

18-10

CITY OF CRAIG, ALASKA BUILDING PERMIT APPLICATION

Applicant Information		Owner Information (if not also applicant)	
Name	Ruth Ann Parsons	Name	
Mailing Address	PO Box 645	Mailing Address	
Street Address	200 Front St.	Street Address	
City, State, Zip	CRAIG AK 99921	City, State, Zip	
Telephone	(907) 826-3292	Telephone	

Property Description

Subdivision Name _____

Survey Number: U551430 Tract Number: _____ Lot Number: SA Block Number: 18

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 checked="" 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 type="checkbox"/> Other (Please describe): _____			

Height of Building at Roof Eave: 16' Closest setback to property line: _____

Building Dimensions: 7'x20' Area of building footprint: 380^{sq}

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 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.

Ruth Ann Parsons

Signature of Applicant	Date	Signature of Property Owner (if other than applicant)	Date
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Special Conditions of Approval.

The following conditions of approval are made a part of this permit as provided by section 18.08.001B.6 of the Craig Land Development Code:

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
<i>Brian L. Payne</i>	<u>9/6/10</u>



State of Alaska
Department of Public Safety
Division of Fire and Life Safety

Sean Parnell, Governor
Joseph A Masters, Commissioner

August 03, 2010

Ruth Ann Parsons
Ruth Ann's Hotel
P. O. Box 645
Craig, AK 99921

AUG - 9 2010

SUBJECT: RUTH ANN'S HOTEL - Renovation Storage Area
CITY: Craig
PLAN REVIEW: 2010June1102
OCCUPANCY: R1
2006 INTERNATIONAL BUILDING AND FIRE CODE

Dear Ruth Ann Parsons:

Plans for the Renovation of the storage area have been reviewed by this office for conformity with the State Fire Safety Regulations and are hereby approved. Enclosed is a certificate of approval that must be posted on the premises until the project has been completed according to the approved plans and all regulations have been adhered to.

Approval of submitted plans is not approval of omissions or oversights by this office or noncompliance with any applicable regulations of the Municipal Government.

It must be understood that the inclusion of and compliance with State Fire Safety Regulations does not preclude the necessity of compliance with the requirements of local codes and ordinances.

If we can be of further assistance in this matter, please feel free to contact us at the address below.

Sincerely,

Robert Plumb
Deputy Fire Marshal
Life Safety Inspection Bureau

cc: Supervisor
Craig Building and Fire Official
Enclosure: Approval Certificate