	00	NOT	WRITE	IN	THIS	SPAC
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RÉMARKS

The owner of this building and the undersigned Commonwealth of Massachusetts.

agree to

conform to

all applicable laws

앜

the City

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Chicopee

and the

Application

Address

alure of appligant

2. Contractor

Architect

S

I. Owner

copke

55611

61020

5988708

ZIP code

Tel. No.

.≤

IDENTIFICATION — To be completed by all applicants.

Mailing address Med

street, city, and State

DATE 4-15-7/

Information on sewer from City Engineer's Office — Indicate on other side if s om Plumbing Inspector in Health Dept. (Submit approval with application)	scessary as follows; — Plot Plans — New Bldgs. — 2 sets	Additions — 2 sets Bldg. Plans — Dwellings — 1 set	Business — 2 sets	Commercial — 2 sets	Industrial — 2 sets
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necessary as follows;

5

is not available get

+

is available

sewer

(This

submit with application —

Dept. and

from Water

Slip

Water

Obtain

Engineer's Office (New Bldgs. only)

number from City

Obtain

Obtain

APPLICATION	
FOR	
PERMIT	
OWNER	
NOGA, JOSEPH	
LOCATION	
106 MEDFORD ST., CF	
· ·	
· ·	
106 MEDFORD ST., CF LOT NO. NEW BUILDING	
LOT NO.	
NEW BUILDING	
NEW BUILDING ADDITION	

completed and signed.

Submit application

PERMIT NO. 27753

CITY OF CHICOPEE BUILDING DEPARTMENT

BUILDING PERMIT APPLICATION

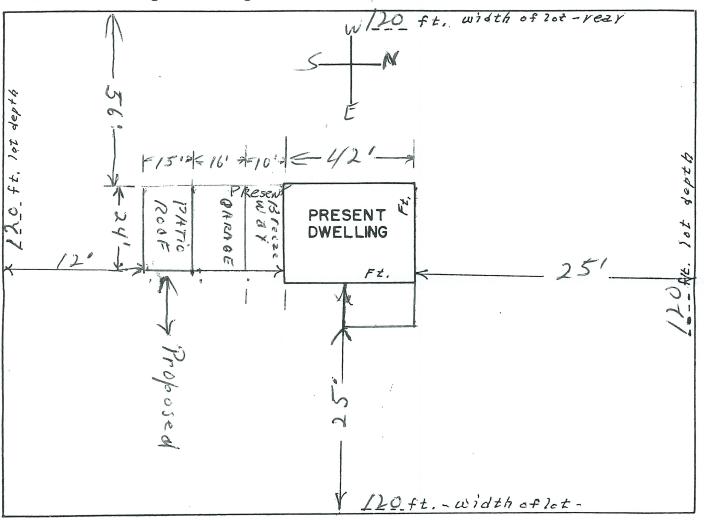
IMPORTA	NT — Complete ALL items. Mark	boxes where applicable.	:		
I. Number and street LOCATION / O 6 / ED /	FORD St. Buttision	Lot No. Block	k Census tract		
	ABA A E	N S E W from intersection of			
II. TYPE AND COST OF BUILDING					
A. TYPE OF IMPROVEMENT D. PROPOSED USE — For "Wrecking" most recent use Posidontial					
2 Addition (If residential, enter nur	mber	Nonresidential			
of new housing units added, if any, in Part D, 13) One family 18 Amusement, recreational 19 Church, other religious					
3 Alteration (See 2 above)	13 Two or more family — En	nter \square	J		
4 Repair, replacement		21 🔲 Parking garage			
5 Wrecking (If multifamily resider enter number of units in buildin	a in or dormitory — Enter	22 Service station, 23 Hospital, instit			
Part D, 13)	number of units ——-	->24 ☐ Office, bank, p			
6 ☐ Moving (relocation) 7 ☐ Foundation only	15 Garage	25 Public utility			
B. OWNERSHIP	——————————————————————————————————————	16 ☐ Carport 26 ☐ School, library, o 27 ☐ Stores, mercantile			
8 🏿 Private (individual, corporation,	17 Other — Specify				
nonprofit institution, etc.) 9	13+10 Roc	29 Other — Spec	sify		
local government)					
C. COST	(Omit cents) Nonresidential —	Describe in detail proposed use of			
10. Cost of improvement		machine shop, laundry building at school, college, parochial school,			
To be installed but not included in the above cost	department store	rental office building, office building	g at industrial plant.		
a. Electrical		building is being changed, enter prop			
b. Plumbing	13416	ROUF ATTAC	17E D		
c. Heating, air conditioningd. Other (elevator, etc.)		ARAGE			
11. TOTAL COST OF IMPROVEMENT	\$ 15000				
III. SELECTED CHARACTERISTICS OF BUILDING — For new buildings and additions, complete Parts E - L; for wrecking, complete only Part J, for all others skip to IV.					
E. PRINCIPAL TYPE OF FRAME	G. TYPE OF SEWAGE DISPOSAL	J. DIMENSIONS			
30 Masonry (wall bearing)	40 Public or private company	48. Number of stories	15 H U		
31 Wood frame	41 Individual (septic tank, etc.)	rear	15		
32 Structural steel		deep			
33 Reinforced concrete	H. TYPE OF WATER SUPPLY	49a. Total square feet of floor ar	ea, r		
34 Other — Specify	42 Public or private company	dimensions	1 12		
	43 🔲 Individual (well, cistern)	depth	1) -1		
· · · · · · · · · · · · · · · · · · ·		50a. Total land area, sq. ft	14400		
F. PRINCIPAL TYPE OF HEATING FUEL 35 Gas	I. TYPE OF MECHANICAL	K. NUMBER OF OFF-STREET PARKING SPACES			
36 Oil	Will there be central air	51. Enclosed			
37 Electricity	conditioning?				
38 Coal	44	L. RESIDENTIAL BUILDINGS ONL 53. Number of bedrooms			
39 Other — Specify	Will there be an elevator?	F4 Non-barret Full			
•	46 Yes 47 No	bathrooms { Partial			
M. LOCATION OF BLDG. OR ADD. ON I		N. 61. Will Addition Block Any Yes No			
55. Street Line ft.	57. Right Lot Line ft.	62. If Ans. is Yes What Rms.			
56. Left Lot Line	58. Rear Lot Lineft.	O. 64. Will Bldg. or Add. be bui			
59. Is this a corner lot? Yes N		65. Foundation	Land Timber		
60. If Ans. is Yes — Distance of Bldg. or Add. From Side Street Line isft. will be laid on Rock Piles					
IV. If this permit is for wrecking or demolition of building — State where building materials and debris will be dumped.					
V. IMPORTANT — This question must be answered before permit will be issued. Has the property listed in Item I. been the subject of a zone change within the past 12 months?					

Plot plan allacked

PLOT PLAN (2 Required)

	Date Okul 6, 1971
Name Joseph I Maya	Address 106 mil ford St.
City Checopee Falls	State 2000 6/620

This plot plan will not be accepted unless all existing buildings are clearly shown, nor unless all dimensions between buildings and buildings and lot lines are shown. All lot dimensions must also be shown.



Front of Lot

10 6 MEDFORD STREET

There shall not be less than (6) feet between the side wall of the garage and the side lot line, when it is attached to the dwelling nor less than (3) feet to side and rear lot lines when garage is unattached. Show all dimensions of buildings and all distances between buildings, and between buildings and side lot lines.

27753

Indicate side street if corner lot.

NORMAN Leelair Property Line

Building not to be less than (15) feet to side street line (on corner lot) in Residential "A" zone, nor less than (10) feet to side street line in Residential "B" zone.

attack to application

THORN WOOD