

COMMERCIAL BUILDING PERMIT APPLICATION

Updated June 2019

Physical Address:
Auburn City Hall Annex, 2nd Floor
1 E Main St

Mailing Address:
25 W Main St
Auburn, WA 98001-4998

Webpage & Application Submittal:
www.auburnwa.gov
applications@auburnwa.gov

Phone and Email:
Phone: (253) 931-3090
permitcenter@auburnwa.gov

PROJECT INFORMATION

Check all that apply: New Construction Addition Tenant Improvement (TI)
For Tenant Improvements: New Tenant Existing Tenant
Cannabis Facility? Yes No Operating As: Producer Processor Retailer
Project Valuation (do not include cosmetic improvements such as paint and carpet) \$ 20,000
Are you deferring impact fees or utility system development charges: Yes No

Permit Number #

Parent Permit #

Job site address: 28900 124th Avenue SE, Auburn, WA 98092 Parcel #: 0421059070
Complex Name: Auburn Mountainview High School Building #: 906 Suite #: _____
Tenant Name: Auburn School District Tenant's Auburn Business License: BUS _____

Received:

Scope of Work: Place one portable classroom on existing school parking lot.

Deferred Submittals (check all that apply):

- Mechanical
- Plumbing
- Fire

For Roofing: # of Squares: 10 # of Layers: 1 Torchdown Yes No

OWNER Primary contact

CONTRACTOR Primary contact

Name: Auburn School District
 Building Owner Tenant
Address: 915 Fourth Street NE
City: Auburn State: WA Zip: 98002
Contact Person: Bob Kenworthy
Phone: 253-931-4826
E-mail: bkenworthy@auburn.wednet.edu

Company Name: Modern Building Systems
Address: 1530 Thornton Avenue SE
City: Pacific State: WA Zip: 98047
Contact: Rick Neil Phone: 253-863-8863
E-mail: rneil@modernbuildingsystems.com
City of Auburn Business License #: BUS 27839ZKC
WA State Lic.# or UBI: MODERBS27

ARCHITECT Primary contact

ENGINEER Primary contact

Company Name: None
Architect: _____
WA ID# (required): _____ Exp. Date: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
E-mail: _____

Company Name: Hargis Engineers
Engineer: Brendon Inman
WA ID# (required): 40443 Exp. Date: _____
Address: 1201 Third Avenue, Suite 600
City: Seattle State: WA Zip: 98101
Phone: 206-448-3376
E-mail: brendon.inman@hargis.biz

BUILDING/FIRE

Type of Construction: <u>VB</u> (i.e. IA, IB, IIA, IIB, IIIB, IV, VA, VB)	Zoning Designation: <u>P1</u>	Modular Building <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Number of Stories: <u>1</u>	Parking: Number Required: <u>288</u>	Change of Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Building Height: <u>16</u> feet	Number Provided: <u>612</u>	Vacant Site: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Building/Tenant Sq. Footage: <u>896</u>	Accessible Spaces: <u>20</u>	FIRE:
Conditioned Space Footage: <u>896</u>	Number of Dwelling Units: <u>0</u>	Sprinklers Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Natural Gas to Site? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Power to Site? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sprinkled Area Sq. Footage: <u>0</u>
		Fire Alarms: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Will there be a change in use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mixed Occupancy? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, Existing Use: _____	Occupancy Classification <u>E1</u> , <u>896</u> Sq. Ft.
If yes, Proposed Use: _____	Occupancy Classification _____, _____ Sq. Ft.
Proposed Occupancy Load: <u>40</u>	Occupancy Classification _____, _____ Sq. Ft.
	Occupancy Classification _____, _____ Sq. Ft.

SPECIAL TESTING AND/OR INSPECTIONS

Will this project require any special testing or inspections: Yes No

If yes, please include the City of Auburn "Agreement for Testing and Special Inspection" form which is available at <https://www.auburnwa.gov/forms>

ADDITIONAL INFORMATION

HALF STREET IMPROVEMENTS:

Required Half Street Improvements have already been completed.

Required Half Street Improvements have not been completed and are proposed to be completed as part of this development.

Required Half Street Improvements have not been completed and are proposed to be deferred to a later time.

USE OF OTHER PROPERTIES:

Yes No Does the proposed development activity rely upon the use of other properties (e.g. easements across another property)? If yes, please provide a copy of the legal document that indicates that the other property may be used to serve the proposed development. Also, please depict this information on any site plan drawings that are attached to this application.

IS THE PROPERTY WITHIN A FLOOD HAZARD AREA? Yes No

APPLICANT REPRESENTATIVE (If not listed on Page 1)

On behalf of: Owner Contractor Architect Engineer

Company Name: _____ Representative Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

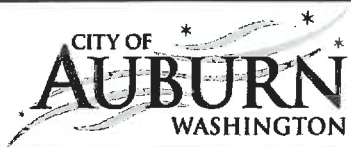
I certify that I have read this application and declare under penalty of perjury that the information contained herein is correct and complete. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes. I am either the owner of the property on this permit application, the Washington State registered contractor for the work, or I represent the owner or contractor as signified above and am acting with the owner's/contractor's full knowledge and consent.

Bob Kenworthy Bob Kenworthy 5/21/21
SIGNATURE PRINTED NAME DATE

POST PROJECT DEBRIEF

As part of our ongoing process improvement efforts, Community Development and Public Works would be interested in meeting with the Applicant and/or their representative after project completion to gain feedback and insight.

Would you be willing to attend a project debrief meeting and share your experience? Yes No



OWNER LETTER OF AUTHORIZATION

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(A copy of this letter must be submitted for each property owner involved)

I, Cindi Blansfield, declare under penalty of perjury under the laws of the State of Washington as follows;

1. I am (*select one*) the owner of the property that is the subject of the application or the owner is a corporation, organization, or public agency and submitting this authorization is within the scope of my authority to act on that entity's behalf for the property located at 28900 124th Avenue SE, Auburn, WA 98092 for the following scope of work addition of one portable classroom building.

2. All statements, answers, and information submitted with this application are true and correct to the best of my knowledge and belief.

3. I acknowledge that approval of this application may be subject to conditions as specified on the approval documents.

4. I agree to hold the City of Auburn harmless as to any claim (including costs, expenses and attorney's fees incurred in the investigation of such claim) which may be made by any person, including the undersigned, and filed against the City of Auburn, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information provided to the City as part of this application.

5. I hereby grant permission for representatives of the City of Auburn and any other Federal, State, or local unit of government with regulatory authority over the project to enter onto my property to inspect the property, take photographs, and post public notices as required in connection with review of this application and for compliance with the terms and conditions of permits and approvals issued for the project.

6. Regarding this application, the following individuals are appointed to act as my agent, or as the agent of the entity I represent: Bob Kenworthy

Cindi Blansfield

Digitally signed by Cindi Blansfield
Date: 2021.04.23 16:04:39 -07'00'

Signature

Cindi Blansfield

Printed Name

cblansfield@auburn.wednet.edu

Email

915 Fourth Street NE, Auburn, WA 98002

Address

Date

253-931-4930

Phone

Associate Superintendent

Title

Auburn, WA

City and State where signed