



**NEW SINGLE-FAMILY RESIDENCE  
PERMIT APPLICATION**

510-B Pioneer Street/PO Box 608  
Ridgefield, WA 98642

Tel: (360)887-3908

Fax: (360)887-2507

[www.ridgefieldwa.us](http://www.ridgefieldwa.us)

OFFICE USE ONLY

PERMIT NUMBER

PROJECT NUMBER

**CONTACT INFORMATION**

**PROPERTY OWNER:**

Check box if primary contact

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

(Original signature or a letter of authorization from the owner required)

**APPLICANT:**

Check box if primary contact

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

(Original signature required)

**CONTRACTOR:**

Check box if primary contact

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor's License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

City of Ridgefield Business License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

(Original signature required)

**CERTIFIED EROSION CONTROL PERSON:** \_\_\_\_\_

**PROPERTY INFORMATION (REQUIRED)**

Site Address: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Phase: \_\_\_\_\_ Lot: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Type of construction: \_\_\_\_\_ Occupancy use: \_\_\_\_\_

If attached dwelling, please list the lot numbers or indicate N/A: \_\_\_\_\_

**Housing:** \_\_\_\_\_ Sq. Ft. **Covered Patio/Deck (Side/Rear):** \_\_\_\_\_ Sq. Ft. **Covered Front Porch:** \_\_\_\_\_ Sq. Ft.  
**Garage:** \_\_\_\_\_ Sq. Ft. **Attached Decks:** \_\_\_\_\_ Sq. Ft.

**1<sup>st</sup> Floor:** \_\_\_\_\_ Sq. Ft. **2<sup>nd</sup> Floor:** \_\_\_\_\_ Sq. Ft. **Other Finished Area:** \_\_\_\_\_ Sq. Ft.  
**Unfinished Basement:** \_\_\_\_\_ Sq. Ft.

**TOTAL PROPOSED FINISHED AREA** \_\_\_\_\_ Sq. Ft.

**Number of bathrooms:** \_\_\_\_\_ **Number of bedrooms:** \_\_\_\_\_

Utilities:  Public Water/meter size \_\_\_\_\_  Private Well  Public Sewer  Septic System PUD Water

Type of Heat  Electric  Gas  Other: \_\_\_\_\_

Value of Proposed Work \$ \_\_\_\_\_

**SUBMITTAL CHECKLIST**

**APPLICATION REQUIREMENTS: Provide two (2) paper copies.**

**ENGINEER'S CALCULATIONS:** Engineering calculations shall be stamped by an engineer or architect licensed in the State of Washington. Engineering shall be site specific.

**1. WA STATE ENERGY CODE COMPLIANCE FORM**

**2. ARCHITECTURAL ELEVATIONS:** Provide documentation showing the proposed building complies with the neighborhood design requirements for the subdivision. Please see enclosed link:  
<https://ridgefieldwa.us/government/city-departments/community-development/residential-building-applications/residential-architectural-design-checklists/>

**3. COMPLETE SET OF LEGIBLE PLANS – Architectural (and Structural, if applicable):** For plans to be accepted they must be drawn to 1/4" = 1', showing conformance to local and state building laws. Structural details and connections must be submitted with plans, or a separate full-size sheet attached to the plans with cross references between plan location and details if home was constructed by an engineer. The detail sheets from the Engineer of Record shall be attached as required.

**FOUNDATION PLANS:** Show all dimensions, anchor bolts and location, hold-downs, concrete pads, connection details, vent size, and location.

**FLOOR PLANS:** Show dimensions, identify all rooms, identify all permanent elements and systems, and include window sizes, location of smoke detectors, water heater, furnace, ventilation fans, plumbing and mechanical fixtures, balconies, and decks.

**FLOOR/ROOF FRAMING:** Provide plans for all floors/roof assemblies, indicating type and lumber sizing, spacing, and bearing locations. Show attic ventilation.

**BASEMENT AND RETAINING WALLS:** Provide cross-sectional dimensions and details showing placement of rebar. Provide engineer's calculations.

**MANUFACTURED FLOOR/ROOF TRUSS DESIGN DETAILS:** Show location and type of connections, per IRC Standards.

**BEAM AND JOIST SIZES:** Provide prescriptive beam and joist sizes by code reference or submit engineering calculations and detail.

**CROSS SECTION(S) DETAILS:** Show all framing-member sizes and spacing such as floor beams, headers, joists, sub-floor, wall construction and roof connection. Show details of all wall and roof sheathing, roofing, roof slope, ceiling height, siding material, footings and foundation, retaining walls, stairs, fireplace constructions, thermal insulation, etc.

**ELEVATION VIEWS:** Provide all elevations for new construction. Exterior elevations must reflect actual grade if the change in grade is greater than four feet at ceiling envelope.

**WALL BRACING:** prescriptive path or engineered lateral analysis (**circle one**). Plans must include details, exterior and interior locations; for non-prescriptive path analysis provide specifications and calculations to engineering standards.

**4. PLOT PLAN:** Provide a plot plan that addresses the requirements below:

Use only standard scales found on an Engineer's scale (1"=10', 1"=20' etc.)

No plot plans smaller than 8.5" x 11" or larger than 11" x 17"

**Identify Property Features:**

North arrow

Lot and subdivision name and/or tax lot and parcel number

Property lines and dimensions

Easement (size, type, dimensions)

Driveway and access point (shown with width, length and distance from the property line)

Right of ways (street names, width, and centerline dimensions.)

Bridges (if applicable)

Physical attributes and buffers (wetlands, water, slopes, etc.)

**Identify Proposed Structures and features:**

Dimension, footprint, and roofline of proposed structure

Elevations at four corners of structure in addition to property corners

Setback from closest point of structure to property lines, edge of easement, right of ways, water marks/ways, features, and buffers

Building envelopes, if shown on recorded plat (for geohazard setbacks, habitat buffers etc.)

**Identify Existing Structures and Features:**

Show and label all existing structures including dimensions

Are trees being removed? Y/N \_\_\_\_ How many? \_\_\_\_

**Zoning & Setback Table**

**Erosion Control Plan**

**Plumbing fixture count (indicate number of each)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Alternative Waste       | <input type="checkbox"/> Floor Sink                 | <input type="checkbox"/> Service Sink            |
| <input type="checkbox"/> Alternative Water       | <input type="checkbox"/> Fountain Drain             | <input type="checkbox"/> Shower                  |
| <input type="checkbox"/> Area Drain              | <input type="checkbox"/> Garbage Disposal           | <input type="checkbox"/> Sump Pump               |
| <input type="checkbox"/> Aspirator               | <input type="checkbox"/> Gas Pipe System            | <input type="checkbox"/> Swimming Pool           |
| <input type="checkbox"/> Bar Sink                | <input type="checkbox"/> Glass Fill Station         | <input type="checkbox"/> Toilet                  |
| <input type="checkbox"/> Bathroom Sink           | <input type="checkbox"/> Glass Washer               | <input type="checkbox"/> Trailer Trap            |
| <input type="checkbox"/> Bath Tub                | <input type="checkbox"/> Grease Trap                | <input type="checkbox"/> Urinal                  |
| <input type="checkbox"/> Commercial Coffee Maker | <input type="checkbox"/> Hose Bibs                  | <input type="checkbox"/> Wash Tray               |
| <input type="checkbox"/> Car Wash Sump           | <input type="checkbox"/> Ice Machine                | <input type="checkbox"/> Washing Machine         |
| <input type="checkbox"/> Dental Chair            | <input type="checkbox"/> Kitchen Sink               | <input type="checkbox"/> Water Connection        |
| <input type="checkbox"/> Dental Sink             | <input type="checkbox"/> Pressure Reducing Valve    | <input type="checkbox"/> Water Heater (Electric) |
| <input type="checkbox"/> Dishwasher              | <input type="checkbox"/> Processing Equipment Drain | <input type="checkbox"/> Water Heater (Gas)      |
| <input type="checkbox"/> Drain Field             | <input type="checkbox"/> Refrigerator Drain         | <input type="checkbox"/> Water Softener          |
| <input type="checkbox"/> Drinking Fountain       | <input type="checkbox"/> Relay Sewer                | <input type="checkbox"/> X-Ray Tank              |
| <input type="checkbox"/> Dry Well                | <input type="checkbox"/> Roof Drain                 | <input type="checkbox"/> Other                   |
| <input type="checkbox"/> Floor Drain             | <input type="checkbox"/> Septic Tank                | <input type="checkbox"/> <b>TOTAL</b>            |

**Mechanical fixture count (indicate number of each)**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Air Handler <10,000 CFM    | <input type="checkbox"/> Duct System             | <input type="checkbox"/> Heat Pump/AC 31-50 Tons      |
| <input type="checkbox"/> Air Handler >10,000 CFM    | <input type="checkbox"/> Ductless                | <input type="checkbox"/> Heat Pump/AC >50 Tons        |
| <input type="checkbox"/> Appliances                 | <input type="checkbox"/> Evaporative Cooler      | <input type="checkbox"/> Heater                       |
| <input type="checkbox"/> Appliance Ventilation      | <input type="checkbox"/> Furnace Floor           | <input type="checkbox"/> Incinerator                  |
| <input type="checkbox"/> Boiler or Compressor ≤3 HP | <input type="checkbox"/> Furnace ≤100,000 BTU    | <input type="checkbox"/> Stove (Insert)               |
| <input type="checkbox"/> Boiler or Comp. 4-15 HP    | <input type="checkbox"/> Furnace >100,000 BTU    | <input type="checkbox"/> Stove (Free Standing)        |
| <input type="checkbox"/> Boiler or Comp. 16-30 HP   | <input type="checkbox"/> Gas Piping              | <input type="checkbox"/> Vent Fan with Duct           |
| <input type="checkbox"/> Boiler or Comp. 31-50 HP   | <input type="checkbox"/> Heat Pump/AC 0-3 Tons   | <input type="checkbox"/> Vent Hood with Mech. Exhaust |
| <input type="checkbox"/> Boiler or Comp. >50 HP     | <input type="checkbox"/> Heat Pump/AC 4-15 Tons  | <input type="checkbox"/> Ventilation System           |
| <input type="checkbox"/> Cooling Unit               | <input type="checkbox"/> Heat Pump/AC 16-30 Tons | <input type="checkbox"/> Other _____                  |
|   |  | <input type="checkbox"/> <b>TOTAL</b>                 |

**☐ FEES:** Plan check fees must be paid prior to review. Please make checks payable to City of Ridgefield.

*By affixing my signature hereto, I certify under penalty of perjury that the information furnished herein is true and correct to the best of my knowledge and that I am the owner of the premises where the work is to be performed or am acting as the owner's authorized agent. I further agree to hold harmless the City as to any claim (including costs, expenses and attorney's fees incurred in investigation of such claim) which may be made by any person, including the undersigned, an filed against the City, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information provided to the City as a part of this application. The building official may, in writing, suspend or revoke a permit issued under the provisions of this code whenever a permit is issued in error or on the basis of incorrect information supplied, or in violation of any ordinance or regulation or any of the provisions of this code.*

Signature of Owner/Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

(Original signature required)