



CHENEY BUILDING DEPARTMENT
 112 Anderson Rd. Cheney, WA 99004
 (509) 498-9237 FAX: (509) 498-9249

Building Permit Application

2015 IRC 2015 IBC 2015 IEBC

BUILDING ONLY COMBO W/PLUMB AND/OR MECHANICAL **PERMIT NO : BLD2019-_____**

JOBSITE ADDRESS (REQUIRED)				EWU AIM ID:	
APPLICANT NAME		MAILING ADDRESS	CITY	ST	ZIP
PHONE #		EMAIL ADDRESS			
OWNER OF BUILDING		MAILING ADDRESS	CITY	ST	ZIP
PHONE #		EMAIL ADDRESS			
GENERAL CONTRACTOR		MAILING ADDRESS	CITY	ST	ZIP
PHONE #		EMAIL ADDRESS	WA STATE LICENSE NUMBER		
ARCHITECT/DESIGNER		MAILING ADDRESS	CITY	ST	ZIP
PHONE #		EMAIL ADDRESS			
CLASS OF WORK (CHECK ALL THAT APPLY): <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input type="checkbox"/> REMOVE					
BUILDING USE : <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> DUPLEX / MULTI-FAMILY <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> CHURCH <input type="checkbox"/> CSD <input type="checkbox"/> EWU <input type="checkbox"/> CITY					
DESCRIPTION OF WORK (REQUIRED):					
CHANGE OF USE FROM:				TO:	
CUBIC YARDS OF EXCAVATION:			VALUATION OF WORK: \$		

Contact the Cheney Building Department (509) 498-9237 for all required inspections or re-inspections. The owner or owner's authorized agent is responsible for all inspection requests and to cause the work to remain accessible and exposed for inspection purposes. This permit becomes null and void if work authorized is not commenced within 180 days, or if the work is suspended or abandoned for a period of 180 days at any time after it is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I understand that the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Department Use Only	
INSPECTION FEE	\$
BUILDING REVIEW FEE	\$
ZONING REVIEW FEE	\$
TECHNOLOGY FEE	\$ 10.00
STATE SURCHARGE <small>+\$2.00 EACH ADD. DWELLING UNIT AFTER THE FIRST UNIT</small>	6.50
TOTAL PERMIT FEES	\$

 SIGNATURE OF APPLICANT (OWNER OR AUTHORIZED AGENT) DATE

SEPARATE PLUMBING AND/OR MECHANICAL PERMIT APPLICATION FORMS MUST BE COMPLETED AND ATTACHED FOR COMBO PERMITS