



City of Anacortes
904 6th Street
P.O.Box 547
Anacortes, WA 98221-0547

Permit #: BLD-2007-0430
Issue date: 06/14/2007
Expire date: 06/13/2008

Job Address: 1908 22ND ST
ANACORTES WA 98221-2414

Permit Type: Reroof Single Family Residence
Project:

APN: P57546

Remarks: remove existing roofing, apply new composition roofing over 30# felt over solid sheathing, install roof venting.

Owner: ROBERT HARRISON
Address: 1908 22ND ST
ANACORTES WA 98221-2414
Phone: (206) 630-9023

Contractor: SKAGIT ROOFING
Address: 9672 FARM TO MARKET RD
BOW WA 98232-7223
Phone:
License #: SKAGIRL949QP

General Information:

Occupancy Group ir-1
Building Valuation 6120

Fees:	
Building Permit Fee	62.50
State Building Code Fee	4.50
Total Calculated:	67.00
Deposits/Receipts:	0.00
Total Due:	67.00

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.


SIGNATURE OF OWNER OR AUTHORIZED AGENT


ISSUED BY



Residential Building Permit Application

Building Department

P.O. Box 547 Anacortes, WA 98221

Phone No.: 360-293-1901 FAX: 360.293.1938

SITE ADDRESS: 1908 22nd ST

CONTRACTOR <input checked="" type="checkbox"/> Applicant Name <u>SKABIT ROOFING</u> Address <u>9672 FARM TO MARKET RD</u> City/State/Zip <u>BOW WA 98232</u> Phone <u>425-1900</u> FAX <u>760-4355</u> State License # <u>SKAGIRL9490P</u> Exp <u>11/15/07</u> City of Anacortes License _____	PROJECT DESCRIPTION RE-ROOF TEAR OFF EXISTING COMPOSITION ROOFING INSTALL #30 FELT UNDERLAYMENT INSTALL FIBERGLASS COMPOSITION INSTALL 9 ATTIC VENTS
PROPERTY OWNER <input type="checkbox"/> Applicant Name <u>ROBERT HARRISON</u> Address <u>1908 22nd ST</u> City/State/Zip <u>ANACORTES</u> Phone <u>206 630 4023</u> FAX _____ E-Mail Address _____	PARCEL NUMBER <u>P57546</u>
<input type="checkbox"/> Architect <input type="checkbox"/> Designer <input type="checkbox"/> Engineer <input type="checkbox"/> Applicant Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail Address _____	LEGAL DESCRIPTION <u>ISLAND VIEW PARK PLAT</u> <u>W 55 FT LOT 21</u> <u>E 25 FT LOT 22</u>
CONTACT <input checked="" type="checkbox"/> Applicant Name <u>JIM GUSEY / SKABIT ROOFING</u> Address _____ City/State/Zip _____ Phone <u>661-5221</u> FAX _____ E-mail Address _____	PROJECT VALUATION <u>6120.00</u> Number of Dwelling Units <u>1</u> Number of Stories <u>1</u> Building Area: 1 st Floor _____ s.f. 2 nd Floor _____ s.f. 3 rd Floor _____ s.f. Basement _____ s.f. Garage _____ s.f. Carport _____ s.f. Deck _____ s.f. Lot Area _____ s.f. LENDER LENDER INFORMATION MUST BE PROVIDED FOR PROJECTS OVER \$5,000 IN VALUATION PER RCW. Name _____ Address _____ City/State/Zip _____ Phone No. _____

CONTINUED ON THE BACK

67-0430

Residential Mechanical Fixtures

Fuel Type

Natural Gas
 Electric
 Wood
 Propane Gas
 Other

Type of Equipment	Number of Fixtures	Type of Equipment	Number of Fixtures
Furnace <=100K BTU		Clothes Dryer	
Boilers/AC/Heat Pump		Gas Water Heater	
Gas Outlets		Gas Fireplace	
Ventilation Fans		Fireplace Insert	
Stove, Appliance		Other Units	
Range Hood			

Residential Plumbing Fixtures

Type of Fixture	Number of Fixtures	Type of Fixture	Number of Fixtures
Toilet		Clothes Washer	
Bathtub		Electric Water Heater	
Shower		Utility Sink	
Dishwasher		Hose Bibb	
Hand Sink		Water Piping	
Kitchen Sink w/Disposal		Additional Fixtures	

I HEREBY ACKNOWLEDGE IF HAVE READ THIS PERMIT APPLICANT AND STATE THE INFORMATION IS CORRECT, AND AGREE TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAWS REGULATING ACITIVIES COVERED BY THIS PERMIT APPLICATION. WITH THIS PERMIT ALL CONTRACTORS AND SUBCONTRACTORS SHALL HAVE A CURRENT WASHINGTON STATE CONTRACTORS LICENSE AND A CITY BUSINESS LICENSE. STOP WORK ORDERS WILL BE ISSUED ON JOB SITES WHERE CONTRACTORS/SUBCONTRACTORS ARE WORKING WITHOUT PROPER LICENSE.



 APPLICANT'S SIGNATURE

6.14.07

 DATE



City of Anacortes
 904 6th Street
 P.O.Box 547
 Anacortes, WA 98221-0547
 (360) 293-1901

Permit #: BLD-2006-0260
Issue date: 04/12/2006
Expire date: 06/11/2006

Job Address: 1908 22ND ST
 ANACORTES WA 98221-2414

Permit Type: Demolition Permit
Project:

APN: P57546

Remarks: Removal of one 300 gallon underground heating oil tank. Excavate pump insert cut and clean remove and back fill tank pit.

Owner: MOORE KEN C

Contractor: ULTRA TANK SERVICES

Address: 1908 22ND ST
 ANACORTES WA 98221-2414

Address: PO BOX 30076
 BELLINGHAM WA 98228-2076

Phone:

Phone: (360) 815-5361

License #: ultratso33ck

General Information:

Fees:

Total Calculated:
 Adjustments:
 Deposits/Receipts:
 Total Due:

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SIGNATURE OF OWNER OR AUTHORIZED AGENT

By Mail Michelle Deaton
 ISSUED BY

CITY OF ANACORTES DEMOLITION PERMIT APPLICATION

Site Address: 1908 22nd St. Date: 4-2-06
Assessors Account No.: _____
Lot(s): _____ Block: _____ Addition: _____

Owners Name: Ann Moore
Address: 1908 22nd St.
State: WA Zip: 98221
Phone: _____

Contractors Name: UTS Inc.
Address: P.O. Box 30096
State: WA Zip: 98228-2096
Contractors License: Ultrats033ck
Phone: 360-738-7611

Have Utilities Been Notified?

Water Dept.: Yes No
Electric: Yes No
Cable: Yes No
Gas: Yes No
Phone: Yes No

Describe Work & Tools To Be Used. How Will Materials Be Disposed?

Removal of (1) 300 gallon underground
Heating Oil Tank. Excavate
Pump Inert Cut & Clean Remove
& Back fill Tank Pit.

BARRICADES TO BE PROVIDED FOR PUBLIC PROTECTION, AREA MUST BE ROPED OFF!!!!!!!!!!!!!!
SEE SECTION 4409 U.B.C.

George Willett
(Applicant's or Agent's Signature)

ASBESTOS WARNING

Breathing asbestos is hazardous to your health. Before starting a renovation or demolition project, survey for friable asbestos materials. Notify Northwest Air Pollution Authority prior to asbestos removal or containment. 201 Pioneer Bldg., Mt. Vernon, WA 98273. (360)428-1617

Fire Department Approval: [Signature] Date: _____
(Fire Chief or Fire Marshal)

Police Dept. Notification: _____ Date: _____

Public Works Dept: [Signature] Date: 4-12-06
(Special Engineer)

Comments: _____

MECHANICAL PERMIT

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

PERMIT NO.: **MEC97-0087**
 APPLIED: **07/30/97**
 ISSUED: **07/30/97**
 EXPIRES: **07/30/98**

SITE ADDRESS: **1908 22ND ST**
 ASSESSOR'S PARCEL NO.: **3798-000-022-0001**

PROJECT DESCRIPTION: **Gas fireplace**

OWNER KEN MOORE 1908 22ND STREET ANACORTES WA 98221 293-2211	CONTRACTOR BARRON HEATING & AIR COND, INC P. O. BOX 1118 BELLINGHAM WA 98227 360-676-1131 BARROHA179D7
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TYPE OF WORK...: ADD TYPE OF USE...: RES FUEL TYPES----- :/GAS/ / /: FURN < 100K BTU: 0 FURN >=100K BTU: 0 FURN - FLOOR...: 0 UNIT HEATERS...: 0 VENT FANS...: 0 VENT SYSTEMS...: 0 VENT W/O APPLI.: 0	BOILERS/COMPRESSORS-- 0-3 HP.....: 0 3-15 HP.....: 0 15-30 HP.....: 0 30-50 HP.....: 0 50+ HP.....: 0 AIR HANDLING UNITS-- <= 10000 cfm.: 0 > 10000 cfm.: 0 EVAP COOLERS...: 0 HOODS.....: 0	DOMES. INCIN.....: 0 COMML. INCIN.....: 0 RELOC/REPAIR...: 0 CLOTHES DRYERS.: 0 GAS WTR HEATERS: 0 STOVE, APPLI...: 0 FIRE LOG/LITE...: 1 WOODSTOVES.....: 0 OTHER UNITS.....: 0 GAS OUTLETS.....: 1
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<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">FEES</th> <th style="text-align: left;">Code</th> <th style="text-align: left;">Amount</th> <th style="text-align: left;">By-</th> <th style="text-align: left;">Date</th> <th style="text-align: left;">Receipt</th> </tr> <tr> <td></td> <td>PRMT</td> <td>\$ 37.00</td> <td>MD</td> <td>07/30/97</td> <td>7274</td> </tr> <tr> <td colspan="2">TOTAL \$</td> <td>37.00</td> <td colspan="3"></td> </tr> </table>	FEES	Code	Amount	By-	Date	Receipt		PRMT	\$ 37.00	MD	07/30/97	7274	TOTAL \$		37.00				NOTES <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
FEES	Code	Amount	By-	Date	Receipt														
	PRMT	\$ 37.00	MD	07/30/97	7274														
TOTAL \$		37.00																	

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

CITY OF ANACORTES

BLDG. PLUMBING MECHANICAL

PERMIT 5929

Telephone 293-5173
ANACORTES, WASH.

DATE 22 Oct 1987

PERMISSION IS HEREBY GRANTED TO:

OWNER 1908 29th Ken Morris

STREET ADDRESS ↓

LOCATION WHERE WORK IS TO BE DONE

CONTRACTOR Savage Roofing

TO ERECT INSTALL OR REPAIR

IN THE FOLLOWING MANNER: Remove existing 2 water & install 15 lb Super Guard #1 Drain Patch

PERMIT EXPIRES ONE YEAR FROM DATE ISSUED

PLANS FOR CONSTRUCTION WERE NOT SUBMITTED
WERE

WORK TO BE DONE BY OWNER CONTRACTOR

RECEIPT OF FEES IS ACKNOWLEDGED AS FOLLOWS:

TYPE	APPROXIMATE VALUE OF WORK	PERMIT FEES
ISSUING		
BUILDING	3495 ⁰⁰	35 ⁰⁰
GAS PIPING		
PLUMBING AND W.S.		
SEWER CONNECTION INSP.		
MECHANICAL		
PLAN CHECK FEE		
MISC. <u>state exchange</u>		3 ⁵⁰
TOTAL		25⁵⁰

LEGAL DESCRIPTION _____

Ralph L. Smith
CITY INSPECTOR

CITY OF ANACORTES

BLDG. PLUMBING MECHANICAL

PERMIT **2513**

ANACORTES, WASH. DATE 11-3 1980

PERMISSION IS HEREBY GRANTED TO:

OWNER Ken Moore

STREET ADDRESS 1708-22nd
LOCATION WHERE WORK IS TO BE DONE

CONTRACTOR Lamine Heating

TO ERECT INSTALL OR REPAIR

IN THE FOLLOWING MANNER: 7 Mo. Heat
F.P. insert to code

PERMIT EXPIRES ONE YEAR FROM DATE ISSUED

PLANS FOR CONSTRUCTION WERE NOT SUBMITTED
WERE

WORK TO BE DONE BY OWNER CONTRACTOR

RECEIPT OF FEES IS ACKNOWLEDGED AS FOLLOWS:

TYPE	APPROXIMATE VALUE OF WORK	PERMIT FEES
ISSUING		300
BUILDING		
GAS PIPING		
PLUMBING AND W.S.		
SEWER CONNECTION INSP.		
MECHANICAL <u>F.P. insert</u>	595 00	300
PLAN CHECK FEE		
MISC.		
TOTAL	595 00	600

LEGAL DESCRIPTION LOT 22 Sta. View Park
act # 3798-000-022-0004

Ray Green
 CITY INSPECTOR

ADDRESS 1908 22nd

LEGAL DESCRIPTION lot 22 Island View Park

ASSESSORS ACCOUNT NO. 3798-000-022-0004

PERMIT NO.	DATE	DESCRIPTION	DATE FINALED
4830		composition roofing	
462	9-5-72	Electric h.w heater	