FORM S. B. NO. 111

LOCATION 617 S. SAVAGE ST.

OWNER

OCCUPANCY CLASS _____ CONSTRUCTION TYPE _____

HEIGHT _____ STORIES _____ FEET

AREA _____ SQ. FT.

VOLUME _____ CU. FT. CERTIFICATE NO.

DIV. 26

SEC. 1

BL'K ~~6629 B~~ 6694D

LOT 9

B'L'DG

APPLICATION RECEIVED	PURPOSE OF APPLICATION	PERMIT NUMBER	PERMIT DATE	CONSTRUCTION COST	DATE OF COMPLETION	REMARKS
4/28/48	Repair rear porch 1st fl	67297	4-28-48	40.00		

OVER