



Residential Plumbing and Mechanical Replacement Permit Application

Planning & Development Services · 1800 Continental Place · Mount Vernon WA 98273
 Main: 360-416-1320 · Inspections: 360-416-1330 · www.skagitcounty.net/planning

For Mobile or Manufactured Homes contact Labor and Industries at 360-416-3000 for permitting requirements.

PROJECT INFORMATION

Site Address: _____ City: _____ Zip: _____

Parcel No(s): _____

Scope of Work: _____

Work Performed: Kitchen Garage Laundry Room Bathroom Other: _____

Plumbing System Information

Water Heater (electric)

This portion only addresses water heater replacements, any other plumbing requires a Residential Building Permit Application.

Mechanical System Information

Indicate the number of each new, and/or relocated fixture type in the space below

	Air Conditioner		Gas Furnace 95% AFUE		Water Heater Heat Pump
	Air Handling Duct System		Gas Piping (# of outlets)		<input type="checkbox"/> Tier I <input type="checkbox"/> Tier II <input type="checkbox"/> Tier III
	Boiler 90%		Generator		Whole House Ventilation
	Dryer Duct		Heat Pump (electric)		Wood Fireplace (WA Approved)
	Ductless Mini Split		Heat Pump (gas)		Wood Stove (WA Approved)
	Exhaust Fan - Bathroom		Heat Pump (ground)		Other:
	Exhaust Fan - Kitchen		HRV/ERV		Other:
	Gas Fireplace (free standing)		Water Heater (gas) 91%		Other:
	Gas Fireplace (insert)		Water Heater Heat Pump - Split		Total # of Fixtures:

GAS PIPING INFORMATION

Proposed Piping Material: CSST Brass Black Steel Galvanized Steel PE-PVC Other:

Proposed Pipe Size: 1/2" 3/4" 1" 1 1/2" 2" 2 1/2" 3" 4" Other:

CONTACT INFORMATION		Primary Contact: <input type="checkbox"/> Applicant <input type="checkbox"/> Owner <input type="checkbox"/> Primary Contractor	
Applicant/Contact		<input type="checkbox"/> Payment Provider	
Name:			Phone No.:
Mailing Address:	City:	State:	Zip:
Email Address:			
Property Owner		<input type="checkbox"/> Payment Provider	
<input type="checkbox"/> Same as applicant			
Name:			Phone No.:
Mailing Address:	City:	State:	Zip:
Email Address:			
Primary Contractor		<input type="checkbox"/> Payment Provider	
<input type="checkbox"/> Same as applicant		<input type="checkbox"/> Same as property owner(s)	
Name:			Phone No.:
Mailing Address:	City:	State:	Zip:
Email Address:	Contractor License No:	Exp.:	
Plumbing Contractor			
Name:			Phone No.:
Mailing Address:	City:	State:	Zip:
Email Address:	Plumbing License No:	Exp.:	
Mechanical Contractor			
Name:			Phone No.:
Mailing Address:	City:	State:	Zip:
Email Address:	Mechanical License No:	Exp.:	

By signing this application permission is granted to field staff to enter the site to verify the presence or absence of critical areas, or slopes and perform inspections of work proposed by this application.

The Residential Plumbing and Mechanical Application does not require the owners' agent authorization.

I hereby certify that I am the Applicant, Owner, Primary Contractor and am authorized to sign this application. The above information is true and correct to the best of my knowledge. Construction on, occupancy of and the use of property will be in accordance with the laws, rules and regulations of the State of Washington and Skagit County. A final inspection and approval shall be obtained when complete.

Signature Date:

Print Name:



Residential Plumbing and Mechanical Replacement Submittal Requirement Checklist

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Residential Plumbing and Mechanical Replacement Submittal Requirement Checklist											
✓ = Required Submittal (includes the following) NR = new or relocated fixture NRG = new or relocated gas fixture G = Gas only ✕ = Submittal may be required			PERMIT TYPES								
Submittal Requirements	Complete Submittal?	Initial	Wood Fireplace & Insert	Gas Fireplace & Insert	Gas Piping	Generator	Heat/AC	Hydronic System	Water Heater Heat Pump	Water Heater Replacement	Plumbing Fixtures & Other Not Specified
General Application Requirements											
Application	Choose an item.		✓	✓	✓	✓	✓	✓	✓	✓	✓
Submittal Requirement Checklist	Choose an item.		✓	✓	✓	✓	✓	✓	✓	✓	✓
Floor plan showing the location of piping and distance to gas fixtures – new and relocation	Choose an item.			NRG	✓					NRG	G
Floor plan showing the location of equipment	Choose an item.		✓	✓				✓	✓	✓	✓
Installation manual for equipment	Choose an item.		✓	✓			✓	✓	✓	NRG	✓
Site plan showing location of the equipment	Choose an item.					✓			✓		✕
Equipment specific cut sheet or Energy Code Worksheet ¹	Choose an item.		✓	✓			✓	✓	✓		✓
Equipment installation in unheated space: provide WA Energy Code requirement for insulation	Choose an item.		✕	✕	✕	✕	✕	✕	✕	✕	✕
Exterior Equipment may trigger a Flood Permit	Choose an item.		✕	✕	✕	✕	✕	✕	✕	✕	✕
Review Fee ²	Choose an item.		✓	✓	✓	✓	✓	✓	✓	✓	✓
PDF Submittal Documents	Choose an item.		✓	✓		✓	✓	✓	✓	✓	✓

NOTES:	FOR COUNTY USE ONLY
<ol style="list-style-type: none">1. An Energy Code Worksheet is not required for an exact like-to-like change out.2. See Skagit County Fee Schedule.	<p><input type="checkbox"/> This application is complete.</p> <p><input type="checkbox"/> This application is incomplete. See items noted above.</p> <p>Skagit County may require additional information. The applicant will be notified in writing if additional information is necessary.</p> <p>These review requirements are for the Skagit County permits only and are to provide general guidance to the process but are subject to change. Additional permits may be required by federal, state, or local agencies. It is the responsibility of the applicant to ascertain whether other permits are required.</p>