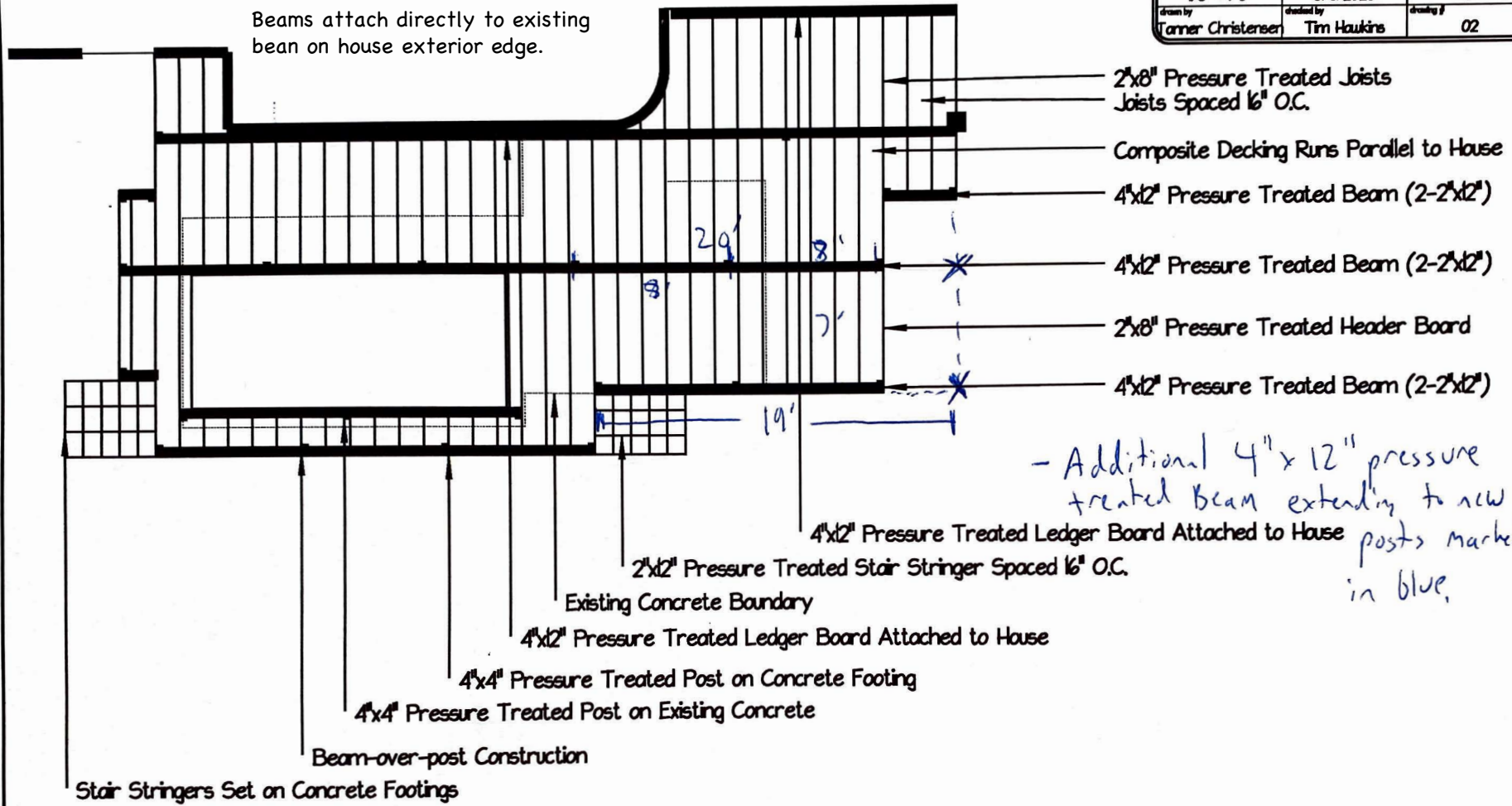


O'Shea Residence  
 7523 92nd Avenue Southeast  
 Mercer Island, WA

sheet	date	revision
1/8" = 1'-0"	3/5/2020	d
drawn by	checked by	drawing #
Tanner Christensen	Tim Hawkins	02

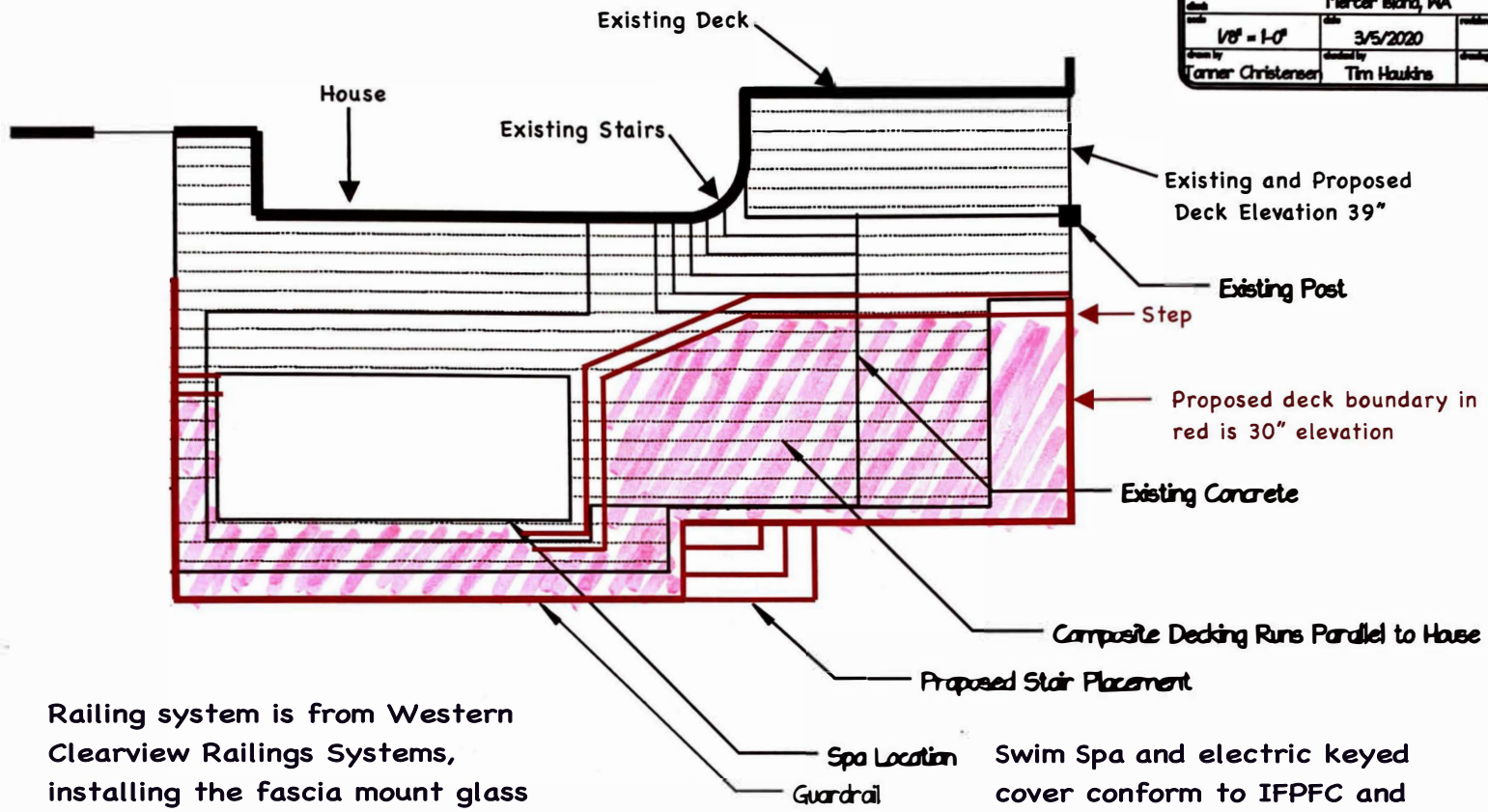
Beams attach directly to existing beam on house exterior edge.



- Additional 4" x 12" pressure treated beam extending to new posts marked in blue.

**BROOKSTONE**  **NE**  
 LANDSCAPE & DESIGN

<b>O'Shea Residence</b>			
7523 92nd Avenue Southeast Mercer Island, WA			
date 3/5/2020	scale 1/8" = 1'-0"	revision cl	drawing # cl
drawn by Tanner Christensen	checked by Tim Hawkins	approved by cl	



Railing system is from Western Clearview Railings Systems, installing the fascia mount glass railing system.

Swim Spa and electric keyed cover conform to IFPFC and AFPM F1346.

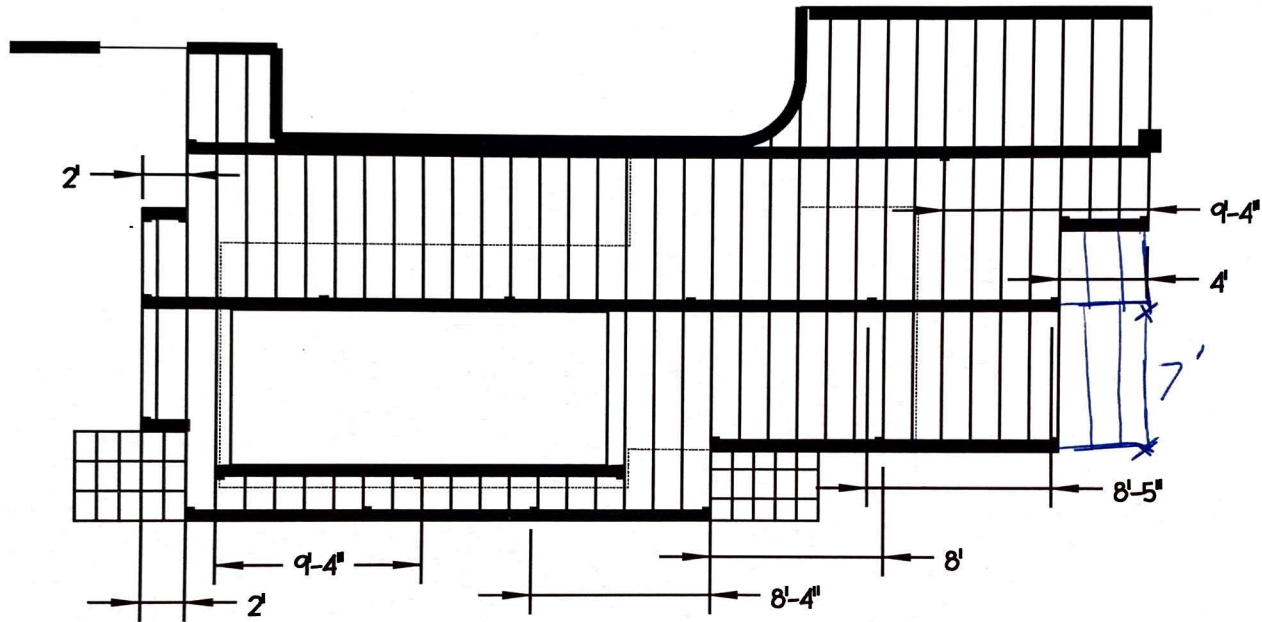
# BROOKSTONE

LANDSCAPE & DESIGN

O'Shea Residence  
7523 92nd Avenue Southeast  
Mercer Island, WA

client	date	revision
scale 1/8" = 1'-0"	3/5/2020	01
drawn by Tanner Cristensen	checked by Tim Hawkins	drawing # 04

Post Spacing Dimensions



**BROOKSTONE**  **NE**  
LANDSCAPE & DESIGN

# CITY OF MERCER ISLAND

## COMMUNITY PLANNING & DEVELOPMENT

9611 SE 36TH STREET | MERCER ISLAND, WA 98040

PHONE: 206.275.7605 | [www.mercergov.org](http://www.mercergov.org)

Inspection Requests: Online: [www.mybuildingpermit.com](http://www.mybuildingpermit.com) VM: 206.275.7730



## Contractor Information Sheet

### New Residential Building Permits and Combo Permits

Permit #			
Owner's Name:		Phone #	
Site Address:			

The following information is required for all new residential building permits:

General Contractor			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
Scope of Work:			

Electrical Sub-Contractor			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
Scope of Work:			

Electrical Sub-Contractor #1			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
Scope of Work:			

Electrical Sub-Contractor #2			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
Scope of Work:			

<b>Electrical Sub-Contractor #3</b>			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
<b>Scope of Work:</b>			

<b>Plumbing Contractor</b>			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
<b>Scope of Work:</b>			

<b>Mechanical Contractor</b>			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
<b>Scope of Work:</b>			

<b>Additional Contractor # 1</b>			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
<b>Scope of Work:</b>			

<b>Additional Contractor # 2</b>			
Company:		Phone #	
Contact Name:		Cell #	
Address:			
Email address:			
WA Contractor Lic:		MI Business License:	
<b>Scope of Work:</b>			