

Location of Construction: 107 Tucker Ave lot 14		Owner: Mindy /Marsha Stultz		Phone: **** 878-0798		Permit No: 000642	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: SAA		Address:		Phone:		Permit Issued: ISSUED	
Past Use: single family		Proposed Use: same		COST OF WORK: \$ 0		PERMIT FEE: \$ 30.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group A-3 Type: 513 BOCA 99 Signature: <i>[Signature]</i>	
Proposed Project Description: Home Occupation Massage therapy/ ^{polarity} priority therapy				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zone: <i>[Handwritten]</i> CBL: 332-D-012	
Permit Taken By: GIna		Date Applied For: June 12 2000 K		Signature: _____ Date: _____		Zoning Approval: <i>OK with</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>completing</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone 6/15/00 <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

PERMIT ISSUED WITH REQUIREMENTS

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

June 12 2000

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS

CEO DISTRICT 1