

BUILDING PERMIT

CITY OF ANACORTES
P.O. BOX 547
ANACORTES, WA 98221
(206) 293-1901

PERMIT NO.: BLD95-0086
APPLIED: 03/29/95
ISSUED: 04/03/95
EXPIRES: 04/03/96

SITE ADDRESS: 1405 15TH
ASSESSOR'S PARCEL NO.: 3772-119-004-0004

PROJECT DESCRIPTION: Add 12x40' garage.

OWNER JEAN JANCE 1401 15TH STREET ANACORTES WA 98221 293-	CONTRACTOR KISER CONSTRUCTION 2301 11TH STREET ANACORTES WA 98221 293-2507 KISERC087C1	LENDER
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TYPE OF WORK.....:ADD	AREA (sf)-----	VALU...\$: 9500
TYPE OF USE.....:SF	LOT.....: 0	REQUIRED SETBACKS----
CENSUS CATEGORY.....:434	1ST FLR.....: 0	FRONT.....: 0 ft
ZONING-----	2ND FLR.....: 0	SIDE.....: 0 ft
:R2 :	BASEMENT.....: 0	REAR.....: 0 ft
OCCUPANCY GROUP-----	GAR/CARPORT...: 480	REQUIRED PARKING--
:R3 :? :? :? :	OTHER.....: 0	TOTAL.....: 0
TYPE OF CONSTRUCTION-----	NUMBER OF UNITS.....: 1	HANDICAPPED: 0
:5N :? :? :? :	STORIES.....: 1	COMPACT.....: 0
OCCUPANT LOAD-----	BUILDING HEIGHT.: 0 ft	IMPRV SURF.: 0 sf
: 0: 0: 0: 0: 0:		

FEES	NOTES
Code Amount---- By- Date---- Receipt	
PLCK \$ 52.33 MD 04/03/95 3668	
PRMT \$ 80.50 MD 04/03/95 3668	
STBC \$ 4.50 MD 04/03/95 3668	
TOTAL \$ 137.33	

I hereby acknowledge that I have read this permit and state that the above information is correct, and agree to comply with all ordinances and laws regulating activities covered by this permit.


Issued by


Applicant or Owner's Signature

24 Hour Notice Required For All Inspections

COMBINATION PERMIT

CITY OF ANACORTES
 P.O. BOX 547
 ANACORTES, WA 98221
 (206) 293-1901

PERMIT NO.: COM95-0022
 APPLIED: 03/13/95
 ISSUED: 03/13/95
 EXPIRES: 03/13/96

SITE ADDRESS: 1405 15TH
 ASSESSOR'S PARCEL NO.: 3772-119-004-0004

PROJECT DESCRIPTION: Move bathroom, clean-up walls etc, sheetrock inside house remove two windows and add egress window.

OWNER JEAN JANCE 1401 15TH STREET ANACORTES WA 98221 293-	CONTRACTOR KISER CONSTRUCTION 2301 11TH STREET ANACORTES WA 98221 293-2507 KISERC087C1	LENDER
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TYPE OF WORK.....:REP	AREA (sf)-----	VALU...\$: 8500	
TYPE OF USE.....:SF	LOT.....: 0	REQUIRED SETBACKS----	
CENSUS CATEGORY.....:434	1ST FLR.....: 0	FRONT.....: 20 ft	
ZONING-----	2ND FLR.....: 0	SIDE(1)...: 5 ft	
:? :	BASEMENT.....: 0	SIDE(2)...: 10 ft	
OCCUPANCY GROUP-----	GAR/CARPORT....: 0	REAR.....: 20 ft	
:R3 :? :? :? :	OTHER.....: 0	REQUIRED PARKING--	
TYPE OF CONSTRUCTION-----		TOTAL.....: 0	
:5N :? :? :? :	NUMBER OF UNITS.....: 0	ACCESSIBLE..: 0	
OCCUPANT LOAD-----	STORIES.....: 0	COMPACT.....: 0	
: 0: 0: 0: 0:	BUILDING HEIGHT..: 0 ft	IMPRV SURF..: 0 sf	

FEES			
Code	Amount----	By- Date----	Receipt
PRMT \$	74.50 MD	03/13/95	3588
PPLM \$	41.00 MD	03/13/95	3588
STBC \$	4.50 MD	03/13/95	3588
TOTAL \$ 120.00			

FUEL TYPES-----	BOILERS/COMPRESSORS-	DOMES. INCIN.....:0	
:? :	0-3 HP.....: 0	COMML. INCIN.....:0	
FURN < 100K BTU: 0	3-15 HP.....: 0	RELOC/REPAIR....: 0	
FURN >=100K BTU: 0	15-30 HP.....: 0	CLOTHES DRYERS..: 0	
FURN - FLOOR....: 0	30-50 HP.....: 0	GAS WTR HEATERS: 0	
UNIT HEATERS....: 0	50+ HP.....: 0	STOVE, APPLI....: 0	
VENT FANS.....: 0	AIR HANDLING UNITS--	FIRE LOG/LITE...: 0	
VENT SYSTEMS....: 0	<= 10000 cfm.: 0	WOODSTOVES.....: 0	
VENT W/O APPLI.: 0	> 10000 cfm.: 0	OTHER UNITS.....: 0	
	EVAP COOLERS....: 0	GAS OUTLETS....: 0	
	HOODS.....: 0		

WATER CLOSETS...: 1	WASHING MACHINES: 0	FLOOR DRAINS....: 0
BATH TUBS.....: 0	ELEC WTR HEATERS: 0	WTR PIPING/TREAT: 0
SHOWERS.....: 1	LAUNDRY TRAYS...: 0	HOSE BIBBS.....: 0
DISHWASHERS....: 0	URINALS.....: 0	GREASE TRAPS....: 0
LAVATORIES.....: 1	WASTE INTERCEPT: 0	ADD'L FIXTURES...: 0
KIT SINKS W/DISP: 0	DRINKING FOUNT...: 0	

NOTES

I hereby acknowledge that I have read this permit and state that the above information is correct, and agree to comply with all ordinances and laws regulating activities covered by this permit.

Michelle Deaton
 Issued by

[Signature]
 Applicant or Owner's Signature

24 Hour Notice Required For All Inspections

BOARD OF ADJUSTMENT

Date Oct. 6, 1968

Fence Height Variance

Applicant's Name Wally A WARM
Applicant's Address 1405 15TH ST ANACORTES, WASH
Property Address 1405 15TH ST, ANACORTES, WASH
Legal description of property Lot 344, Block 119
ORIGINAL,

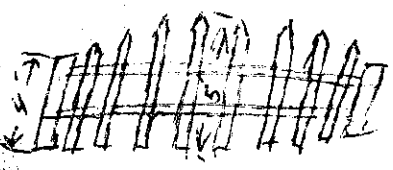
Height of Fence Request NOT over 5 Feet
Date of Board of Adjustment Hearing _____

Plot Plan showing location and height of proposed fence on reverse side.
Also indicate name and address of adjoining property owners.

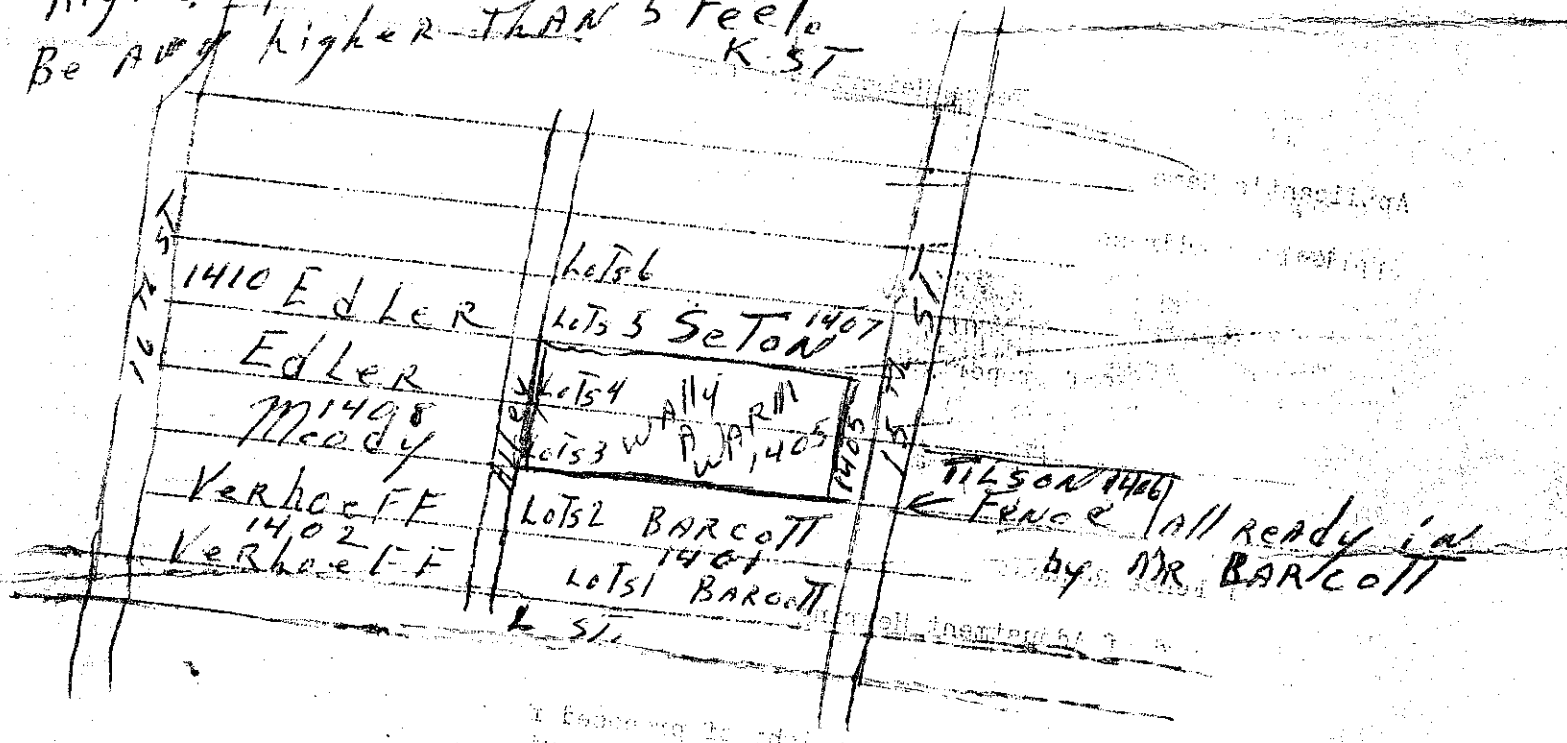
Signatures of adjoining property owners, or in lieu thereof, a certified mail receipt and affidavit indicating they have been given 10 days notice that a hearing is to be held.

1. Donald A. Seters 1407 15TH ST
2. Anton Barcot 1401 15TH ST
3. Leonard C. Verhoff 1402 16TH ST
4. Pearl Moody 1408 16TH ST
5. Robert B. Johnson 1406 15TH ST
6. Claida Edler 1410 16TH ST

Wally A Warm
Applicant's signature



post will be 4 Feet
 high pickets will Not
 Be Any higher THAN 5 Feet
 K ST



I would like A Fence All
 They around my property To keep
 Dogs out & Kids in. Also we are
 gone during the summer months and
 I think A higher Fence than 2 1/2 Feet
 would keep out people, so that
 would not have any right to be there.

RECORD OF FINDINGS OF FACT BY BOARD OF ADJUSTMENT
IN ALL CASES

Request of Wally A. Warm, 1405 15th St., Anacortes, Wash. for height
of fence variance to not over 5 feet.

DATA

DATE THIS APPLICATION FILED October 7, 1968

NOTICE OF HEARING October 7, 1968

DATE OF HEARING November 7, 1968

POSTED October 7, 1968

SIGNED

Loutha Felton

Secretary of Board

DECISION

Application or appeal granted in accordance with the terms of the following
~~denied~~
order: _____

Date

Nov. 7, 1968

Loutha Felton

Secretary, Board of Adjustment

FOR INSPECTIONS CALL:

CITY OF ANACORTES

PERMIT NO 8780

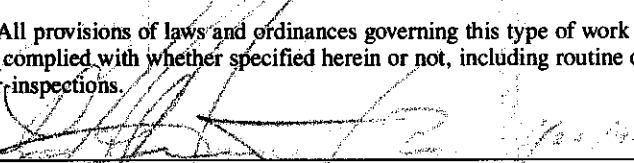
293-1901

BUILDING PERMIT

1405 15th Street

24 Hrs. Notice Requested

Site Address

OWNER	NAME (OR NAME OF BUSINESS) Buck Lieske			PLUMBING																																																	
	MAILING ADDRESS 1405 15th Street																																																				
	CITY Anacortes, WA 98221	TELEPHONE NUMBER 293-3566		No.	TYPE OF FIXTURE OR ITEM	FEE																																															
					Water Closet	\$																																															
ARCHITECT	NAME				Bathtub																																																
	ADDRESS				Lavatory																																																
	CITY	TELEPHONE NUMBER			Shower																																																
CONTRACTOR	NAME Savage Roofing				Kitchen Sink																																																
	ADDRESS P.O. Box 367				Dishwasher																																																
	CITY Anacortes, WA 98221	TELEPHONE NUMBER 293-2021			Laundry Tray																																																
	STATE LICENSE NUMBER SAVAGRI193PE	CITY LICENSE NUMBER 4344			Clothes Washer																																																
	<input type="checkbox"/> Residential	<input type="checkbox"/> Non-Residential			Water Heater																																																
<input type="checkbox"/> New <input type="checkbox"/> Add <input type="checkbox"/> Alter <input type="checkbox"/> Repair				Urinal																																																	
<input type="checkbox"/> Building <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical				Drinking Fountain																																																	
<input type="checkbox"/> Sign <input type="checkbox"/> Demolition <input type="checkbox"/> Other				Floor Sink or Drain																																																	
Legal Description of Property or Tax Account Number				Slop Sink																																																	
Lot _____ Block _____ of _____				Water Piping																																																	
Describe Work Reroof																																																					
Occupancy Use																																																					
<input type="checkbox"/> Single Family Residence <input type="checkbox"/> Multi-Family Residence																																																					
<input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> Storage <input type="checkbox"/> Church																																																					
<input type="checkbox"/> Restaurant <input type="checkbox"/> Other _____																																																					
NOTICE																																																					
This permit is issued by the Building Official and, under the provisions of the Uniform Building Code, shall expire by limitation and become null and void if the building or work authorized by such permit is not commenced within 180 days from the date of permit issuance, or if the building or work authorized by such permit is suspended or abandoned at any time after the work is commenced for a period of 180 days.																																																					
By affixing my signature, I hereby certify that I am the owner of the property for which this permit is issued or am an authorized representative of the owner.																																																					
All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, including routine calls for inspections.																																																					
 Signature of Owner or Authorized Agent (Date)																																																					
Street Setback	Side Yard Setback	Rear Yard Setback																																																			
Use Zone	Occupancy Group	Type of Const.																																																			
Lot Area	Vacant Site <input type="checkbox"/> Yes <input type="checkbox"/> No	Dwelling Units																																																			
Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of Stories	Bedrooms	Occupant Load																																																		
Size of Bldg.	Plans Checked By:																																																				
WHEN SIGNED AND DATED BELOW, THIS IS YOUR PERMIT																																																					
Permission is hereby given to do the above described work, according to the conditions hereon and according to the approved plans and specifications pertaining thereto, subject to compliance with the ordinances of the CITY OF ANACORTES.																																																					
05/22/91																																																					
Permit Issued By <i>Edwin Frank</i>																																																					
Building Official (Date)																																																					
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			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align:center;">TOTAL FEES</td> <td style="text-align:center;">VALUATION</td> <td style="text-align:center;">FEE</td> </tr> <tr> <td colspan="2"></td> <td style="text-align:right;">2,195.00</td> <td style="text-align:right;">39.00</td> </tr> <tr> <td>Building</td> <td></td> <td style="text-align:right;">\$</td> <td style="text-align:right;">0.00</td> </tr> <tr> <td>Plan Check</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plumbing</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Mechanical</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sign</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Demolition</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Energy Surcharge</td> <td></td> <td></td> <td style="text-align:right;">.50</td> </tr> <tr> <td>State Surcharge</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Other</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="text-align:right;">TOTAL \$</td> <td></td> <td style="text-align:right;">40.50</td> </tr> </table>			TOTAL FEES		VALUATION	FEE			2,195.00	39.00	Building		\$	0.00	Plan Check				Plumbing				Mechanical				Sign				Demolition				Energy Surcharge			.50	State Surcharge				Other				TOTAL \$			40.50
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TOTAL \$			40.50																																																		
Conditions:																																																					

PERMIT NO 8780

7405-15-10- waarna

LEGAL DESCRIPTION

ASSESSORS ACCOUNT NO. 3772-119-00⁴~~6~~-0004

PERMIT NO.	DATE	DESCRIPTION	DATE FINALED
1733	12-12-67	panelnet ceiling (self)	

MECHANICAL PERMIT

CITY OF ANACORTES
 P.O. BOX 547
 ANACORTES, WA 98221
 (206) 293-1901

PERMIT NO.: MEC95-0023
 APPLIED: 03/16/95
 ISSUED: 03/16/95
 EXPIRES: 03/16/96

SITE ADDRESS: 1405 15TH
 ASSESSOR'S PARCEL NO.: 3772-119-004-0004

PROJECT DESCRIPTION: New Gas furnace and piping.

OWNER KISER CONSTRUCTION 2301 11TH STREET ANACORTES WA 98221 293-2507	CONTRACTOR FOSS & CO. 329 E BLACBURN MT. VERNON WA 98273 FOSSCH*072MF
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TYPE OF WORK...:ADD	BOILERS/COMPRESSORS-	DOMES. INCIN.....:0
TYPE OF USE.....:RES	0-3 HP.....: 0	COMML. INCIN.....:0
	3-15 HP.....: 0	RELOC/REPAIR....: 0
FUEL TYPES-----	15-30 HP.....: 0	CLOTHES DRYERS.: 0
:/GAS/ / /:	30-50 HP.....: 0	GAS WTR HEATERS: 0
FURN < 100K BTU: 1	50+ HP.....: 0	STOVE, APPLI....: 0
FURN >=100K BTU: 0	AIR HANDLING UNITS--	FIRE LOG/LITE...: 0
FURN - FLOOR....: 0	<= 10000 cfm.: 0	WOODSTOVES.....: 0
UNIT HEATERS....: 0	> 10000 cfm.: 0	OTHER UNITS.....: 0
VENT FANS.....: 0	EVAP COOLERS....: 0	GAS OUTLETS.....: 1
VENT SYSTEMS....: 0	HOODS.....: 0	
VENT W/O APPLI.: 0		

FEEES Code Amount---- By- Date---- Receipt PRMT \$ 27.00 MD 03/16/95 3608 TOTAL \$ 27.00	NOTES <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
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I hereby acknowledge that I have read this permit and state that the above information is correct, and agree to comply with all ordinances and laws regulating activities covered by this permit.

Michelle Deaton
 Issued by

David F. [Signature]
 Applicant or Owner's Signature

24 Hour Notice Required For All Inspections