COMMERCIAL RE-ROOF
COMMUNITY DEVELOPMENT
BUILDING DIVISION

806 WEST MAIN STREET • MONROE, WA 98272
City Hall 360.794.7400• Fax 360.794.4007

INSTRUCTIONS:

Below is a checklist of items that must be submitted as part of your application for a Commercial Re-Roof permit. The replacement of any and all structural members and sheathing must be inspected by the City Building Inspector prior to cover. Numbers in parenthesis equal the number of copies required.

If you have any questions about what is required, or if you would like to schedule an intake appointment, please call the 360.863.4527.

SUBMITTAL CHECKLIST

- ◊ (1) Original of the Combined Permit Application form
- ◊ (2) site plan
- ◊ (2) roof plan with existing information
  - ◊ Building type of construction and information on type of roofing being applied and any underlying materials that will be applied underneath
- ◊ (2) structural calculations (if applicable)
- ◊ Current copy of Labor & Industries contractor's license

Adopted State Codes – Effective July 1st, 2016

The City of Monroe enforces the following Washington State Building Codes and amendments; the Washington Administrative Code (WAC) Title 51 and as amended by the Monroe Municipal Code Title 15:

2015 International Building Code (IBC)
2015 International Existing Building Code (IEBC)
2015 International Residential Code (IRC)
2015 International Fire Code (IFC)
2015 International Mechanical Code (IMC)
2015 International Fuel Gas Code (IFGC)
2015 Uniform Plumbing Code (UPC)
2015 ICC Energy Conservation Code with State amendments

Structural Design Criteria

Seismic Design Category: **IRC** D1/D2 / **IBC** - D
Basic Wind Speed: 85 mph
Exposure Category: B
Frost Depth: 18"
Snow load: 25 lbs/sq ft
*A soils investigation is required for commercial projects, residential short plats and subdivisions and some instances residential lots.

COMMUNITY DEVELOPMENT
PERMIT DIVISION

806 West Main Street, Monroe, WA 98272
Phone (360) 863-4501 building@monroewa.gov
www.monroewa.gov

FOR OFFICE USE ONLY

APPLICATION #(s) _____

_____

_____

COMBINED PERMIT APPLICATION

Permit Submittal Hours:
Monday-Friday 8:00-12:00 / 1:00-4:00

Building

- ❑ Basic SFR
- ❑ Commercial T/I
- ❑ Demolition
- ❑ Garage/Carport
- ❑ Mechanical
- ❑ New Construction (Commercial/Residential)
- ❑ Plumbing
- ❑ Racking
- ❑ Residential Remodel
- ❑ Other _____

Operations

- ❑ Engineering Review
- ❑ Fencing
- ❑ Grading
- ❑ Retaining wall
- ❑ Rockery
- ❑ Right-of-Way Disturbance
- ❑ Utility Service
- ❑ Other _____

Fire

- ❑ Fire Alarm
- ❑ Fire Sprinkler
- ❑ High Piled Storage
- ❑ Hood Suppression
- ❑ Spray Booth
- ❑ Tents & Canopies
- ❑ Other _____

Land Use

- ❑ Type I Permit
- ❑ Type II Permit
- ❑ Type III Permit
- ❑ Type IV Permit
- ❑ See permit types listed in Monroe MMC
- ❑ Other _____

NOTE: All required Electrical Permits will be issued by the Dept. of Labor & Industries.

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS

Site Address or Property Location: _____

Size of site (acre/square feet): _____

Assessor's Tax Parcel Number (14 digits): _____

Applicant: _____ Phone # (_____) _____

*Signature: _____ Printed Name: _____

Mailing Address: _____

City _____ State _____ Zip _____ E-mail _____

Property Owner: _____ Phone # (_____) _____

**Signature: _____ Printed Name: _____

Mailing Address: _____

City _____ State _____ Zip _____ E-mail _____

Attach a separate sheet for additional property owners/additional addresses

***Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf.**

****Property Owners: by your signature above, you hereby certify that you have authorized the above applicant to make application on your behalf for this application.**

Combined Permit Application - Page 2

Contractor:_____ Phone # _____

Contractor's License # _____ Exp Date _____

Email _____

Mailing Address _____

_____

Contractor's Bond Company: _____

Contractor's Bid Amount or Project Cost (labor and materials): $_____

Detailed description of proposal/work:

_____

_____

_____

_____

_____

Lending Institution for project (if applicable): _____

FOR OFFICE USE ONLY

Residential:

Living area:_____sf x $_____ = $_____

Garage / Carport:_____sf x $_____ = $_____

Deck / Porch:_____sf x $_____ = $_____

Total valuation: $_____

Commercial:

(fill in type) _____ _____sf x $_____ = $_____

(fill in type) _____ _____sf x $_____ = $_____

Total valuation: $_____

Plan Check Fee: _____ Permit Fee:_____

State Fee:_____ Fire Plan Check Fee:_____

Technology Fee:_____ SEPA Fee: _____

Updated 2020 – Please verify accuracy of this information/form prior to submitting.