

# BUILDING PERMIT

CITY OF ANACORTES  
 P.O. BOX 547  
 ANACORTES, WA 98221  
 (360)293-1901

PERMIT NO.: BLD2000-00335  
 APPLIED: 00-10-23  
 ISSUED: 00-10-23  
 EXPIRES: 01-10-23

SITE ADDRESS: 1112 36TH STREET  
 ASSESSOR'S PARCEL NO.: 3786-003-015-0001  
 PROJECT DESCRIPTION: Roof Repair

<p><b>OWNER</b>                  CINDI LHEUREUX                  1114 36TH STREET                  ANACORTES, WA 98221</p> <p>Primary Phone:                  Phone 1:</p>	<p><b>CONTRACTOR</b></p> <p>Primary Phone:                  Phone 1:                  License #:</p>
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<p>TYPE OF WORK: <b>ALT</b>                  TYPE OF USE: <b>SF</b>                  CENSUS CATEGORY:                  ZONING:                  Occupancy Groups</p> <hr/> <p>1: <b>R3</b>      2:                  3:            4:</p> <p>Construction Types</p> <hr/> <p>1: <b>5N</b>      2:                  3:            4:</p>	<p style="text-align: center;"><b>AREA</b></p> <hr/> <p>LOT:                    sf                  1ST FLR:            sf                  2ND FLR:            sf                  BASEMENT:           sf                  GAR/CARPORT:      sf                  OTHER:                sf</p> <p>NUMBER OF UNITS:                  STORIES:                  BUILDING HEIGHT:    ft</p>	<p>VALUE: <b>\$ 500.00</b></p> <p>REQUIRED SETBACKS:</p> <hr/> <p>FRONT:            ft                  SIDE 1:           ft                  SIDE 2:           ft                  REAR:             ft</p> <p>REQUIRED PARKING</p> <hr/> <p>TOTAL:                  HANDICAPPED:                  COMPACT:                  IMPRV SURF:            sf</p>
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FEES				
Type	By	Date	Receipt	Amount
PRMT	MRD	00-10-23		\$10.00
STBC	MRD	00-10-23		\$4.50
			<b>Total:</b>	<b>\$14.50</b>

**NOTES:**

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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 state and federal laws regulating activities covered by this permit.

Michelle Deaton  
 Issued by

Cindy Lheureux  
 Applicant or Owner's Signature

**CONDITIONS OF APPROVAL:**

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**24 Hour Notice Required For All Inspections**

Evans. Bob

ADDRESS 1112 310<sup>th</sup>

LEGAL DESCRIPTION lots 13, 14, 15 Block 3  
Mary Eubank's first addition

ASSESSORS ACCOUNT NO. 3786-603-015-0001

PERMIT NO.	DATE	DESCRIPTION	DATE FINALED
1259		piping	
1289		space heater	
2884		Foundation	
3150		piping	
4805		Composition Roofing	

**After recording, return to:**

**ACCESSORY DWELLING UNIT COVENANT &  
CERTIFICATE OF OWNER OCCUPANCY**

**Associated Reference Numbers:** N/A  
**Property Address:** 1112 & 1114 36<sup>th</sup> Street, Anacortes, WA 98221  
**Assessors Parcel Number:** P57172  
**Legal Description:** MARY EUBANK'S ADDITION TO ANACORTES,  
LOTS 13 TO 15, BLK 3

I, the undersigned, have attained approval for an accessory dwelling unit (ADU) at the property address above, in accordance with the provisions of Chapter 17.10 (Accessory Dwelling Units) of the Anacortes Municipal Code. I certify that, as the owner of the subject property, I will occupy either the principal residence or the accessory dwelling unit as my permanent and principal residence.

I agree and understand that it is my responsibility to notify all future property owners or long term lessors of the subject lot that the existence of the accessory dwelling unit is predicated upon the occupancy of either the accessory dwelling unit or the principal dwelling by the person to whom the accessory dwelling unit permit has been issued. Additionally, I will notify all prospective buyers of the limitations on use and maintenance of the ADU as stipulated in Anacortes Municipal Code (AMC) Sections 17.10.170 & 17.10.180 (Accessory Dwelling Units).

Finally, I agree that it is my responsibility to notify a prospective buyer of the limitations of the above-referenced AMC sections, and to provide for the removal of improvements added to convert the premises to an accessory dwelling unit and the restoration of the site to a single family dwelling in the event that any condition of approval is violated.

Property Owner Signature: Cindy L'Heureux - Cindy L'Heureux  
Print Name: CINDY L'HEUREUX  
Date: 12/12/11

STATE OF WASHINGTON)  
)  
COUNTY OF SKAGIT)

I certify that I know of or have satisfactory evidence that  
Cindy L'Heureux signed this instrument and acknowledged it to  
be his/her free and voluntary act for the uses and purposes mentioned in this instrument.

Notary's pressure seals must be smudged.

Dated: December 12, 2011  
Signature of Notary Public: Cheri Kahns  
Residing at: Mount Vernon  
My Appointment Expires: 10-19-14

**THIS DOCUMENT MUST BE RECORDED WITH THE SKAGIT COUNTY AUDITOR**

