



Application for **COMMERCIAL BUILDING PERMIT**

BUILDING SERVICES DIVISION

1700 Civic Drive · DuPont, WA 98327

P: (253) 912-5217 · F: (253) 964-3554

www.dupontwa.gov

Application for:

New Construction Tenant Improvement Demolition Foundation Only

Shell Only Re-Roof Solar Other _____

Approximate Project State Date: _____

Description of Work: _____

Project Address:	Parcel Number:				
Owner of Building:	Phone Number:				
Mailing Address <i>(if different from Project Address):</i>					
Applicant <i>(if contractor, fill out next section):</i>	Phone Number:				
Address:	Email Address:				
Contact Person:	Phone Number:				
Contractor:	Phone Number:				
Address:	Email Address:				
State Contractor Number:	City Business License:				
Project Contact Person:	Phone Number:				
Valuation of Work:	Project Sq. Footage <i>(required):</i>				
Square Footage:	1st Floor:	2nd Floor:	3rd Floor:	Garage:	(Other):
I certify that I am the: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Agent					
I hereby certify that I have read and examined this application and state that the above information is correct. I agree to comply with all City Ordinances and State Laws, whether specified herein or not.					
***By leaving the contractor information section blank, I hereby certify further that contractors (General or Subcontractors) will not be hired to perform any work in association with this permit.					
_____ Applicant/Authorized Agent Signature			_____ Date		
_____ Printed Name					