

**CITY OF CASTLE ROCK**

DEPARTMENT OF BUILDING AND PLANNING  
City Hall, P.O. Box 370 / 141 "A" Street, Castle Rock, WA 98611  
Phone: (360) 274-8181 FAX: (360) 274-4876

CR

**MASTER APPLICATION**

PLEASE PRINT IN INK OR TYPE

**PROPERTY INFORMATION**

Project Address \_\_\_\_\_ City \_\_\_\_\_ Parcel # \_\_\_\_\_

Short Plat/Subdivision \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**OWNER/APPLICANT INFORMATION**

Applicant/Authorized Agent \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Property Owner \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contractor Name \_\_\_\_\_ Lic # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Lending Institution Information:

Lender Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_

Lender's Address: \_\_\_\_\_

**PROJECT INFORMATION**

**Building/Construction**

- Building Permit
- Manufactured/Structure Placement
- Plumbing Permit
- Mechanical Permit
- Excavation & Grading Permit
- Roofing Permit
- Signage Permit
- Other

**Planning**

- Site Plan (Preliminary)
- Site Plan (Final)
- Critical Areas
- Flood Plain
- Master Plan
- Mobile Home Park
- Plat (Preliminary)
- Plat (Final)

**Environmental**

- SEPA
- Flood Plain Permits
- Critical Areas
- Surface Mining
- Other

**PROJECT DESCRIPTION**

Occupancy Group \_\_\_\_\_ Type of Construction \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ No. of Stories \_\_\_\_\_ No. of Bedrooms \_\_\_\_\_

Is there any grading, filling, or excavation associated with this project? \_\_\_\_\_ Quantity (cubic yards): \_\_\_\_\_  
(Include grading for road construction, site preparation, and landscaping.) **NO SITE WORK MAY BE DONE PRIOR TO CRITICAL AREAS DETERMINATION.**

Water Supply \_\_\_\_\_ Sewage Disposal \_\_\_\_\_ Type of Heat \_\_\_\_\_ Fair Mkt. Value \_\_\_\_\_

Does project involve asbestos?  Yes  No

**PLEASE PROVIDE A BASIC DESCRIPTION OF THE PROPOSED PROJECT:**

I hereby certify that I am the owner or duly authorized agent of the owner for the purposes of this application. I further certify that I have read and examined this application and know the same to be true and correct. If any of the information provided on this application is incorrect, the permit or approval may be revoked.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

A SITE PLAN REVIEW IS:  REQUIRED  NOT REQUIRED STAFF INITIALS \_\_\_\_\_

APPLICATION ACCEPTED BY \_\_\_\_\_ DATE \_\_\_\_\_

Application Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

PERMIT NUMBER CR \_\_\_\_\_

Initials

