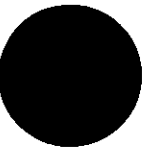


Brick

Permit Without a Jacket

Permit Number 1316-91



Date Received
Date Issued
Control #
Permit #

7-15-91
1316-91

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 606 Lot 8
Work Site Location 17 Holly Rd.
Owner in Fee JOSEPH TLEUTO
Address 17 HOLLY RD
BRICK
Tele. ()
Contractor SELF
Address SAME
Tele. ()
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the agent of owner of record and am authorized to make this application.
Signature Joseph Tleuto

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

JOB SUMMARY (Office Use Only)	
PLAN REVIEW	INSPECTIONS
Date	Initial
☐ No Plans Req.	Type: _____
☐ All	Footing _____
☐ Footing	Foundation _____
☐ Foundation	Slab _____
☐ Frame	Frame _____
☐ Other _____	Insulation _____
Joint Plan Review Required:	Finishes: _____
☐ Elec. ☐ Plumb. ☐ Fire	Energy _____
SUBCODE APPROVAL	Mechanical _____
☐ CO ☐ CCO ☐ CA	TCO _____
Date: _____	Other _____
Approved By: _____	Final _____

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Const. Class Present 1/2 Proposed _____
No. of Stories _____ Ft.
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
Total Bldg. Area/All Floors _____ Sq. Ft.
Volume of Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

TYPE OF WORK:	
☐ New Building	(Office Use Only) FEE
☐ Addition	
☐ Alteration	
☒ Roofing	
☐ Siding	
☐ Other _____	
☐ Demolition	
☐ Miscellaneous	
☐ Fence _____ Height _____	
☐ Sign _____ Sq. Ft. _____	
☐ Pool	
☐ Elevator	
☐ Asbestos Abatement	
☐ Other _____	

Administrative Surcharge	
Paid ☐ Check # _____	Minimum Fee \$ _____
Collected by: _____	TOTAL FEE \$ _____