

19-11

CITY OF CRAIG, ALASKA BUILDING PERMIT APPLICATION

Applicant Information		Owner Information (if not also applicant)	
Name	ROBERT C CLAIS	Name	
Mailing Address	PO BOX 986	Mailing Address	
Street Address	609 THIRD ST	Street Address	
City, State, Zip	CRAIG AK 99921	City, State, Zip	
Telephone	907 826 3004	Telephone	

Property Description

Subdivision Name _____

Survey Number: U951430 Tract Number: _____ Lot Number: 1 Block Number: 7

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

Building Activity Information (please check one)

<input checked="" 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): <u>REMODEL BATHROOM + Sitework</u>			

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

Building Dimensions: _____ Area of building footprint: _____

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

Site Plan N/A (see below) #1

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] 8/5/11

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 change to building footprint without submission of site plan.

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] _____

Signature of City Building Official _____ Date 8/5/11