



CITY OF PACIFIC
COMMUNITY DEVELOPMENT DEPARTMENT/ PUBLIC WORKS
100 3RD AVENUE SE
PACIFIC, WA 98047
Telephone (253) 929-1110 Fax (253) 887-9910

Project Name _____ Project Number _____

FEE OBLIGATION

In applying for this permit I acknowledge that, if the number of hours needed for but not limited to professional review exceeds the minimum stated in the Fee Resolution, I am responsible for further payment accordingly. I also acknowledge receipt of a copy of the Fee Resolution.

Deposits represent an estimate of the time needed for, but not limited to professional review, field inspections and other estimated expenses in the next step of reviews. The City reserves the right to request additional deposits in the future for other anticipated costs for the completion of this project. If all of the deposit money is not used, a full refund of the unused portion will be returned to you upon completion of the project.

Signature of Person with Ownership Interest
(Contract Purchaser or Current Owner)

Date

Designated Contact Person Print Name

Address

Address of Owner

Phone

Phone