

Commercial, Multi-Family & Industrial (CMI)

Submit to: eplans@cityofvancouver.us Questions? 360-487-7833 | [Getting Started with 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"/> Food Truck
<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:
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	Construction Type	Square Footage	Story	
(IBC CH 3: R-2, S-1, etc.)	(IBC CH 6: VB, IA, etc.)			
CONTRACTOR		PLUMBING CONTRACTOR		
Business Name:		License Required RCW 18.106.440		
Address:		Business Name:		
City/State/Zip:		Address:		
Email:		City/State/Zip:		
Phone:		Email:		
WA State License #		Phone:		
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):		
		Phone:		
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:		