

BUILDING & FIRE REVISION/ADDITIONAL INFORMATION FORM



3715 Bridgeport Way W
University Place, WA 98466
PH: (253) 566-5656 FAX: (253) 460-2541

REVISIONS TO EXISTING APPLICATION/PERMIT # _____

PROJECT NAME:	REVISED PROJECT VALUATION: \$
PROJECT ADDRESS (Street, City, State, Zip):	PARCEL #:
CONTACT PERSON:	CONTACT PHONE #:
CONTACT EMAIL:	MOBILE PHONE #:
CONTRACTOR (If different from original app.):	PHONE:
ADDRESS (Street, City, State, Zip):	LICENSE #/EXPIRE DATE:

DESCRIPTION OF REVISIONS OR ADDITIONAL INFORMATION INCLUDED:
(BE SPECIFIC. PLAN REVISIONS MUST BE CLOUDED.)

ARE YOU INCREASING OR DECREASING BUILDING SQUARE FT: Example: +250 sq ft or -250 sq ft

1st Floor _____ 2nd Floor _____ 3rd Floor _____
 Garage _____ Basement _____ Patio/Deck _____
 Other _____ Are you increasing or decreasing height of the structure? _____

PLUMBING CHANGES

Example: +1 sink or -2 lavatories

<input type="checkbox"/> sink (kitchen/utility)	<input type="checkbox"/> clothes washer
<input type="checkbox"/> water closet (toilet)	<input type="checkbox"/> hose bib
<input type="checkbox"/> tub/shower	<input type="checkbox"/> backflow assembly:
<input type="checkbox"/> lavatories (bth sink)	Size: _____
<input type="checkbox"/> dishwasher	Make: _____
<input type="checkbox"/> electric water heater	Model: _____

MECHANICAL CHANGES

Example: +1 exhaust fan or -1 heat pump

<input type="checkbox"/> furnace < 100K	<input type="checkbox"/> gas piping
<input type="checkbox"/> furnace > 100K	<input type="checkbox"/> air-conditioner
<input type="checkbox"/> gas water heater	<input type="checkbox"/> exhaust fans
<input type="checkbox"/> fireplace	<input type="checkbox"/> gas dryer
<input type="checkbox"/> heat pump	<input type="checkbox"/> vents (not included with appliances)
<input type="checkbox"/> misc. _____	

I hereby certify that the information provided is correct and that the construction on the above-described property, the occupancy, and use will be in accordance with the laws, rules, and regulations of the State of Washington and the University Place Municipal Code.

Signature of Applicant: _____ Date: _____