



Permit # _____

Application Date: _____

Permit Fee: _____

Receipt No. _____

STREET AND UTILITY CONSTRUCTION PERMIT APPLICATION

Street Address: _____

Tax Parcel Number(s): _____

Legal Description/Subdivision Name: _____

Project Cost (RIGHT OF WAY ONLY) \$ _____

Brief description of the work to be done: include the plan to repair Right-Of-Way to City standards, who will be doing the work and the timeline. Submit a drawing of the work to be done and traffic control plan with the application: _____

Owner/Applicant/Contractor Information

Owner: _____

Phone: _____ Email: _____

Mailing Address: _____

City/State/Zip: _____

Applicant: _____

Phone: _____ Email: _____

Mailing Address: _____

City/State/Zip: _____

Contractor: _____

Phone: _____ Email: _____

City/State/Zip: _____

Architect/Engineer: _____

Phone: _____ Email: _____

City/State/Zip: _____

WA State Contractor License: _____

City Business License: _____

Bonding Company: _____

Bond Number: _____

Expiration Date: _____

Expiration Date: _____

Phone: _____

Expiration Date: _____

Notice: Separate permits and approvals may be required for this project. Every permit issued by the Administrative Authority under the provisions of the Ephrata Municipal Code shall expire by limitation and become null and void if the work authorized by such permit is not commenced within 180 days from the date of issuance of such permit, or if the work authorized by such permit is suspended or abandoned at anytime after the work is commenced for a period of 180 days. Issuance of a permit does not authorize any work in public right-of-way or on utility easements. I hereby certify that as a contractor I am currently registered and properly licensed as defined in RCW 18.27 or as a property owner I am exempt from the requirements of the contractor registrations and will do all my own work or use properly licensed subcontractors in connection with the work to be performed under this permit. I hereby certify that I have read and examined this application and know the same to be true and correct, and if any of the information provided is incorrect, the permit or approval may be revoked.

Signature of Owner/Authorized Agent

Date

STREET AND UTILITY CONSTRUCTION DRAWING

Project Address: _____

Contractor Name: _____ Phone: _____

Please include drawing of work to be done and traffic control plan below: