



**FOR OFFICE USE ONLY:**  
 Permit#: \_\_\_\_\_  
 Project #: \_\_\_\_\_

Application Date: \_\_\_\_\_

Community Development  
 1000 Laurel Street  
 Milton, WA 98354  
 Phone: 253-922-8738

[www.cityofmilton.net](http://www.cityofmilton.net)

**City of Milton  
 CIVIL PERMIT APPLICATION**

**#1 (Please check all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Civil Site Approval | <input type="checkbox"/> Water Main Extension |
| <input type="checkbox"/> Water System        | <input type="checkbox"/> Storm Water          |

**#2 - PROJECT**

Site Address: \_\_\_\_\_ Project #: \_\_\_\_\_  
 Tax Parcel Number(s): \_\_\_\_\_ Current Zoning: \_\_\_\_\_

**#3 - DESCRIPTION OF WORK (ATTACH A SEPARATE SHEET, IF NEEDED)**

Description of Work: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**#4 - PROPERTY OWNER/\*CONTACT INFORMATION (\*This person is designated to receive all Project communications )**

**Applicant:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

**Lien Holder:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

**CONTACT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_  
**COMPANY:** \_\_\_\_\_

**#5 - CONTRACTOR INFORMATION**

**Contractor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Contractor's License #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_  
**UBI #:** \_\_\_\_\_ **City of Milton Business License #** \_\_\_\_\_

**#6 - ARCHITECT/DESIGNER & ENGINEER INFORMATION**

**Architect/Designer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Engineer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**#7 - CIVIL/STORMWATER PERMIT CHECKLIST:**

**Project Number:** \_\_\_\_\_

- THREE (3) complete sets of all required drawings. Please include electronic versions, via flash drive.
  - Minimum plan sheet size shall be 24 x 32 inches
  - Minimum scale is 1 to 20 unless otherwise authorized
  - Plans shall be prepared by a certified professional engineer, surveyor or landscape architect (licensed in the State of Washington) unless otherwise authorized
  
- TWO (2) copies of all reports, SWPPPs and O & M manuals (if applicable)
  - Name and Phone Number of TESC Lead: \_\_\_\_\_
  
  - Total area of Impervious Surface added: \_\_\_\_\_

*This may not be a complete list of requirements. Please refer to the City of Milton Development Guidelines and Public Works Standards, the Milton Municipal Code and the Department of Ecology's Storm Water Management Manual for Western Washington for guidance on complete submittals.*

**#8 - NOTICE**

*I hereby certify, under penalty of perjury, that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of the permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.*

\_\_\_\_\_  
**Signature of Owner/Contractor/Authorized Agent**

\_\_\_\_\_  
**Date**

**#9 - STAFF COMMENTS**
