. Forced Air Heating systems need to be provided with chases for supply and returns so structural walls are not cut. <input type="checkbox"/> Duct work in garage minimum 26 gauge with no openings in garage. <input type="checkbox"/> Supply and return are provided with adequate chase to upper floors, are shown on plans. <input type="checkbox"/> Heat Pump <input type="checkbox"/> Central Furnace <input type="checkbox"/> Wood stove / Fireplace (<i>cannot be the primary heat source</i>). <input type="checkbox"/> Other
6.	<input type="checkbox"/>	<input type="checkbox"/>	<p>CROSS SECTION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Foundation Dimensions <input type="checkbox"/> Reinforcement steel shown or noted as specification on plans. <input type="checkbox"/> Insulation (<i>walls, floors, ceiling, slab</i>) <input type="checkbox"/> Framing Details <input type="checkbox"/> Stair and Landings <input type="checkbox"/> Roof Details (<i>include roofing materials</i>) <input type="checkbox"/> Lateral Bracing
7.	<input type="checkbox"/>	<input type="checkbox"/>	<p>ELEVATIONS (<i>four views are required, and must be drawn to scale</i>):</p> <ul style="list-style-type: none"> <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West <input type="checkbox"/> Existing grades must be accurately shown and labeled on each view if located on a shoreline. <input type="checkbox"/> Final grades must be accurately shown and labeled on each view. <input type="checkbox"/> Clearly label the new proposed area vs. the existing portion of the structure.
8.	<input type="checkbox"/>	<input type="checkbox"/>	<p>WASHINGTON STATE ENERGY/VENTILATION CODE COMPLIANCE:</p> <p>Energy code forms must be submitted with building plans. Prescriptive forms are available at this office or on the internet at http://www.energy.wsu.edu/code.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Heat Loss Calculations <input type="checkbox"/> Glazing Schedule <input type="checkbox"/> Energy Credit(s) Form