

CITY OF CRAIG, ALASKA BUILDING PERMIT APPLICATION

Applicant Information		Owner Information (if not also applicant)	
Name	Dolores Owen	Name	same
Mailing Address	PO Box 809	Mailing Address	
Street Address	102 Eagle tree Ct	Street Address	
City, State, Zip	Craig AK 99921	City, State, Zip	
Telephone	907 401-0065	Telephone	

Property Description

Subdivision Name _____

Survey Number: VSS 2611 Tract Number: 14 Lot Number: D2 Block Number: _____

Army Corps of Engineers Permit Name and/or Number: _____

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 type="checkbox"/> Shed
<input type="checkbox"/> Mobile Home (Year and Make) _____			
<input type="checkbox"/> Travel Trailer (Year and Make) _____			
<input checked="" type="checkbox"/> Other (Please describe): Carport on end of garage			

Height of Building at Roof Eave: _____ Closest setback to property line: 10'

Building Dimensions: _____ Area of building footprint: 23x24

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

Dolores Owen 10/26/12

Signature of Applicant _____ Date _____ 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 walls within 10' of setback.

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 _____ Date 10/25/12

SITE PLAN

Show the items from the checklist below in the drawing grid. The drawing must be legible and accurate.

- | | |
|---|--|
| <input type="checkbox"/> Lot lines and dimensions | <input type="checkbox"/> Water lines |
| <input type="checkbox"/> Distances from all structures to lot lines | <input type="checkbox"/> Sewer lines |
| <input type="checkbox"/> Proposed structures with dimensions | <input type="checkbox"/> Electric lines and poles |
| <input type="checkbox"/> All easements, streets, alleys, sidewalks | <input type="checkbox"/> Driveways |
| <input type="checkbox"/> Existing structures and their dimensions | <input type="checkbox"/> North Arrow |
| <input type="checkbox"/> Parking spaces | <input type="checkbox"/> Other pertinent information |

