



CITY OF KIRKLAND MECHANICAL PERMIT APPLICATION

City of Kirkland 123 5th Avenue Kirkland, WA. 98033 425-587-3600

Permit # MNR14-07517

MECP 14-02452

Site Address: - PLEASE PRINT -

Project Name:

#1 12618 TOTEM LAKE BLVA
KIRKLAND, WA 98034
Property Owner TOTEM NVO, LLC Phone 425 823 2517
Property Owner's Address 12618 TOTEM LAKE BLVA City, Zip Code KIRKLAND, WA 98034
Describe Job to be Done INSTALL AIR DUCTING FOR NAIL TABLES
N/A

#2 ADKCO Contractor's Name ADKCO, LLC Contractor's Reg. # ADKCL*871PZ
(Company Name) Expiration Date 10/09/15
Contractor's Address 23423 -14TH AVE SOUTH State UBI # 603 333 690
City, Zip Code DES MOINES, WA 98198 Phone 206 412-1975

(T-Stat Electrical Control Wire ONLY)
Electrical Contractor's Name N/A Electrical Contractor's Reg. # N/A
(Company Name) Expiration Date

I have read Chapter RCW 18.27.010 relating to definitions of general contractors and specialty contractors and RCW Chapter 18.27.110, which prohibits issuing permits without proof of registration. OWNER/CONTRACTOR SIGNATURE: 206

#3 Contact Person AMYL LE Daytime Phone 206 883-5547
Address 12513 125TH AVE NE Alt. Phone
City KIRKLAND State WA ZIP 98034 Fax # KNONE
Email AMYL5NAILS81@GMAIL.COM

#4 Property Tax Account Number (Parcel Number) TOTEM LAKE SHOPPING CENTER
SUITE R-28

#5 Estimated cost, mechanical portion only \$8,000.00

#6 FILL IN FOR ONE AND TWO FAMILY DWELLINGS ONLY. MECHANICAL FIXTURES INCLUDING ROUGH-INS

Move	New	Yes/No		Fuel Type	BTU/KW	Move	New		Fuel Type	BTU/KW
			Water Heater (gas)					Furnace		
			Cooktop /Oven					Gas Unit/Wall Heater		
			Range					T-Stat Control wire		
			BBQ					Wood Stove/Fireplace		
			Clothes Dryer (gas)					Gas Fireplace/Insert		
			Gas Outlets not assoc. w/appliance					Log Lighter		
			Gas Piping not assoc. w/appliance					Heat Pump		
			Duct System					Air Conditioner		
		X	Ventilation System <u>FOR NAIL TABLES</u>					Boiler		

#7 By signing this application, I authorize employees/agents of the City of Kirkland to enter onto the property which is the subject of this application during regular business hours. The sole purpose of entry is to make any examination of the property which is necessary to process this application.

I certify under penalty of perjury that the information furnished by me is true and correct to the best of my knowledge and, further, that I am authorized by the owner of the above premises to perform the work for which permit application is made. I further agree to save harmless the City of Kirkland as to any claim (including costs, expenses, and attorney's fees incurred in investigation and defense of such claim), which may be made by any person, including the undersigned, and filed against the City of Kirkland, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information supplied to the City as a part of this application.

OWNER/AGENT: [Signature] DATE: 12-15-2014

City Website: www.ci.kirkland.wa.us Permit Information: www.kirklandpermits.net

NOTE: Permit Applications not requiring plan review are accepted Monday-Tuesday-Thursday-Friday 8-4:30, Wednesday 10:30-4:30

Permit Applications requiring plan review are accepted Monday-Tuesday-Thursday-Friday 8-4:00, Wednesday 10:30-4:00

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MECHANICAL PERMIT APPLICATION REQUIREMENT CHECKLIST

The following items must be provided in order to properly apply for a building permit.
PLANS AND APPLICATION CANNOT BE ACCEPTED IF INFORMATION IS INCOMPLETE.

1. Indicate mechanical unit location(s) on the roof plan.
2. Structural design calculations are required by a licensed architect or engineer to verify the adequacy of the roof to support the unit. Lateral calculations are required if units weigh over 400 pounds.
3. Submit documentation showing compliance with W.S.E.C. and V.I.A.Q.
4. **Screening may be required.** Contact the Planning Department 425-587-3225. If screening is required, **plans and engineering must be included with this application.**
5. Rooftop mechanical equipment requires screening that is architecturally compatible with the building if the equipment extends above the roofline.
6. Equipment requires 110 volt outlets within 25 feet of unit and disconnects outside the equipment.
7. If over 2,000 cfm, indicate that equipment must shut down with activation of fire alarm system (duct detectors or fire alarm system).
8. Commercial kitchen equipment must comply with IMC Section 507 and 508.
9. If mechanical equipment is ground-mounted, then a site plan drawn to scale showing building footprint and equipment location relative to building and property lines. Show location of adjacent streets, alleys, or access tracts or easements. Include dimensions from mechanical unit(s) to all property lines and structures. (Example drawn below.)
10. Contractor's UBI number and a copy of contractor's registration card are required prior to permit issuance.
11. Total project cost.
12. Information showing compliance with noise standards at the property line. See Chapter 173-60 WAC for Washington State adopted.
13. Manufacturer's brochure or manual with unit specifications.

