

Commercial, Multi-Family & Industrial (CMI)

Submit to: eplans@cityofvancouver.us Questions? 360-487-7833 | [ePlans](#)



CATEGORY OF CONSTRUCTION			
<input type="checkbox"/> Commercial/Industrial		<input type="checkbox"/> Multi-Family Residential	
<input type="checkbox"/> Commercial with Multi-Family			
TYPE OF WORK			
<input type="checkbox"/> Addition Only	<input type="checkbox"/> Remodel Only	<input type="checkbox"/> Cell Tower (co-locate)	<input type="checkbox"/> Cell Tower (new)
<input type="checkbox"/> Inspection Only			
<input type="checkbox"/> New Building/Structure	<input type="checkbox"/> Addition and Remodel	<input type="checkbox"/> Modular	<input type="checkbox"/> Re-roof
<input type="checkbox"/> Tenant Improvement			
JOB SITE LOCATION			
Site Address:	Suite#	Parcel #(s):	Project Name:
DESCRIPTION OF WORK			
SCOPE OF WORK			
Existing Building Use:	Proposed Building Use:	SF Scope of Work:	Number of Stories:
Valuation (materials and labor): \$	Number of Units:	Number of Seats:	
Fire Sprinkler Existing: <input type="checkbox"/> Yes <input type="checkbox"/> No	Proposed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Alarm Existing: <input type="checkbox"/> Yes <input type="checkbox"/> No	Proposed: <input type="checkbox"/> Yes <input type="checkbox"/> No
NOTE: Fire sprinkler & alarms require separate permits and are not considered a deferred submittal under this permit.			
Proposed work includes (check all that apply): <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical			
Requesting Deferred Submittal? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Plans Examiner Approval Required</i> (check all that apply):			
<input type="checkbox"/> Electrical	<input type="checkbox"/> Elevators	<input type="checkbox"/> Fireproofing/Firestopping	<input type="checkbox"/> Floor Joists
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Refrigeration	<input type="checkbox"/> Roof Trusses
<input type="checkbox"/> Stairs and Railings	<input type="checkbox"/> Storefront/Curtain Wall	<input type="checkbox"/> Other/Specify:	
Hard Surface Area SF (New & Replaced):	Stormwater Applicability Form Required		Area of Land Disturbance SF:
Master Plan for Same As: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Same As CMI:	Traffic Impact Fee Credits: <input type="checkbox"/> Yes <input type="checkbox"/> No	
ADDITIONAL INFORMATION			
Occupancy Group (IBC CH 3: R-2, S-1, etc.)	Construction Type (IBC CH 6: VB, IA, etc.)	Square Footage	Story
CONTRACTOR		PLUMBING CONTRACTOR License Required RCW 18.106.440	
Business Name:		Business Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Email:		Email:	
Phone:		Phone:	
WA State License #		WA Plumbing License #	
OWNER		ELECTRONIC PLANS SUBMITTER (Required)	
Name:		Responsible for ePlans uploading and correspondence	
Address:		Name:	
City/State/Zip:		Address:	
Email:		City/State/Zip:	
Phone:		Email (Required):	
ONLINE PAYMENT		Phone:	
Request an ePermits Account			
Existing ePermits Username:			
REQUIRED SIGNATURES			
A complete application form, submittal documents and required information as set forth in VMC 17.08.100 must be submitted to obtain a permit. If it is determined that the application is not complete and/or the application fees have not been paid, the City may reject the application and plan review will not begin. It is the responsibility of the applicant/owner to comply with all private conditions, covenants, and restrictions (CC&R's) associated with this property. As evidenced by my signature below, I/we agree that City of Vancouver staff has my/our full permission to enter upon the subject property at any reasonable time to consider the merits of the application, to take photographs and to post public notices.			
Applicant Signature:		Date:	
Property Owner Signature:		Date:	