



RESIDENTIAL MISCELLANEOUS APPLICATION

Community and Economic Development

City of Arlington • 18204 59th Ave NE • Arlington, WA 98223 • Phone (360) 403-3551

This application is required for Residential: Decks, Fences, Hot Tub/Spa, Pools, Retaining Walls and other similar in nature but not specified. See the ASSISTANCE BULLETINS for additional information and requirements.

EACH BUILDING OR STRUCTURE REQUIRES A SEPARATE SUBMITTAL.

SUBMIT ELECTRONIC FILES FOR EACH OF THE FOLLOWING; Incomplete applications will not be accepted.

| REQUIRED DOCUMENTS | | |
|--|--|-------------|
| <input type="checkbox"/> DECKS | <ul style="list-style-type: none"> • Proof of approved Zoning Verification or Permit Number: _____ • Site Plan | |
| <input type="checkbox"/> FENCES | <ul style="list-style-type: none"> • Type of fencing: _____ | • Site Plan |
| <input type="checkbox"/> HOT TUB/SPA | <ul style="list-style-type: none"> • Manufacturer's Installation Documents | • Site Plan |
| <input type="checkbox"/> ABOVE GROUND POOL | <ul style="list-style-type: none"> • Manufacturer's Engineering and Installation Documents | • Site Plan |
| <input type="checkbox"/> IN GROUND POOL | <ul style="list-style-type: none"> • Manufacturer's Engineering and Installation Documents | • Site Plan |
| <input type="checkbox"/> RETAINING WALL | <ul style="list-style-type: none"> • Engineered plans | • Site Plan |
| <input type="checkbox"/> OTHER | <ul style="list-style-type: none"> • Describe: _____ • Site Plan | |

Type of Permit: Deck Fence Hot Tub/Spa Pool Retaining Wall _____

Property Address: _____ Project Valuation: _____
 Lot #: _____ Parcel ID No.: _____ Subdivision: _____
 Project Scope of Work: _____

Primary Contact: Owner Contractor

Owner Name: _____ Home No.: _____
 Email Address: _____ Cell No.: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____

Contractor Name: _____ Office No.: _____
 Email Address: _____ Cell No.: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 L&I Contractor License Number: _____ Expiration Date: _____

I hereby certify that I am the Owner Contractor and authorized to sign this application and that the above information is correct and construction on, and the occupancy and the use of the above-described property will be in accordance with the laws, rules and regulation of the State of Washington, and the City of Arlington.

Signature

Print Name

Date