



# DEVELOPMENT SERVICES

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# Mechanical Permit Application

Building Services

Complete this form to submit at City Hall. Or, use [mybuildingpermit.com](http://mybuildingpermit.com) to submit your application entirely online.

Mechanical permits are required when installing, altering, relocating or replacing mechanical systems or fuel gas piping in existing buildings or new buildings (other than new single family residences). Use the [Mechanical Permit Checklist](#) to help submit a complete permit application.

## PROPERTY INFORMATION

Site Address: \_\_\_\_\_ Project Name: \_\_\_\_\_  
Parcel No.: \_\_\_\_\_ Tenant (if commercial): \_\_\_\_\_  
Property Owner: \_\_\_\_\_ Owner Phone: \_\_\_\_\_  
Owner Address: \_\_\_\_\_

## PERMIT INFORMATION

This mechanical permit involves:  Single Family, Duplex or Townhouses (Residential Only)  Mixed-Use  
(select one)  Multi-Family (Residential Only)  Commercial or Industrial (Non Residential)

This mechanical permit relates to:  Construction of a NEW building  Alteration or Addition to an EXISTING building  
(select one)  Construction or modification of a non-building structure (such as a swimming pool)

Estimated cost of mechanical work only: (fair market value, labor & materials) \_\_\_\_\_

Provide a description of work to be done:

Will the proposed mechanical work involve any of the following? (check all that apply):

- In-kind replacement only
- Ground-mounted equipment
- Rooftop-mounted equipment
- Fire or smoke damper(s)
- Fire-rated assembly penetration(s)

## MECHANICAL CONTRACTOR INFORMATION

Contractor Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Contractor Mailing Address: \_\_\_\_\_  
Contractor's L&I License No.: \_\_\_\_\_ Contractor's WA State UBI No.: \_\_\_\_\_

OR  **OWNER IS CONTRACTOR** - I have read [RCW 18.27.010](#) relating to definitions of general contractors and specialty contractors and [RCW 18.27.110](#), which prohibits issuing permits without proof of registration, and owner is contractor.

Owner/Agent Printed Name: \_\_\_\_\_

Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use Only - Permit Number: \_\_\_\_\_ Target: \_\_\_\_\_

**PRIMARY CONTACT INFORMATION**

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Contact Address: \_\_\_\_\_  
Email: \_\_\_\_\_

**ACKNOWLEDGMENTS**

- 1. By signing this application, I authorize employees/agents of the City of Kirkland to enter onto the property which is the subject of this application during regular business hours. The sole purpose of entry is to make any examination of the property which is necessary to process this application.*
- 2. I certify that I am the owner of this property or the owner's authorized agent. If acting as an authorized agent, I further certify that I have full power and authority to file this application and to perform, on behalf of the owner, all acts required to enable the jurisdiction to process and review such application. I have furnished true and correct information. I will comply with all provisions of law and ordinance governing this type of application. If the scope of work requires a licensed contractor to perform the work, the information will be provided prior to permit issuance.*

Owner/Agent Printed Name: \_\_\_\_\_  
Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_