

# CITY OF BUCKLEY

P.O. Box 1960 ♦ Buckley, WA 98321 ♦ (360) 829-1921 ext. 7801  
[www.cityofbuckley.com](http://www.cityofbuckley.com); <http://www.codepublishing.com/WA/Buckley/>



## PRE-APPLICATION REQUEST FORM

File Number: \_\_\_\_\_

Zone: \_\_\_\_\_

Parcel Number(s): \_\_\_\_\_

Amount Received: \$310 (2-3 Staff) \$570 (3+ Staff)

Date Amount Received: \_\_\_\_\_

Receipt stamp

TR# \_\_\_\_\_

### NO WORK OR ACTIVITY MAY BE STARTED WITHOUT APPROVAL AND ISSUANCE OF A PERMIT.

This section of the permit application process is to provide basic information about the applicant and the proposal, billing information, the proposal's location, and to allow the city to address the applicant's issues and questions.

Please check billing address

A. **Applicant:** Phone # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

B. **Project Address and/or Location:**  
\_\_\_\_\_  
\_\_\_\_\_

**Parcel ID Number:**

C. **Property Owner:** Phone # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

D. **Contractor/Agent:** Phone # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: Contractor Lic. # Or Consultant Business Name: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

E. **Contact Person:** Phone # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

F. **Project Description/Activity:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

