

# 410

## CITY OF KENMORE, WA PLUMBING CHECKLIST

18120 68<sup>th</sup> Ave NE, Kenmore, WA 98028

425-398-8900

www.kenmorewa.gov

A Permit Application needs to be completed and submitted with this checklist. This checklist identifies the minimum requirements and number of copies the applicant must submit for the City of Kenmore to accept the application. Should any of the following minimum items not be provided, the application will not be accepted at the counter. Acceptance does not deem the application complete.

Permit #:	Related permits:	STAFF USE AREA          Date Stamp
<b>1</b> Project Name: _____ Lot #: _____		
Property Address: _____		
Project valuation: _____		

<b>2</b>							
Fixture(s)	New or Moved	Existing	Sub-total	Fixture units*	Sub-total Fixture units		
Bathtub	+	=	x	4.0	=		
Clothes washer	+	=	x	4.0	=		
Dishwasher	+	=	x	1.5	=		
Drinking fountain	+	=	x	0.5	=		
Hose bibb (1 <sup>st</sup> )	+	=	x	2.5	=		
Hose bibb (each add)	+	=	x	1.0	=		
Ice machine	+	=	x	0.5	=		
Lavatory	+	=	x	1.0	=		
Lawn sprinkler head	+	=	x	1.0	=		
Mop sink	+	=	x	1.5	=		
Sink	+	=	x	1.5	=		
Shower	+	=	x	2.0	=		
Toilet (w/tank)	+	=	x	2.5	=		
Other	+	=	x		=		
Other	+	=	x		=		
Toilet (w/flushometer)	+	=	x		=		
Urinal (w/flushometer)	+	=	x		=		
Backflow preventer				<b>Total Fixture Units*</b>		Applicant	Staff
Floor sink				Distance from meter to most remote fixture			
Grease interceptor				Elevation difference from meter to highest fixture			
Medical gas outlet				Pressure in street main (measure w/gauge or check with NUD)			
Pressure reducer				New or Existing Building domestic water supply size			
Roof drain (flat roof)				New or Existing Water meter size			
Water heater (electric)							
Other							
Other							
<b>Total proposed fixtures</b>							

\* = see notes

**3 Submittal Requirements for Commercial and Multi-family.** Plans must be submitted for review and approval whenever the scope of work is too complex for inspection alone as determined by the building official. Applicant, please check each box under the applicant heading on this checklist to confirm items included in your submittal. If you think an item is not applicable, you must contact the appropriate department prior to your intake, to have the item(s) initialed as not required. The **minimum scale** for drawings is ¼" = 1 foot.

Appl.	Staff		# of Copies
<input type="checkbox"/>	<input type="checkbox"/>	A completed permit application (one for each building and/or accessory structure)	1
<input type="checkbox"/>	<input type="checkbox"/>	Construction plans with (floor plan with piping layout and isometric or elevation plan):	2
		<ul style="list-style-type: none"> <li>▪ Location of appliances, appurtenances, fixtures, and valves</li> <li>▪ Pipe sizes and lengths</li> <li>▪ Pipe materials identified</li> <li>▪ Hangers and supports specified</li> <li>▪ Water usage of fixtures specified</li> <li>▪ Cross connection control detailed</li> <li>▪ Anchorage of appliance or equipment detailed</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	For grease interceptor:	2
		<ul style="list-style-type: none"> <li>▪ Provide size calculations (see UPC Table 10-2 or 10-3)</li> <li>▪ Detail installation</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	For roof drainage system:	2
		<ul style="list-style-type: none"> <li>▪ Provide roof plan showing locations of drains</li> <li>▪ Pipe sizes, lengths and material identified</li> <li>▪ Overflow detailed</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	For medical gas systems:	2
		<ul style="list-style-type: none"> <li>▪ Floor plans with locations of equipment and cylinders and compressed air, gas and vacuum systems</li> <li>▪ Detail enclosure construction and ventilation</li> <li>▪ Specify pipe sizes, materials, identifications, hangers and supports</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	Structural calculations for both gravity and lateral supports and anchorage on equipment weighing 400 lbs or more.	2
<b>4</b>		<p><b>* NOTES:</b></p> <ul style="list-style-type: none"> <li>▪ Manufacturer's specifications and installation instructions should be submitted for each appliance.</li> <li>▪ Plumbing Code Appendix A may be used to size the plumbing system.</li> <li>▪ Where plan checks are performed a plan check fee of 65% of the permit fee will be assessed.</li> <li>▪ A 3% technology fee applies to plan check and permit fees.</li> <li>▪ For applications received at the permit counter payments shall be cash or check only. Online submittals received via <a href="http://www.mybuildingpermit.com">www.mybuildingpermit.com</a> can be paid for with a credit or debit card.</li> </ul>	