I CIT OF C	CRAIG, ALASKA
BUILDING P	ERMIT APPLICATION
Applicant Information	Our or Information (if not all 1)
Name Matt + Kathy Peavey	Name Same
Mailing Address 108 442	Mailing Address
Street Address 1604 Hamilton dr.	Street Address
City, State, Zip Cranq, OK 99971	City, State, Zip
Telephone 9079010790	Telephone
Property Description	- O
Subdivision Name	5 - W USS Z661
Survey Number: Tract Number:	Lot Number: D Block Number:
Army Corps of Engineers Permit Name and/or Number:	
Building Activity Information (please check one)  Single Family Home □ Duplex	□ Triploy □ □ Fournite and the second
Deck Porch	☐ Triplex ☐ Fourplex or greater ☐ Retaining Wall ☐ Addition
☐ Commercial Building ☐ Wannigan	☐ Garage ☐ Shed
☐ Mobile Home (Year and Make)	neetrocking rooms
☐ Travel Trailer (Year and Make)	
☐ 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?	
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 with all codes and ordinances of the City of Craig applicable to	le above information is correct. I agree to comply
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 Oraig with an as-built survey of the lot in the event one is completed for this project.	
10 XX (ee) 9/25/2018	
Cignoffure of Applicative	21 (V// 1 X
Signature of Applicant Date	Signature of Property Owner (if other than applicant) Date
Special Conditions of Approval.	Signature of Property Owner (if Other than applicant) Date
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