

BUILDING DEPARTMENT PERMIT APPLICATION		Applicant Fill Inside Heavy Lines	USE ZONE RA-20	PERMIT NUMBER 780325
OWNER	NAME (OR NAME OF BUSINESS) MARK R SIMONSON		JOB ADDRESS 16621-76th Avenue West	
	MAILING ADDRESS 17316 E RIVERSIDE DR		LEGAL LOT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SUBDIVISION NO. S-47-76
	CITY ROTHELL	TELEPHONE NUMBER 98011 485-8960	STREET R/W 40 FT. DEFICIENCY THIS PROPERTY	
	EXISTING STREET R/W 60 FT.		COMP. PLAN ST. R/W 60 FT. 10 FT.	
ARCHITECT	NAME IMPRESSION DESIGN		REMARKS SEE MEMO DATED 3/20/78	
	ADDRESS 2229 JACKSON		NOTE SEPTIC SYSTEM # 542-3381 CHECKED BY WJN	
	CITY EVERETT	TELEPHONE NUMBER 98204 355 3200	STREET AND/OR UTILITY WORK REQ'D. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
	R/W PERMIT REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		UNDERGROUND WIRING REQ'D. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
CONTRACTOR	NAME L.A. JOHNSON		TYPE CONNECTION SANITARY SEWER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	ADDRESS 13513 NORTHSHIRE RD		VERIFIED BY WJN	
	CITY SEATTLE	TELEPHONE NUMBER 364 9558	SEPTIC SYSTEM APPV'D BY CITY ENG. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
	PERMIT NUMBER 77-386		REMARKS PRESSURE REGULATOR REQD.	
LEGAL DESCRIPTION	Legal Description of Property (Show Below or Attach Four Copies)			
	WEST 1/2 OF TRACT 94,			
	MERCOWDALE BEACH - VOL. 5-			
	PLATS - PG. 38			
<input checked="" type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR		<input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> NON-RESIDENTIAL <input type="checkbox"/> DEMOLISH <input type="checkbox"/> EXCAVATE OR FILL <input type="checkbox"/> PRE-MOVE INSP.		<input type="checkbox"/> GAS LINE <input type="checkbox"/> SIGN <input type="checkbox"/> RETAINING WALL <input type="checkbox"/> FENCE (____ X ____ FT) <input type="checkbox"/> SWIM POOL
NUMBER OF STORIES 3		NUMBER OF DWELLING UNITS 1		METER SIZE 3/4" BUILDING SUPPLY SIZE 3/4" MIN.
NATURE OF WORK TO BE DONE NEW CONSTRUCTION OF RESIDENCE.				SIGN AREA ALLOWED <input checked="" type="checkbox"/> PROPOSED <input type="checkbox"/>
PROPOSED USE FAMILY RESIDENCE				ENV. REVIEW COMPLETE <input type="checkbox"/> EXEMPT <input checked="" type="checkbox"/>
PLOT PLAN (INDICATE BUILDING SETBACKS, ABUTTING STREETS)				ADB NO. N/R
YARDS 25' FRONT 17 1/2' SIDE 25' REAR		LOT COVERAGE		REMARKS
FIRE ZONE 3		TYPE OF CONSTRUCTION U-N		VARIANCE OR CU
SPECIAL INSPECTOR REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		AREA		PLANNING REVIEW BY
PLAN CHECKED BY RZ		OCCUPANCY GROUP I, J-1		DATE
REMARKS LOT DRAINAGE PER APPD. PLAN				THIS SITE IS LOCATED IN THE CITY OF EDMONDS. LOCAL SALES TAX SHOULD BE CODED 31.04.
REMARKS THERMAL INSULATION PER #B 98				YARDS
PLAN CHECK NO. _____		VALUATION		FEE
BUILDING		40 376		40
PLUMBING				160
HEAT & GAS LINE				23
FENCE				8
SIGN				
RETAINING WALL				
SWIMMING POOL				
TOTAL AMOUNT DUE				\$231 ⁰⁰
ATTENTION		APPLICATION APPROVAL		
THIS PERMIT AUTHORIZES ONLY THE WORK NOTED		This application is not a permit until signed by the Building Official or his Deputy; and fees are paid, and receipt is acknowledged in space provided.		
INSPECTION DEPARTMENT		DIRECTOR'S SIGNATURE		
CITY OF EDMONDS		3-27-78		
775-2525		DATE		

I hereby acknowledge that I have read this application; that the information given is correct; and that I am the owner, or the duly authorized agent of the owner. I agree to comply with city and state laws regulating construction; and in doing the work authorized thereby, no person will be employed in violation of the Labor Code of the State of Washington relating to Workmen's Compensation Insurance.

NOTE: Permit Limit One Year (Except DEMOLITIONS and FILL PERMITS without conditional use permit, which shall be completed in 90 days; MOVED-IN BUILDINGS shall be completed in six months.)

SIGNATURE (OWNER OR AGENT) **Mark R. Simonson** DATE SIGNED **3-9-78**

NOTE: Applicant Subject to Plan Check Fee

This Permit covers work to be done on private property ONLY. Any construction on the public domain (curbs, sidewalks, driveways, etc.) will require separate permission.

ORIGINAL - File YELLOW - Inspector
COLD - Assessor PINK - Owner

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RECORD OF INSPECTIONS

	Date Inspected	
FOUNDATION	6/29/78	BD
Basement	6/29/78	BD
Porches, piers		
Retaining walls		
Garage, carport		
PLUMBING		
Underground		
Rough-in	11-7-78	W
Water service		
HEATING SYSTEM		
FRAMING	10-5-78	W OK TO COVER
WALLBOARD	11-3-78	W
FINAL	12-1-78	W

TEMP OCC.