



City of Washougal  
Building Division  
1701 C Street  
Washougal WA 98671  
360-835-8501/Fax 360-835-8808

PERMIT # \_\_\_\_\_  
COST \$ \_\_\_\_\_

**Irrigation Permit Application**  
Lawn

Applicant: \_\_\_\_\_ Phone #: ( ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone #: ( ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

**Sub-Contractor:** \_\_\_\_\_ Phone #: ( ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**WA Contractors License #:** \_\_\_\_\_ **City Business License #:** \_\_\_\_\_

Email: \_\_\_\_\_

Project Location \_\_\_\_\_ Tax Lot # \_\_\_\_\_

Type of work:            Commercial \_\_\_\_\_            Single Family/Town Home \_\_\_\_\_  
                                 Duplex/Condo \_\_\_\_\_            Multi-Family \_\_\_\_\_

Further description of work to be performed (use separate sheet if needed):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*See attached list for required fixture total sheet.**

*I/we certify that the above information is correct and that the construction on, and the occupancy and use of, the above described property will be in accordance with the laws, rules, and regulations of the State of Washington and the City of Washougal.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Plumbing	
Item	Quantity
Lawn sprinkler system on any one meter including backflow protection devices therefore	
<b>Atmospheric-type vacuum breakers not included in above:</b>	
<b>Make:</b> _____ <b>Model:</b> _____	
1 to 5 device(s)	
Over 5 devices	
<b>Backflow protective device other than atmospheric-type vacuum breakers:</b>	
<b>Make:</b> _____ <b>Model:</b> _____	
2" diameter (50.8 mm) and smaller	
Over 2" diameter (50.8 mm)	