

\$ 466.⁰⁰



COMMUNITY DEVELOPMENT
PERMIT DIVISION

806 West Main Street, Monroe, WA 98272
Phone (360) 863-4501 landuse@monroewa.gov
www.monroewa.gov

FOR OFFICE USE ONLY	
APPLICATION #(s)	_____
File#	_____
SEPA#	_____

COMBINED PERMIT APPLICATION

Permit Submittal Hours:
Monday-Friday 8:00-12:00 / 1:00-5:00

Building	Operations	Fire	Land Use
<input type="checkbox"/> Basic SFR	<input type="checkbox"/> Engineering Review	<input type="checkbox"/> Fire Alarm	<input checked="" type="checkbox"/> Type I Permit ?
<input type="checkbox"/> Commercial T/I	<input type="checkbox"/> Fencing	<input type="checkbox"/> Fire Sprinkler	<input checked="" type="checkbox"/> Type II Permit ?
<input type="checkbox"/> Demolition	<input type="checkbox"/> Grading	<input type="checkbox"/> High Piled Storage	<input type="checkbox"/> Type III Permit
<input checked="" type="checkbox"/> Garage/Carport	<input type="checkbox"/> Retaining wall	<input type="checkbox"/> Hood Suppression	<input type="checkbox"/> Type IV Permit
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Rockery	<input type="checkbox"/> Spray Booth	<input type="checkbox"/> See permit types listed in Monroe MMC
<input type="checkbox"/> New Construction (Commercial/Residential)	<input type="checkbox"/> Right-of-Way Disturbance	<input type="checkbox"/> Tents & Canopies	<input type="checkbox"/> Other _____
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Utility Service	<input type="checkbox"/> Other _____	
<input type="checkbox"/> Racking	<input type="checkbox"/> Other _____		
<input type="checkbox"/> Residential Remodel			
<input type="checkbox"/> Other <u>ADU</u>			

NOTE: All required Electrical Permits will be issued by the Dept. of Labor & Industries.

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS

Site Address or Property Location: 15606-171 st AVE SE

Size of site (acre/square feet): .28 acres 12,197 sqft (per county)

Assessor's Tax Parcel Number (14 digits): 008563 00000 100

Applicant: Ron & Joy Petrick Phone # (425 879 7861 R) 425 210 4767 J

*Signature: [Signature], Joy Petrick Printed Name: _____

Mailing Address: 15606-171 st AVE SE

City Monroe State WA Zip 98272 E-mail rpetrick6@comcast.net

Property Owner: Ron + Joy Petrick Phone # (425 879 7861 R) 425 210 4767 J

**Signature: [Signature], Joy Petrick Printed Name: _____

Mailing Address: 15606-171 st ave SE

City Monroe State WA Zip 98272 E-mail r petrick 6 @ comcast.net

Attach a separate sheet for additional property owners/additional addresses.

*Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf.

**Property Owners: by your signature above, you hereby certify that you have authorized the above applicant to make application on your behalf for this application.

Combined Permit Application Land Use - Page 2

Forest Tax Reporting Account Number (if harvesting timber call the Department of Revenue at (800) 548-8829 for tax reporting information or to receive a tax number): N/A

Give a detailed description below of the proposal/work. Provide details specific to your application e.g., description of proposed business including hours of operation, number of employees, existing and proposed parking spaces.

* narrative for Land Use Permit

Build a garage/adu in rear of driveway -
Adu is 1,000 sq ft above a garage - Detached
to be built on same lot as main home located
@ 15606-171st ave SE. Monroe WA. Home is
located in a residential area-

FOR OFFICE USE ONLY

Planning Application Fee: _____

Publication Fee: _____

Fire Plan Check Fee: _____

Mailing Fee: _____

SEPA Fee: _____

Technology Fee: _____

Hearing Examiner Deposit: \$1,000 \$2,500

Consultant Review Fee (if applicable) – Deposit for estimated cost + 10% Admin fee: _____