



BUILDING PERMIT APPLICATION -- SIDING / STUCCO

Permit #: _____

**** All applicaton items in BOLD must be completed ****

Incomplete applications will be denied.

S T A M P

Submit completed application to: PermitSubmittal@FranklinCountyWA.gov

Site Address	City	State	Zip Code
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Parcel Number	Legal Description
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Building Owner	Current Address	City, State	Zip Code	Phone #
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Property Owner	Mailing Address	City, State	Zip Code	Phone #
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Contractor	Business Address	City, State	Zip Code	Phone #
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Email Address	UBI Number	WA Contractor License #	Expiration Date
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Franklin County Business License Number: _____ (Please visit <https://dor.wa.gov/> or contact staff for more information)

Please select either Siding or Stucco and the type being installed:		Year of Structure: _____	
<input type="checkbox"/> Siding	Please list the type of siding being installed:	<input type="checkbox"/> Board & Batton	<input type="checkbox"/> T-111
		<input type="checkbox"/> Wood Composite Lap Siding	<input type="checkbox"/> Hardie Plank Lap Siding
<input type="checkbox"/> Stucco	Please select the type of stucco system being installed:	<input type="checkbox"/> Lath & Plaster	<input type="checkbox"/> EIFS
		<input type="checkbox"/> Other (please specify): _____	<input type="checkbox"/> Hardie Board
			<input type="checkbox"/> Foam, Lath & Plaster

After review of your plans, the Building Department may have comments or requests for additional information that are required prior to issuance of your building permit. Please provide the preferred method of contact below.

Please mark the preferred method of contact, provide the necessary information, and print clearly.

- E-Mail Address (Contractor): _____
- E-Mail Address (Owner): _____
- E-Mail Address (Other): _____

<u>Valuation of Project</u>

Please provide a detailed scope of work: _____

OFFICE NOTES: