



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

Permit #: BLD-2013-0538
Issue date: 12/24/2013
Expire date: 06/22/2015

Job Address: 2203 22ND ST
 ANACORTES WA 98221-7407

Permit Type: Mechanical Permit
Project:

APN:

Remarks: Install two electric water heaters

Owner: DREW SCHNABEL

Contractor:

Address: 2203 22ND ST

Address:

ANACORTES WA 98221-7407

Phone:

Phone:

License #:

General Information:

of Other Mechanical Units 2

Fees:

Mechanical Permit Fees 44.80


Total Calculated: 44.80

Deposits/Receipts: 0.00

Total Due: 44.80

1335902-1 0005 12/24/2013 001 104
 Permit Fees 009936 \$44.80

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED. 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

Ed



ANACORTES PUBLIC WORKS DEPARTMENT

P.O. BOX 547, ANACORTES, WA 98221
ROBERT W. HYDE, P.E., DIRECTOR

PH (360) 293-1919
FAX (360) 293-1938

E-MAIL: bobhyde@cityofanacortes.org

May 18, 2004

Ray & Katherine Nowotny
2203 22nd St.
Anacortes, WA 98221

RE: Encroachment Agreement - Lots 1, 2 and East 1/2 of lot 3 Block 214 - "Map Of City Of Anacortes" As Per Plat Recorded In Vol. 2 Page 4.

Encroachment Description

To encroach 40 feet by 100 feet off of the North property line to construct a fence 6 feet in height and landscape

Dear Sir:

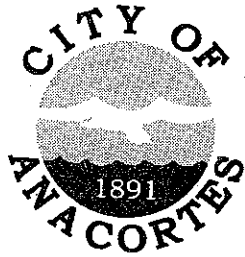
I am sorry to inform you that your Encroachment Request has not been approved do to the following conditions:

- Need to maintain access to the storm drain stub out and the sanitary sewer cleanout that is in the utility easement.
- Need access to the water line in the utility easement.

If you have any further questions or concerns regarding this agreement, please do not hesitate to call me at 293-1921.

Very Truly Yours,
CITY OF ANACORTES

Marc E Krueger
Public Services



ANACORTES PLANNING & COMMUNITY DEVELOPMENT DEPT.

(INCLUDING BUILDING DEPARTMENT)
P.O. BOX 547, ANACORTES, WA 98221
IAN MUNCE, DIRECTOR

(360) 299-1943
(360) 293-1938 FAX

August 18, 2003

Ray and Katherine Nowotny
2203 22nd St.
Anacortes, WA 98221

Dear Mr. and Mrs. Nowotny:

This letter shall serve as your Home Occupation Permit to use your home at 2203 22nd Street for your business to operate one tanning bed. The permit is granted based on the description of the Home Occupation as outlined in your July 15, 2003 application and subject to the following conditions:

- (1) A parking plan shall be provided for Building Department review and approval.
- (2) The business is limited to one tanning bed.

I have enclosed an information sheet that lists the conditions imposed on all home occupation permits. The information sheet also outlines the appeal process and the time restrictions should an appeal be filed. If no appeal is made the effective date of the permit shall be **August 25, 2003**.

I'd like to take this opportunity to thank you for participating in the planning and permit process and to wish you well with your business venture.

Sincerely,

CITY OF ANACORTES

A handwritten signature in cursive script, appearing to read "Ian S. Munce".

Ian S. Munce, AICP
Director of Planning and Community Development

ISM:kj

Attachment

cc: Adjacent property owners
Ed Frank, Building Official, 293-1901 (business sign information)
Susan Chenoweth, 299-1968 (business license information)



HOME OCCUPATION PERMITS

Home Occupation Permits are conditional uses which shall be processed by the administrative official, with appeal of decision to the City Council.

The administrative official is authorized and may issue Home Occupation Permits in any residential use district upon application provided that:

1. The home occupation fulfills the conditions regulating home occupations as set forth below, and
2. The administrator finds the request will not cause detrimental effects to the surrounding neighborhood.

Conditions Regulating Home Occupation Permits:

1. The occupation may include such uses as personal, business, or professional services, or offices and repair shops for household items. Mechanical equipment used in the home occupation shall not be of a nature that is objectionable due to noise, dust, smoke, vibration, odor or electronic interference.
2. The occupation shall be carried on entirely within the residence by the occupant thereof. There shall be no exterior modification of the building in order to accommodate the occupation, nor shall there be any outward manifestation of the occupation. The primary use of the premises shall be residential and at no time shall the home occupation be the predominant use.
3. No person other than members of the family residing on the premises shall be engaged in such occupation. If the occupation requires that customers or clients visit the premises, required parking will be a condition of the permit.
4. Once a Home Occupation Permit has been issued it shall not be transferable to another person or to a location other than stated in the permit; nor shall the specified conditions be changed.
5. A flat unlighted sign flush against the building is allowed. Such sign shall not exceed two square feet in area.

APPEAL PROCESS:

Any aggrieved party shall have five working days from date of the decision to appeal the decision of the administrator to the City Council. The appeal is to be filed with the City Clerk. The permit shall not become valid until expiration of the five days. An appeal stays the validity of the permit until a decision is made by the City Council.



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

Permit #: BLD-2003-8433
Issue date: 01/27/2003
Expire date: 01/27/2004

Job Address: 2120 D AVE
 ANACORTES WA 98221

APN: P56274

Permit Type: Single Family Alteration/Repair Permit

Project:

Remarks: Hook up existing single family residence into Ctiy Sewer.

Applicant: RAY NOWOTNY
Address: 2120 D AVE
 ANACORTES, WA 98221
Phone: (360) 588-0537

Owner: RAY NOWOTNY
Address: 2120 D AVE
 ANACORTES WA 98221
Phone: (360) 588-0537

Contractor:

Address:

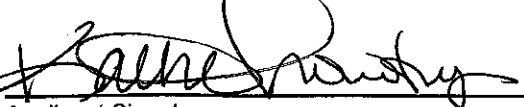
Phone:

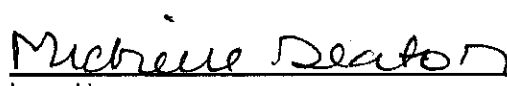
License #:

General Information:

Fees:	
Sewer GFC - Residential	4,080.00
Sewer Inspection Fee	50.00
Total Calculated:	4,130.00
Deposits/Receipts:	0.00
Total Due:	4,130.00

THIS APPLICATION IS RECEIVED BY THE BUILDING OFFICIAL UNDER THE PROVISIONS OF THE UNIFORM BUILDING CODE, AND SHALL EXPIRE BY LIMITATION AND BECOME NULL AND VOID IF PERMIT IS NOT OBTAINED WITHIN 180 DAYS OF THIS APPLICATION. BY AFFIXING MY SIGNATURE I HEREBY CERTIFY THAT I AM THE LEGAL OWNER OF THE PROPERTY FOR WHICH THIS APPLICATION IS ISSUED OR AN AUTHORIZED AGENT OF THE OWNER. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, INCLUDING CALLS FOR INSPECTIONS.


 Applicant Signature


 Issued by



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

Permit #: BLD-2002-8205
Issue date: 12/05/2002
Expire date: 12/05/2003

Job Address: 2120 D AVE
 ANACORTES WA 98221

APN: P56274

Permit Type: Single Family Alteration/Repair Permit

Project:

Remarks: Construct new garage/shop unheated.

Applicant: RAY NOWOTNY
Address: 2120 D AVE
 ANACORTES, WA 98221
Phone: (360) 588-0537

Owner: RAY NOWOTNY
Address: 2120 D AVE
 ANACORTES WA 98221
Phone: (360) 588-0537

Contractor:
Address:

Phone:
License #:

General Information:

Building Valuation 18000


Fees:


Building Permit Fee 128.50
 Plan Review Fee 83.53
 State Building Code Fee 4.50

Total Calculated: 216.53
 Deposits/Receipts: 0.00

Total Due: 216.53

THIS APPLICATION IS RECEIVED BY THE BUILDING OFFICIAL UNDER THE PROVISIONS OF THE UNIFORM BUILDING CODE, AND SHALL EXPIRE BY LIMITATION AND BECOME NULL AND VOID IF PERMIT IS NOT OBTAINED WITHIN 180 DAYS OF THIS APPLICATION. BY AFFIXING MY SIGNATURE I HEREBY CERTIFY THAT I AM THE LEGAL OWNER OF THE PROPERTY FOR WHICH THIS APPLICATION IS ISSUED OR AN AUTHORIZED AGENT OF THE OWNER. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, INCLUDING CALLS FOR INSPECTIONS.


 Applicant Signature


 Issued by

Final Inspection Checklist

Site Address: ~~2120~~ ^{2203 22nd} D AVE Permit No.: B1d-2063-8205

Date Issued: 12-5-02 Zoning: Occ. Group: R-3 Constr. Type: VN

Owners Name: Ray Nowotny

Owners Mailing Address: ~~2120 D AVE Ana~~ State: WA Zip: 98221

- | | | | |
|-------------------------------|---|--------------------|---|
| Variances: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Safety Glass: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Sewer Fee Paid: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Hand Rails: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Sewer Inspected: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Guard Rails: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| WSEC Compliance: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Traps: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Attic Access: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Wood Stove: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Smoke Detectors: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Water Pressure: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| T&P Drains: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | House Numbers: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Insulation Cert.: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Site Drainage: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Curb Cut: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Crawlspace Insul: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Bedroom Windows: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Water Heater Strp: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Vapor Barrier: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | D.W. Air Gap: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Water Meter Box: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Auto Garage Door: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Exterior Decks/Landings: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Outside Caulking: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> |
| Garage/House Door: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Inspected By: | LA |
| Crawl Space Access: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | Date: | 7/23/02 |
| Exh. Duct/Dryer Vent Dampers: | No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> | | |

CITY OF ANACORTES BUILDING PERMIT APPLICATION

SITE ADDRESS: 2120 D AVE. ASSESSOR NO.: 3772-214-010-0005

LOT: _____ BLOCK: _____ DIV: _____ ADDITION: _____

OWNER	LENDER	CONTRACTOR
<u>Name:</u> NOWOTNY, RAY	<u>Name:</u> 	<u>Name:</u> SAME
<u>Mailing Address:</u> SAME	<u>Mailing Address:</u> 	<u>Mailing Address:</u>
<u>City: State: Zip:</u> ANACORTES WA 98221	<u>City: State: Zip:</u> 	<u>City: State: Zip:</u>
<u>Phone No.:</u> 588 0537	<u>Phone No.:</u> 	<u>Phone No.:</u> <u>Contractor License:</u>

Contact Person: RAY NOWOTNY Phone No.: 360 588 0537

OCCUPANT USE					
(Check One)					
Single Family: <input checked="" type="checkbox"/>	Multi-Family: _____	Apartment: _____	Condominium: _____	Senior Housing: _____	
Retail: _____	Office: _____	Restaurant: _____	Manufacturing: _____	Storage: _____	Bank: _____
Assembly: _____	Accessory: _____	Automotive Repair: _____	Other (Specify): _____		

DESCRIBE OF WORK: CONSTRUCTION OF GARAGE/SHOP UNHEATED

GENERAL INFORMATION		
Street Setback: _____ ft.	2nd Floor: _____ sf.	(Circle Y or N) Shoreline/Wetlands Y N Water on/Adj. to Property Y N Soils Report Y N Sensitive Area Y N Latecomers Agreement Y N Fire Hydrant (250 FT) Y N Variance Y N Covenant Y N
1st Side Setback: _____ ft.	3rd Floor: _____ sf.	
2nd Side Setback: _____ ft.	Basement: _____ sf.	
Rear Setback: _____ ft.	Occ. Group: _____	
Use Zone: <u>R2</u>	Carport Area: _____ sf.	
Type of Construction: <u>GARAGE (W)</u>	Garage Area: <u>656</u> sf.	
Lot Area: _____ sf.	No. of Stories: _____	
No. of Dwellings: _____	Building Height: _____	
Lot Coverage: <u>688 SF (Total 2056)</u>	Deck Area: _____ sf.	
1st Floor: _____ sf. <u>(2625 SF allowed)</u>		

Project Valuation (Labor and Material Cost): 18,000

RECEIVED

OCT 18 2002

THIS APPLICATION IS RECEIVED BY THE BUILDING OFFICIAL UNDER THE PROVISIONS OF THE UNIFORM BUILDING CODE, AND SHALL EXPIRE BY LIMITATION AND BECOME NULL AND VOID IF PERMIT IS NOT OBTAINED WITHIN 180 DAYS OF THIS APPLICATION. BY AFFIXING MY SIGNATURE I HEREBY CERTIFY THAT I AM THE LEGAL OWNER OF THE PROPERTY FOR WHICH THIS APPLICATION IS ISSUED OR AN AUTHORIZED AGENT OF THE OWNER. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, INCLUDING CALLS FOR INSPECTIONS.

SIGNATURE: Katherine Nowotny DATE: 10/18/02

Bld-2002-8205



CITY OF ANACORTES
WASHINGTON
BUILDING DEPARTMENT

CERTIFICATE OF OCCUPANCY

This is to certify that the (Description of Building or Structure):

New Garage At Existing Residence

Located At: 2203 22nd Street
STREET & NUMBER

Owner: Ray Nowotny

Constructed By: _____
OWNER OR CONTRACTOR

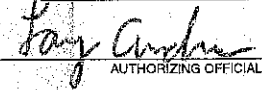
Bldg. Permit#: BLD-2003--8205

Date Issued: 12-5-02

Occ. Group: R3 Use Zone: R2

Has Been Inspected And Occupancy Is Hereby Authorized.

This 8th Day of August 2003



AUTHORIZING OFFICIAL

SEE REVERSE SIDE FOR SPECIAL REQUIREMENTS.

CITY OF ANACOSTIA BUILDING DEPARTMENT RESIDENTIAL CHECKLIST

(This form is to be completed prior to issuing the building permit)

Site Address: 2120 D Ave Date: 12/3/02
 Contact Person: Ray Nowotny Phone No.: 588-0537
 Assessors No.: 3772-214-010-0005 Lot: _____ Block: _____ Addition: _____

(Building Department Checklist for Completeness)

- | OK | NA | | OK | NA | |
|-------------------------------------|-------------------------------------|------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Fire Department Access | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Fire Hydrant Located within 250 feet |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Fire Flow Required | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Shoreline or Wetlands |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Site Plan | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Covenant Approval |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Variance Required | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Regulated Slopes |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plat Facts and Findings Compliance | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Survey in File |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Fill on Site | | | |

Received and Reviewed by: [Signature] Date: 12/3/02

(Engineering Department Checklist for Completeness)

- | OK | NA | | OK | NA | |
|--------------------------|--------------------------|-----------------------------------|--------------------------|--------------------------|-----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Water Extension/Meter | <input type="checkbox"/> | <input type="checkbox"/> | Sewer Extension/Connection |
| <input type="checkbox"/> | <input type="checkbox"/> | Street Improvements/Sidewalks | <input type="checkbox"/> | <input type="checkbox"/> | Site Drainage Plan |
| <input type="checkbox"/> | <input type="checkbox"/> | Covenant Not to Oppose Future LID | <input type="checkbox"/> | <input type="checkbox"/> | Latecomers Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Street Drainage | <input type="checkbox"/> | <input type="checkbox"/> | Driveway location, slope, culvert |
| <input type="checkbox"/> | <input type="checkbox"/> | Storm Drain Extension | | | |

Received and Reviewed by: _____ Date: _____

FURTHER COMMENTS

Existing House - Adding Garage

Zoning: R2
 Lot Size: 7,500 SF. (Garage 656 SF)
 Coverage Allowed: 2625 SF.
 Actual Coverage: 2056 SF. Total

D 17VE

75'

-46"

-29"

5'-0"

SET BACK
32'

DRAINAGE TO DITCH
18" MIN. DEPTH
4" SCH. 40 ABS

-9"

12'

SET BACK
W/MAX 1'-0"
OVERHANG

NEW
GARAGE
652 SQ.FT.

-6"

24'

-6"

-23"

EXISTING
RESIDENCE
960 SQ. FT.

FLOWER
BED

FLOWER
BED

4'-3"

ALLEY
DRIVE ENTRANCE TO GARAGE

DRIVEWAY

14'

FLOWER
BED

0"

+3"
100'

0"

AL