



Community Development & Building Department  
 818 E Edison Avenue Sunnyside, WA 98944  
 Email: [permitting@sunnyside-wa.gov](mailto:permitting@sunnyside-wa.gov)  
 (509) 837-4229, (509) 836-6383 Fax

(Non-residential)  
**Commercial Construction  
 Permit Application**

**New Construction**  
 **Tenant Improvement**     **Other:**

SITE ADDRESS: \_\_\_\_\_ Permit # \_\_\_\_\_

ASSESSOR'S PARCEL NO: \_\_\_\_\_ Valuation \$ \_\_\_\_\_

**Zoning Review Site Plan Fee: \$125.00**

<b>Building Owner:</b>
Name:
Address:
City: State: Zip:
Phone: Email:

<b>Contractor:</b>
Name:
Address:
City: State: Zip:
Phone: Email:
Contractor Lic No: Exp Date:

<b>Applicant:</b>
Name:
Phone:
Contact Person:
Name:
Phone:
Email:

<b>Architect</b>
Company Name:
Architect Name:
Address:
City/State/Zip:
Phone: Email:

**The following MUST be complete: (write n/a if not applicable)**

Type of Construction:	Dimensions:	# of stories:	Total Building Sq. Foot:
Heat Source:	Fire Sprinklers:	Primary Occupancy:	Sq. Foot:
Secondary Occupancy	Sq. Foot:		

Describe the work in detail. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Plan Rev. Fee:	Bldg Permit Fee:	St. Surcharge:
Zoning Review Site Plan: \$125.00		Total:

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of state or local law regulating construction or the performance of construction.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Received by \_\_\_\_\_