

CITY OF MERCER ISLAND

COMMUNITY PLANNING & DEVELOPMENT

9611 SE 36TH STREET | MERCER ISLAND, WA 98040

PHONE: 206.275.7605 | www.mercerisland.gov

Inspection Requests: Online: www.mybuildingpermit.com VM: 206.275.7730



PERMIT APPLICATION

A	SITE ADDRESS*		PROJECT VALUATION (REQUIRED)*		PERMIT #	
	PROPERTY OWNER: * Derek & Eileen Cheshire		ADDRESS*		PHONE 206-399-9301	
	TENANT NAME: Same as Owner				E-MAIL* Derek.Cheshire@microsoft.com	
	APPLICANT CONTACT NAME*		ADDRESS		PHONE 206-790-6287	
					E-MAIL* Marianne@pluspermit.com	
	ARCHITECT / DESIGNER (Company/Name)		ADDRESS		PHONE 574-286-0816	
L					E-MAIL* plyncharchitect@gmail.com	
	STRUCTURAL ENGINEER (Company/Name)		ADDRESS		PHONE 509-714-9433	
I					E-MAIL* kevin@mdsstructural.com	
	CONTRACTOR(Company/Name)		ADDRESS		PHONE	
C					E-MAIL*	
	STATE CONTRACTOR LICENSE #*: TBD		MI BUSINESS LICENSE #*: TBD			
A	ELECTRICAL CONTRACTOR (Company/Name)		ADDRESS		PHONE	
					E-MAIL* TBD	
N	STATE CONTRACTOR LICENSE #*: TBD		MI BUSINESS LICENSE #*: TBD			
	PLUMBING CONTRACTOR (Company/Name)		ADDRESS		PHONE	
T					E-MAIL* TBD	
	STATE CONTRACTOR LICENSE #*: TBD		MI BUSINESS LICENSE #*: TBD			
<i>*Required</i>						
PERMIT TYPE	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Low Voltage	OCCUPANCY TYPE	<input checked="" type="checkbox"/> SINGLE FAMILY	WORK TYPE	<input type="checkbox"/> ADDITION
	<input checked="" type="checkbox"/> Demolition	<input type="checkbox"/> Mechanical		<input type="checkbox"/> MULTI FAMILY		<input type="checkbox"/> ALTERATION
	<input type="checkbox"/> Electrical	<input type="checkbox"/> Plumbing		<input type="checkbox"/> COMMERCIAL		<input checked="" type="checkbox"/> NEW
	<input type="checkbox"/> Fire Protection	<input checked="" type="checkbox"/> Stormwater		<input type="checkbox"/> MIXED USE		<input type="checkbox"/> REPAIR
	<input type="checkbox"/> Fuel Tank	<input checked="" type="checkbox"/> Site Development		<input type="checkbox"/> CHRUCH/SCHOOL		
	<input checked="" type="checkbox"/> Grading					

Briefly Describe Proposed Scope of Work (REQUIRED):

Will your project result in (all questions must be answered):

A change of use	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
New Single Family dwelling	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
A reduction in any existing side yard setback	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
An increase in lot coverage by more than 100 square feet	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
An increase in the gross floor area of more than 500 square feet	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
An increase in the maximum building height above the highest point of the building	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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NOTICE TO APPLICANT

Applications for which no permit is issued within 18 months shall expire. Once issued, building permits shall expire if work is not completed within two years from date of issue. Electrical, mechanical, and plumbing permits shall expire at the same time as the associated building permit except that if no associated building permit is issued, the electrical, mechanical and/or plumbing permit shall expire 180 days from issuance.

All work shall be done in accordance with the approved plans, except where such approval is in conflict with other codes. The approved plans shall not be changed or modified without the prior approval of the Building Official. It is the responsibility of the permittee to obtain the required inspections. Failure to notify this department that work is ready for inspection may necessitate the removal of some of the construction materials at the owner's expense in order to perform such inspections. All provisions of laws and ordinances governing this type of work will be met whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.

I hereby certify that I am the owner of the subject property or I have been authorized by the owner(s) of the subject property to represent this application, and that I have read and examined this application and know the same to be true and correct. Also, I have received authorization to utilize all contractor license information provided within this application and have been informed about contractor license laws (RCW 18.27, RCW 18.106, etc.), and the potential risks and monetary liability to the homeowner for using an unregistered contractors (general, plumbing, electrical, etc.). Further information can be obtained at 1-800-647-0982.

<u><i>Derek Cheshire</i></u> <small>Derek Cheshire (Mar 13, 2025 22:46 PDT)</small>	<u>Mar 13, 2025</u>	<u>Derek Cheshire</u>
Signature of Owner/Contractor/Authorized Agent	DATE	Printed Name of Owner/Contractor/Authorized Agent






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Final Audit Report

2025-03-14

Created:	2025-03-14
By:	Marianne J Stover (Marianne@PlusPermit.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA_OL3BnP2rIRlp2CCcmob5OQZlgceXS0T

"Document 4 of 5" History

-  Document created by Marianne J Stover (Marianne@PlusPermit.com)
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