

	<p align="center"><b>Mechanical Permit Application</b>  City of South Bend  P.O. Drawer 9, South Bend, WA 98586  (360) 875-5571 FAX (360) 875-4009  <a href="http://www.southbend-wa.gov">www.southbend-wa.gov</a></p>	PERMIT FEE: \$115.00
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PROPERTY OWNER INFORMATION	<input type="checkbox"/> Contact Person	OFFICE USE ONLY
Name:		Issued Date:
Address:		
City/State/Zip:		
Phone:	Phone:	
Email:		
Issued By:		
APPLICANT INFORMATION	<input type="checkbox"/> Contact Person	
Name:		
Address:		
City/State/Zip:		
Phone:	Phone:	
Email:		
		<b>TYPE OF PROJECT</b>
		<input type="checkbox"/> Commercial <input type="checkbox"/> Residential
		<b>**Important Notice**</b>
		Call L & I at 360-575-6900 for a mechanical permit for a manufactured home. The city does not issue mechanical permits for manufactured homes.
CONTRACTOR INFORMATION	<input type="checkbox"/> Contact Person	
Name:		<b>DESCRIPTION OF WORK</b>
Address:		
City/State/Zip:		
Phone:	Phone:	
Email:		
WA State License Number:		

JOB SITE INFORMATION AND LOCATION	
Job Site Address:	Unit/Bldg/Apt No:
Legal Description:	Tax Parcel ID No:
Directions to Site:	

Legal Description and Tax Parcel Number can be found on your tax statement, the Pacific County Website address – [www.co.pacific.wa.us](http://www.co.pacific.wa.us) – or by calling the Assessor’s office at 360-875-9301. **Applications cannot be processed without this information.**

- I hereby certify under penalty of perjury under the laws of the State of Washington that the following is true and correct:*
1. *I have read and examined this Mechanical Permit Application*
  2. *The information provided in this application contains no misstatement of fact.*
  3. *I am the owner(s), or the authorized agent(s) of the owner(s) of the property which is the subject of this development application.*
  4. *I am currently a licensed general contractor or specialty contractor under Chapter 18.27 RCW.*

Authorized Signature:

Print Name:	Date:
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