


CGCC BUILDING PERMIT APPLICATION


|  |  |  |
|--|--|--|
| Name: <u>JIM DOROS</u>   |  | Date: <u>3/24/2017</u>                     |
| Property Address: <u>10 RHODODENDROW STREET</u>                                  |  | Port Townsend, WA 98368                    |
| Email Address:<br><u>JAMESDOROS@HOTMAIL.COM</u>                                  | Daytime Phone:<br>Evening Phone: <u>206-794-1687</u> |  |
| Request Building Permit for: <b>Select one</b>                                   | Legal Location:                                      |  |
| Home <input checked="" type="checkbox"/> Outbuilding <input type="checkbox"/>    | Blk No. <u>6</u>                                     | Colony <input checked="" type="checkbox"/> |
| Manufactured/Mobile Home <input type="checkbox"/> Other <input type="checkbox"/> | Div No.: <u>3</u>                                    | Village <input type="checkbox"/>           |
| Addition <input type="checkbox"/>  | Lot No.: <u>2</u>                                    | Highlands <input type="checkbox"/>         |

| Please answer the following questions                                      |   | YES                                 | NO                                  |
|--|---|-------------------------------------|-------------------------------------|
| 1  | I agree to abide by the CGCC Building and Property Regulations?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2  | Can the location of your proposed building be determined by survey markers?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3  | Have your plot plans been prepared according to the CGCC Building and Property Regulations?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 4  | Do the plans show the location of underground utilities?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5  | Do your plans require a Variance Request?   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6  | Manufactured/Mobile Home Installation:<br>(a) Does the plot plan include a description of the manufactured/mobile home year and the dimensions, not including the tongue?<br>(b) Does the concrete slab floor on which the manufactured/mobile home is to be installed have a minimum thickness of three and one-half (3 1/2) inches? | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 7  | Indicate the exact set-back as measured from the front property line to the nearest point of structure, including overhangs (minimum set back requirement is 25 feet):  | <u>57</u> ft. <u>  </u> in.         |                                     |
| 8  | Indicate the exact overall height of structure as measured from point of highest natural grade at the foundation line to highest point of roof ridge (maximum height of 17 feet):   | <u>14</u> ft. <u>6</u> in.          |                                     |
| 9  | Indicate the exact square footage of your living area – minimum 1,000 sq.ft.  | <u>1546</u> sq ft                   |                                     |
| Attach a copy of Approved Jefferson County permit and plans.               |   | <input checked="" type="checkbox"/> | attached                            |
| Attach plot plans per CGCC Building and Property Regulations.              |   | <input checked="" type="checkbox"/> | attached                            |
| Attach Fills/Earthwork/Culverts/Drainage Permit application, if applicable |   | <input type="checkbox"/>            | attached                            |
| Attach driveway Connection Permit application.                             |   | <input checked="" type="checkbox"/> | attached                            |
| Attach Water Connection Permit application, if applicable                  |   | <input checked="" type="checkbox"/> | attached                            |
| Attach Variance Request application, if applicable                         |   | <input type="checkbox"/>            | attached                            |

Contact Building Committee upon completion of your project for final

|   |                      |
|---|----------------------|
| Owner's or Agent's signature:  | Date: <u>3-24-17</u> |
|---|----------------------|

|   |       |
|---|-------|
| Building Committee: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved (reason): | Date: |
| Signature:                   |       |

|  |                      |
|--|----------------------|
| Manager Signature:  | Date: <u>4/10/17</u> |
|--|----------------------|