

**CITY OF SPOKANE  
DEPARTMENT OF BUILDING SERVICES  
RELOCATION PERMIT APPLICATION**

808 W SPOKANE FALLS BLVD SPOKANE WA 99201-3343  
**Phone:** 625-6300 **Fax:** (509) 625-6822 [www.buildingspokane.org](http://www.buildingspokane.org)

**THE FOLLOWING ITEMS ARE REQUIRED AND MUST ACCOMPANY THIS APPLICATION:  
 LEGAL ADDRESS SLIP FROM ENGINEERING SERVICES VERIFYING SEWER AND WATER AVAILABILITY  
 TWO (2) COPIES OF THE SITE PLAN**

\_\_\_\_\_  
 OLD ADDRESS STREET NUMBER ZIP

\_\_\_\_\_  
 NEW ADDRESS STREET NUMBER ZIP ZONE PARCEL #

\_\_\_\_\_  
 LEGAL DESCRIPTION # OF SQUARE FEET

PROPOSED USE (I.E. SINGLE FAMILY RESIDENCE, DUPLEX, COMMERCIAL, ETC.) \_\_\_\_\_

**SQUARE FOOTAGE OF BASEMENTS, ADDITIONS ETC., DIMENSIONS OF SLAB/CRAWL SPACE**

MAIN FLOOR	_____	GARAGE	_____
SLAB/CRAWL SPACE	X	UNCOVERED DECK	_____
UNFINISHED BASEMENT	_____	COVERED DECK	_____
FINISHED BASEMENT	_____	CARPORT	_____
2ND/3RD FLOOR	_____	OTHER	_____

A RELOCATION PERMIT APPLICATION COMPLETED IN FULL BY EITHER THE OWNER OF THE PROPERTIES (THE STRUCTURE AND THE LOT ON WHICH IT IS TO BE PLACED) OR A WASHINGTON STATE LICENSED GENERAL CONTRACTOR, A LEGAL ADDRESS SLIP, TWO COPIES OF THE SITE PLAN AND PAYMENT OF THE \$150 FEE BEGIN A PROCESS WHICH INCLUDES:

- A REVIEW BY THE ZONING DEPARTMENT TO APPROVE THE SITE PLAN AND THE PROPOSED USE OF THE STRUCTURE;  
 A REVIEW BY DEVELOPER SERVICES TO APPROVE THE SITE PLAN REGARDING UTILITIES.

- A BUILDING DEPARTMENT INSPECTION OF THE STRUCTURE TO DETERMINE THE COST OF NECESSARY ALTERATIONS AND REPAIRS AND THE VALUE OF ANY NEW CONSTRUCTION, INCLUDING THE PROPOSED FOUNDATION, TO BRING THE STRUCTURE TO PRESENT CODE..

THE CITY REQUIRES A SURETY BOND IN THE AMOUNT DETERMINED BY THE BUILDING DEPARTMENT'S INSPECTION PLUS 25%. IF ALL RELOCATION WORK IS APPROVED AND RESULTS IN A CERTIFICATE OF OCCUPANCY, THE BOND IS RELEASED TO THE APPLICANT. IF THE APPLICANT DEFAULTS, THE BOND FUNDS ARE USED TO COMPLETE THE WORK TO PERMIT CONDITIONS OR DEMOLISH/REMOVE THE STRUCTURE. FUNDS EQUAL TO THE COST PLUS 25% ARE RETAINED BY THE CITY; FUNDS IN EXCESS OF THE COST PLUS 25% ARE RETURNED TO THE APPLICANT. Spokane Municipal Code 10.26

ONCE THE RELOCATION APPLICATION HAS BEEN APPROVED AND THE BOND HAS BEEN RECEIVED BY THE BUILDING DEPARTMENT THE APPLICANT MAY BE ELIGIBLE TO APPLY FOR THE BUILDING, ELECTRICAL, MECHANICAL AND PLUMBING PERMITS REQUIRED TO COMPLETE THE SITE AND STRUCTURAL WORK.

A MOVING PERMIT IS ISSUED BY ENGINEERING SERVICES AFTER THE BUILDING PERMIT IS ISSUED, THE FOUNDATION IS INSPECTED AND APPROVED, AND THE SITE IS PROPERLY PREPARED TO RECEIVE THE RELOCATED STRUCTURE.

**I HAVE READ THE REQUIREMENTS ABOVE AND I AGREE TO COMPLY WITH ALL CONDITIONS.**

\_\_\_\_\_  
 APPLICANT'S SIGNATURE

\_\_\_\_\_  
 STREET ADDRESS

\_\_\_\_\_  
 APPLICANT'S NAME (PLEASE PRINT)

\_\_\_\_\_  
 CITY STATE ZIP

\_\_\_\_\_  
 CONTRACTOR'S LICENSE NUMBER (IF APPLICABLE)

\_\_\_\_\_  
 CONTACT PERSON & PHONE NUMBER

# INSPECTOR'S REPORT - RELOCATION PERMIT

PERMIT NUMBER \_\_\_\_\_ OLD STREET ADDRESS \_\_\_\_\_

BUILDING TYPE \_\_\_\_\_ PROPOSED USE \_\_\_\_\_

ALTERATIONS & REPAIRS AS PROPOSED & REQUIRED

BOND AMOUNT

## BUILDING

FOUNDATION \$30.00 x \_\_\_\_\_ LINEAR FEET \_\_\_\_\_

UNFINISHED BASEMENT \$22.50 X \_\_\_\_\_ SQ FT \_\_\_\_\_

FINISHED BASEMENT \$30.20 X \_\_\_\_\_ SQ FT \_\_\_\_\_

ROUGH CARPENTRY \_\_\_\_\_

REPAIRS \_\_\_\_\_

FINISH CARPENTRY \_\_\_\_\_

ROOFING (\$ 250.00 X \_\_\_\_\_ SQUARE) \_\_\_\_\_

SIDING (\$ \_\_\_\_\_ X \_\_\_\_\_ SQ FT) \_\_\_\_\_

SITE WORK/GRADING \_\_\_\_\_

## ELECTRICAL

ROUGH-IN, NEW SQUARE FOOTAGE \_\_\_\_\_

REPAIRS \_\_\_\_\_

SERVICE \_\_\_\_\_

FINISH WORK \_\_\_\_\_

## MECHANICAL

ROUGH-IN: PIPING, DUCT WORK, VENTS, ETC. \_\_\_\_\_

REPAIRS \_\_\_\_\_

FINISH \_\_\_\_\_

## PLUMBING

UNDERGROUND \_\_\_\_\_

ROUGH-IN \_\_\_\_\_

REPAIRS \_\_\_\_\_

FINISH \_\_\_\_\_

WATER TAP/METER PERMITS REQUIRED BY ENGINEERING SERVICES \$ 2,150.00 \_\_\_\_\_

SEWER/SEWER CONNECT PERMITS REQUIRED BY ENGINEERING SERVICES \$ 1,700.00 \_\_\_\_\_

BOND AMOUNT SUB TOTAL \_\_\_\_\_

PLUS 25% \_\_\_\_\_

TOTAL BOND REQUIRED \_\_\_\_\_

DATE \_\_\_\_\_

INSPECTOR'S SIGNATURE \_\_\_\_\_

PLEASE RETURN COMPLETED FORM TO PERMIT CLERK