



City of Castle Rock

Department Of Building and Planning
City Hall, PO Box 370 / 141 'A' St SW, Castle Rock, WA 98611
Phone: 360.274.8181 / Email: finance@ci.castle-rock.wa.us

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PLEASE PRINT IN INK OR TYPE

MASTER APPLICATION

PROPERTY INFORMATION

Project Address: City: Parcel #:
Short Plat/Subdivision: Block: Lot:

OWNER/APPLICANT INFORMATION

Applicant/Authorized Agent: Phone:
Mailing Address: City: State: Zip:
Property Owner: Phone:
Mailing Address: City: State: Zip:
Contractor: Lic #: Phone:
Mailing Address: City: State: Zip:
Lender Name: Phone:
Lender's Address:

PROJECT INFORMATION

- Building/Construction: Building Permit, Excavation & Grading Permit, etc.
Planning: Critical Areas, Flood Plain, Master Plan, etc.
Environmental: Critical Areas, Flood Plain Permits, SEPA, etc.

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?
Water Supply: Sewage Disposal: Type of Heat: Fair Market 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. Further, I grant permission from the owner to any and all employees and representatives of the City of Castle Rock and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application.

APPLICANT'S SIGNATURE: DATE:
APPLICATION ACCEPTED BY: DATE:
APPLICATION APPROVED BY: DATE:

PERMIT NUMBER
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