

CAPE GEORGE COLONY CLUB

61 CAPE GEORGE DRIVE
PORT TOWNSEND, WA 98368

RECEIVED SEP 29 2021

PHONE: (360) 385-1177
FAX: (360) 385-3038

CGCC BUILDING PERMIT APPLICATION

Name: <i>Wesley (Nick) + Carol Muzik</i>		Date: <i>9-29-21</i>
Property Address: <i>181 S. Rhododendron Dr</i>		Port Townsend, WA 98368
Email Address: <i>muzikn1@gmail.com</i>	Daytime Phone: _____ Evening Phone: <i>208-660-0113</i>	
Request Building Permit for: Select one Home <input type="checkbox"/> Outbuilding <input type="checkbox"/> Manufactured/Mobile Home <input type="checkbox"/> Other <input checked="" type="checkbox"/> <i>Deck</i> Addition <input type="checkbox"/>	Legal Location: Blk No.: _____ Colony <input checked="" type="checkbox"/> Div No.: _____ Village <input type="checkbox"/> Lot No.: _____ Highlands <input type="checkbox"/>	

Please answer the following questions		YES	NO
1	Is a Jefferson County Building Permit required for this project?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	I agree to abide by the CGCC Building and Property Regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	Can the location of your proposed building be determined by survey markers?	<input type="checkbox"/>	<i>N/A</i>
4	Have your plot plans been prepared according to the CGCC Building and Property Regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5	Do the plans show the location of underground utilities?	<input type="checkbox"/>	<i>N/A</i>
6	Do your plans require a Variance Request?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7	Manufactured/Mobile Home Installation: (a) Does the plot plan include a description of the manufactured/mobile home year and the dimensions, not including the tongue? (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"/>	<i>N/A</i>
8	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):	___ ft. ___ in.	<i>N/A</i>
9	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):	___ ft. ___ in.	<i>N/A</i>
10	Indicate the exact square footage of your living area <input checked="" type="checkbox"/> minimum 1,000 sq.ft. <i>Deck</i> <i>192 sq. ft.</i>	___ 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		___ attached	<i>N/A</i>
Attach driveway Connection Permit application.		___ attached	<i>N/A</i>
Attach Water Connection Permit application, if applicable		___ attached	<i>N/A</i>
Attach Variance Request application, if applicable		___ attached	<i>N/A</i>

Contact Building Committee upon completion of your project for final

Owner's or Agent's signature: <i>[Signature]</i>	Date: <i>9-29-21</i>
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Building Committee: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved (reason):	Date: <i>10/4/21</i>
Signature: <i>[Signature]</i>	
Manager Signature: <i>[Signature]</i>	Date: <i>10/4/21</i>

West

Nick & Carol Muzik
181 S Rhododendron Dr.
Port Townsend 98368
208.660.0113
muzikn1@gmail.com

JEFFERSON COUNTY DCD
BUILDING PLAN REVIEW

Before making changes or revisions
to the approved plans you must
contact the Bldg Dept 360-379-4450.

APPROVED PLANS
TO REMAIN ON BUILDING SITE
WITH
POSTED PERMIT SIGN OFF SHEET

APPROVED AS SUBMITTED

APPROVED AS NOTED

REJECTED

Date 9/20/11 Reviewer PC

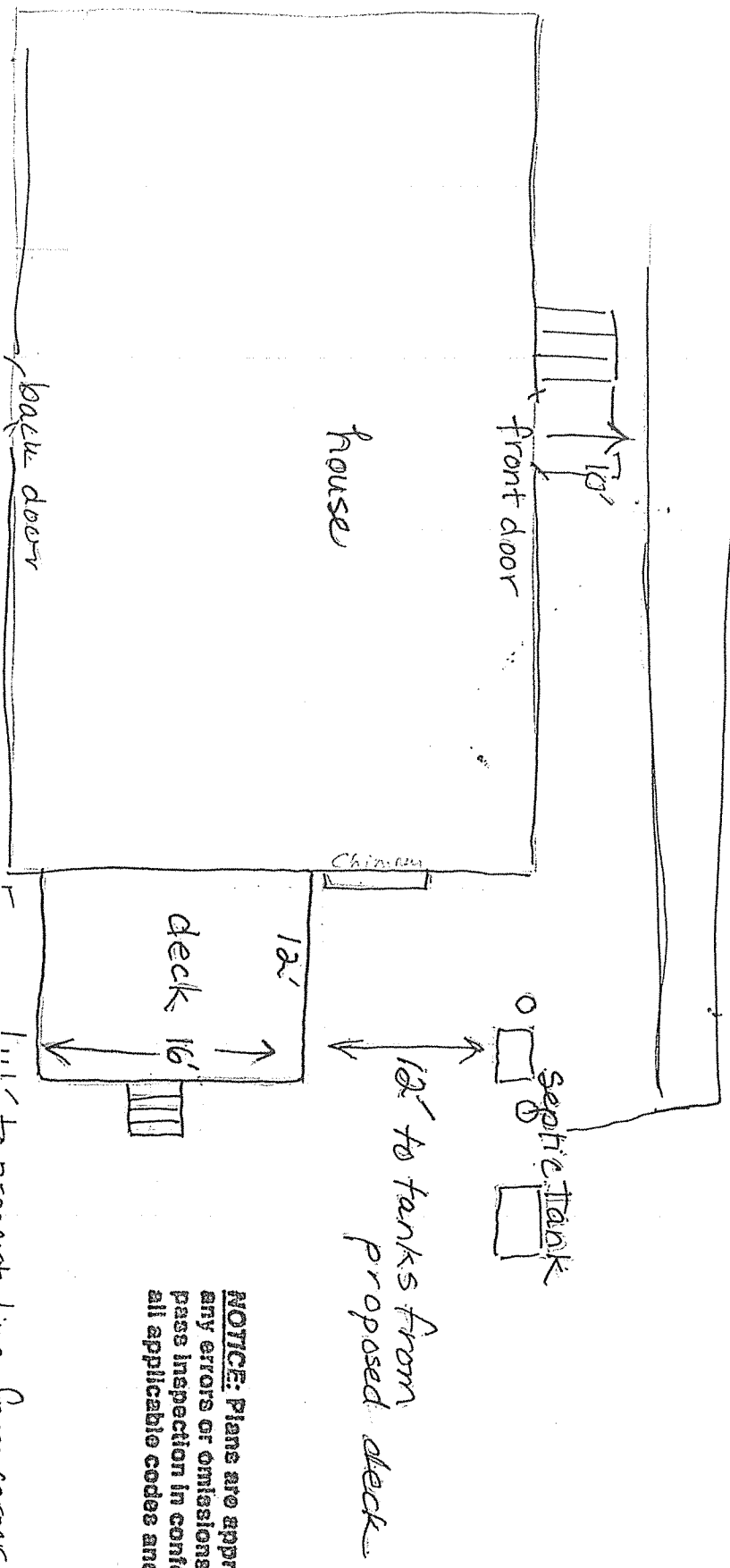
REVIEWED FOR
CODE COMPLIANCE

Property line see next page

Drainfield

NORTH

SITE COPY



NOTICE: Plans are approved excepting any errors or omissions. All work must pass inspection in conformance with all applicable codes and regulations.



JEFFERSON COUNTY
 DEPARTMENT OF COMMUNITY DEVELOPMENT
 621 Sheridan Street | Port Townsend, WA 98368
 360-379-4450 | email: dcd@co.jefferson.wa.us
 www.co.jefferson.wa.us/commdevelopment

BUILDING PERMIT

PERMIT #: BLD2021-00520 Received Date: 9/8/2021
 SITE ADDRESS: 181 S RHODODENDRON DR Issue Date: 9/29/2021
 PORT TOWNSEND, 98368 Expiration Date: 9/29/2022

OWNER: WESLEY MUZIK PHONE:
 CAROL MUZIK
 181 SOUTH RHODODENDRON DRIVE
 PORT TOWNSEND WA 98368

SUBDIVISION: 9384 - CAPE GEORGE COLONY DIV.
 PARCEL NUMBER: 938400612 Section: 12 Township: 30 N Range: 2W

CONTRACTOR: OWNER/BUILDER

PROJECT DESCRIPTION: DECK 12'x16'

TYPE OF WORK NON SQUARE FOOTAGE:
 TYPE OF IMP DEK
 VALUATION MAIN:
 CODE EDITION: 2018 ADD'L:
 OCCUPANCY: U-1 HEAT BASE: HEAT TYPE:
 OCCUPANCY: UNHEATED: # OF STORIES:
 CONST TYPE: 5N OTHER:
 CONST TYPE: GARAGE: SHORELINE:
 DECK: 192 SETBACK:
 BANK HEIGHT:

SEWAGE DISPOSAL:
 WATER SYSTEM:

BEDROOMS: BATHROOMS:
 Exist: Exist:
 Prop: Prop:
 Total: Total:

Type	Amount Paid	By:	Date:	Receipt:
Permit D010	\$194.00	ASW	09/08/21	198671
Plan Check DCD019	\$97.00	ASW	09/08/21	198671
Scanning Fee DCD022	\$24.00	ASW	09/08/21	198671
State Building Code DCD0:	\$6.50	ASW	09/08/21	198671
Tech Fee DCD003	\$16.07	ASW	09/08/21	198671
Total:	\$337.57			

R105.5 Expiration. Every *permit* issued shall become invalid unless the work authorized by such *permit* is commenced within 180 days after its issuance, or if the work authorized by such *permit* is suspended or abandoned for a period of 180 days after the time the work is commenced.

HEALTH DEPARTMENT AND PUBLIC WORKS APPROVAL REQUIRED PRIOR TO FINAL INSPECTION

THIS PERMIT IS VALID FOR ONE YEAR OR IT MUST BE PROPERLY RENEWED

BUILDING INSPECTION HOT-LINE 379-4455.

Request must be received by **3pm** the day before the inspection is needed.

Final Inspections require 24 hour notice.

Office Hours 9:00 am - 4:30 pm **MONDAY - THURSDAY**

HOT LINE AVAILABLE 24 HOURS A DAY