FORM B. O. NO. 111

LOCATION 2035 E. OLIVER ST

OWNER

OCCUPANCY CLASS _____ CONSTRUCTION TYPE _____

HEIGHT { _____ STORIES / _____ FEET

AREA _____ SQ. FT.

VOLUME _____ CU. FT. CERTIFICATE NO. _____

DIV. 8

SEC. 17

BL'K 1498

LOT 15

B'L'DG

APPLICATION RECEIVED	PURPOSE OF APPLICATION	PERMIT NUMBER	PERMIT DATE	CONSTRUCTION COST	DATE OF COMPLETION	REMARKS
9/13/57	Repairs per Health Dept. Notice	206645	9/23/57	115 00	10-21-57	

OVER