

After recording return to:

PIU
D. Cavender

Multnomah County Official Records
R Weldon, Deputy Clerk

2012-055632



\$36.00

05/08/2012 09:03:16 AM

1R-COVNT
\$5.00 \$11.00 \$15.00 \$5.00

Pgs=1 Stn=11 RECCASH2

(SPACE ABOVE THIS LINE FOR RECORDER'S USE)

8/1/05

**COVENANT FOR
FUTURE COMPLIANCE WITH ZONING REGULATIONS
(SECOND KITCHEN WITH SINK)**

ADDRESS: 1054 SW MAPLE CREST DRIVE
PROJECT: CONSTRUCT OR IMPROVE A SINGLE-FAMILY DWELLING TO INCLUDE A SECOND KITCHEN WITH COOKING FACILITES INCLUDING A SINK
BUILDING PERMIT APPLICATION NUMBER: 12-135577 RS
LEGAL DESCRIPTION: MAPLE CREST, LOTS 51, 52 & 60, TAXLOT 4700
TAX ACCOUNT NUMBER: R212423

Whereas Peter Gillespie + Ann BARR (Owner(s)) has applied to the City of Portland (City) for authorization to add a second kitchen, which includes cooking facilities and a sink, to an existing single-family dwelling.

Whereas Title 33 of the Portland City Code prohibits any use of a single-family dwelling as a two-family dwelling without the appropriate permit and review process.

NOW, THEREFORE, IT IS AGREED, AS FOLLOWS:

This Covenant for Future Compliance with Zoning Regulations (Covenant) executed by the City and the Owner(s) in order to ensure that the structure, at the above referenced address, remains a single-family dwelling unless permits are issued, improvements made, and inspections passed that would permit the use of the structure as other than a single-family dwelling.

This Covenant is to run with the land, shall be binding on Owners(s) and all parties claiming through or under them, and may at any time be specifically enforced by the City unless an instrument executed by the City and Owner(s) has been recorded agreeing to change this Covenant in whole or in part.

Dated this 30th day of April, 20 12
Signed Peter G. Gillespie
Peter G. Gillespie
(Owner)

Dated this 30th day of April, 20 12
Signed Ann E. Barr
Ann E. Barr
(Owner)

State of Oregon

State of Oregon

County of Multnomah

County of Multnomah

On 30th APRIL, 2012 personally appeared the above named PETER GORDON GILLESPIE

On 30th APRIL, 2012 personally appeared the above named ANN ELIZABETH BARR

And acknowledged the foregoing instrument to be a voluntary act and deed.

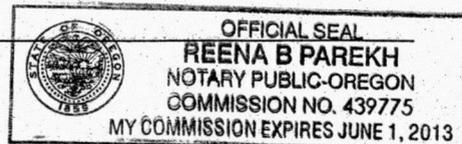
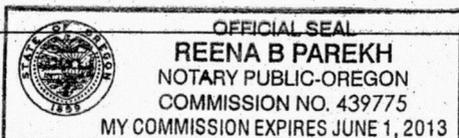
And acknowledged the foregoing instrument to be a voluntary act and deed.

Before me: Reena Parekh

Before me: Reena Parekh

Notary Public for Oregon
My Commission expires:

Notary Public for Oregon
My Commission expires:





Building Permit Application
City of Portland, Oregon - Bureau of Development Services

1900 SW 4th Avenue, Portland, Oregon 97201 • 503-823-7310 • TTY 503-823-6868 • www.portlandoregon.gov/bds

Type of work

- New construction Addition/alteration/replacement
 Demolition Other:

Category of construction

- 1 & 2 family dwelling Commercial/industrial Accessory building
 Multifamily Master builder Other:

Job site information and location

Job no.: _____ Job address: 1054 SW Maple Crest Dr
 City/State/ZIP: Portland, OR
 Suite/bldg./apt. no.: _____ Project name: _____
 Cross street/directions to job site: Taylor's Ferry and Sawwilliger
Toward Lake Oswego - R at Maplecrest Dr.
 Subdivision: _____ Lot no. _____ Tax map/parcel no. _____

Description of work

Move wall, add shower, plumbing,
electrical for kitchen, Heated floors

- Reference RS / Combination Permit no. _____

Property owner **Tenant**

Name: Peter Gillespie
 Address: 1054 Maple Crest Dr
 City/State/ZIP: Portland OR
 Phone: 503 576-0000 FAX: _____

Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.

Owner signature: _____ Date: _____

Contractor

Business name: Dan Cavender Construction Inc
 Address: 2813 22nd Ave
 City/State/ZIP: Fairport OR 97116
 Phone: 971-212-5466 FAX: 503-359-5038
 CCB lic. no. _____

Authorized signature: Dan Cavender 4/27/12
 Print name: DAN CAVENDER Date: 4-27-12

Applicant **Contact Person**

Business name: SAME AS ABOVE
 Contact name: _____
 Address: _____
 City/State/ZIP: _____
 Phone: _____ FAX: _____
 E-mail: _____
 Authorized signature: _____
 Print name: _____ Date: _____

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

Office Use Only

Permit no: _____
 Date received: _____
 By: _____

Required Data: One and Two Family Dwelling

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

| | |
|-------------------------|---------------|
| Valuation: | <u>25,000</u> |
| Number of bedrooms: | |
| Number of bathrooms: | |
| Total number of floors: | |
| New dwelling area: | square feet |
| Garage/carport area: | square feet |
| Covered porch area: | square feet |
| Deck area: | square feet |
| Other structure area: | square feet |

Required Data: Commercial Use

Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.

| | |
|-------------------------|-------------|
| Valuation: | |
| Existing building area: | square feet |
| New building area: | square feet |
| Number of stories: | |
| Type of construction: | |
| Occupancy groups | |
| Existing: | |
| New: | |

Notice

All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed. If the applicant is exempt from licensing, the following reasons apply.

Statement of Fact: I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of fact (whether intentional or not) in this application or any other required document, as well as any misleading statement or omission, may be cause for revocation of permit and/or certificate of occupancy, regardless of how or when discovered.

Building Permit Fees*

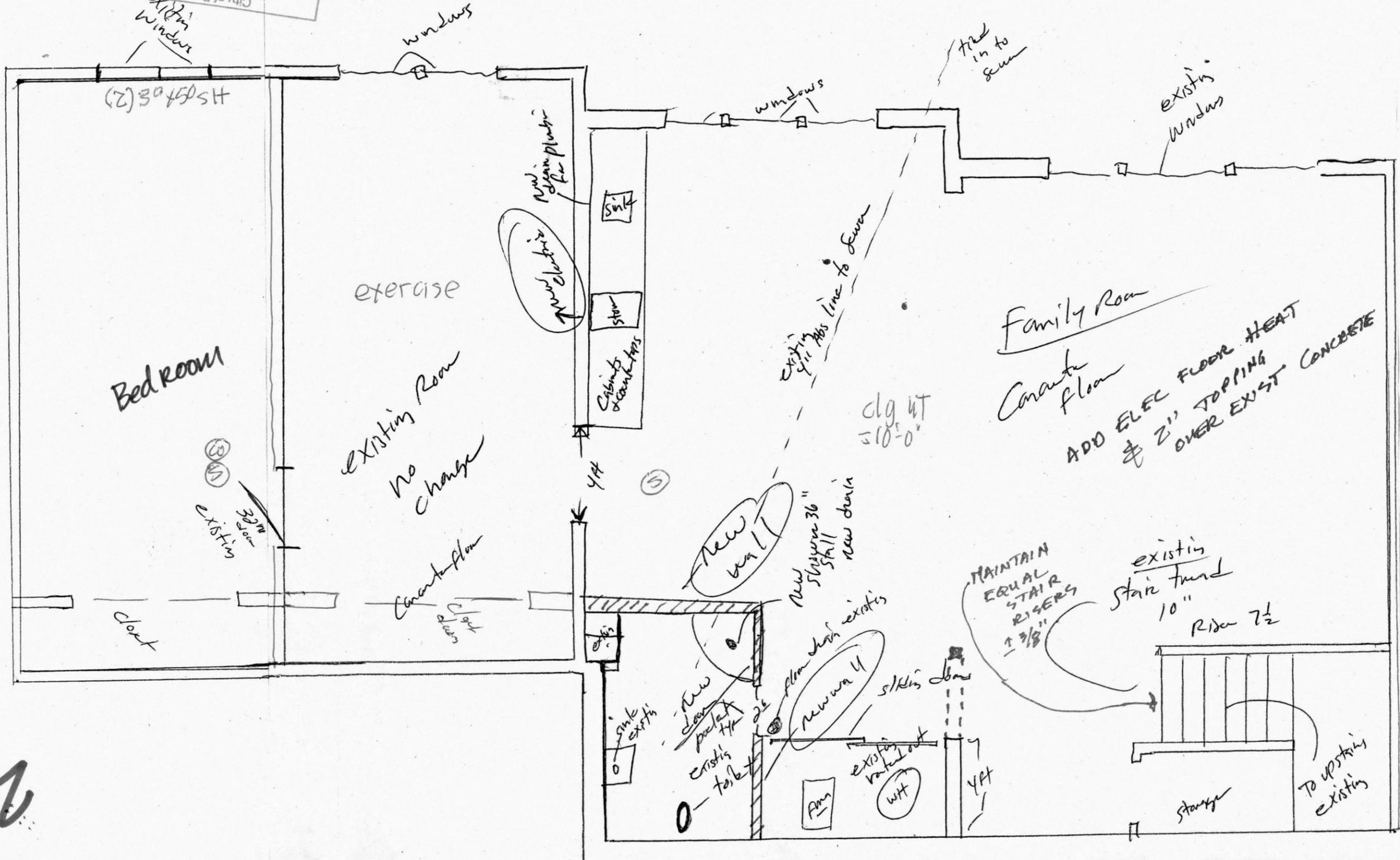
Please refer to fee schedule

| | |
|---------------------------|--|
| Fees due upon application | |
| Amount received | |
| Date received | |

Sub-contractor information can be faxed to 503-823-7693.

12-135571 RS

City of Portland
REVIEWED FOR CODE COMPLIANCE
MAY 08 2012 Bureau of Development Services
Permit Number: [blank] Date: 5/8/12
Approved by Planning and Zoning Review



Scale 3/4" = 1 ft
1054 maple cut dr
Portland, OR

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