



**CITY OF TUKWILA**  
 Community Development Department  
 Permit Center  
 6300 Southcenter Blvd., Suite 100  
 Tukwila, WA 98188  
<http://www.TukwilaWA.gov>

<b>Mechanical Permit No.</b> _____ Project No. _____ Date Application Accepted: _____ Date Application Expires: _____ (For office use only)
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## MECHANICAL PERMIT APPLICATION

Applications and plans must be complete in order to be accepted for plan review.  
 Applications will not be accepted through the mail or by fax.  
 \*\*please print\*\*

<b>SITE LOCATION</b>
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King Co Assessor's Tax No.: \_\_\_\_\_

Site Address: \_\_\_\_\_ Suite Number: \_\_\_\_\_ Floor: \_\_\_\_\_

Tenant Name: \_\_\_\_\_ **New Tenant:**  .....Yes  ..No

<b>PROPERTY OWNER</b>		
Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____

<b>MECHANICAL CONTRACTOR INFORMATION</b>		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	
Contr Reg No.: _____	Exp Date: _____	
Tukwila Business License No.: _____		

<b>CONTACT PERSON – person receiving all project communication</b>		
Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	
Email: _____		

Valuation of project (contractor's bid price): \$ \_\_\_\_\_

Describe the scope of work in detail:

Use: Residential: New .....  Replacement .....   
 Commercial: New .....  Replacement .....

Fuel Type: Electric .....  Gas .....  Other: \_\_\_\_\_

Indicate type of mechanical work being installed and the quantity below:

Unit Type	Qty
Furnace <100k btu	
Furnace >100k btu	
Floor furnace	
Suspended/wall/floor mounted heater	
Appliance vent	
Repair or addition to heat/refrig/cooling system	
Air handling unit <10,000 cfm	

Unit Type	Qty
Air handling unit >10,000 cfm	
Evaporator cooler	
Ventilation fan connected to single duct	
Ventilation system	
Hood and duct	
Incinerator – domestic	
Incinerator – comm/industrial	

Unit Type	Qty
Fire damper	
Diffuser	
Thermostat	
Wood/gas stove	
Emergency generator	
Other mechanical equipment	

Boiler/Compressor	Qty
0-3 hp/100,000 btu	
3-15 hp/500,000 btu	
15-30 hp/1,000,000 btu	
30-50 hp/1,750,000 btu	
50+ hp/1,750,000 btu	

**Noise:**

Mechanical units need to be in compliance with the Tukwila Noise Code. Maximum permissible sound levels are based on from where the sound is created and where the sound is heard. Additionally, if sound can be heard from within a house at night in a residential zone it may not be allowed. For more details, see TMC 8.22

District of Sound Producing Source	District of Receiving Property			
	Residential, Daytime*	Residential, Nighttime	Commercial	Industrial
Residential	55 dB(A)	45 dB(A)	57 dB(A)	60 dB(A)
Commercial	57 dB(A)	47 dB(A)	60 dB(A)	65 dB(A)
Industrial	60 dB(A)	50 dB(A)	65 dB(A)	70 dB(A)

\*Daytime means 7AM-10PM, Monday through Friday and 8AM-10PM, Saturday, Sunday and State-recognized holidays.

A few sounds are exempt from the noise code, including:

- Warning devices;
- Construction and property maintenance during the daytime hours (7am-10pm);
- Testing of backup generators during the day.

**PERMIT APPLICATION NOTES -**

**Value of construction** – in all cases, a value of construction amount should be entered by the applicant. This figure will be reviewed and is subject to possible revision by the permit center to comply with current fee schedules.

**Expiration of plan review** – applications for which no permit is issued within 180 days following the date of application shall expire by limitation. The building official may grant one extension of time for additional periods not to exceed 90 days each. The extension shall be requested in writing and justifiable cause demonstrated. Section 105.3.2 International Building Code (current edition).

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE UNDER PENALTY OF PERJURY BY THE LAWS OF THE STATE OF WASHINGTON, AND I AM AUTHORIZED TO APPLY FOR THIS PERMIT.

**BUILDING OWNER OR AUTHORIZED AGENT:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Day Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City State Zip