



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

Invoice/Permit #: BLD-2020-0210
Applied date: 04/23/2020
Issue date: 04/23/2020
Expire date: 10/20/2021

Job Address: 2102 10TH ST
 ANACORTES WA 98221-1424

Permit Type: Reroof Single Family Residence
Project:

APN: P56208

Remarks: REMOVE EXISTING ROOFING AND REPLACE WITH ONE LAYER OF COMP CLASS A, 22 SQUARES.

Owner: KEN IRELAND

Contractor: MOUNT BAKER ROOFING

Address: 2102 10TH ST

Address: 3945 HOME RD

ANACORTES WA 98221-1424

BELLINGHAM WA 98226

Phone:

Phone: (360) 733-0191

License #:

General Information:

Occupancy Group ir-1
 Building Valuation 14244

Fees:

Building Permit Fee	251.25
State Building Code Fee Resi	6.50
Total Calculated:	257.75
Deposits/Receipts:	0.00
Total Due:	257.75

Permits and Insp... - BLD-2020-0210 - 2020

The issuance or granting of this permit shall not be construed to be a permit for, or approval of, any violation of this Code or any other ordinance or order of the City, of any state or federal law, or of any order, proclamation, guidance advice or decision of the Governor of this State. To the extent the issuance or granting of this permit is interpreted to allow construction activity during any period of time when such construction is prohibited or restricted by any state or federal law, or order, proclamation, guidance advice or decision of the Governor of this State, this permit shall not authorize such work and shall not be valid. The building official is authorized to prevent occupancy or use of a structure where in violation of this Code, any other City ordinances of this jurisdiction or any other ordinance or executive order of the City, or of any state or federal law, or of any order, proclamation, guidance advice or decision of the Governor. The building official is authorized to suspend or revoke this permit if it is determined to be issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any City ordinance, regulation or order, state or federal law, or any order, proclamation, guidance or decision of the Governor. This permit becomes null and void if work or construction authorized is not commenced within 180 days or if construction work is suspended or abandoned for a period of 180 days at any time after work is commenced. I have read and examined this application and know the same to be true and correct.

SIGNATURE OF OWNER OR AUTHORIZED AGENT

ISSUED BY



PLANNING, COMMUNITY, & ECONOMIC DEVELOPMENT DEPARTMENT

RE-ROOF PERMIT APPLICATION

Mailing Address: P.O. Box 547, Anacortes, WA 98221

Office Location: 904 6th Street, Anacortes WA 98821

Phone: (360) 293-1901

PLEASE REFER TO THE RE-ROOF PERMIT CHECKLIST FOR SUBMITTAL REQUIREMENTS

<input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL	
PROJECT ADDRESS (Street, Suite #): 2102 10TH ST	PARCEL(s) #: P56208
Subdivision/Lot #:	PROJECT VALUATION \$ 14,244
APPLICANT: Mt Baker Roofing (Katy Mount)	Phone: 360-733-0191
Address (Street, City, State, Zip): 3945 Home Rd, Bellingham WA 98226	Email Address: katymount@mtbakerroofing.com
PROPERTY OWNER: KEN IRELAND	Phone: 619.254.6879
Address (Street, City, State, Zip): 254 D AVE CORONADO CA 98118	Email Address: KIRELAND@SAN.RR.COM
CONTACT PERSON: KEN IRELAND	Phone: 619.254.6879
Address (Street, City, State, Zip):	Email Address: KIRELAND@SAN.RR.COM
CONTRACTOR: * Mt Baker Roofing, INC	Phone: 360-733-0191
Address (Street, City, State, Zip): 3945 Home Rd, Bellingham WA 98226	Email Address: katymount@mtbakerroofing.com
<i>*All Contractors & subcontractors must have a valid City of Anacortes business license prior to doing work in the City. Contact the City's Finance Department at (360) 299-1968.</i>	Contractor's License # MTBAKR1055ML Exp. Date: 05/2020
	Business License #: 601526326 001 0001 Exp. Date: 2-29-20
PROPOSED WORK: <u>To remove current roofing and replace with one layer of roofing</u> <hr/> <hr/>	
TYPE OF ROOFING: COMPOSITION	NUMBER OF LAYERS: 3
CLASS OF ROOFING: <input checked="" type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	NUMBER OF SQUARES: 22
I declare under penalty of perjury that the information I have provided on this form/application is true, correct, and complete, and that I am the property owner or duly authorized agent of the property owner to submit a permit application to the City of Anacortes.	
Print Name: <u>Katy Mount</u>	Owner <input type="checkbox"/> Other <input type="checkbox"/> (specify): _____
Signature: <u>Katy L Mount</u>	Date: <u>4.22.20</u>