

**CITY OF EDMONDS
CONSTRUCTION PERMIT APPLICATION**

USE ZONE _____ PERMIT NUMBER **840043**

OWNER: NAME (OR NAME OF BUSINESS) **CHRIS MEDINA**
 MAILING ADDRESS **8513 MAIN ST #203**
 CITY **Edmonds** TELEPHONE NUMBER **774-6700**

JOB ADDRESS **22820 100th Ave Suite 12**
 LEGAL DESCRIPTION CHECK _____ SUBDIVISION NO. **1** LID NO. _____

ARCHITECT: NAME **Robert Reynolds**
 ADDRESS **9430 232nd St SW**
 CITY **Edmonds** TELEPHONE NUMBER **542-2682**

PUBLIC RIGHT OF WAY PER OFFICIAL STREET MAP.
 EXISTING _____ REQUIRED DEDICATION _____
 PROPOSED _____

CONTRACTOR: NAME **SSG CONST.**
 ADDRESS **8117 240th SW**
 CITY **Edmonds** TELEPHONE NUMBER **774-5138**
 STATE LICENSE NUMBER **223-01SSG-CON-249JB** CITY LICENSE NUMBER **B1442**

RIGHT OF WAY CONSTRUCTION PERMIT REQUIRED ()
 STREET USE PERMIT REQUIRED ()
 SEE ENGINEERING MEMO DATED _____
 SEE PIW DEPT REVIEW CHECK LIST DATED _____

LEGAL DESCRIPTION: **Attached**

REMARKS: **OPEN**

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> NEW | <input type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> PLUMBING |
| <input checked="" type="checkbox"/> ADD/ALTER | <input checked="" type="checkbox"/> NON-RESIDENTIAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> REPAIR | <input type="checkbox"/> RETAINING WALL | <input type="checkbox"/> SIGN |
| <input type="checkbox"/> DEMOLISH | <input type="checkbox"/> EXCAVATE OR FILL | <input type="checkbox"/> FENCE FT) |
| | <input type="checkbox"/> PRE-MOVE INSP COMPLIANCE INSP | <input type="checkbox"/> SWIM POOL |
| <input type="checkbox"/> SIDE SEWER | <input type="checkbox"/> WATER LINE | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

METER SIZE _____ BUILDING SUPPLY SIZE _____ FIXTURE UNITS _____
 REMARKS: **EXISTING SERVICE**

NUMBER OF STORIES _____ NUMBER OF DWELLING UNITS _____

SIGN AREA ALLOWED	PROPOSED	ENV. REVIEW COMPLETE	EXEMPT	ADB NO.
			NIR	

NATURE OF WORK TO BE DONE (ATTACH PLOT PLAN):

VARIANCE OR CU _____ PLANNING REVIEW BY _____ DATE _____
 YARDS: FRONT **N/C** SIDE _____ REAR _____ LOT COVERAGE _____

**TERANT IMPROVEMENT FOR
HALLMARK SHOP**

REMARKS: **Signs to be approved by ADB and issued by separate permit.**

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

CHECKED BY _____	TYPE OF CONSTRUCTION _____	CODE _____	HEIGHT _____
SPECIAL INSPECTOR REQUIRED YES _____ NO _____	AREA _____	OCCUPANCY GROUP _____	OCCUPANT LOAD _____

Permit Application: 180 Days
 Permit Limit: 1 Year - Provided Work is Started Within 180 Days

REMARKS: **FIRE DEPT MEMO DATED 1-27-84
PROGRESS INSPECTIONS REQD**

HOLD HARMLESS: "Applicant, on behalf of his or her spouse, heirs, assigns and successors in interest, agrees to indemnify, defend and hold harmless the City of Edmonds, Washington its officials, employees, and agents from any and all claims for damages of whatever nature, arising directly or indirectly from the issuance of this permit. Issuance of this permit shall not be deemed to modify, waive or reduce any requirement of any city ordinance nor limit in any way the City's ability to enforce any ordinance provision."

	VALUATION	FEE
PLAN CHECK FEE		37.00
BUILDING	6,000	56.50
PLUMBING (2)		4.00
MECHANICAL		
GRADING/FILL		
TOTAL AMOUNT DUE		97.50

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.
 SIGNATURE (OWNER OR AGENT) **Chris Medina** DATE SIGNED **JAN 25 84**

ATTENTION: THIS PERMIT AUTHORIZES ONLY THE WORK NOTED
 INSPECTION DEPARTMENT
 CITY OF EDMONDS
 775-2525

APPLICATION APPROVAL
 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.
 OFFICIAL'S SIGNATURE: **Harold M. Reeves**
 DATE: **1-31-84**

ATTENTION
 IT IS UNLAWFUL TO USE OR OCCUPY A BUILDING OR STRUCTURE UNTIL A FINAL INSPECTION HAS BEEN MADE AND APPROVAL OR A CERTIFICATE OF OCCUPANCY HAS BEEN GRANTED UBC CHAPTER 3

JAN 25 1984 ORIGINAL - File YELLOW - Inspector
 PINK - Owner GOLD - Assessor

January 27, 1984

MEMO TO: Hal Reeves
Building Official

FROM: Gary L. McComas
Fire Marshal

SUBJECT: PARTY HARBOR TENANT IMPROVEMENT AT 22820-100TH AVE. W.

After review of the proposed improvements, the only requirement is that the two fire extinguishers are a minimum of 2, A-10, B:C dry chemical type.

Gary L. McComas

GLM:be

B40043

RECORD OF INSPECTIONS

Date Passed

	<u>Date Passed</u>	
FOUNDATION		
House		
Porches, piers		
Retaining walls		
Garage, carport		
PLUMBING		
Underground	2-10-84	HR
Rough-in	2-10-84	HR
Water service		
HEATING SYSTEM		
FRAMING	2-15-84	HR
WALLBOARD		
FINAL	3-12-84	HR

