



**Building Division
Residential
Plumbing/Mechanical**

City of Black Diamond
24301 Roberts Drive / PO Box 599
Black Diamond, WA 98010

Parcel # (s)	Permit #
Legal Description:	Project Valuation \$
Address of proposed work:	

Contractor's License #:	Expiration Date:
OR	
Owner Affidavit In lieu of Contractor Registration: <i>required for a property owner doing all the work under this permit themselves. This form is required by permit issuance.</i>	
AND	
City Business License #:	

Description of work:

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Owner: _____

Address: _____

Phone/Email: _____

Applicant: _____

Address: _____

Phone/Email: _____

