



City of Yelm

Community Development Department

Building Division

Phone: (360) 458-8407

Fax: (360) 458-3144

Permit No.: **20180328**

Issue Date: **11/16/2018**

(Work must be completed within 180 days)

Applicant:

Name: SOUNDBUILT
Address: PO BOX 73790
PUYALLUP WA 98373

Phone: _____

Property Information:

Site Address: **9978 DAIN ST SE** Owner: SOUNDBUILT

Assessor Parcel No.: 78640124800 Subdivision: TAHOMA TERRA DIV 2 Lot: 248

Contractor Information:

Name: SOUNDBUILT
Address: PO BOX 73790
PUYALLUP WA 98373

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: NEW RESIDENTIAL BUILDING

Description of Work: NEW SFR PLAN 2048B LOT 248

Sq. Ft. per floor:	First	825	Heat Type (Electric, Gas, Other):	GAS
	Second	1223		
	Third			
	Garage	386		
	Basement			

Fees:

Item	Contractor	Fees
NEW RESIDENTIAL BUILDING	SOUNDBUILT	\$23,405.53
MECHANICAL	SOUNDBUILT	\$ 68.75
PLUMBING	SOUNDBUILT	\$ 125.00

TOTAL FEES: \$ 23,599.28

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____

Firm _____

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Sets of Prints: _____
Final Inspection:
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Phone: (360) 458-8407

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Permit No.: **20180329**

Issue Date: **11/16/2018**

(Work must be completed within 180 days)

Applicant:

Name: SOUNDBUILT

Phone: _____

Address: PUYALLUP WA 98373

Property Information:

Site Address: **9982 DAIN ST SE**

Owner: SOUNDBUILT

Assessor Parcel No.: 78640124900

Subdivision: TAHOMA TERRA DIV 2

Lot: 249

Contractor Information:

Name: SOUNDBUILT

Phone: _____

Address: PUYALLUP WA 98373

Contractor License No.: _____

Expires: 0/00/0000

Project Information:

Project: NEW RESIDENTIAL BUILDING

Description of Work: NEW SFR PLAN 2048A LOT 249

Sq. Ft. per floor:

First	825
Second	1223
Third	
Garage	386
Basement	

Heat Type (Electric, Gas, Other): GAS

Fees:

Item	Contractor	Fees
NEW RESIDENTIAL BUILDING	SOUNDBUILT	\$23,294.20
MECHANICAL	SOUNDBUILT	\$ 68.75
PLUMBING	SOUNDBUILT	\$ 125.00

TOTAL FEES: \$ 23,487.95

Applicant's Affidavit:

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Permit No.: **20180330**

Issue Date: **11/16/2018**

(Work must be completed within 180 days)

Applicant:

Name: SOUNDBUILT
Address: PO BOX 73790
PUYALLUP WA 98373

Phone: _____

Property Information:

Site Address: **9984 DAIN ST SE** Owner: SOUNDBUILT

Assessor Parcel No.: 78640125000 Subdivision: TAHOMA TERRA DIV 2 Lot: 250

Contractor Information:

Name: SOUNDBUILT
Address: PO BOX 73790
PUYALLUP WA 98373

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: NEW RESIDENTIAL BUILDING

Description of Work: NEW SFR PLAN 2048B LOT 250

Sq. Ft. per floor:	First	825	Heat Type (Electric, Gas, Other):	GAS
	Second	1223		
	Third			
	Garage	386		
	Basement			

Fees:

Item	Contractor	Fees
NEW RESIDENTIAL BUILDING	SOUNDBUILT	\$23,294.20
MECHANICAL	SOUNDBUILT	\$ 68.75
PLUMBING	SOUNDBUILT	\$ 125.00

TOTAL FEES: \$ 23,487.95

Applicant's Affidavit:

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Permit No.: **20180343**

Issue Date: **11/29/2018**
(Work must be completed within 180 days)

Applicant:

Name: RANDY PAIGEN
Address: PO BOX 625
YELM WA 98597

Phone: 360-701-7099

Property Information:

Site Address: **715 YELM AVE E** Owner: RANDY PAIGEN

Assessor Parcel No.: 22730120102 Subdivision: _____ Lot: _____

Contractor Information:

Name: RANDY PAIGEN
Address: PO BOX 625
YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: OTHER SPECIAL EVENT

Description of Work: GOING OUT OF BUSINESS SALE

Sq. Ft. per floor: First _____ Heat Type (Electric, Gas, Other): _____
Second _____
Third _____
Garage _____
Basement _____

Fees:

Item	Contractor	Fees
SE	RANDY PAIGEN	\$ 0.00
TOTAL FEES:		\$ 0.00

Applicant's Affidavit:

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Permit No.: **20180357**

Issue Date: **11/15/2018**
(Work must be completed within 180 days)

Applicant:

Name: SUNSET AIR INC
Address: LACEY WA 98503

Phone: _____

Property Information:

Site Address: **9825 GREENLEAF LP SE** Owner: **SARRA MANICKE**

Assessor Parcel No.: 84070006300 Subdivision: _____ Lot: _____

Contractor Information:

Name: SUNSET AIR INC
Address: LACEY WA 98503

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REPLACE HEAT PUMP

Sq. Ft. per floor: First Heat Type (Electric, Gas, Other): _____
Second _____
Third _____
Garage _____
Basement _____

Fees:

Item	Contractor	Fees
MECHANICAL	SUNSET AIR INC	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

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Permit No.: **20180370**

Issue Date: **11/02/2018**
(Work must be completed within 180 days)

Applicant:

Name: BRENNAN HEATING
Address: SEATTLE WA 98168

Phone: _____

Property Information:

Site Address: **14945 PRAIRIE VISTA LP SE** Owner: **ANDERS DREISZUS**

Assessor Parcel No.: 81860000300 Subdivision: _____ Lot: _____

Contractor Information:

Name: BRENNAN HEATING
Address: SEATTLE WA 98168

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REPLACE GAS FURNACE AND GAS WATER HEATER

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):
	Second	_____
	Third	_____
	Garage	_____
	Basement	_____

Fees:

Item	Contractor	Fees
MECHANICAL	BRENNAN HEATING	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

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Permit No.: **20180371**

Issue Date: **11/01/2018**
(Work must be completed within 180 days)

Applicant:

Name: CROSSROADS AT YELM LLC
Address: GRANITE BAY CA 95746

Phone: _____

Property Information:

Site Address: **153 WALHAUPT RD B** Owner: **MIKE MCGRAW**

Assessor Parcel No.: _____ Subdivision: _____ Lot: _____

Contractor Information:

Name: CROSSROADS AT YELM LLC
Address: GRANITE BAY CA 95746

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: BOUNDARY LINE ADJUSTMENT

Description of Work: 3 LOT BOUNDARY LINE ADJUSTMENT 16910/16930 SR 507

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
BOUNDARY LINE ADJUSTMENT	CROSSROADS AT YELM LLC	\$ 250.00
TOTAL FEES:		\$ 250.00

Applicant's Affidavit:

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Permit No.: **20180372**

Issue Date: **11/06/2018**
(Work must be completed within 180 days)

Applicant:

Name: FAST WATER HEATER
Address: BOTHELL WA 98011

Phone: _____

Property Information:

Site Address: **14907 PRAIRIE VISTA LP SE** Owner: **BRIAN KROGER**

Assessor Parcel No.: 81860001800 Subdivision: _____ Lot: _____

Contractor Information:

Name: FAST WATER HEATER
Address: BOTHELL WA 98011

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REMOVE AND REPLACE GAS WATER HEATER

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
MECHANICAL	FAST WATER HEATER	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

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Signature _____ Date _____

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Permit No.: **20180373**

Issue Date: **11/06/2018**
(Work must be completed within 180 days)

Applicant:

Name: FAST WATER HEATER
Address: 11715 NORTH CREEK PARKWAY S.
BOTHELL WA 98011

Phone: 425-814-3124

Property Information:

Site Address: 14945 MOUNTAIN VIEW CT SE Owner: BYRON HENDERSON

Assessor Parcel No.: 42990000500 Subdivision: _____ Lot: _____

Contractor Information:

Name: FAST WATER HEATER
Address: 11715 NORTH CREEK PARKWAY S.
BOTHELL WA 98011

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REMOVE AND REPLACE GAS WATER HEATER

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):
	Second	_____
	Third	_____
	Garage	_____
	Basement	_____

Fees:

Item	Contractor	Fees
MECHANICAL	FAST WATER HEATER	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

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Permit No.: **20180374**

Issue Date: **11/16/2018**
(Work must be completed within 180 days)

Applicant:

Name: SOUNDBUILT HOMES
Address: PO BOX 73790
PUYALLUP WA 98373

Phone: 253-848-0820

Property Information:

Site Address: 9972 DAIN ST SE Owner: SOUNDBUILT HOMES

Assessor Parcel No.: _____ Subdivision: _____ Lot: 247

Contractor Information:

Name: SOUNDBUILT HOMES
Address: PO BOX 73790
PUYALLUP WA 98373

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: NEW RESIDENTIAL BUILDING

Description of Work: NEW SINGLE FAMILY RESIDENTIAL LOT 247 PLAN 2048A.

Sq. Ft. per floor:	First	<u>825</u>	Heat Type (Electric, Gas, Other): <u>GAS</u>
	Second	<u>1223</u>	
	Third	_____	
	Garage	<u>386</u>	
	Basement	_____	

Fees:

Item	Contractor	Fees
NEW RESIDENTIAL BUILDING	SOUNDBUILT HOMES	\$23,744.30
MECHANICAL	SOUNDBUILT HOMES	\$ 68.75
PLUMBING	SOUNDBUILT HOMES	\$ 125.00

TOTAL FEES: \$ 23,938.05

Applicant's Affidavit:

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Permit No.: **20180376**

Issue Date: **11/15/2018**
(Work must be completed within 180 days)

Applicant:

Name: SUNSET AIR INC
Address: 5210 LACEY BLVD.
LACEY WA 98503

Phone: 360-456-4956

Property Information:

Site Address: 16126 PRAIRIE CREEK LP SE Owner: KYLE CASE

Assessor Parcel No.: 69240001600 Subdivision: _____ Lot: _____

Contractor Information:

Name: SUNSET AIR INC
Address: TERRY MEDLOCK
5210 LACEY BLVD.
LACEY WA 98503

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REPLACE GAS FURNACE, AIR CONDITIONER, AND GAS PIPING TO RANGE AND WATER HEATER

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
MECHANICAL	SUNSET AIR INC	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

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Permit No.: **20180387**

Issue Date: **11/14/2018**

(Work must be completed within 180 days)

Applicant:

Name: BLACK AND WHITE NAIL SPA
Address: YELM WA 98597

Phone: 3608106745

Property Information:

Site Address: 1201 YELM AVE E Owner: LAM NGUYEN

Assessor Parcel No.: 99002065242 Subdivision: _____ Lot: _____

Contractor Information:

Name: BLACK AND WHITE NAIL SPA
Address: YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: SIGN

Description of Work: REPLACE ILLUMINATED EXTERIOR WALL MOUNTED LIMEBERRY SIGN WITH A 2' X 10' EXTERIOR ILLUMINATED WALL MOUNTED SIGN FOR BLACK AND WHITE NAIL SPA

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
SIGN	BLACK AND WHITE NAIL SPA	\$ 125.00
TOTAL FEES:		\$ 125.00

Applicant's Affidavit:

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Permit No.: **20180388**

Issue Date: **11/15/2018**
(Work must be completed within 180 days)

Applicant:

Name: THUNDER FIREWORKS
Address: MCKENNA WA 98558

Phone: _____

Property Information:

Site Address: **906 YELM AVE E** Owner: YELM PLAZA LLC

Assessor Parcel No.: 22730110204 Subdivision: YELM PLAZA Lot: _____

Contractor Information:

Name: THUNDER FIREWORKS
Address: MCKENNA WA 98558

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: FIRE WORKS

Description of Work: RETAIL SALES OF 1.4 G CONSUMER FIREWORKS CLASS C

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
FIRE	THUNDER FIREWORKS	\$ 35.00
TOTAL FEES:		\$ 35.00

Applicant's Affidavit:

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Permit No.: **20180389**

Issue Date: **11/15/2018**

(Work must be completed within 180 days)

Applicant:

Name: YELM PROFESSIONAL PARK

Phone: 3604814402

Address: YELM WA 98597

Property Information:

Site Address: **209 CULLENS ST**

Owner: STEPHEN SMITH

Assessor Parcel No.: _____ Subdivision: _____ Lot: _____

Contractor Information:

Name: YELM PROFESSIONAL PARK

Phone: _____

Address: YELM WA 98597

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: DEMOLITION

Description of Work: DEMOLITION OF A MANUFACTURED HOME AND GARAGE

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
DEMOLITION	YELM PROFESSIONAL PARK	\$ 50.00
TOTAL FEES:		\$ 50.00

Applicant's Affidavit:

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Permit No.: **20180390**

Issue Date: **11/15/2018**
(Work must be completed within 180 days)

Applicant:

Name: WHITE HORSE TAVERN
Address: YELM WA 98597

Phone: _____

Property Information:

Site Address: **107 YELM AVE E** Owner: **KYLE PHILLIPS**

Assessor Parcel No.: _____ Subdivision: _____ Lot: _____

Contractor Information:

Name: WHITE HORSE TAVERN
Address: YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: OTHER SPECIAL EVENT

Description of Work: BEER GARDEN 11/16/18 - 11/30/18

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
SE	WHITE HORSE TAVERN	\$ 0.00
TOTAL FEES:		\$ 0.00

Applicant's Affidavit:

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Permit No.: **20180391**

Issue Date: **11/15/2018**

(Work must be completed within 180 days)

Applicant:

Name: YELM REFRIGERATION
Address: 22435 VALE CT SE
YELM WA 98597

Phone: _____

Property Information:

Site Address: **601 YELM AVE E.**

Owner: TYPE CURRENT OWNER
NAME

Assessor Parcel No.: _____ Subdivision: _____ Lot: _____

Contractor Information:

Name: YELM REFRIGERATION
Address: 22435 VALE CT SE
YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REPLACE BROKEN FURNACE AND A/C.

Sq. Ft. per floor:	First	_____	Heat Type (Electric, Gas, Other):	_____
	Second	_____		
	Third	_____		
	Garage	_____		
	Basement	_____		

Fees:

Item	Contractor	Fees
MECHANICAL	YELM REFRIGERATION	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

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Permit No.: **20180392**

Issue Date: **11/19/2018**
(Work must be completed within 180 days)

Applicant:

Name: LACEY ROOFING INC
Address: 3505 STOLL RD SE
OLYMPIA WA 98509

Phone: 360-943-4232

Property Information:

Site Address: 14636 BERRY VALLEY RD SE Owner: RANDY THOMPSON

Assessor Parcel No.: 21724240201 Subdivision: _____ Lot: _____

Contractor Information:

Name: LACEY ROOFING
Address: PO BOX 5550
LACEY WA 98509

Phone: 360-943-4232

Contractor License No.: LACEYRL928MJ Expires: 8/30/2012

Project Information:

Project: ROOF

Description of Work: TEAR-OFF AND RE-ROOF

Sq. Ft. per floor:

First	_____	Heat Type (Electric, Gas, Other):	_____
Second	_____		
Third	_____		
Garage	_____		
Basement	_____		

Fees:

Item	Contractor	Fees
ROOF	LACEY ROOFING INC	\$ 25.00
TOTAL FEES:		\$ 25.00

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____

Firm _____

OFFICIAL USE ONLY
Sets of Prints: _____
Final Inspection:
Date: _____
By: _____



City of Yelm

Community Development Department

Building Division

Phone: (360) 458-8407

Fax: (360) 458-3144

Permit No.: **20180393**

Issue Date: **11/19/2018**
(Work must be completed within 180 days)

Applicant:

Name: DB&R
Address: 316 JACKSON ST.
CENTRALIA WA 98531

Phone: 360-269-3877

Property Information:

Site Address: **1502 YELM AVE W 2**

Owner: TYPE CURRENT OWNER NAME

Assessor Parcel No.: _____ Subdivision: _____ Lot: _____

Contractor Information:

Name: DB&R
Address: 316 JACKSON ST.
CENTRALIA WA 98531

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: BUILDING

Description of Work: MANUFACTURED HOME FOUNDATION PERMIT

Sq. Ft. per floor:	First	_____	Heat Type (Electric, Gas, Other):	_____
	Second	_____		
	Third	_____		
	Garage	_____		
	Basement	_____		

Fees:

Item	Contractor	Fees
BUILDING	DB&R	\$ 150.00
TOTAL FEES:		\$ 150.00

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____

Firm _____

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By: _____



City of Yelm

Community Development Department

Building Division

Phone: (360) 458-8407

Fax: (360) 458-3144

Permit No.: **20180394**

Issue Date: **11/29/2018**
(Work must be completed within 180 days)

Applicant:

Name: CLEARVIEW EXTERIORS
Address: PO BOX 2576
YELM WA 98597

Phone: _____

Property Information:

Site Address: **306 SECOND ST NE** Owner: **DEBBIE GAUNT**

Assessor Parcel No.: _____ Subdivision: _____ Lot: _____

Contractor Information:

Name: CLEARVIEW EXTERIORS
Address: PO BOX 2576
YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: ROOF

Description of Work: RESIDENTIAL ROOFING

Sq. Ft. per floor: First Heat Type (Electric, Gas, Other): _____
Second _____
Third _____
Garage _____
Basement _____

Fees:

Item	Contractor	Fees
ROOF	CLEARVIEW EXTERIORS	\$ 25.00
TOTAL FEES:		\$ 25.00

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____

Firm _____

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By: _____



City of Yelm

Community Development Department

Building Division

Phone: (360) 458-8407

Fax: (360) 458-3144

Permit No.: **20180395**

Issue Date: **11/20/2018**
(Work must be completed within 180 days)

Applicant:

Name: CAPITAL HEATING AND COOLING
Address: 1218 CARPENTER RD
LACEY WA 98503

Phone: 360-946-2787

Property Information:

Site Address: **10541 FARWEST CT SE** Owner: CINDY BARRETT

Assessor Parcel No.: 65080002000 Subdivision: _____ Lot: _____

Contractor Information:

Name: CAPITAL HEATING AND COOLING
Address: 1218 CARPENTER RD
LACEY WA 98503

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: MECHANICAL

Description of Work: REPLACE GAS FURNACE

Sq. Ft. per floor: First Heat Type (Electric, Gas, Other): _____
Second _____
Third _____
Garage _____
Basement _____

Fees:

Item	Contractor	Fees
MECHANICAL	CAPITAL HEATING AND COOLING	\$ 29.50
TOTAL FEES:		\$ 29.50

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____

Firm _____

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Final Inspection:
Date: _____
By: _____



City of Yelm

Community Development Department

Building Division

Phone: (360) 458-8407

Fax: (360) 458-3144

Permit No.: **20180396**

Issue Date: **11/21/2018**
(Work must be completed within 180 days)

Applicant:

Name: FULL SPECTRUM RENOVATIONS
Address: YELM WA 98597

Phone: 360-960-9008

Property Information:

Site Address: 16126 PRAIRIE CREEK LP SE Owner: KYLE CASE

Assessor Parcel No.: 69240001600 Subdivision: _____ Lot: _____

Contractor Information:

Name: FULL SPECTRUM RENOVATIONS
Address: YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: RESIDENTIAL REMODEL

Description of Work: remodel kitchen, build pantry, move kitchen-garage door, build laundry room in garage, build hall closet, remodel master closet and master bath, relocate gas line

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
BUILDING	FULL SPECTRUM RENOVATIONS	\$ 490.36
MECHANICAL	FULL SPECTRUM RENOVATIONS	\$ 26.50
TOTAL FEES:		\$ 516.86

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____
Firm _____

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Sets of Prints: _____

Final Inspection:

Date: _____

By: _____



City of Yelm

Community Development Department

Building Division

Phone: (360) 458-8407

Fax: (360) 458-3144

Permit No.: **20180399**

Issue Date: **11/27/2018**
(Work must be completed within 180 days)

Applicant:

Name: CHRIS WALKER
Address: 10445 YELM TERRA ST SE
YELM WA 98597

Phone: 253-678-4714

Property Information:

Site Address: 10445 YELM TERRA ST SE Owner: _____

Assessor Parcel No.: 85840003100 Subdivision: _____ Lot: _____

Contractor Information:

Name: CHRIS WALKER
Address: 10445 YELM TERRA ST SE
YELM WA 98597

Phone: _____

Contractor License No.: _____ Expires: 0/00/0000

Project Information:

Project: HOME OCCUPATION PERMIT

Description of Work:

Sq. Ft. per floor:	First	Heat Type (Electric, Gas, Other):	_____
	Second		_____
	Third		_____
	Garage		_____
	Basement		_____

Fees:

Item	Contractor	Fees
HOME OCCUPATON PERMIT	CHRIS WALKER	\$ 125.00
TOTAL FEES:		\$ 125.00

Applicant's Affidavit:

I certify that I have read and examined the information contained within the application and know the same to be true and correct. I also certify that the proposed structure is in conformity with all applicable City of Yelm regulations including those governing zoning and land subdivision, and in addition, all covenants, easements and restrictions of record. If applying as a contractor, I further certify that I am currently registered in the State of Washington.

Signature _____ Date _____

Firm _____

OFFICIAL USE ONLY
Sets of Prints: _____
Final Inspection:
Date: _____
By: _____