

City of Roy BUILDING INSPECTION CARD

THIS PERMIT MUST BE ON-SITE FOR ALL INSPECTIONS

Owner Erika Perez Type of Work Siding Windows Deck Porch
Flooring, Dormer Soffit
Contractor Self Contractor License# NA Roof

PERMIT# 2024-A1 SITE ADDRESS 28805 SR 507 DATE 2-14-2024

		APPROVED	DATE
FOUNDATION	Ftg. & Setbacks		
	Walls		
	1st Floor Joists & Mud Sill DO NOT COVER BEFORE INSPECTION		
PLUMBING Contractor's License # _____	Ground Work		
	Rough In		
	Final		
MECHANICAL Contractor's License # _____	Duct-Garage Slab		
	Wood Stove		
	Gas Piping		
	Furnace		
	Final		
SHEAR WALLS	Exterior Nailing DO NOT COVER BEFORE INSPECTION		
ELECTRICAL must be signed by Labor & Industries			
FRAMING approved only if above are approved			
WINDOW	U-Value _____		
INSULATION Gas _____ or Electric _____ Fresh Air Intake: Window Ports _____ or Furnace Intake _____ Vapor barrier Paint _____ or Other _____	Walls R-		
	Slope Ceilings R-		
	Flat Ceilings R-		
	Floors R-		
SHEETROCK INTERIOR	Shear/Firewall DO NOT TAPE BEFORE INSPECTION		
SEPTIC TANK must be signed by Pierce County Health Dept.			
FINAL ALL ABOVE MUST BE APPROVED PRIOR TO FINAL			

APPROVED PLANS MUST BE ON SITE FOR INSPECTION.

NO CONCRETE SHALL BE POURED OR STEEL COVERED WITHOUT INSPECTION & APPROVAL.

APPROVAL OF ANY BUILDING INSPECTION REFERENCED HEREIN IS NOT A GUARANTEE BY THE CITY OR ANY CITY OFFICIAL THAT THE CONSTRUCTION AND IMPROVEMENTS ARE, IN FACT, TO CODE, NOR IS IT AN ASSUMPTION OF LIABILITY BY THE CITY IN THE EVENT OF INJURY OR DAMAGE TO PERSONS OR PROPERTY ARISING FROM IMPROPER DESIGN OR CONSTRUCTION.

NOTES:

DO NOT OCCUPY UNTIL FINAL IS APPROVED. VIOLATION IS MISDEMEANOR.

FOR INSPECTION REQUESTS CALL 253-843-1113. PRIOR NOTICE IS REQUIRED.

City of Roy



APPLICATION FOR BUILDING PERMIT

☒ Residential ☐ Commercial
(see supplement)
Site Address 28805 State Route 507 S. Parcel No. _____Owner Erika Perez Mailing Address _____ Phone 253-355-2908

Contractor <u>Self</u>	Phone _____	State Contractor License No. _____
Roy Business License No. _____	Mailing Address _____	Contact Name _____
Architect _____	Phone _____	

Check as applicable:

- ☒ New ☐ Addition ☐ Alteration ☐ Repair ☐ Move ☐ Demolition (see Requirements)
☐ Single-family ☐ Multi-family ☐ Manufactured/Mobile ☐ Grading ☐ Clearing ☐ Sign
☐ Plumbing ☐ Mechanical ☐ Additional Contractors (submit information on separate sheet)

Project Description/Scope of Work <u>Siding, Windows, Deck, Porch</u> <u>flooring, Dormer, Slat, Roof</u> <u>Open Sided</u>	Valuation \$ _____ Sq. Ft. _____
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Describe any new or different type of water usage that will result:

NOTICE TO APPLICANT Permit expires if work is not commenced within 180 days, or if suspended for 180 days after commencing, or if not completed within one year. All work shall be done in accord with plans approved by the Building Official. *It is the responsibility of the permittee to obtain all required inspections.* Failure to notify the City of work that is ready for inspection may necessitate removal of some construction materials at the owner's expense. **For inspection, call (253) 843-1113.**

I certify the information furnished by me is true and correct, and that I am the owner of the subject property or I have been given express permission by the owner of the subject property to submit this application for permit. I will ensure compliance with all provisions of law, code and ordinances governing this type of construction work and occupancy, including state contractor registration laws.

Signature of Owner/Agent _____ Date _____

FEES	STAFF USE	PERMIT No. _____
\$ <u>300.00</u> Building -	Y N in regulatory floodplain?	Y N subject to SMP?
_____ Plumbing	Y N need water service permit?	Y N need water use questionnaire?
_____ Mechanical -	Y N in WDO district?	Y N zoning compliant?
_____ Plan Review	Y N critical area?	
<u>7.50</u> State BCC	Contractor's license expires ____/____/____	<u>NA</u>
_____ Park Impact	Documents submitted:	
_____ Other:	Special conditions:	
\$ <u>307.50</u> Total	Permit issued by _____	Date _____