APPLICATION TO CONSTRUCT, REPAIR, RENOVATE OR DEMOLISH A ONE OR TWO FAMILY DWELLING

APPLICATION	I DETAILS										
Application #:	R-24-117130	Date Issued:	03/27/17		Permit #:	R-17-02	263	_	Date Paid :	03/2	27/17
Fee Payable: (\$)	0.00	Fee Paid: (\$)	35.00		Receipt #:	72785		_			
SECTION 1 - S	ITE INFORMATION										
Street Name	SAMPSON PKWY				Map Block Lot	J	07000502	6			
Street Number	86				Zoning District	F	R12				
Unit Number											
SECTION 2 - C	OWNER INFORMATION										
Owner Name	LE HIEU T										
Street Number	86		Street Name	SAMPSON	PKWY						
City	PITTSFIELD		State	MA		_		Zip	1.	201	
Telephone			Email								
SECTION 3 - A	PPLICANT INFORMATION	on .									
Applicant Name	Joseph Carry										
Street Number	29		Street Name	Edgewood	Dr.						
City	PITTSFIELD		State	MA				Zip	1.	201	
Telephone	4132810046		Email	joseph@d	ecumanusgr	een.con	7				
SECTION 4 - M	AAILING ADDRESS										
			Street	Edgewood							

City	PITTSFIELD	State	MA	Zip	1201

SECTION 5 - WO	RK DETAILS							
Current Use	R-3 (Residentia	occupancy not more tl	han 2 un	<i>i</i> -	Construction type	Type V-B (Typ	ical house, VB, deck, s	
5.1 Building Setb	acks (ft):	✓ Not Applicable						
Percent Lot Cover	rage							
Square feet of are	ea of work			Not A	Applicable			
Building or structure size	Length		Width	ı ————	He	ight ————		
5.2 Water Supply (M.G.L. c. 40. ß 54) Not Applicable								
5.3 Flood Zone o	f Structure	Not Applicable						
5.4 Sewage Dispo	osal System	Not Applicable						
5.5 Description of Proposed Work (New 1 or 2 Family Dwelling should only be selected if you are applying for a permit for a new 1 or 2 Family dwelling. An Existing Building should be selected for additions, renovations, demolitions, solar panels, etc., and accessory structures such as pools, sheds and garages.) I have read and understand the text above.								
	Family Dwelling	Existing	Building					
Repair (s)		Alteration (s)	=	Addition		cessory Building	Deck	
Solar Panel	S	Weatherization		Pool Above Ground	L Po	ol In-Ground	Siding	
Foundation	Only	Windows		Selective Demolition	Ro	of	Tent	
Accessory Apartment		Demolition		Mobile Homes				
Other								
Brief Description of Proposed Work Air seal basement and attic. Add cellulose insulation to attic to a minimum of r-48. Maintain NFA to attic area ratio of 1:300.								
All Seal basellier	it and attic. Add	centrose msulation to a	ittic to a	Timininani oi 1-40	o. Manitani Ni A	to attic area ratio	01 1.500.	
	PERTY OWNERS	HIP/AUTHORIZED AGEI	NT					
6.1 Tenant :								
Tenant Name								

15/08/2024, 09:51 Application Form Not Dumping Site Location (where any resulting debris will be Applicable disposed of (780 CMR 111.5)) 6.2 Authorized Agent/Owner: Name Joseph Carry Street Number Street 29 Edgewood Dr. Name Telephone **Email** 4132810046 **SECTION 7 - CONSTRUCTION SERVICES** 7.1 Licensed Construction Supervisor: **Applicable** Name Joseph Carry License Expiration 90239 **VERIFY** 11/28/18 Date Number Street Street 29 Edgewood Dr. Number Name City State Zip MA 01240 Lenox Telephone Email 4132810046 joseph@decumanusgreen.com License Type U or 00 - Unrestricted 1G - 1 & 2 Family M - Masonry Only RC - Residential Roofing **Dwelling** Covering WS – Residential SF - Residential Solid D - Residential IC - Insulation Window & Siding Fuel Burning Appliance Demolition Contractor Installation I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct. 7.2 Home Improvement Contractor: **Applicable** Name Decumanus Green D B Inc Registration Expiration 159641 **VERIFY** Number Date 05/25/18 Street Street 29 Edgewood Dr. Number Name City State Zip Lenox MA 1240 Telephone **Email** 4132810046 I do hereby certify under the pains & penalties of perjury that the information provided above is true and correct. Not Is the Licensed Construction Supervisor different from the applicant or Applicable the Home Improvement Contractor?

No

Yes

5/08/2024, 09:51	Application Form
CSL Email Address	
7.3 Homeowners Permit	i:
Applicable	
Job Location	Home Owner
Telephone	
	or " <u>homeowners</u> " was extended to include owner occupied dwellings to allow such homeowners to engage an object on the possess a license, <u>provided that the owner acts as supervisor</u> . (State Building Code 780 CMR, Section
DEFINITION OF HOMEO	WNER:
family dwelling, attached in a two year period shall the Building Official, that The undersigned "homeorules and regulations.	rcel of land on which he/she resides or intends to reside, on which there is, or is intended to be, a one-or two- or detached structure accessory to such use and/or farm structure. A person who constructs more than one home not be considered a homeowner. Such "homeowner" shall submit to the Building Official, on a form acceptable to he/she shall be responsible for all such work performed under the building permit. (780 CMR, Section 110.R5.1.3.1 owner" assumes responsibility for compliance with the State Building Code and other applicable codes, by-laws,
The undersigned "homeo procedures and requirem	owner" certifies that he/she understands the CITY OF PITTSFIELD Building Department minimum inspection nents.
SECTION 8 - REGISTERED	D 81-R/ ARCHITECT/ ENGINEER
Applicable	Not Applicable
Name (Registrant)	
Registration Number	Expiration Date
Street Number	Street Name
Telephone	Email
SECTION 9 - ESTIMATED	COST
ltem	Estimated Value to be completed by
	permit applicant
1. Building	3000
2. Electrical	
3. Plumbing	
4. Gas	
5. Mechanical (HVAC)	
6. Fire Protection	

Total = (1+2+3+4+5+6)

\$ 3,000.00

SECTION 10 - PROPERTY OWNER AUTHORIZATION						
I am the Owner Cont	cractor / Agent					
I, LE HIEU T	as owner of the subject property hereby authorize Joseph Carry	to act				
on my behalf, in all matters relative to w	ork authorized by this building permit application.					
Property Owner's Email	OR Copy of Signed Contract to be attached after submitting application					
Telephone No. I do hereby certify under the pa above is true and correct.	ins & penalties of perjury that the information provided Date					
DECLARATION						
l, Joseph Carry	as Owner/Authorized Agent hereby declare that the statements and information on the fo	oregoing				
application are true and accurate, to the	e best of my knowledge and belief. Signed under the pains and penalties of perjury.					
I do hereby certify under the pains & penalties of perjury that the information provided above is true and correct.						