

## Town of Friday Harbor

PO Box 219 / Friday Harbor / WA / 98250

(360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

### BUILDING PERMIT GUIDELINES

1. **PREPARE AND SUBMIT CONSTRUCTION DRAWINGS IN PDF VIA EMAIL.** Submit drawings with a complete building permit application packet. **Drawings must be formatted on 11" x 17" (minimum), up to 24" x 36" (maximum), and must include the following:**
  - a. **THE BUILDING AND SITE PLAN MUST INCLUDE THE FOLLOWING DETAILS (only if a formal Site Plan Review was not required):** 1) Location of all existing and proposed utility lines including stormwater, and location of utility connections in conjunction with building, 2) Dimensioned lot drawing including any easements (recorded survey may be required), 3) All buildings existing and those proposed, 4) Existing and proposed landscaping, and 5) Show existing and proposed parking. **BUILDING PLANS MUST BE DRAWN TO SCALE OF 1/4 INCH = 1 FEET.**
  - b. **FOUNDATION PLAN** showing size, shape, and height of foundation walls, all footings, posts, beams, size and direction of all floor joists in all areas, and all vents.
  - c. **CROSS (WALL) SECTION** showing excavation, foundation and finished grade, posts, beams, floor joists, studs, bracing, roof rafters and bracing, roof pitch and overhang, ceiling joists, and type of roofing materials.
  - d. **FLOOR PLAN** showing partitions, windows, (location, size and percent of opening), doors (size and swing), and plumbing fixtures. Label any future construction as "Not a part of this application".
  - e. **ELEVATION** drawings that show original grade at all building corners, finished floor and roof peak elevations, as well as all exterior decks, porches, patios, and covered walkways.
  - f. **DETAILS** showing stairs, rise and run, landings, and headroom.
  - g. **IF YOUR CONSTRUCTION REQUIRES PUBLIC WORKS PERMITS** (i.e., water or sewer service applications, or excavation in the public right of way permits), you must obtain proper permits prior to starting work.
2. **HISTORIC DISTRICT** - If you are planning to build a new structure or remodel an existing structure that is within the Historic District (map and application attached), please arrange to **meet with the Town Historic Preservation Coordinator**.
3. **MANUFACTURED HOMES** – A building permit application and installation drawings are required. Include a foundation plan showing tie down and pier locations with details. Units must have Washington State Labor & Industries approval since they are built off site; provide PDF copies of documentation.
4. **PLUMBING AND MECHANICAL PERMITS** – Plumbing and/or mechanical permit applications are required when plumbing and/or mechanical work is proposed.
5. Building permit fees are calculated based on project valuation (time and materials). **The total fees for the building, plumbing, mechanical, and stormwater applications will be due before plan check begins.** Make checks payable to: Town of Friday Harbor.
6. The plan check will require a minimum of 15 working days.
7. Electrical permits can be obtained from the Orcas Power and Light Company or the Department of Labor and Industries at 360.416.3000.

**POST THE BUILDING INSPECTION CARD ON SITE UNTIL FINAL INSPECTION IS COMPLETE.  
A 24-HOUR NOTICE IS REQUIRED FOR INSPECTIONS, CALL: 360-378-2810**

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### Checklist Public Works Permits / Building Permits / Land Use Permits

Property Owner: \_\_\_\_\_

Telephone \_\_\_\_\_

Address of job site: \_\_\_\_\_

Tax Parcel \_\_\_\_\_

#### If your construction requires the following applications, have you obtained?

- Yes ☐ No ☐ N/A ☐ Water and Sewer Service applications? **(Each application requires a site plan showing location of proposed water & sewer lines in conjunction with construction.)**
- Yes ☐ No ☐ N/A ☐ If your construction involves the addition of residential units, have you paid for additional sewer connection fees? Do you still comply with the current density regulations for your zone?
- Yes ☐ No ☐ N/A ☐ Does your project require an Excavation Within a Public Right of Way Permit application for work within the public right of way?
- Yes ☐ No ☐ N/A ☐ Application to Construct Curb, Gutter, Sidewalk, Storm Drainage, Street?
- Yes ☐ No ☐ N/A ☐ If your construction is 10,000 square feet or larger, have you submitted an Environmental Checklist (SEPA) for review and public comment period?
- Yes ☐ No ☐ N/A ☐ If your construction is planned within the designated shoreline, have you obtained an application for Exemption from Substantial Development or a Substantial Shoreline Development Permit application?
- Yes ☐ No ☐ N/A ☐ Land Clearing, Grading, or Filling Permit application?
- Yes ☐ No ☐ N/A ☐ Does the construction take place in the Historic Preservation District? See map attached. If so, see Historic Preservation Coordinator 360-378-2810 at least three weeks before construction application submittal.
- Yes ☐ No ☐ N/A ☐ If your construction requires a Storm Water Management Plan obtain review and approval four weeks before construction application submittal.

#### For your building permit application have you submitted the following?

- Yes ☐ No ☐ N/A ☐ Was a Site Plan Review required?
- Yes ☐ No ☐ N/A ☐ Have you met the Zoning, Parking, Land Use or Set Back requirements?
- Yes ☐ No ☐ N/A ☐ A completed building permit application with signature or agent authorization.
- Yes ☐ No ☐ N/A ☐ Two sets of construction drawings showing a site plan, parking plan, landscaping, foundation, walls, footings, beams, floor joists, etc? Guidelines attached.
- Yes ☐ No ☐ N/A ☐ Utility Checklist – must be signed by all companies and by owner/agent.
- Yes ☐ No ☐ N/A ☐ Energy calculations.
- Yes ☐ No ☐ N/A ☐ Mechanical Permit application?
- Yes ☐ No ☐ N/A ☐ Plumbing Permit application?
- Yes ☐ No ☐ N/A ☐ Storm Water Service application?

\_\_\_\_\_  
**Signature of Property Owner or Authorized Agent**

\_\_\_\_\_  
**Date**



TOWN OF FRIDAY HARBOR  
Post Office Box 219 • Friday Harbor, Washington 98250  
(360) 378 – 2810 • FAX: (360) 378 – 5339 • [www.fridayharbor.org](http://www.fridayharbor.org)

## Building Permit Application

|   |   |   |                         |
|---|---|---|-------------------------|
| Application date  | Tax parcel number                             | <b>Office Use Only</b>                                  |                         |
|   |   | BP#   | Date Permitted          |
| Name of legal property owner  |   | Property owner phone number                             |                         |
| Property Owner email address  |   |   |                         |
| Property owner mailing address  |   |   |                         |
| Authorized Agent (Letter of Agent Authorization required)               |   | Authorized Agent phone number                           |                         |
| Authorized Agent email address  |   |   |                         |
| Authorized Agent address  |   |   |                         |
| Job site address/physical location of property                          |   |   |                         |
| Description of work to be performed                                     |   |   |                         |
| Is the project or site within 200 feet of the body of water?            |   | <b>Yes.</b> <i>If yes, must show on plans.</i>          | <b>No</b>               |
| Is project located within the Historic District? (see attached map)     |   | <b>Yes.</b> <i>If yes, must submit HPRB Review App.</i> | <b>No</b>               |
| <b>Type of permit requested - check the appropriate box(es).</b>        |   |   |                         |
| <input type="checkbox"/> New Residence                                  | <input type="checkbox"/> Residential Addition | <input type="checkbox"/> Residential Remodel            |                         |
| <input type="checkbox"/> Accessory Building                             | <input type="checkbox"/> Garage (attached)    | <input type="checkbox"/> Garage (not attached)          |                         |
| <input type="checkbox"/> Carport  | <input type="checkbox"/> Agriculture          | <input type="checkbox"/> Commercial                     |                         |
| <input type="checkbox"/> Deck   | <input type="checkbox"/> Other (specify)      |   |                         |
| Bldg. Dimensions ____ X ____  | Main Floor _____ sq. ft.                      | Second Floor _____ sq. ft.                              |                         |
| Basement _____ sq. ft.  | Garage _____ sq. ft.                          | Other _____ sq. ft.                                     |                         |
| Construction Company name   |   |   |                         |
| Contractor name   |   |   |                         |
| Contractor email address  |   | Phone #   |                         |
| Contractor's Washington State License #                                 |   | Expiration date   |                         |
| UBI #   |   | Expiration date   |                         |
| Manufactured home company name  |   | Model   |                         |
| Size _____ X _____  | Year Built                                    | Serial #  |                         |
| Total valuation of work to be performed<br>(required to calculate fees) |   | Signature of Owner or Authorized Agent      Date        |                         |
| <b>Building Permit Fee(s)</b><br>\$                                     | <b>Plan Review</b><br>\$                      | <b>SBCC Fee</b><br>\$                                   | <b>Total Fees</b><br>\$ |

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**LETTER OF AGENT AUTHORIZATION**

I, \_\_\_\_\_  
(Legal Property Owner(s))

authorize \_\_\_\_\_ to act on  
(Agent)

my behalf during the processing of:

\_\_\_\_\_  
(Application Type)

\_\_\_\_\_  
(Signature of legal property owner) (Date)

\_\_\_\_\_  
(Signature of legal property owner) (Date)

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Date Received:

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**Historic Preservation Review Board  
Review Process & Request**

|  |                   |  |
|--|-------------------|--|
| Application date   | Tax parcel number | Job site address/physical location of property |
| Name of legal property owner   |                   | Phone number<br>Email address                  |
| Property owner mailing address   |                   |  |
| Authorized agent (Letter of Agent Authorization req.)  |                   | Phone number<br>Email address                  |
| Authorized agent mailing address   |                   |  |
| Are you seeking Historic Preservation incentives (height or parking) for this project? If yes, please describe.  |                   |  |
| <hr/>  |                   |  |
| <b><u>Historic Preservation Review Board: Review Process</u></b>   |                   |  |
| <p>The Historic Preservation Review Board (HPRB) meets twice a month on the second and fourth Wednesday. To get your project on the HPRB Agenda we must receive 7 (seven) sets of the materials outlined below, on 8.5"x 11" paper, no later than noon on Tuesday, the week preceding the HPRB meeting. Questions? Call 360.378.2810 ext. 241. In order to provide help with design solutions and offer informed recommendations to applicants during the review process, the Historic Preservation Review Board (HPRB) relies upon the following applicant information:</p>   |                   |  |
| <ol style="list-style-type: none"><li>1. <b>A comprehensive written description</b> of the proposed modifications to the existing building or of the proposed new construction including scope of work, materials, areas of demolition/new construction, etc.</li><li>2. <b>A site plan to scale</b> that indicates the dimensions of the lot, the location of existing buildings, and the location of additions or new buildings. Also to be indicated: parking, signs, fencing, &amp; landscaping.</li><li>3. <b>A plan to scale showing elevations, and section drawings.</b> Drawings should include materials to be used, window design, signs, exterior lighting with keyed dimensions.</li><li>4. <b>Detailed drawings</b> of new or altered architectural features and trim.</li><li>5. <b>A description or sample of new exterior materials</b> to be used, including the types of windows, roofing, and siding. (Product pamphlets describing the materials/products you propose to use can be obtained from the product vendor and/or from their websites online.)</li><li>6. <b>Photographs:</b> When the HPRB is reviewing projects within the Historic District, it is helpful to have photographs of applicable buildings, sites, and streetscapes. Applicants are encouraged to include vintage or contemporary photographs that illustrate what you are proposing. Look around Friday Harbor, can you find examples of similar features that will demonstrate your concept?</li></ol> |                   |  |
| <b>Please refer to the Town of Friday Harbor's <i>Historic Preservation Manual</i> for guidelines applicable to your proposed project and the historic district. Copies are available at Town Hall.</b>  |                   |  |
| <b>Signature of Owner or Authorized Agent*</b>   |                   | <b>Date</b>                                    |
| <hr/>  |                   |  |
| <b>*If signed by the Authorized Agent, please attach a Letter of Agent Authorization signed by owner or a letter from and signed by the owner authorizing representation of the proposed work.</b>   |                   |  |
| <b>TOWN OF FRIDAY HARBOR USE ONLY:</b>   |                   |  |
| Date of HPRB Design Review: _____ Number of Documents Received: _____  |                   |  |
| HPRB Decision:    Complies _____    Does Not Comply _____    Design Review Summary is Attached _____   |                   |  |



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## Mechanical Permit Application

|  |  |                          |                        |   |                       |
|--|--|--------------------------|------------------------|---|-----------------------|
| Application date                                 |  | Tax parcel number        |                        | <b>Office Use Only</b>  |                       |
|  |  |                          |                        | <b>ME#</b>  | <b>Date Permitted</b> |
| Legal Property Owner                             |  |                          | Owner Telephone Number |   |                       |
| Owner Address                                    |  |                          | Email Address          |   |                       |
| Mechanical Contractor's Company Name             |  | WA State L & I License # |                        | UBI #   |                       |
| Job Location – Street / Road                     |  |                          |                        |   |                       |
| Property Owner's or Authorized Agent's Signature |  |                          |                        |   |                       |
| No.  | TYPE OF EQUIPMENT  | FEE EA.                  | FEE                    | Work / Use  |                       |
|  | Forced Air System – Btu/h M ea. Up to 100,000 btu            | 18.50                    |                        | Enter a "1" in the field left of "Original Permit" to include the base permit fee of \$29.40 in the total fee.<br><br>If adding to an existing/ original mechanical permit, enter a "1" in the field left of "Supplemental Permit". |                       |
|  | LPG Wall Heaters   | 18.50                    |                        |   |                       |
|  | Oil Wall Heaters   | 18.50                    |                        |   |                       |
|  | Unit Heaters / Gas Fireplace / Ductless Head                 | 13.30                    |                        |   |                       |
|  | Gas – Fired A.C. Units – Btu/h                               | 13.30                    |                        |   |                       |
|  | Air-Conditioning Units                                       | 13.30                    |                        |   |                       |
|  | Refrigeration Units  | 13.30                    |                        |   |                       |
|  | Boilers –BTU's-needs back flow device (see Town Water Dept)  | 33.95                    |                        |   |                       |
|  | Air – Handling Unit – C.F.M. Up to and Incl. 10,000 C.F.M.   | 13.30                    |                        |   |                       |
|  | Air – Handling Unit – C.F.M. Over 10,000 C.F.M.              | 22.25                    |                        |   |                       |
|  | Evaporative Coolers / Mini-Split Outdoor Unit                | 13.30                    |                        |   |                       |
|  | Commercial Range Hood  | 13.30                    |                        |   |                       |
|  | Gas Systems (1-4 outlets only)                               | 7.80                     |                        |   |                       |
|  | Each additional gas system outlet (over 4)                   | 1.25                     |                        |   |                       |
|  | Ventilation fan to a single duct                             | 9.10                     |                        |   |                       |
|  | Range (LPG only)   | 13.30                    |                        |   |                       |
|  | Clothes Dryer Vent   | 9.10                     |                        |   |                       |
|  | Solid Fuel Burning Appliances                                | 50.00                    |                        |   |                       |
|  | Liquid Propane Tank Install                                  | 13.30                    |                        |   |                       |
|  | Hazardous Process Piping                                     | 13.30                    |                        |   |                       |
|  | Oil Tank Install   | 13.30                    |                        |   |                       |
|  | Oil Tank Process Piping                                      | 13.30                    |                        |   |                       |
|  | Residential Solar Array <26kWh                               | 90.00                    |                        |   |                       |
|  | Residential Battery Backup                                   | 90.00                    |                        |   |                       |
|  |  |                          |                        |   |                       |
|  | <b>Original Permit</b>                                       | 29.40                    |                        |   |                       |
|  | <b>Supplemental Permit</b> (if adding to an Original Permit) | 9.10                     |                        |   |                       |
|  | <b>TOTAL FEE</b>   |                          |                        |   |                       |



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## Plumbing Permit Application

|  |                              |                         |                       |
|--|------------------------------|-------------------------|-----------------------|
| Application date                                 | Tax parcel number            | <b>Office Use Only</b>  |                       |
|  |                              | <b>PL#</b>              | <b>Date Permitted</b> |
| Legal Property Owner                             |                              | Owner Telephone Number  |                       |
| Owner Address                                    |                              | Email Address           |                       |
| Plumbing Company Name                            |                              | WA State L& I License # | UBI #                 |
| Water Meter Size                                 | Job Location – Street / Road |                         |                       |
| Property Owner's or Authorized Agent's Signature |                              |                         |                       |

| No. | TYPE OF FIXTURE  | FEE<br>EA. | FEE | Work / Use  |
|-----|--|------------|-----|---|
|     | Water Closet (Toilet)                                  | 8.75       |     |   |
|     | Bathtub  | 8.75       |     |   |
|     | Lavatory (Wash Basin)                                  | 8.75       |     |   |
|     | Shower   | 8.75       |     |   |
|     | Kitchen Sink & Disposal                                | 8.75       |     |   |
|     | Dishwasher   | 8.75       |     |   |
|     | Laundry Tray   | 8.75       |     |   |
|     | Clothes Washer   | 8.75       |     |   |
|     | Urinal   | 8.75       |     |   |
|     | Drinking Fountain                                      | 8.75       |     |   |
|     | Floor – Sink or Drain                                  | 8.75       |     |   |
|     | Water Structure Connection                             | 18.75      |     |   |
|     | Sewer Structure Connection                             | 18.75      |     |   |
|     | Water Heater-Thermal Expansion Tank Required           | 8.75       |     |   |
|     | Waste Interceptor                                      | 8.75       |     |   |
|     | Water Supply Piping / Pressure Test                    | 8.75       |     |   |
|     | Lawn Sprinkler System (\$7 ea per # of zones)          | 8.75       |     |   |
|     | Vacuum Breakers (Hose Bibs)                            | 6.25       |     |   |
|     | Back Flow Device (see attached questionnaire & submit) | 8.75       |     |   |
|     |  |            |     |   |
|     |  |            |     |   |
|     | <b>Original Permit</b>                                 | 25.00      |     | Enter a "1" in the field left of "Original Permit" to include the base permit fee of \$25.00 in the total fee.<br><br>If adding to an existing/ original plumbing permit, enter a "1" in the field left of "Supplemental Permit". |
|     | Supplemental Permit (if added to Original Permit)      | 12.50      |     |   |
|     |  |            |     |   |
|     |  |            |     |   |
|     | <b>TOTAL FEE</b>                                       |            |     |   |





Town of Friday Harbor  
Water Department  
P.O. Box 219 \* 501 Marguerite St.  
Friday Harbor, WA 98250  
Phone (360) 378-8353

## Water Service Connection Questionnaire

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Water Service Address:** \_\_\_\_\_

Parcel #: \_\_\_\_\_ Type of Service: Residential \_\_\_\_\_ Commercial \_\_\_\_\_

If commercial, type of Business: \_\_\_\_\_

Number of Stories: \_\_\_\_\_ Number of units/businesses on meter: \_\_\_\_\_

**Please indicate all that apply for planned or current water use. This questionnaire must be completed before water utilities permit is issued.**

| <b>Residential:</b>                                 | <b>YES</b>               | <b>NO</b>                | <b>DON'T KNOW</b>        | <b>OFFICIAL USE</b>      |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Lawn irrigation system?                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Swimming pool or hot tub?                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Photo Lab, chemical, medical or other lab facility? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Private well or auxiliary water supply?             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lawn or garden chemical sprayers attached to hose?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Water softener or other treatment systems?          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| In floor heating system?                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Boiler heating system?                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire sprinkler system?                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| <b>Commercial:</b>                                  | <b>YES</b>               | <b>NO</b>                | <b>DON'T KNOW</b>        | <b>OFFICIAL USE</b>      |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Lawn irrigation system?                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Carbonation equipment?                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ice machine?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Boiler?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire sprinkler system?                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| In floor heating system?                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Water softener or other treatment systems?          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Photo lab, chemical, medical or other lab facility? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Swimming pool or hot tub?                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Private well or auxiliary water supply?             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Water-cooled equipment?                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Janitor's sink?                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Floor Drain Trap Primer?                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Laundry/dry cleaning facilities?                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Medical facilities?                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Beverage bottling, food processing?                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dental facilities?                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Veterinarian facilities?                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Baptismal pool?                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |