

**CITY OF EDMONDS  
CONSTRUCTION PERMIT APPLICATION**

**OWNER**  
 NAME (OR NAME OF BUSINESS) Olson's Westgate  
 MAILING ADDRESS 22828 100th W.  
 CITY Edmonds Wa TELEPHONE NUMBER 98030

**ARCHITECT**  
 NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

**CONTRACTOR**  
 NAME Air-Con, Inc  
 ADDRESS 18104 N.E. 76th Jan or Scott  
 CITY Redmond Wa TELEPHONE NUMBER 8819533  
 STATE LICENSE NUMBER 98052 CITY LICENSE NUMBER \_\_\_\_\_  
AIRCO # 32139

**LEGAL DESCRIPTION**  
 Legal Description of Property - include all easements (show below or attach four copies)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- |                                     |  |  |
|-------------------------------------|--|--|
| <input type="checkbox"/> NEW        | <input type="checkbox"/> RESIDENTIAL                   | <input type="checkbox"/> PLUMBING              |
| <input type="checkbox"/> ADD/ALTER  | <input checked="" type="checkbox"/> NON-RESIDENTIAL    | <input checked="" 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"/>                       |

**JOB DESCRIPTION**  
 NUMBER OF STORIES \_\_\_\_\_ NUMFR OF DWELLING UNITS \_\_\_\_\_  
 NATURE OF WORK TO BE DONE (ATTACH PLOT PLAN)  
HVAC Duct Installation

	VALUATION	FEE
PLAN CHECK FEE		/
BUILDING		/
PLUMBING		/
MECHANICAL		51
GRADING/FILL		/
<b>TOTAL AMOUNT DUE</b>		<u>\$51.00 2517</u>

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.

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

**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.

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) Scott J. Habacker DATE SIGNED 5/3/84

USE ZONE \_\_\_\_\_ PERMIT NUMBER 840315

JOB ADDRESS 22828 100th Ave W.

LEGAL DESCRIPTION CHECK \_\_\_\_\_ SUBDIVISION NO. \_\_\_\_\_ LID. NO. \_\_\_\_\_

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

RIGHT OF WAY CONSTRUCTION PERMIT REQUIRED \_\_\_\_\_  
 STREET USE PERMIT REQUIRED \_\_\_\_\_  
 SEE ENGINEERING MEMO DATED N/R  
 SEE PIW DEPT. REVIEW CHECK LIST DATED \_\_\_\_\_

REMARKS  
OPFM

METER SIZE \_\_\_\_\_ BUILDING SUPPLY SIZE \_\_\_\_\_ FIXTURE UNITS \_\_\_\_\_

REMARKS \_\_\_\_\_  

SIGN AREA ALLOWED	SIGN AREA PROPOSED	ENV. REVIEW COMPLETE	ENV. REVIEW EXEMPT	ADB NO.
/	/	/	N/R	/

VARIANCE OR CU \_\_\_\_\_ PLANNING REVIEW BY \_\_\_\_\_ DATE \_\_\_\_\_

YARDS FRONT N/A SIDE \_\_\_\_\_ REAR \_\_\_\_\_ LOT COVERAGE \_\_\_\_\_

REMARKS  
SCREEN ROOF MOUNTED EQUIP  
PER ADB & CITY STDS

CHECKED BY \_\_\_\_\_ TYPE OF CONSTRUCTION III-N CODE 1979 HEIGHT \_\_\_\_\_

SPECIAL INSPECTOR REQUIRED YES \_\_\_\_\_ NO \_\_\_\_\_ AREA \_\_\_\_\_ OCCUPANCY GROUP B-2 OCCUPANT LOAD \_\_\_\_\_

REMARKS  
THERMAL STDS PER STATE CODE  
FIRE DEPT APPROVAL DATED 5-10-84  
PROGRESS INSPECTIONS REQD

	VALUATION	FEE
PLAN CHECK FEE		/
BUILDING		/
PLUMBING		/
MECHANICAL		51
GRADING/FILL		/
<b>TOTAL AMOUNT DUE</b>		<u>\$51.00 2517</u>

**ATTENTION**  
 THIS PERMIT AUTHORIZES ONLY THE WORK NOTED  
 INSPECTION DEPARTMENT  
 CITY OF EDMONDS  
 771-3202

**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. Reever  
 DATE 5-11-84 / 6/20/84

**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

**MAY 3 1984**

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

Building Dept

DATE 5-10 1984

FROM Gary McComas

SUBJECT: HVAC Plans for Olsons Westgate

APPROVED / NO COMMENT

840316

RECORD OF INSPECTIONS

Date Passed

	Date Passed	
FOUNDATION		
House		
Porches, piers		
Retaining walls		
Garage, carport		
PLUMBING		
Underground		
Rough-in		
Water service	5-30-85	Hz
HEATING SYSTEM		
FRAMING		
WALLBOARD	5-30-85	Hz
FINAL		

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