

Town of Friday Harbor

PO Box 219 / Friday Harbor / WA / 98250

(360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

Town of Friday Harbor BUILDING PERMIT GUIDELINES

1. **PREPARE AND SUBMIT TWO SETS OF CONSTRUCTION DRAWINGS; ONE PLAN CHECKED COPY WILL BE RETURNED, ONE OBTAINED.** Submit drawing with a complete building permit application packet. The drawings must include the following:
 - a. **THE BUILDING AND SITE PLAN MUST INCLUDE THE FOLLOWING DETAILS(only if a Site Plan Review was not required):** 1) Location of all existing and proposed utility lines including stormwater, and location of utility connections in conjunction with building. 2) Dimensioned lot drawing including any easements (recorded survey may be required), 3) All buildings existing and those proposed, 4) Existing and proposed landscaping and 5) Show existing and proposed parking. **THE BUILDING PLAN MUST BE DRAWN TO SCALE OF 1/4 INCH = 1 FEET. THE 2009 INTERNATIONAL BUILDING CODES BECAME IN EFFECT.**
 - b. **FOUNDATION PLAN** showing size, shape, and height of foundation walls, all footings, posts, beams, size and direction of all floor joists in all areas, and all vents.
 - c. **CROSS (WALL) SECTION** showing excavation, foundation and finished grade, posts, beams, floor joists, studs, bracing, roof rafters and bracing, roof pitch and overhang, ceiling joists, and type of roofing materials.
 - d. **FLOOR PLAN** showing partitions, windows, (location, size and percent of opening), doors (size and swing), and plumbing fixtures. Label any future construction as "Not a part of this application".
 - e. **ELEVATION** drawings that show original grade at all building corners, finished floor and roof peak elevations, as well as all exterior decks, porches, patios and covered walkways.
 - f. **DETAILS** showing stairs, rise and run, landings, and headroom.
 - g. **IF YOUR CONSTRUCTION REQUIRES PUBLIC WORKS PERMITS** i.e., water or sewer service permits, or excavation in the public right of way permits, obtain proper forms.
2. **HISTORIC DISTRICT** - If you are planning to build a new structure or remodel an existing structure that is within the Historic District (map and application attached), please arrange to **meet with the Town Historic Preservation Coordinator at 378-2390 before you initiate your design phase.**
3. **MANUFACTURED HOMES** – A building permit application is required with installation drawings as per regulations mandated by current building code regulations.
4. **A PLUMBING AND MECHANICAL PERMIT** application is required with submittal of building permit application.
5. Upon receipt of your application your construction will be valued and you will be notified of the permit fees. The total fees for the building, plumbing, mechanical, and stormwater applications will be due before plan check begins. **Make check payable to the Town of Friday Harbor.**
6. The plan check will require a minimum of 15 working days. Electrical permits can be obtained from the Orcas Power and Light Company or the Department of Labor and Industries at 360.416.3000.

THE BUILDING PERMIT JOB CARD MUST BE POSTED ON THE BUILDING SITE UNTIL FINAL INSPECTION IS COMPLETED. A 48 HOUR NOTICE IS REQUIRED FOR INSPECTIONS.

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Checklist
Public Works Permits / Building Permits / Land Use Permits

Property Owner: _____

Telephone _____

Address of job site: _____

Tax Parcel _____

If your construction requires the following applications, have you obtained?

- Yes No N/A Water and Sewer Service applications? (Each application requires a site plan showing location of proposed water & sewer lines in conjunction with construction.)
- Yes No N/A If your construction involves the addition of residential units, have you paid for additional sewer connection fees? Do you still comply with the current density regulations for your zone?
- Yes No N/A Does your project require an Excavation Within a Public Right of Way Permit application for work within the public right of way?
- Yes No N/A Application to Construct Curb, Gutter, Sidewalk, Storm Drainage, Street?
- Yes No N/A If your construction is 10,000 square feet or larger, have you submitted an Environmental Checklist (SEPA) for review and public comment period?
- Yes No N/A If your construction is planned within the designated shoreline, have you obtained an application for Exemption from Substantial Development or a Substantial Shoreline Development Permit application?
- Yes No N/A Land Clearing, Grading, or Filling Permit application?
- Yes No N/A Does the construction take place in the Historic Preservation District? See map attached. If so, see Historic Preservation Coordinator 360-378-2810 at least three weeks before construction application submittal.
- Yes No N/A If your construction requires a Storm Water Management Plan obtain review and approval four weeks before construction application submittal.

For your building permit application have you submitted the following?

- Yes No N/A Was a Site Plan Review required?
- Yes No N/A Have you met the Zoning, Parking, Land Use or Set Back requirements?
- Yes No N/A A completed building permit application with signature or agent authorization.
- Yes No N/A Two sets of construction drawings showing a site plan, parking plan, landscaping, foundation, walls, footings, beams, floor joists, etc? Guidelines attached.
- Yes No N/A Utility Checklist – must be signed by all companies and by owner/agent.
- Yes No N/A Energy calculations.
- Yes No N/A Mechanical Permit application?
- Yes No N/A Plumbing Permit application?
- Yes No N/A Storm Water Service application?

Signature of Property Owner or Authorized Agent _____
Date

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Building Permit Application

Application date	Tax parcel number	Office Use Only		
		BP#	Date Permitted	
Name of legal property owner		Phone number		
Property owner mailing address				
Authorized Agent		Authorized Agent phone number		
Authorized Agent address				
Job site address/physical location of property				
Description of work to be performed				
Is the project or site within 200 feet of the body of water?		Yes (If yes, must show on plans)	No	
Is project located within the Historic District? (see attached map)		Yes (If yes, must submit historic application for review)	No	
Type of permit requested (check the appropriate box)				
<input type="checkbox"/> New Residence	<input type="checkbox"/> Residential Addition	<input type="checkbox"/> Residential Remodel		
<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Garage (attached)	<input type="checkbox"/> Garage (not attached)		
<input type="checkbox"/> Carport	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Commercial		
<input type="checkbox"/> Deck	<input type="checkbox"/> Other (specify)			
Building Dimensions ____ X ____	Main Floor _____ sq. ft.	Second Floor _____ sq. ft.		
Basement _____ sq. ft.	Garage _____ sq. ft.	Other _____ sq. ft.		
Construction Company name				
Contractor name		Phone #		
Contractor's Washington State License #		Expiration date		
Mechanical Contractor name		Phone #		
Mechanical Contractor's Wash. State License #		Expiration date		
Manufactured home company name		Model		
Size _____ X _____	Year Built	Serial #		
Total valuation of work to be performed				
Signature of Owner or Authorized Agent	Date	Building Permit Fee \$	State Code Fee \$ 4.50	Total Fees \$

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LETTER OF AGENT AUTHORIZATION

I, _____
(Legal Property Owner(s))

authorize _____ to act on
(Agent)

my behalf during the processing of:

(Application Type)

(Signature of legal property owner) (Date)

(Signature of legal property owner) (Date)

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UTILITY CHECKLIST

Legal Owner: _____

Job Address: _____

Tax Parcel Number of Job Address: _____

The following utility companies shall be contacted prior to a Building Permit being issued by the Town of Friday Harbor. It is further understood that said utility companies will sign off on behalf of their company and indicate in the remarks section any problems, if any, and if utility costs have been paid.

Orcas Power & Light Company: _____
376-3550
1034 Guard Street
Remarks: _____
Signature of Authorized Representative

CenturyLink: _____
378-1531
50 Second St
Remarks: _____
Signature of Authorized Representative

Zito LLC (Cable Service): _____
208-599-4044
Remarks: _____
Signature of Authorized Representative

Town of Friday Harbor: _____
378-2154 (Water & Sewer)
425 Marguerite Place
Remarks: _____
Signature of Authorized Representative

I certify I have contacted the above utility companies and have paid the appropriate fees if necessary. _____
Signature of Property Owner / Authorized Agent Date

Town of Friday Harbor Street Improvements:
I certify in accordance with current Town Ordinances if a condition of a construction application calls for street, and/or curb, gutter and sidewalk improvements, said land improvements will be secured or accomplished prior to the issuance of that permit.

Signature of Property Owner / Authorized Agent Date

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Mechanical Permit Application

Application date		Tax parcel number		Office Use Only	
				ME#	Date Permitted
Legal Property Owner			Owner Telephone Number		
Owner Address					
Mechanical Contractor's Company Name			WA State L & I License #	Town Business License #	
Job Location – Street / Road					
Property Owner's or Authorized Agent's Signature					
No.	TYPE OF EQUIPMENT	FEE EA.	FEE	Work / Use	
	Forced Air System – Btu/h M ea. Up to 100,000 btu	18.50			
	LPG Wall Heaters	18.50			
	Oil Wall Heaters	18.50			
	Unit Heaters / Gas Fireplace	13.30			
	Gas – Fired A.C. Units – Btu/h	13.30			
	Air-Conditioning Units – Hp ea.	13.30			
	Refrigeration Units – Hp ea.	13.30			
	Boilers –BTU'S-needs back flow device (see Town Water Dept)	33.95			
	Air – Handling Unit – C.F.M. Up to and Incl. 10,000 C.F.M.	13.30			
	Air – Handling Unit – C.F.M. Over 10,000 C.F.M.	22.25			
	Evaporative Coolers	13.30			
	Commercial Range Hood	13.30			
	Gas Systems (1-4 outlets only)	7.80			
	Each additional outlet over 4 - \$1.25 each	1.25			
	Ventilation fan to a single duct	9.10			
	Range	13.30			
	Clothes Dryer Vent	9.10			
	Solid Fuel Burning Appliances	50.00			
	Liquid Propane Tank Install	13.30			
	Hazardous Process Piping	13.30			
	Oil Tank Install	13.30			
	Oil Tank Process Piping	13.30			
	Original Permit	29.40	29.40		
	Supplemental Permit (if added to Original Permit)	9.10			
	TOTAL FEE				

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Plumbing Permit Application

Application date	Tax parcel number	Office Use Only	
		PL#	Date Permitted
Legal Property Owner		Owner Telephone Number	
Owner Address			
Plumbing Company Name		WA State L& I License #	Town Business License #
Water Meter Size	Job Location – Street / Road		
Property Owner's or Authorized Agent's Signature			

No.	TYPE OF FIXTURE	FEE EA.	FEE	Work / Use
	Water Closet (Toilet)	8.75		
	Bathtub	8.75		
	Lavatory (Wash Basin)	8.75		
	Shower	8.75		
	Kitchen Sink & Disposal	8.75		
	Dishwasher	8.75		
	Laundry Tray	8.75		
	Clothes Washer	8.75		
	Urinal	8.75		
	Drinking Fountain	8.75		
	Floor – Sink or Drain	8.75		
	Water Structure Connection	18.75		
	Sewer Structure Connection	18.75		
	Water Heater-Thermal Expansion Tank Required	8.75		
	Waste Interceptor	8.75		
	Water Supply Piping / Pressure Test	8.75		
	Lawn Sprinkler System (\$7 ea per # of zones)	8.75		
	Vacuum Breakers (Hose Bibs)	6.25		
	Back Flow Device (see attached questionnaire & submit)	8.75		
		8.75		
	Original Permit	25.00	25.00	
	Supplemental Permit (if added to Original Permit)	12.50		
	TOTAL FEE			



Town of Friday Harbor
 Water Department
 P.O. Box 219 * 501 Marguerite St.
 Friday Harbor, WA 98250
 Phone (360) 378-8353

Water Service Connection Questionnaire

Name: _____
 Mailing Address: _____ City: _____ Zip: _____
 Phone #: _____ Fax #: _____
 Water Service Address: _____
 Parcel #: _____ Type of Service: Residential _____ Commercial _____
 If commercial, type of Business: _____
 Number of Stories: _____ Number of units/businesses on meter: _____

Please indicate all that apply for planned or current water use. This questionnaire must be completed before water utilities permit is issued.

Residential:	YES	NO	DON'T KNOW	OFFICIAL USE
Lawn irrigation system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swimming pool or hot tub?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Photo Lab, chemical, medical or other lab facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private well or auxiliary water supply?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lawn or garden chemical sprayers attached to hose?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water softener or other treatment systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In floor heating system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boiler heating system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire sprinkler system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Commercial:	YES	NO	DON'T KNOW	OFFICIAL USE
Lawn irrigation system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carbonation equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice machine?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boiler?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire sprinkler system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In floor heating system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water softener or other treatment systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Photo lab, chemical, medical or other lab facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swimming pool or hot tub?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private well or auxiliary water supply?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water-cooled equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Janitor's sink?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor Drain Trap Primer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laundry/dry cleaning facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beverage bottling, food processing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Veterinarian facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baptismal pool?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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APPLICANT IS TO COMPLETE PAGES 1-8 - INCOMPLETE ENERGY FORMS WILL NOT BE ACCEPTED

Project Name & Location: _____

Select applicable item(s) from options provided:

JOB TYPE:	NEW CONSTRUCTION		ADDITION		REMODEL
BUILDING TYPE:	1 OR 2 FAMILY RESIDENCE; TOWNHOUSE		GARAGE, WORKSHOP, OTHER ACCESSORY BLDG.		
HEATING SOURCE:	ELECTRIC	OIL	PROPANE (LPG)	OTHER _____	
HEATING SYSTEM:	FORCED AIR	ROOM HEATERS	RADIANT	HYDRONIC	
	HEAT PUMP	EXISTING SYSTEM	WOOD STOVE	OTHER:	

LOCATION OF HEATING EQUIPMENT:

Check the box below for the compliance option you are choosing for this project. Carefully review all of the included forms and fill them out completely, unless otherwise exempted. All the information relating to energy code compliance must clearly be shown on the submitted construction documents. These forms are provided as a compliance tool. They are not a substitute for the actual full text of the energy code. This can be found at <http://www.energy.wsu.edu/code>. The WSU website also has similar compliance forms in an excel format for completion and would be accepted.

PLEASE CHECK ONLY ONE:

- I will meet the prescriptive requirements of the 2009 Washington State Energy Code and have completed all the forms in this packet. (Reference WSEC Ch. 6)
- I will meet the 2009 WSEC using a component performance approach. I have completed the "component performance worksheet" (not included) in addition to the glazing worksheet, Ch. 9 credit worksheet, and heat sizing worksheets found in this packet. (Reference WSEC Ch. 5)
- I will meet the 2009 WSEC using a Building Design By Systems Analysis. I have included all necessary documentation demonstrating compliance. (Reference WSEC Ch. 4)
- I am constructing an unheated accessory structure (garage, workshop, or similar). It is NOT necessary to complete any additional forms

The following is a list of the pages in this packet and a brief description. Please read all forms and complete as required.

- 1) Information Page. Must fill out and pick compliance option
- 2) Ventilation info, glazing info, acknowledgement of compliance. Read, fill out, and acknowledge with signature
- 3) Prescriptive Energy Code Compliance: choose prescriptive path for insulation
- 4) Chapter 9 Energy Credit Options: select option for compliance with Ch. 9 credit requirement
- 5) Glazing Schedule Worksheet: check box on page 2 indicating reason for completion or if exempt.
- 6) Glazing Schedule Worksheet (con't): additional space, including boxes for totaling
- 7) Residential Heating System Sizing: to be completed for prescriptive and component compliance paths
- 8) Building Heat Loss Calculation: worksheet to obtain heat loss for completing Heating System Sizing.

GLAZING SCHEDULE: Check reason(s) for completion of glazing schedule; pages 5&6 of this packet

1) Does not apply. (See Instructions) <u>Using Prescriptive Option III</u> (pg. 3). All glazing and doors meet maximum U-Factor. Alternate heating size method submitted. Also check if N/A for UNHEATED ACCESSORY STRUCTURES.
2) <u>Prescriptive Option I or II</u> (pg. 3) Glazing to floor area limits. (WSEC 602.7.2)
3) Area weighted window, skylight or door U-Factor (WSEC 602.7.2)
4) As part of the heating system sizing calculation (IRC M1401.3 & WSEC 503.2.2)

WHOLE HOUSE VENTILATION SYSTEMS: Check the box corresponding to the WH Ventilation system to be used

1) Whole House Ventilation using exhaust fans. (IRC 1508.4)
2) Whole House Ventilation integrated with a forced-air system. (IRC 1508.5)
3) Whole House Ventilation using a supply fan. (IRC 1508.6)
4) Whole House Ventilation using a heat recovery ventilation system. (IRC 1508.7)
5) Engineered "Whole House Ventilation" system designed in accordance with IMC 403.8.10
LOCATION OF WHOLE HOUSE FAN: _____ SIZE: _____ (CFM)
6) Exempt from WHV for building with less than 500 square feet of conditioned floor area
7) Exempt from WHV for replacement of HVAC equipment without altering or repairing the associated air distribution system
NOTE: In addition to the required "whole house ventilation system", "source specific exhaust ventilation" is required in each kitchen, bathroom, water closet, laundry room, indoor swimming pool, spa, and other rooms where excess water vapor or cooking odors are produced. ***Additional note*** Accessory structures are not required to comply with the WHV system requirements. They shall, however, comply with any applicable source specific exhaust requirements.

By signing below, you are acknowledging that:

- 1) You have read and completed the attached forms to demonstrate compliance with the current Washington State Energy Codes & Ventilation and Indoor Air Quality provisions of the IRC.
- 2) These forms are provided as a compliance tool but do not represent all the intricacies of the codes.
- 3) You are aware that a complete copy of the energy code is available at www.energy.wsu/code
- 4) You are aware that the 2009 International Residential Code contains requirements and provisions for insulation and ventilation and copies of the Washington St. Amendments to this code are available at <https://fortress.wa.gov/ga/apps/sbcc/Default.aspx>
- 5) You have included all necessary details demonstrating compliance with these codes on your submitted construction drawings.
- 6) San Juan County is not responsible for any errors or omissions on these forms.
- 7) All elements of construction are subject to field inspection and correction.

Signature _____

Date _____

(owner or other authorized agent)

(required)

2009 WSEC **PRESCRIPTIVE ENERGY CODE COMPLIANCE** FOR SINGLE FAMILY RESIDENCES IN SAN JUAN COUNTY

CHECK THE OPTION below that will apply to your project. The insulation values and construction details are required to be shown on the submitted construction drawings. (WSEC 104.2)

TABLE 6-1 PRESCRIPTIVE REQUIREMENTS^{0,1}

Option	Glazing Area ¹⁰ : % of floor	Glazing U- Factor		Door ⁹ U- Factor	Ceiling ²	Vaulted Ceiling ³	Wall ¹² above grade	Wall-int ⁴ below grade	Wall-ext ⁴ below grade	Floor ⁵	Slab ⁶ on grade
		Vertical	Overhead ¹¹								
<input type="radio"/> I	13%	0.34	0.50	0.20	R-49 or R-38 adv.	R-38	R-21 Int. ⁷	R-21 TB	R-10	R-30	R-10 2ft.
<input type="radio"/> II	25%	0.32	0.50	0.20	R-49 or R-38 adv.	R-38	R-21 Int. ⁷	R-21 TB	R-10	R-30	R-10 2ft.
<input type="radio"/> III	Unlimited	0.30	0.50	0.20	R-49 or R-38 adv.	R-38	R-21 Int. ⁷	R-21 TB	R-10	R-30	R-10 2ft.

Footnotes:

0. Nominal R-values are for wood frame assemblies only or assemblies built in accordance with Section 601.1.
1. Minimum requirements for each option listed. For example, if a proposed design has a glazing ratio to the conditioned floor area of 15%, it shall comply with all of the requirements of the 25% glazing option (or higher). Proposed designs which cannot meet the specific requirements of a listed option above may calculate compliance by Chapters 4 or 5 of this Code.
2. Requirement applies to all ceilings except single rafter or joist vaulted ceilings complying with note 3. 'Adv' denotes Advanced Framed Ceiling.
3. Requirement applicable only to single rafter or joist vaulted ceilings.
4. Below grade walls shall be insulated either on the exterior to a minimum level of R-10 continuous, or on the interior as a framed wall. Exterior insulation installed on below grade walls shall be a water resistant material, manufactured for its intended use, and installed according to the manufacturer's specifications. See Section 602.2.
5. Floors over crawl spaces or exposed to ambient air conditions.
6. Required slab perimeter insulation shall be a water resistant material, manufactured for its intended use, and installed according to manufacturer's specifications. See Section 602.4. For slabs inside a foundation wall, the insulation shall be installed to provide a thermal break (TB) between the slab edge and the foundation. Monolithic slabs shall include insulation, installed outside the foundation wall, and shall extend downward from the top of the slab for a minimum distance of 24 inches or downward and then horizontally for a minimum combined distance of 24 inches. Monolithic slabs shall also include R-10 insulation under the non-load-bearing portions of the slab.
7. Int. denotes standard framing 16 inches on center with headers insulated with a minimum of R-10 insulation.
8. Reserved.
9. Doors, including all fire doors, shall be assigned default U-factors from Table 10-6C.
10. Where a maximum glazing area is listed, the total glazing area (combined vertical plus overhead) as a percent of gross conditioned floor area shall be less than or equal to that value. Overhead glazing with U-factor of U=0.35 or less is not included in glazing area limitations.
11. Overhead glazing shall have U-factors determined in accordance with NFRC 100 or as specified in Section 502.1.5.
12. Log and solid timber walls with a minimum average thickness of 3.5" are exempt from this insulation requirement.

WSEC Chapter 9 Energy Credit Options. Check all that apply. Total of 1 Point required.

+1pt	1A	HIGH EFFICIENCY HVAC EQUIP. 1: Gas, propane, or oil fired furnace or boiler with minimum AFUE of 92% or air-source heat pump with minimum HSPF of 8.5
+2pts	1B	HIGH EFFICIENCY HVAC EQUIP 2: Closed loop ground source heat pump with minimum COP of 3.3
+1pt	1C	HIGH EFFICIENCY HVAC EQUIP 3: Where primary space heating system is zonal electric heating, a ductless heat pump system shall be installed to provide heating to at least one zone
+1pt	2	HIGH EFFICIENCY HVAC DISTRIBUTION: All heating and cooling system components installed inside the conditioned space. All combustion equipment shall be direct vent or sealed combustion. Locating system components in conditioned crawl spaces is not permitted under this option. Electric resistance heat is not permitted under this option. Direct combustion heating equipment with AFUE less than 80% is not permitted under this option.
+½ pt	3A	EFFICIENT BUILDING ENVELOPE 1: Prescriptive compliance per Table 6-1, Option III **as modified per CH 9** or component performance compliance: reduce the Target UA from table 5-1 by 5% as determined using EQ. 1
+1pt	3B	EFFICIENT BUILDING ENVELOPE 2: Prescriptive compliance per Table 6-1, Option III **as modified per CH 9** or component performance compliance: reduce the Target UA from table 5-1 by 15% as determined using EQ. 1
+2pts	3C	EFFICIENT BUILDING ENVELOPE 3: Prescriptive compliance per Table 6-1, Option III **as modified per CH 9** or component performance compliance: reduce the Target UA from table 5-1 by 30% as determined using EQ. 1
+½ pt	4a	AIR LEAKAGE CONTROL AND EFFICIENT VENTILATION: Envelope leakage reduced to SLA of 0.00020 building envelope tightness when tested with blower door at pressure difference of 50 Pa after rough in and installation of all building envelope penetrations, and all whole house ventilation requirements met by heat recovery ventilation system per IRC section 1508.7
+1pt	4B	AIR LEAKAGE CONTROL AND EFFICIENT VENTILATION: Envelope leakage reduced to SLA of 0.00015 building envelope tightness when tested with blower door at pressure difference of 50 Pa after rough in and installation of all building envelope penetrations, and all whole house ventilation requirements met by heat recovery ventilation system per IRC section 1508.7
+½ pt	5A	EFFICIENT WATER HEATING: Water heating system shall include one of the following: gas, propane, or oil water heater with minimum EF of 0.62; OR electric water heater with minimum EF of 0.93 AND for both cases all showerheads and kitchen sink faucets shall be rated at 1.75gpm or less, all others 1.0gpm or less when tested in accordance with ASME A112.18/CSA B125.1
+1.5pts	5B	EFFICIENT WATER HEATING: Water heating system shall include one of the following: gas, propane or oil water heater with minimum EF of 0.82; OR solar water heating supplementing minimum standard water heater. Solar water heating will provide minimum savings of 85 therms or 2000kWh based on Solar Rating and Certification Corp. (SRCC) Annual performance of OG-300 Certified Solar Water Heating Systems; OR Electric heat pump water heater with minimum EF of 2.0
+1pt	6	SMALL DWELLING UNIT: Dwelling less than 1500 sq. ft. with less than 300 sq. ft. window and door openings. Additions to existing buildings that are less than 750 sq. ft. of heated floor area
-1pt	7	LARGE DWELLING UNIT: Dwelling exceeding 5000 sq. ft. floor area shall be assessed a deduction
+½ pt	8	RENEWABLE ELECTRIC ENERGY: For each 1200 kWh of electrical generation provided annually by on-site wind or solar equipment, a 0.5 credit shall be allowed, up to 3 credits. Generation shall be calculated as follows: For solar electric systems, the design shall be demonstrated to meet this requirement using the National Renewable Energy Laboratory calculator PVWATTS. Documentation noting solar access shall be included on the plans For wind generation projects, designs shall document annual power generation based on the following factors: the wind turbine power curve, average annual wind speed at the site, frequency distribution of the wind speed at the site, and the height of the tower.

FOOTNOTES:

- 1) Interior duct placement: Ducts included as Option 2 (above) shall be placed wholly within the heated envelope of the housing unit. The placement shall be inspected and certified to receive the credits associated with this option.
Exception: Ducts complying with this section may have up to 5% of the total linear feet of ducts located in the exterior cavities or buffer spaces of the dwelling. If this exception is used, the ducts will be tested to the following standards: Post construction test: Leakage to outdoors shall be less than or equal to 1 CFM per 100 sq. ft. of conditioned floor area when tested at a pressure differential of 0.1 inches w.g. (25 Pa) across the entire system, including the manufacturer's air handler enclosure. All register boots shall be taped or otherwise sealed during the test.
- 2) Plumbing Fixtures Flow Ratings: Low flow plumbing fixtures (water closets and urinals) and fittings (faucets and showerheads) shall comply with the following:
 - a) Residential bath lavatory sinks faucets: Max. flow rate 1.0 gal/min (tested in accordance with ASME 112.18.1/CSA B125.1)
 - b) Residential kitchen faucets: Max. flow rate 1.75 gal/min (tested in accordance with ASME 112.18.1/CSA B125.1)
 - c) Residential shower heads: Max. flow rate 1.75 gal/min (tested in accordance with ASME 112.18.1/CSA B125.1)

(CONTINUED FROM FRONT)

VERTICAL GLAZING (Windows, Glazed doors with >50% glazing)

Plan ID	Component Description	Qty.	width		height		Glazing U-Factor	Glazing Area	Glazing UA
			feet	inch	feet	inch			(area x U)
Sum of Area and UA									
Area Weighted UA = UA ÷ Area									

OVERHEAD GLAZING

Plan ID	Component Description	Qty.	width		height		Glazing U-Factor	Glazing Area	Glazing UA
			feet	inch	feet	inch			(area x U)
Sum of Area and UA									
Area Weighted UA = UA ÷ Area									

Completing the Glazing Schedule Worksheet:

EXTERIOR DOORS:

The exterior door section is for swinging doors only. Enter sliding doors in the vertical glazing section of the worksheet.

If a swinging door includes glazing, it may be included in the vertical glazing schedule or the exterior door schedule.

Obtain NFRC tested U-Factors from the door manufacturer or use U-Factors from WSEC tables. (Refer to CH. 10 for tables).

Areas of windows, doors, and skylights are measured using the area of the rough opening.

Glazing area in exterior doors is added to the total of glazing areas of the project as follows: *If greater than 50%, 100% of the area is entered in the door glazing area. If less than 50%, only the glazed area will be entered in the door glazing area.*

Exempt Door: One door, 24 ft² or less is not included in the U-Factor of the glazing area calculations. You must calculate the door area to verify that it is 24 ft² or less. This also enters the door heat loss into the heat system size calculation.

VERTICAL AND HORIZONTAL GLAZING:

Obtain NFRC tested U-Factors from the glazing supplier. These will give the most accurate and likely the most favorable results. If you can't obtain this data, the tables in WSEC Ch. 10 must be used.

2009 Residential WSEC CH. 5 & 6 Heating System Sizing

The 2009 Washington State Energy Code (WSEC) requires heating and cooling systems for residential projects to be sized. With few exceptions, heating and cooling systems may not exceed 150% of the design loads as calculated per the 2009 WSEC or 2009 IRC section M1401.3 or 2009 IMC section 312.

This form will only size an electric, natural gas, LPG or oil fired heating system when all the required information has been filled out. The type of insulation and areas involved, skylights, doors, and window sections of this form must be completed accurately.

If your system provides cooling, it must be sized using ASHRAE Manual J or equivalent calculations and they must be attached to this form. Please contact your mechanical contractor for this information.

PLEASE READ AND CHECK THE APPROPRIATE BOX			
<input type="checkbox"/>	A	I am using this form to define my project and to size the heating system	
<input type="checkbox"/>	B	I am using this form to define my project and to size the heating system. The heating system installed will be fueled by LPG or Oil with an annual fuel utilization efficiency (AFUE) of 90% or greater. The minimum heat output of the heating system may be exceeded by no more than 250%	
<input type="checkbox"/>	C	This project is using ASHRAE Manual J or an approved equivalent method for the sizing of the heating system. I have attached the form that sizes my equipment.	
<input type="checkbox"/>	D	This project uses a heating and cooling system. An ASHRAE Manual J equivalent method for sizing the heating and cooling system is attached. I have attached the form that sizes my equipment.	
<input type="checkbox"/>	E	This project uses a heating system <u>fueled by LPG or Oil</u> , is <u>less than 1500 sq. ft.</u> in size, and is in compliance with <u>Prescriptive Path Option 1</u> . A <u>heating system not to exceed 40,000 BTU/H</u> total output will be installed. The following sizing calculations are not required to be completed.	
<input type="checkbox"/>	F	NOT APPLICABLE. UNHEATED ACCESSORY STRUCTURE.	
SIMPLE HEATING SYSTEM SIZE: Climate Zone 1. Outdoor Design Temp = 24° for entire County			
Design Temperature Difference=	46° ^F	Conditioned Floor Area =	Ft. ²
SUM OF UA (heat loss of building, calculation on back of this page)		Conditioned Volume (CV)=	Ft. ³

	Other Fuels: <u>Btu/Hr.</u>	ELECTRIC: <u>KW</u> (convert BTU→KW: Btu÷3413)
ENVELOPE HEAT LOAD (Sum of UA X Design Temp. Difference)		
AIR LEAKAGE HEAT LOAD (CV X 0.6) X (Outdoor Design Temp) X (.018)		
BUILDING DESIGN HEAT LOAD (Air Leakage + Envelope Heat Load)		
MINIMUM HEATING EQUIPMENT OUTPUT: (Use 1.15 x Building Design Heat Load if ducts are in unconditioned space) (Use 1.0 x Building Design Heat Load if ducts are in conditioned space)		
MAXIMUM HEATING EQUIPMENT OUTPUT (Min. Output x 1.5)		
INCREASE Max. Heating Equip. Output (Requires 90% High Efficiency Furnace from Option B. = Min Output x 2.5)		

2009 WSEC Ch. 5&6 Heating System Sizing - Building Heat Loss Calculations

ATTIC (type)	U-FACTOR	X	AREA (sq. ft)	=	UA
R-49	0.027	X		=	
R-38	0.026	X		=	
(other):		X		=	

SINGLE RAFTER or JOIST VAULTED CEILINGS	U-FACTOR	X	AREA (sq. ft)	=	UA
R-38 Vented	0.027	X		=	
(other):		X		=	

ABOVE GRADE WALLS	U-FACTOR	X	AREA (sq. ft)	=	UA
R-21	0.056	X		=	
(other):		X		=	

FLOORS	U-FACTOR	X	AREA (sq. ft)	=	UA
R-30	0.029	X		=	
(other):		X		=	

SLAB ON GRADE	F-FACTOR	X	LENGTH (perimeter)	=	UA
R-10 2 ft @perimeter	0.54	X		=	
R-10 Full (heated slab)	0.55	X		=	
(other):		X		=	

BELOW GRADE WALLS	U-FACTOR	X	AREA (sq. ft)	=	UA
2 Ft. Depth	0.042	X		=	
3.5 Ft. Depth	0.041	X		=	
7 Ft. Depth	0.037	X		=	
(other):		X		=	

SLAB BELOW GRADE	F-FACTOR	X	LENGTH (perimeter)	=	UA
2 Ft. Depth	0.59	X		=	
3.5 Ft. Depth	0.64	X		=	
7 Ft. Depth	0.57	X		=	
(other):		X		=	

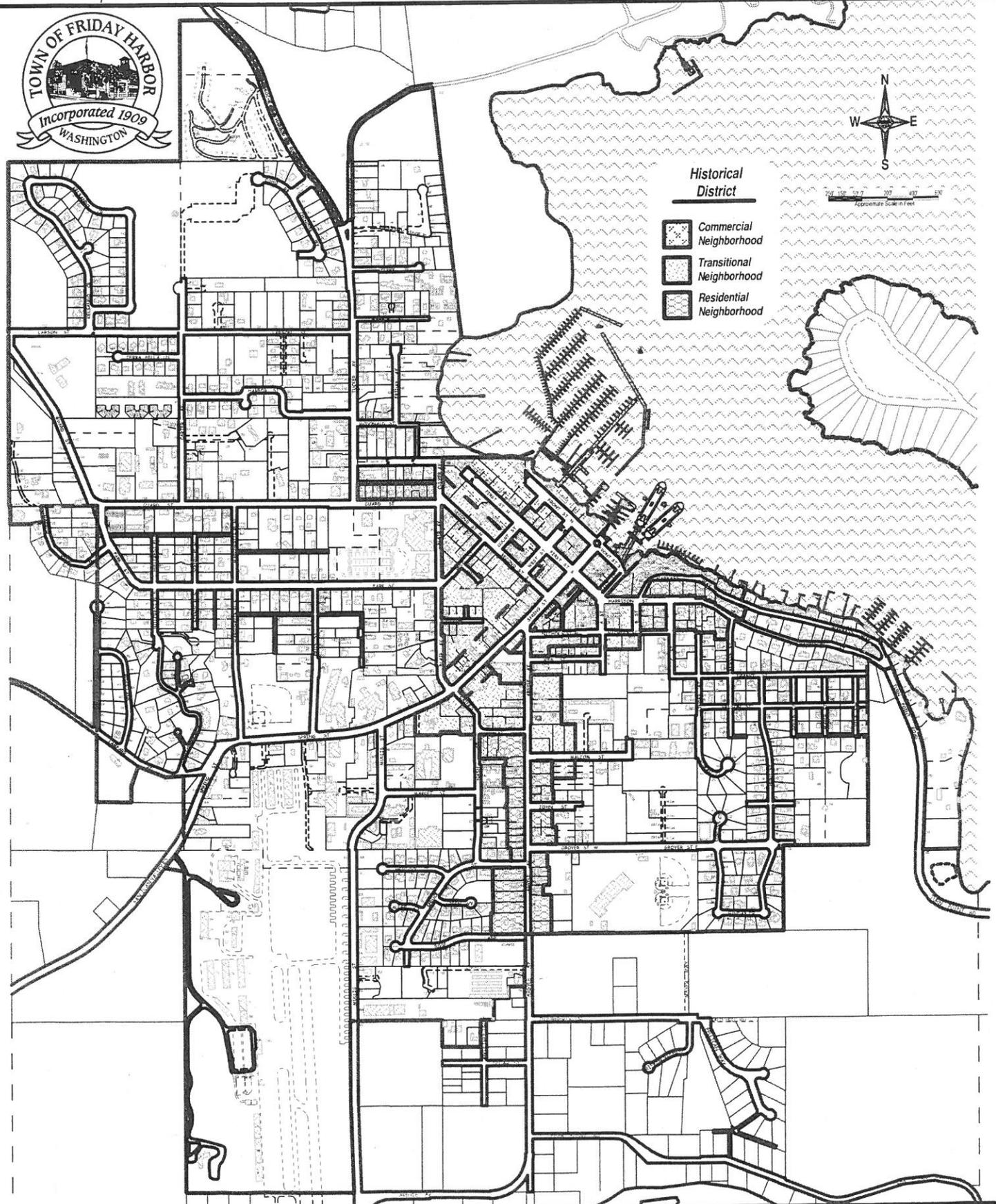
SUBTOTAL OF UA VALUES FROM WORKSHEET ABOVE	=	
COPY SUM OF UA VALUE FROM GLAZING WORKSHEET	=	
BUILDING HEAT LOSS CALCULATION VALUE	=	

Town of Friday Harbor
 PO Box 219 / Friday Harbor / WA / 98250
 (360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

Date Received:

Historic Preservation Review Board Review Process & Request

Application date	Tax parcel number	Job site address/physical location of property	
Name of legal property owner			Phone number
Property owner mailing address			
Authorized agent			Phone number Email address
Authorized agent mailing address			
Are you seeking Historic Preservation incentives (height or parking) for this project? If yes, please describe.			
<p>The Historic Preservation Review Board (HPRB) meets twice a month on the second and fourth Wednesday. To get your project on the HPRB Agenda we must receive <u>seven</u> 8.5 x 11" sets of the materials outlined below no later than noon on Tuesday, the week preceding the HPRB meeting. Questions? Call 360.378.2810. In order to provide help with design solutions and offer informed recommendations to applicants during the review process, the Historic Preservation Review Board (HPRB) relies upon the following applicant information:</p>			
1. A comprehensive written description of the proposed modifications to the existing building or of the proposed new construction including scope of work, materials, areas of demolition/new construction, etc.			
2. A site plan to scale that indicates the dimensions of the lot, the location of existing buildings, and the location of additions or new buildings. Also to be indicated: parking, signs, fencing, landscaping.			
3. A plan to scale showing elevations, and section drawings. Drawings should include materials to be used, window design, signs, exterior lighting with keyed dimensions.			
4. Detailed drawings of new or altered architectural features and trim.			
5. A description or sample of new exterior materials to be used, including the types of windows, roofing, and siding. (Product pamphlets describing the materials/products you propose to use can be obtained from the product vendor and/or from their websites online.)			
6. Photographs: When the HPRB is reviewing projects within the Historic District, it is helpful to have photographs of applicable buildings, sites, and streetscapes. Applicants are encouraged to include vintage or contemporary photographs that illustrate what you are proposing. Look around Friday Harbor, can you find examples of similar features that will demonstrate your concept?			
Please refer to the Town of Friday Harbor's Historic Preservation Manual for guidelines applicable to your proposed project and the historic district. Copies are available at Town Hall.			
Signature of Owner or Authorized Agent*			Date
If signed by the Authorized Agent, please attach a copy of the contractual authorization agreement signed by owner, or a letter from the owner authorizing representation the proposed work.			
Town of Friday Harbor Staff to complete the following:			
Date of HPRB Design Review: _____			
Number of Documents Received: _____			
HPRB Decision: <input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Design Review Summary is Attached			



Historical District

-  Commercial Neighborhood
-  Transitional Neighborhood
-  Residential Neighborhood

