

PARCEL #

BD 2



APPLICANT MUST USE TYPEWRITER IN FILING IN

INSPECTIONAL SERVICES DEPT. CITY DESK

L.F. 1251

THIS APPLICATION

CITY OF BOSTON

10 10 AM '88

INSPECTIONAL SERVICES DEPARTMENT

Certified Street Numbers

135 Myrtle ST.

Street Numbering Inspector. wd. 5

Application to the Commissioner for Permit for Alterations, Repairs or Change of Occupancy

Location: 135 Myrtle ST. District: Ward 5
Name of owner: Jeffrey Katz Address: same
Name of architect or engineer: Lic. No. BEACON HILL ARCHITECTURAL COMMISSION
Material of building: brick Style of roof: flat Construction of roof:
Size of building: 21.66 feet front; 22 feet rear; 30 feet deep; No. of stories: 3
No. of feet in height from sidewalk to highest point of roof:
Thickness of external walls: Party walls:

Description of Present Building

LEGAL OCCUPANCY OR USE (Applicant is not to fill in this box)
four family dwelling Doc#3063-11930

Front stairs: X Back stairs: Fire escape: X Con. balconies: Any other:
Is building equipped with automatic sprinkler system?
Type of construction: Group occupancy:
Building to be occupied for: TWO FAMILY DWELLING after alteration

Description of Proposed Extension

IF EXTENDED ON ANY SIDE OR VERTICALLY

Size of extension, No. of feet long; No. of feet wide; No. of feet high above sidewalk;
No. of stories high; style of roof; material of roofing;
Of what material will the extension be built? Foundation?
How will the extension be occupied? Type of Construction

GENERAL DESCRIPTION OF THE PROPOSED WORK AND ITS LOCATION. (ALL STRUCTURAL, MECHANICAL, ELECTRICAL, ETC., SHALL BE INCLUDED)

CHANGING OCCUPANCY FROM FOUR FAMILY TO A TWO FAMILY DWELLING
NEW PLUMBING, HEATING, ELECTRICAL SYSTEM
REPLASTER WALLS.

NO EXTERIOR ALTERATIONS
No formal hearing is required

SEP 29 1988

PLAN FILED WITH APPLICATION

CHANGE OF OCCUPANCY

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

Date: Sept. 27, 1988 Estimated Cost, \$ 75,000.00
Owner's Phone 367-0537

The facts I have set forth above in this application and accompanying plans are a true statement to the best of my knowledge and belief.

Signature of Owner: Jeffrey Katz

Type Name of Person Signing: Jeffrey Katz
(Address): 135 Myrtle ST.

Signature of Licensed Builder: [Signature]

Type Name of Person Signing: Owner as contractor
(Name of Contractor): [Signature]

(Address), Lic. No., Class, My license expires, Phone

(Address), (Name of Contractor), (Address), Phone

No. 1251

1988

Permit for Alterations, Repairs or Change of Occupancy

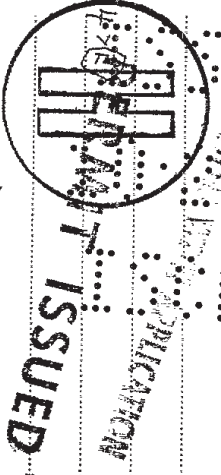
No. 135 Myrtle St

Location

Ward 5

CONDITIONS 10/4 DW

RF



Date issued

Permitted

1988

SEP 29 1988

EXAMINATION OF PLANS

NOV. 19 1988

Oct. 24 1988

Supervisor of Plans

Arch./Struct./Safety

APPROVED as shown on plans

Signature: Douglas W. ...

EXAMINATION OF PLANS

PERMIT NUMBERS

Electrical Gas

Plumbing Sprinklers

Electrical APPROVED as shown on plans

Signature: Douglas W. ...

Egress APPROVED as shown on plans

Signature: Douglas W. ...

Plumbing Gas

H.V.A.C. Sprinklers

Mechanical APPROVED as shown on plans

Signature: Douglas W. ...

INSPECTIONAL SERVICE UNIT CITY OF BOSTON ZONING DIVISION

DATE 10/12/88 H-2605

NOV 19 1988

INSPECTOR'S REPORT

This building is approved for satisfactory Egress.

Signature of Inspector