

PERMIT # 002220 TOWN OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Eleanor Minvella
 Address: 27 Bernard Rd., Portland
 LOCATION OF CONSTRUCTION: 27 Bernard St.
 CONTRACTOR: Wanda G. Grady SUBCONTRACTORS: 799-5466
 ADDRESS: 364 Mitchell Rd., Cape Elizabeth, Me 04107
 Est. Construction Cost: \$950 Type of Use: single family
 Past Use: _____
 Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____
 Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____
 Conversion - Explain Tear down existing stairs and replace in same footprint. 1 plot/irregular plan submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE
 Residential Buildings Only: _____
 # Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Sizes _____ Span(s) _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size _____
 7. Insulation Type _____ Size _____
 8. Sheathing Type _____ Size _____
 9. Siding Type _____ Weather Exposure _____
 10. Masonry Materials _____
 11. Metal Materials _____

Interior Walls:
 1. Studding Size _____ Spacing _____
 2. Header Sizes _____ Span(s) _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

For Official Use Only	
Date <u>June 13, 1989</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost <u>\$950</u>	Permit Expiration: _____
Value/Structure _____	Ownership: _____ Public _____ Private _____
Fee <u>\$25</u>	

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size _____ Span _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____
 4. Other _____

Chimneys:
 Type: _____ Number of Fire Places _____

Heating:
 Type of Heat: _____

Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:
 1. Approval of soil test if required Yes No _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____

Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ x _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Zoning:
 District R-3 Street Frontage Req.: _____ Provided _____
 Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shore and Floodplain Mgmt. _____ Special Exception _____
 Other (Explain) _____

Date Approved 6-13-89
 Permit Received By Nancy Grosman

Signature of Applicant _____ Date 6/13/89
 Signature of CEO _____ Date _____

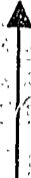
Inspection Date: _____

PERMIT ISSUED
 JUN 19 1989
 City Of Portland

(Handwritten signature)

PLOT PLAN

N



FEES (Breakdown From Front)
Base Fee \$ 25.00 _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type

Inspection Record

Date

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

1/5/90 all OK.

Signature of Applicant

Edward H. Brady agent for owner

Date

6/13/89

BUILDING
REMODELING

KITCHENS
GARAGES

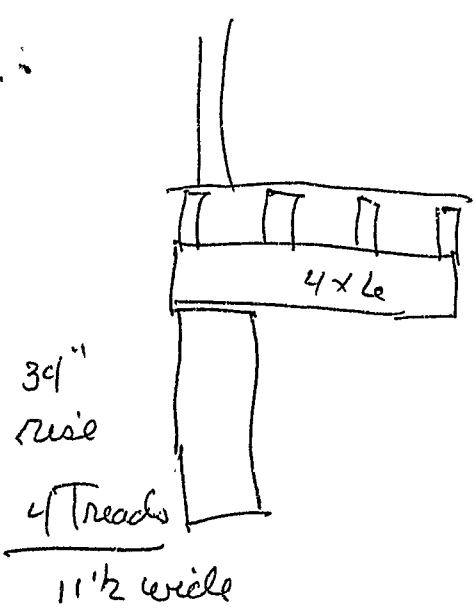
GRADY GENERAL CONTRACTOR

ED GRADY
STEVE GRADY

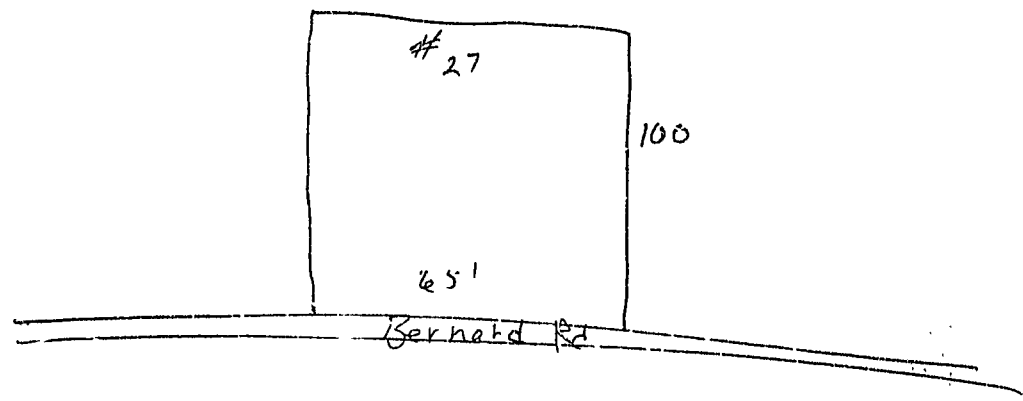
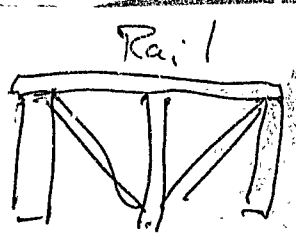
799-5488
364 MITCHELL RD. C.E.

10. Melody Lane

Rustic Pine refil off
Rustic yellow
Pine



5/4 PT. Spruce
2x6 1600.



Rise max 8 1/4"
max. 9"

437-D-12

Zone 5

Same footprint
as old steps

27 Bernard St.

RECEIVED
JUN 13 1988

BUILDING INSPECTOR
CITY OF PORTLAND



CITY OF PORTLAND

CONDITIONAL USE APPEAL

APPLICATION

Applicant's name and address: _____

Applicant's interest in property (e.g., owner, purchaser, etc.): _____

Owner's name and address (if different): _____

Address of property (or Assessor's chart, block and lot number): _____

Zone: _____ Present use: _____

Type of conditional use proposed: _____

Conditional use authorized by: Section 14- _____

NOTE: If site plan approval is required, attach preliminary or final site plan.

The undersigned hereby makes application for a conditional use permit as above-described, and certifies that all information herein supplied by him is true and correct to the best of his knowledge and belief.

Dated: 6/5, 1989

Michael Seabrook
Signature of Applicant

B

002220

PERMIT # _____ TOWN OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form:

Owner: Eleanore Minvielle

Address: 27 Bernard Rd., Portland

LOCATION OF CONSTRUCTION 27 Bernard St.

CONTRACTOR: Edmund G. Grady SUBCONTRACTORS: 799-5466

ADDRESS: 364 Mitchell Rd., X Cape Elizabeth, Me 04107

Est. Construction Cost: \$950 Type of Use: single family

Past Use: _____

Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories: _____ Lot Size: _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain Tear down existing stairs and replace in same

footprint. 1 plot/framing plan submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only: _____

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

1. Type of Soil: _____

2. Set Backs - Front _____ Rear _____ Side(s) _____

3. Footings Size: _____

4. Foundations Size: _____

5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.

2. Girder Size: _____

3. Lally Column Spacing: _____ Size: _____

4. Joists Size: _____ Spacing 16" O.C.

5. Bridging Type: _____ Size: _____

6. Floor Sheathing Type: _____ Size: _____

7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____

2. No. windows _____

3. No. Doors _____

4. Header Sizes _____ Span(s) _____

5. Bracing: Yes _____ No _____

6. Corner Posts Size _____

7. Insulation Type _____ Size _____

8. Sheathing Type _____ Size _____

9. Siding Type _____ Weather Exposure _____

10. Masonry Materials _____

11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____

2. Header Sizes _____ Span(s) _____

3. Wall Covering Type _____

4. Fire Wall if required _____

5. Other Materials _____

For Official Use Only

Date June 13, 1989 Subdivision: Yes / No _____

Inside Fire Limits _____ Name _____

Bldg Code _____ Lot _____

Time Limit _____ Block _____

Estimated Cost \$950 Permit Expiration: _____

Value/Structure _____ Ownership: _____ Public _____

Fee \$25 Private _____

Celling:

1. Ceiling Joists Size: _____

2. Ceiling Strapping Size _____ Spacing _____

3. Type Ceiling: _____

4. Insulation Type _____ Size _____

5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____

2. Sheathing Type _____

3. Roof Covering Type _____

4. Other _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____

2. No. of Tubs or Showers _____

3. No. of Flushes _____

4. No. of Lavatories _____

5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____

2. Pool Size: _____ x _____ Square Footage _____

3. Must conform to National Electrical Code and State Law.

Zoning:

District: _____ Street Frontage Req.: _____ Provided _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shore and Floodplain Mgmt. _____ Special Exception _____

Other (Explain) _____

Date Approved _____

Permit Received By Nancy Crossman

Signature of Applicant Edmund G. Grady Date 6/13/89

Signature of CEO _____ Date _____

Inspection Dates 6/13/89

940360

Permit # 940360 City or Portland BUILDING PERMIT APPLICATION Fee \$25 Zone _____ Map # _____ Lot # _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Brent & Diane Powers Phone # 823-3212
Address: 27 Bernard Rd - Ptld, ME 04103

LOCATION OF CONSTRUCTION 27 Bernard Rd.

Contractor: owner Sub: _____
Address: _____ Phone # _____

Est. Construction Cost: \$1000 Proposed Use: 1-fam w util shed
Past Use: 1-fam dwlg

of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion constaruct utility shed - 3'x'12'

Foundations:
1. Type of Soil: _____
2. Sct Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:
1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:
1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only
Date 5/2/94 Subdivision: MAY - 3 1994
Inside Fire Limits _____ Name _____
Bldg Code _____ Lot _____
Time Limit _____ Estimated Cost \$25
Ownership: _____ Private _____

Zoning: Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____ Side _____
Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain: Yes _____ No _____
Special Exception _____
Other (Explain) WAL 5-3-94

Ceiling:
1. Ceiling Joists Size: _____ Spacing _____ Not in District nor Landmark.
2. Ceiling Strapping Size _____ Spacing _____ Does not require review.
3. Type Ceilings: _____
4. Insulation Type _____ Size _____ Requires Review.
5. Ceiling Height: _____

Roof:
1. Truss or Rafter Size _____ Span Action: Approved
2. Sheathing Type _____ Size _____ Approved with conditions
3. Roof Cover: Type _____

Chimneys:
Type: _____ Number of Fire Places _____

Heating:
Type of Heat: Oil

Electrical:
Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:
1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures Use Group U Type 5B

Swimming Pools:
1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received by Louise E. Chase
Signature of Applicant Brent Powers Date 5/2/94

CEO's District 6
CONTINUED TO REVERSE SIDE MR ROWE

White - Tax Assessor

Ivory Tag - CEO

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED WITH REQUIREMENTS

HISTORIC PRESERVATION

PLOT PLAN

N



FEEES (Breakdown From Front)

Base Fee \$ 25-

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS 9/20/94. OK above

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

Deane Powell

SIGNATURE OF APPLICANT _____ ADDRESS _____ PHONE NO. _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE NO. _____

BUILDING PERMIT REPORT

Address 27 Bernard Rd. Date 3/12/99

Reason for Permit To Construct Utility

Bldg. Owner: P. G. ...

Contractor: ...

Permit Applicant: ...

Approval: * / ...

CONDITION OF APPROVAL:

1. Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection).
2. Precaution must be taken to protect concrete from freezing.
3. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
4. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hr., including fire doors with selfclosers.
5. Each apartment shall have access to (2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
6. The boiler shall be protected by enclosing with one (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessible location between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
7. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of special knowledge or separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping room must have minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm), and a minimum net clear opening of 5.7 sq. ft.
8. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code (International Building Code 1993), and NFPA 101 Chapter 18 & 19.

9. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by Fire Partitions and floor/ceiling assembly joints which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 section 407.0 of the BOCA/1995).

10. Guardrails & Handrails - A guardrail system is a system of building components located near the open sides of elevated walking surface, for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Group "2", except Use Group R which is 36". In occupancies in Use Group A, B, H-1, II, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect.

11. All exit signs, lights and main egress lighting shall be done in accordance with Chapter 10, section 4 subsections 1023.8 & 1024.0 of the City's building code (The BOCA National Building Code/1993).

12. Stair construction in Use Group R-3, R-4 is a minimum of 9" tread and 8-1/4" maximum rise.

13. Headroom in habitable space is a minimum of 7'6".

14. Minimum headroom in all part of a stairway shall not be less than 80 inches.

15. All construction and demolition debris must be disposed at the City's authorized reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final certificate of occupancy is issued or demolition permit is granted.

16. Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".

17. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 MRSA refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

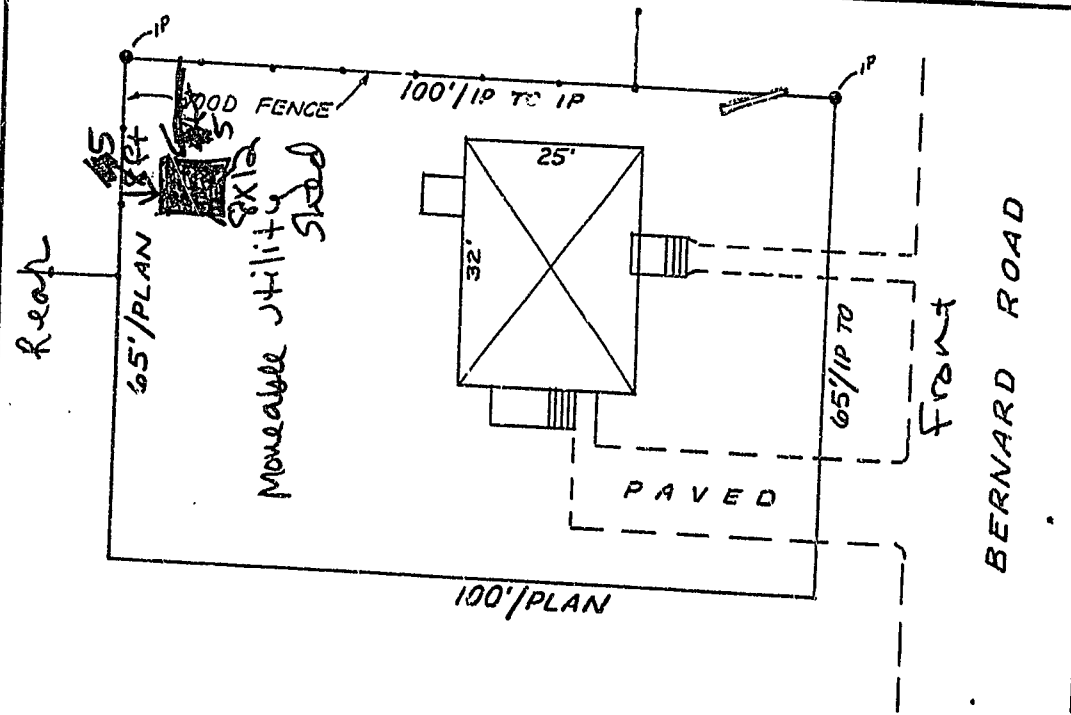
Sincerely,

P. Samuel Hoffses
Chief of Inspections

dm 01/14/94
(redo w/additions)

Assessor's Map 437 Block and/or Lot D-12

This is not a land b



R-3 zone

I hereby certify that the location of the dwelling shown on this plan did conform with the local zoning laws in effect at the time of construction. The property does not fall within a special flood hazard zone.

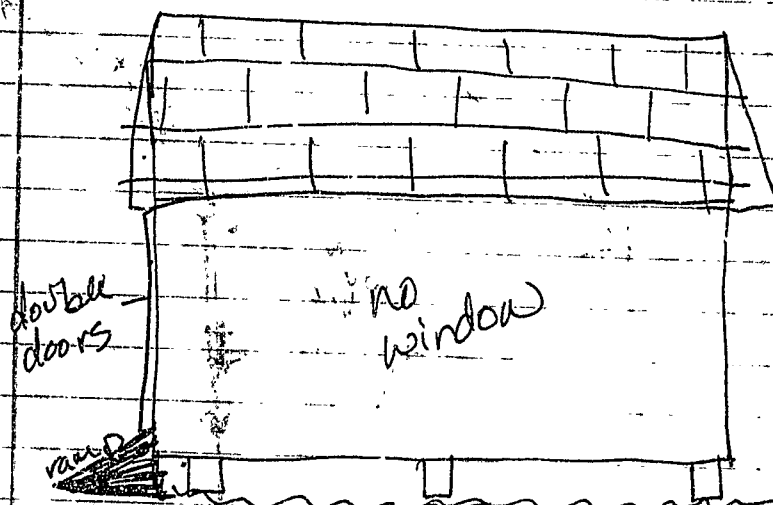
To The Lending Institution And Its Title Insurer

On record in the County of Cumberland
 Book 2821 Page 425 Plan Book 60 Page 57 Lot 31

This plan was not made from an instrument survey and is not for recording purposes. The plan shows conditions existing as of the date shown hereon. Certification is for mortgage purposes only. Property lines as shown are apparent only. This certification is limited to this particular transaction only and this surveyor is not liable for any other use by any other person or entity.

Mortgage Loan In	
This is a Class D Sur	
PROPERTY OF	<u>ELEANOR MIN</u>
	<u>27 BERNARD ROAD - P</u>
SCALE	<u>1" = 20'</u>
DATE	<u>SEPT. 16, 1993</u>
BUYER	<u>BRENT W. & DIAN</u>
SURVEYOR	<u>Peter A. Webber</u> Scarborough,

8x12 moveable structure (utility shed)



walls -

2x4 walls - ~~boards~~ ~~boards~~ tongue + groove boards
2 Ft. on center

Roof -

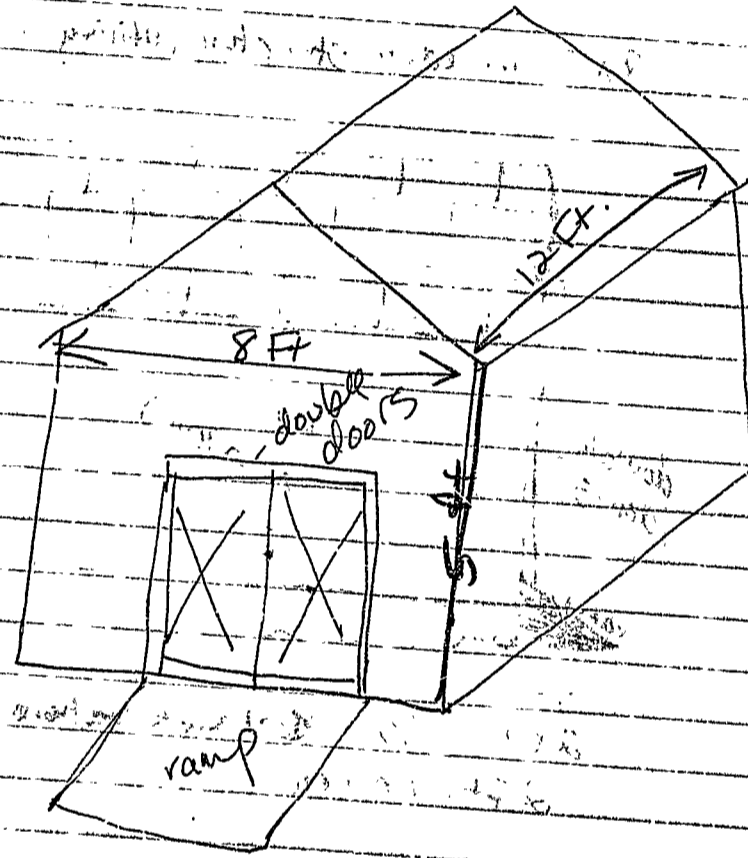
2x4 rafters - 2 Ft. on center

3/4 boards

asphalt shingles

stands on 4x4 pressure treated wood blocks

*Not to scale



DEPT. OF BUILDING INSPECTION
 CITY OF PORTLAND, ME
 MAY 2 1994
RECEIVED

940360

Permit # 940360 City of Portland BUILDING PERMIT APPLICATION Fee \$25 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Brent & Diane Powers Phone # 828-3212

Address: 27 Bernard Rd- Pld, MF 04103

LOCATION OF CONSTRUCTION 27 Bernard RD.

Contractor: owner Sub: _____

Address: _____ Phone # _____

Est. Construction Cost: \$1000 Proposed Use: 1-fam w util shed Zoning: _____

_____ Past Use: 1-fam dwlg

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion const ruct utility shed - 8'x'12'

Foundation:
1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:
1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:
1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only
Date 5/2/94 Subdivisor Name 940360
Inside Fire Limits _____ Bldg Code _____ Lot _____
Time Limit _____ Ownership _____ Public _____
Estimated Cost \$25

Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____
Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) 25-394

Ceiling:
1. Ceiling Joists Size _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____ Does not require review _____
4. Insulation Type _____ Size _____ Requires Review _____
5. Ceiling Height: _____

Roof:
1. Truss or Rafter Size _____ Span _____ Action: Approved
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:
Type: _____ Number of Fire Places _____
Signature: _____

Heating:
Type of Heat: _____

Electrical:
Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:
1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures Use Group U Type 512

Swimming Pools:
1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Robert Chase
Signature of Applicant Brent Powers Date 5/2/94
CEO's District 6 Diane Powers

PERMIT ISSUED WITH REQUIREMENTS

White - Tax Assessor

CONTINUED TO REVERSE SIDE [E] Mr Rowc, Ivory Tag - CEO