



**CITY OF TUMWATER**  
 555 ISRAEL RD. SW, TUMWATER, WA 98501  
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**GENERATOR PERMIT  
 Submittal Checklist**

|         |            |
|---------|------------|
| TUM -   | DATE STAMP |
|         |            |
| RCVD BY |            |

**APPLICANT INFORMATION** (please print neatly)

NAME OF APPLICANT: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SUBJECT PROPERTY INFORMATION**

ADDRESS OF PROPERTY (COMPLETE): \_\_\_\_\_

In order to install a generator, you must submit a completed permit application and all items on this checklist unless modified or waived by Staff.

| <b>A. APPLICATION</b> | N/A | Provided | Staff |
|-----------------------|-----|----------|-------|
|-----------------------|-----|----------|-------|

|  |  |                          |                          |
|--|--|--------------------------|--------------------------|
| 1. Provide a complete and signed (by owner or authorized representative) application and applicable fee. Note: Payment of the plan check fee is required at the time of application. |  | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--|--------------------------|--------------------------|

|  |  |                          |                          |
|--|--|--------------------------|--------------------------|
| 2. Draw plans to scale of 1/4" = 1' or larger. Minimum plan sheet size is 18"x24". All notations and drawings must be clear and legible. |  | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--|--------------------------|--------------------------|

| <b>B. SITE PLAN</b> | N/A | Provided | Staff |
|---------------------|-----|----------|-------|
|---------------------|-----|----------|-------|

|   |  |                          |                          |
|---|--|--------------------------|--------------------------|
| 1. Draw site plan to scale of 1" = 10' or larger. |  | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--|--------------------------|--------------------------|

|   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| 2. Show:  |                          |                          |                          |
| a. Address.   |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Parcel number.   |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Zoning district.   |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Total square footage of the site.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| e. North arrow, and locations and dimensions of all property lines and easements.                                     |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Vicinity map.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Distances from generator to structures, property lines and easements.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Highest point of the structure.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Location and names of all streets and alleys (public and private) adjacent to the site.                            |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Wetlands or surface waters (if any), floodplain boundaries (reference the FIRM panel), and any applicable buffers. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Existing on-site septic systems.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Existing wells and 100-foot well-radius areas.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Existing and proposed stormwater drainage facilities (including downspouts, dry wells, pipes, etc).                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Generator Permit Submittal Checklist

| <b>B. SITE PLAN (CONTINUED)</b>  | N/A                      | Provided                 | Staff                    |
|--|--------------------------|--------------------------|--------------------------|
| n. Locations of all existing and proposed utilities (water, sewer, gas, meters, power, telephones, cable, etc).  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o. Exterior storage tanks (e.g. propane), HVAC equipment and underground tanks.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>C. GENERATOR INFORMATION</b>  | N/A                      | Provided                 | Staff                    |
| 1. Provide manufacturer specifications.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Identify how generator will be fastened for seismic design D-2.   |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Provide detail of pad that the generator will rest on.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Show specifications on fuel storage, size, approval listing and leak detection.   |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Provide generator output, horsepower, and fuel source.  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. If a cover is provided, show roof design, side detail and footing foundation requirements.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>D. ADDITIONAL INFORMATION</b>   | N/A                      | Provided                 | Staff                    |
| 1. Copy of permit or exemption letter from Olympic Region Clean Air Agency (ORCAA).  |                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. SEPA checklist.   |                          |                          |                          |
| <b>E. ELECTRONIC SUBMITTAL</b>   | N/A                      | Provided                 | Staff                    |
| 1. Submitting online: <a href="#">Upload</a> documents, naming them with the project address and document name (project address – application, checklist, plans, etc). | <input type="checkbox"/> | <input type="checkbox"/> |                          |
| Submitting in person: USB drive containing apps, checklist, plans, reports, etc. as outlined under B and C above, in PDF-file format. Maximum format shall be 300 dpi. | <input type="checkbox"/> | <input type="checkbox"/> |                          |

I verify that all required documents associated with this application have been submitted.

\_\_\_\_\_  
Signature of Applicant/Representative

\_\_\_\_\_  
Date