



**CITY OF ANACORTES**  
COMMUNITY DEVELOPMENT DEPARTMENT  
PERMIT CENTER - 904 - 6TH STREET

**CERTIFICATE OF OCCUPANCY**

This is to certify that the occupancy listed hereon has been inspected and is hereby approved for use.

719 22nd Street Address of Building/Premises		8614 Building Permit No.	
Anvil Corporation Occupant		Suite No. VN	
Anvil Corporation Owner		Business Registration No. B-1	
1675 W Bakerview, Bellingham 98226 Address of Owner		Type of Construction HM	
Maximum Occupancy Load		Zoning District	
Statement of Restrictions		Square Feet	

Inspection Approval: *Paul Little* 9-17-91 Issued By: *D. W. Carver* 9-17-91  
Fire Marshal Date Building Official Date

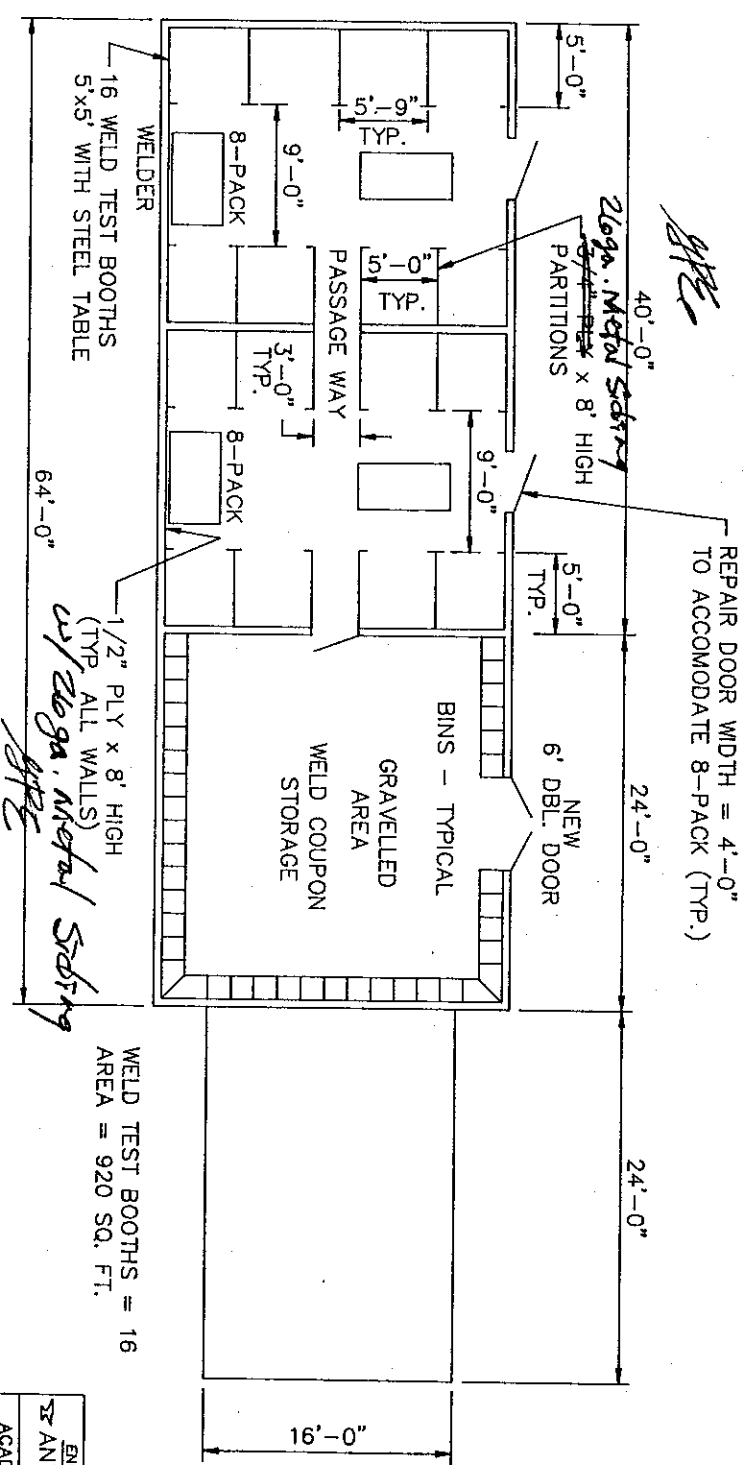
**THIS CERTIFICATE TO BE DISPLAYED IN PUBLIC AREA  
TO BE REMOVED ONLY BY THE BUILDING OFFICIAL**

BUILDING PERMIT

24 Hrs. Notice Requested

Site Address 719-22nd Street

OWNER	NAME (OR NAME OF BUSINESS) Anvil Corporation		PLUMBING		
	MAILING ADDRESS 1675 W. Bakerview				
	CITY Bellingham, WA 98226	TELEPHONE NUMBER 671-1450	No.	TYPE OF FIXTURE OR ITEM	FEE
ARCHITECT	NAME Anvil Corp.			Water Closet	\$
	ADDRESS 1675 W. Bakerview			Bathtub	
	CITY Bellingham, WA 98226	TELEPHONE NUMBER 671-1450		Lavatory	
CONTRACTOR	NAME			Shower	
	ADDRESS			Kitchen Sink	
	CITY	TELEPHONE NUMBER		Dishwasher	
	STATE LICENSE NUMBER			Laundry Tray	
	CITY LICENSE NUMBER			Clothes Washer	
<input type="checkbox"/> Residential <input checked="" type="checkbox"/> Non-Residential <input type="checkbox"/> New <input checked="" type="checkbox"/> Add <input type="checkbox"/> Alter <input type="checkbox"/> Repair <input type="checkbox"/> Building <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Sign <input type="checkbox"/> Demolition <input type="checkbox"/> Other			Water Heater		
Legal Description of Property or Tax Account Number pt 35 Lot <del>Anacortes</del> Block Industrial Park 4198-000-030-0008			Urinal		
Describe Work interior partitions, enclose portion of east wall, conc. floor and exterior fencing.			Drinking Fountain		
Occupancy Use <input type="checkbox"/> Single Family Residence <input type="checkbox"/> Multi-Family Residence <input type="checkbox"/> Office <input type="checkbox"/> Retail <input checked="" type="checkbox"/> Storage <input type="checkbox"/> Church <input type="checkbox"/> Restaurant <input type="checkbox"/> Other     Testing, welding			Floor Sink or Drain		
<b>NOTICE</b> 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.			Slop Sink		
Signature of Owner or Authorized Agent: <i>AT Ecall</i> Date: 3/22/91			Water Piping		
Street Setback     Side Yard Setback     Rear Yard Setback			PERMIT \$ TOTAL FEE \$		
Use Zone: <i>HM</i> Occupancy Group: <i>B-1</i> Type of Const.: <i>VN</i>			<b>MECHANICAL</b> <input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> ELECT. <input type="checkbox"/> OTHER		
Lot Area     Vacant Site: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		No.	TYPE OF EQUIPMENT	FEE	
Fire Sprinklers Required: <input type="checkbox"/> Yes <input type="checkbox"/> No			Air Cond. Unit	\$	
No. of Stories     Bedrooms     Occupant Load: <i>EF</i>			Refrigeration Unit --	HP	
Size of Bldg.     Plans Checked By:			Boiler --	HP	
<b>WHEN SIGNED AND DATED BELOW, THIS IS YOUR PERMIT</b> 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. 03/22/91			Forced Air System --	BTU/KW	
Permit Issued By: <i>Edwin Frank</i> Building Official     Date:			Floor Furnace		
			Wall Heater		
			Unit Heater		
			Clothes Dryer		
			Ventilation Fan		
			Range Hood		
			Air Handling Unit --	CFM	
			Pre-manufactured Stove or Fireplace		
			Gas Piping		
			PERMIT \$ TOTAL FEE \$		
			<b>TOTAL FEES</b> 14,000.00 <b>VALUATION</b> 157.00		
			Building	\$ 0.30	
			Plan Check		
			Plumbing		
			Mechanical		
			Sign		
			Demolition		
			Energy Surcharge	4.00	
			State Surcharge		
			Other	157.00	
			<b>TOTAL \$</b>		
		<b>Conditions:</b>			



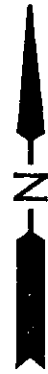
1. ALL INTERIOR PLYWOOD TO RECEIVE A FIRE RETARDANT TREATMENT.

NOTES:

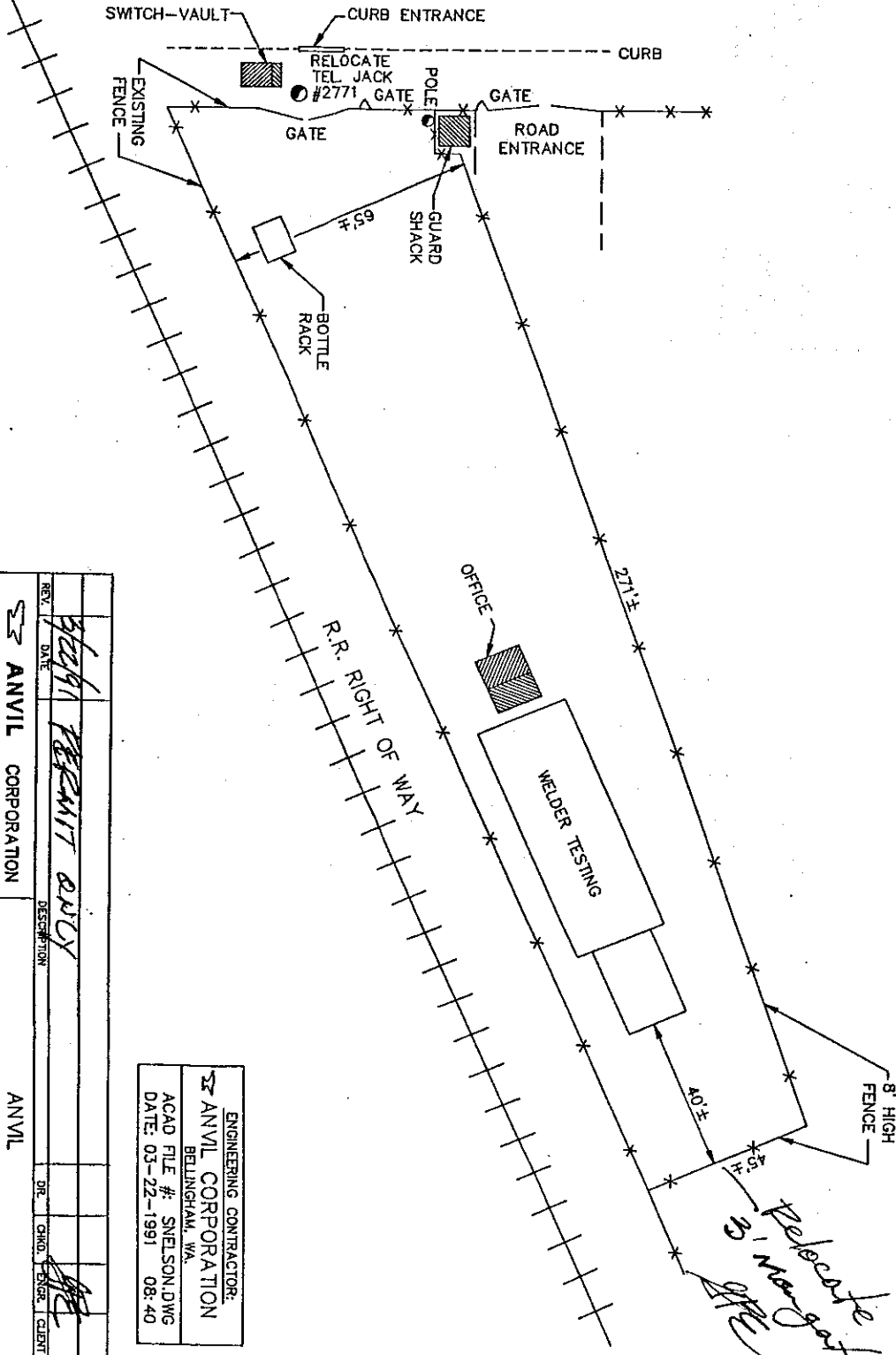
WELD TEST BOOTHS = 16  
AREA = 920 SQ. FT.

ENGINEERING CONTRACTOR:  
ANVIL CORPORATION  
BELLINGHAM, WA.  
ACAD FILE # BLDG.DWG  
DATE: 03-22-1991 14:19

REV.	DATE	DESCRIPTION	DR.	CHKD.	ENGR.	CLIENT
	3-21-91	ISSUED FOR PERMIT				
		ANVIL CORPORATION 1875 N. BARKER RD BELLINGHAM, WA 98226 (360) 671-1450	ANVIL ANACORTES WELD TEST BUILDING			
SCALE 1/8" = 1'-0"		JOB NO. BE3949	DRAWING NUMBER			
						REV. 0



22 ND STREET



REV. DATE	DESCRIPTION	DRG. ENGR. CLIENT
1/22/91	PERMIT ONLY	
<p><b>ANVIL CORPORATION</b>          1875 W. BARKVIEW ROAD          BELLINGHAM, WA, 98228          (206) 871-1488</p>		
<p>SCALE 1" = 30'</p>		<p>JOB NO. BE3979</p>
<p>ANVIL CORPORATION</p>		<p>ANVIL          ANACORTES WELD TEST LOCATION</p>
<p>DRAWING NUMBER</p>		<p>REV. 0</p>

ENGINEERING CONTRACTOR:  
**ANVIL CORPORATION**  
 BELLINGHAM, WA.  
 ACAD FILE #: SNEISON.DWG  
 DATE: 03-22-1991 08:40

CITY OF ANACORTES PERMIT CENTER

# APPROVED PLANS

PERMIT No. 8614 3-22-R  
ADDRESS: 719- 22<sup>RD</sup>  
APPROVED BY: E. Feak

FOR ELECTRICAL INSPECTION  
CONTACT DEPT OF LABOR AND  
INDUSTRIES, 1220 MEMORIAL  
HWY MOUNT VERNON, WA 98221  
(428-1350)