



City of Seattle, Department of Planning and Development
Mailing Address: 700 5th Ave, Suite 2000, PO Box 34019, Seattle, WA 98124-4019
OTC Phone: (206) 684-8464 **Drainage Counter Phone:** (206) 684-5362
Website: www.seattle.gov/dpd
ASC Hours: M / W / F 8:00-4:00 & Tu / Th 10:30-4:00



PERMIT APPLICATION



Work Site Address: _____

Work Activity Location: _____

Occupancy: Single Family Multi-Family Commercial Institutional Industrial

Description of Work: _____

Associated Building Permits: _____ **Related Side Sewer Permits:** _____

***REVISION TO ISSUED PERMIT – Permit #:** _____ (mark revisions/additions on reverse side)

WORK SITE OWNER / TENANT INFORMATION	CONTRACTOR INFORMATION Fill out completely if applicable, no exceptions.
<input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Owner's Agent <input type="checkbox"/> King County Metro Reporting Information Name: _____ Phone: _____ Fax: _____ Address: _____ Apt/Ste #: _____ City/State: _____ Zip: _____	<p style="text-align: center;"><i>(24 Hour Contact Required if Working in the ROW)</i></p> Company Name: _____ Phone: _____ Fax: _____ Address: _____ Apt/Ste #: _____ City/State: _____ Zip: _____

Payment and Responsibility for Fees:

I, _____, am the **Owner / Applicant** of the above referenced property.

I understand that both the applicant for the permit, and the owner of the property for which the permit is required, are jointly and severally responsible for payment of review and inspection fees required by SMC 21.16. However, when an applicant is not the owner and is not acting, even in part, as agent for the owner, the applicant is solely responsible for payment of applicable fees.

Signed this _____ day of _____ 20____.

by _____ of _____
Signature *Company*

For DPD Staff Use Only:

Permit #: _____

Permit Fees: _____

Intake Reviewer: _____

CONTINUE APPLICATION ON BACK...

NOTE: This application form CANNOT be mailed and/or faxed in for processing, please contact the Drainage Counter at (206) 684-5362 for more information ***

Complete if Activity is in the Right-of-Way:

Curb Crossing / Staging (circle one): **Yes** **No**

Excavation in R-O-W (circle one): **Yes** **No**

RSSC to Perform Street Restoration (circle one):

Yes No

Note: If excavating in the R-O-W, the Contractor must be registered with the City of Seattle as an RSSC.

Temporary Dewatering for Construction

Field Full (if full: SPU / King County)

Other:

Pipe Lining Exception

DRAINAGE SYSTEM:

of Service Drain Lines Capped ____

Addition / Alteration

Repair

New System

Temporary

of New Connections to Main: ____ # of Other New Connections: ____ # of New/Replaced/Repair Pumps: ____

FLOW CONTROL TYPE:

- Bio-Engineer
- Infiltration
- No Control
- Pipe
- Surface
- Vault

FLOW CONTROL STANDARD:

- Forest & Peak
- Forested
- Pasture
- Pasture & Peak
- Peak
- Wetland

TREATMENT STANDARD TYPE:

- Basic
 - Basic Plus
 - No Treatment
- BASIC PLUS TYPE:**
- Enhanced
 - Oil
 - Phosphorous

DISCHARGE POINT TYPE:

- Alley
- Combined System
- Direct
- Ditch
- On Site
- Other
- Storm System
- Weep Hole

Total Disturbed Area _____ square feet

New Plus Replaced Impervious Surface _____ square feet

New Impervious Surface _____ square feet

Total Area Mitigated by GSI _____ square feet

SANITARY SYSTEM:

of Service Sewer Lines Capped ____

Addition / Alteration

Repair

New System

Temporary

of New Connections to Main: ____ # of Other New Connections: ____ # of New Dwelling Units: ____

of New Connections to Side Sewer: ____ # of New/Replaced/Repair Pumps: ____

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