

BP 05-14

CITY OF CRAIG, ALASKA BUILDING PERMIT APPLICATION

Applicant Information		Owner Information (if not also applicant)	
Name	Chris Pihlman	Name	
Mailing Address	Box 445 Klawock, AK	Mailing Address	
Street Address	Edna 521 W. Hamilton	Street Address	
City, State, Zip	Craig, AK, 99921	City, State, Zip	
Telephone	907-481-0155	Telephone	

Property Description

Subdivision Name: none

Survey Number: 75-29 Tract Number: Lot Number: 3A Block Number:

Army Corps of Engineers Permit Name and/or Number: N/A

Building Activity Information (please check one)

<input type="checkbox"/> Single Family Home	<input type="checkbox"/> Duplex	<input type="checkbox"/> Triplex	<input type="checkbox"/> Fourplex or greater
<input type="checkbox"/> Deck	<input type="checkbox"/> Porch	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Addition
<input type="checkbox"/> Commercial Building	<input type="checkbox"/> Wannigan	<input type="checkbox"/> Garage	<input checked="" type="checkbox"/> Shed
<input type="checkbox"/> Mobile Home (Year and Make)			
<input type="checkbox"/> Travel Trailer (Year and Make)			
<input type="checkbox"/> Other (Please describe):			

Height of Building at Roof Eve: _____ Closest setback to property line: _____

Building Dimensions: _____ Area of building footprint: _____

What use(s) do you propose for the building? Gear Storage

Site Plan

Please complete on reverse side or attached sheet a site plan showing all proposed construction.

Owner's/Applicant's Statement

I acknowledge that I have read this application and state that the above information is correct. I agree to comply with all codes and ordinances of the City of Craig applicable to building and construction, and all land use regulations as pertaining to this permit. Any violation of land management regulations are the responsibility of the property owner. This permit becomes void upon completion of the approved work, or one year, whichever comes first. Work not documented in this application is not authorized by this building permit. I understand that this permit is revocable if work is not completed consistent with this applicant or if work does not comply with the requirements of the City of Craig Municipal Code. I agree to provide the City of Craig with an as-built survey of the lot in the event one is completed for this project.

Signature of Applicant: Chris Pihlman Date: 4/29/14

Signature of Property Owner (if other than applicant) _____ Date _____

Special Conditions of Approval.

The following conditions of approval are made a part of this permit as provided by section 18.06.001B.6 of the Craig Land Development Code:

#1. No construction within 10' of property line w/o submission to Fire Marshal.

Permission is hereby granted to perform the above work in compliance with any and all conditions listed above and in compliance with the Craig Land Development Code and all other ordinances of the City of Craig and the State of Alaska pertaining to the construction of buildings.

Signature of City Building Official: [Signature] Date: 4/30/14

PRELIMINARY

NOTES

CERTIFICATE OF IMPROVEMENTS
 NO IMPROVEMENTS ARE REQUIRED FOR THE VACATION/REPLAT

CITY PLANNING OFFICIAL _____ **DATE** _____

APPROVAL SIGNATURES
 This final subdivision plat has been prepared and
 recorded in accordance with the provisions of the
 Revised Code - Subdivision Ordinance. All dedications
 to the City of Cuyahoga have been accepted and accepted by
 the City of Cuyahoga.

CITY PLANNING OFFICIAL _____ **DATE** _____

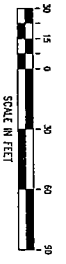
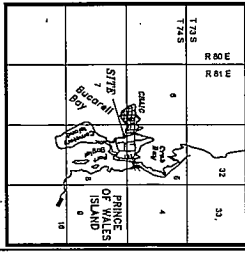
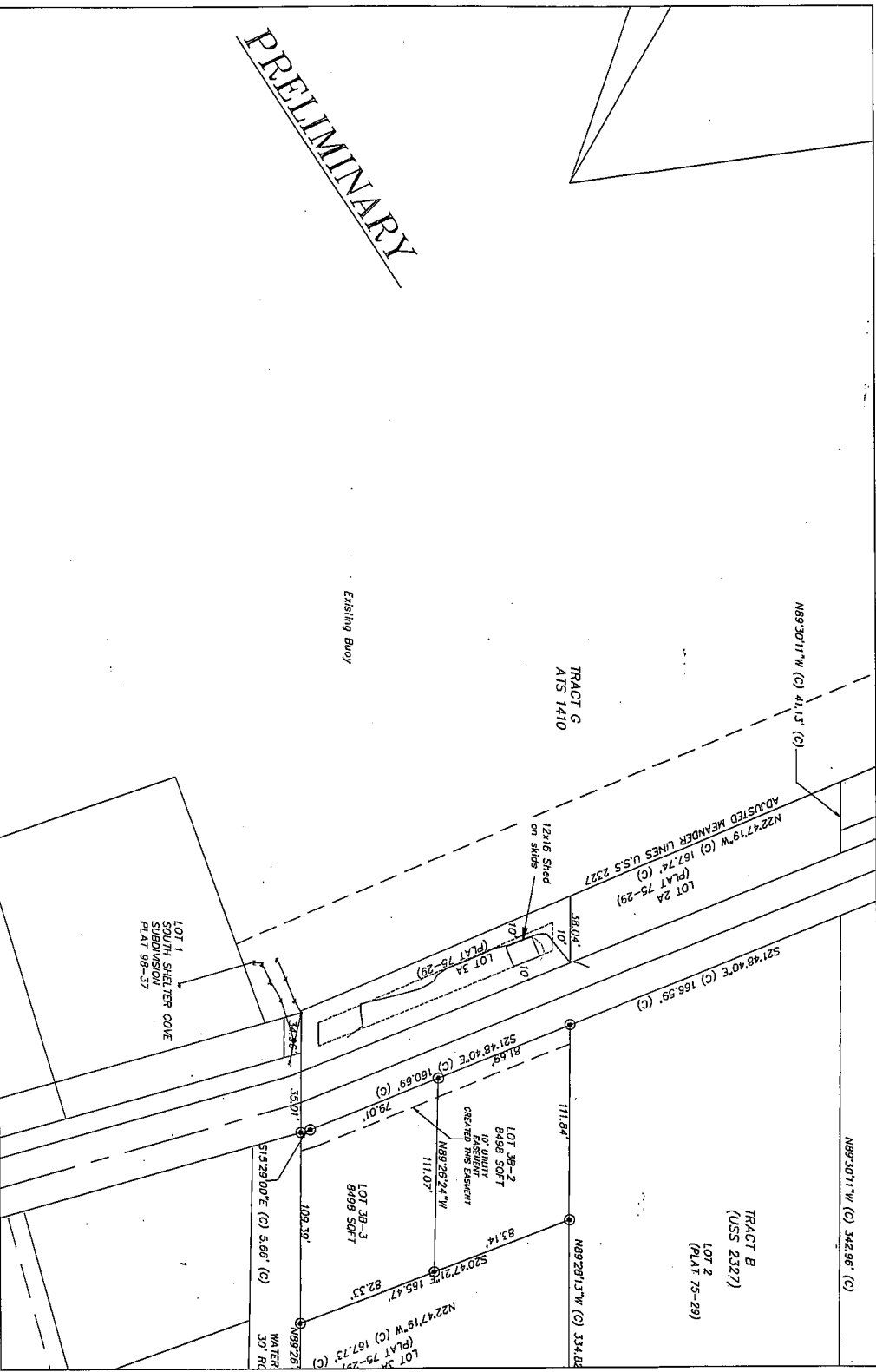
PLANNING COMMISSION _____ **DATE** _____

TAX STATEMENT
 I hereby certify that all of the above taxes, special
 assessments, and other charges have been paid or are to be
 paid on the lots here shown.

CITY CLERK _____ **DATE** _____

CLIENT: Chris and Chantal Plaban
 881 4th Rowan Ave.
 Lakewood, OH 44122
 PHONE: (216) 233-3411
 FAX: (216) 233-3411

DATE: 03/04/14
SCALE: 1"=50'
PROJECT: G.O.S. SHEET 1 OF 1



SURVEYOR'S CERTIFICATE
 I hereby certify that I am a duly qualified and
 licensed to practice land surveying in the State of
 Ohio. I have personally supervised and checked the
 work of the surveyors and assistants who have
 shown herein, and I certify that the same are
 correct and conform to the laws of the State of
 Ohio.

Registration Number: 15-9700
Date: _____
Surveyor: G. SMITH, S.A.S.

KETCHIKAN RECORDING DISTRICT

FILE NUMBER: _____

DATE: _____

RECORDING OFFICE: _____

PLAT: 75-29, A SUBDIVISION OF LOT 3A, TRACT B OF U.S.S. 2327.