Public Works Application Cover Sheet

Permit Number: _______________________
Assoc. Permits: _______________________

Please read and follow all instructions on your application, submittal checklists and/or applicable supplemental forms carefully. Staff will not process incomplete applications. Please print or type legibly.

- Cross Connection Control
- Critical Areas Permit
- Fire Hydrant Inspection
- Grading
- Grease Interceptor
- House Moving
- Industrial Waste, Discharge
- Industrial Waste, Limited Discharge
- Right-of-Way Use
- Right-of-Way Vacation
- Road Improvement
- Sanitary Sewer System, Public
- Sanitary Sewer System, Private
- Sewer Capping
- Storm Drainage
- Tree Removal – Class I
- Tree Removal – Class II
- Water Main/Service
- Water Meter Installation
- Water Use
- Weekend Work Approval

Description of Work:

Site Address/Location:

| Subdivision: | Lot No.: |

Property Owner Name:

| Address: | Phone: |
| City: | State: | Zip: | Fax: |

E-Mail:

Contractor Name:

| Address: | Phone: |
| City: | State: | Zip: | Fax: |

State Contractor’s License Number: City Business License Number:

Contact Person, if different:

| Phone: |

E-Mail:

| Cell: |

Subcontractor Name:

| Phone: |

State Contractor’s License Number: City Business License Number:

I/We certify that the information provided in this application, including all submittals and attachments, is true and correct to the best of my/our knowledge. This application does not constitute approval of permits and/or work to be performed. For specific fee information, see LMC 3.104 or check the fee schedule available online or at our office.

Signature of Applicant/Agent: _______________________
Date: _______________________

Signature of Property Owner: _______________________
Date: _______________________

Please call 425-670-8337 by 3:00 PM for next business day inspection.
A Industrial Waste Discharge or Industrial Waste Limited Discharge Application shall include the following information, unless specifically waived by the Public Works Director.

**REQUIRED ITEMS – DISCHARGE AND LIMITED DISCHARGE**

- [ ] 1. Public Works Application Cover Sheet.
- [ ] 2. A baseline monitoring report completed by a Washington State-licensed testing lab.
- [ ] 4. All other information required by State or Federal agencies.
- [ ] 5. Application fee.

**ADDITIONAL REQUIRED ITEMS – DISCHARGE ONLY**

- [ ] 6. Identification of applicable Categorical Pretreatment Standards by the United States Environmental Protection Agency.

**FEES**

See LMC 3.104 or contact our office for current fee information.

**NOTES**

1. The approval of an Industrial Waste Discharge or Industrial Waste Limited Discharge Permit does not in any way replace, modify or waive any requirement for the compliance of the proposal with other applicable codes, standards, or regulations including, but not necessarily limited to, those of the Community Development, Fire or Public Works Departments. You are advised to contact these departments concerning such requirements.

2. Items with any typewritten information must be 10-point font or larger to ensure legibility of scanned documents.

3. An application may be amended only in writing.

4. Submittal of this application grants the appropriate city officials the right of entry to the project site during a reasonable hour and, upon proper identification, to the building, structure and/or premise, which is directly related to this application.

5. It is the responsibility of the owners, applicants and agents to become aware of the requirements of the Lynnwood Municipal Code.

It is the responsibility of the applicant to contact the Underground Location Center at 1-800-424-5555 (or dial 811) **48 hours prior** to starting work.

I/We certify that the information provided in this application, including all submittals and attachments, is true and correct to the best of my/our knowledge. This application does not constitute approval of permits and/or work to be performed. For specific fee information, see LMC 3.104 or check the fee schedule available online or at our office.

Signature of Applicant/Agent: ___________________________ Date: __________

Signature of Property Owner: ___________________________ Date: __________