

PLYMOUS									AF	P	LIC	CA	TIC	ON	F	OR	P	ER	M	T	TC	D	0	PL	.UN	/BI	IN (G
7	O'	W	N	OF	= H	ΗL	JLI	_								Da	te,	ħ	10	ĵ.	7		1	_	19_	9. 18 teo	6	
20, 1640											,					Рe	rm:	it	#_			1		27	-1	18		
B AT: L	ui.	ldi ati	ing ion	2	76	11	Pro	55	DC	°C	1					Ow Na	ne: me	r's	S	1	1	מ	1	V.	6	too	5	
7.1. 2	•••			0	t			7			-			_			-			-		7			11			
<i>_</i>			===						_		_			_		Ту	pe	01	E C)cc	up	and	гу:	<u>ں</u>	11	19	4	<u>-</u>
New				R	en	SVC	ati	on		4				Rep	ola	.ce	mei	nt										
										FI	хт	UF	RES	S				P] Si	lan ıbm	is	te	d:		Ye	s [No	V
									NN.	ΚS						TAIN					ä							
	WATER CLOSETS	× S			ALLS	2		LAUNDRY TRAYS	WASH, MACH, CONN	HOT WATER TANKS			S			DRINKING FOUNT		g	S	BACKFLOW PREV	OTHER FIXTURES:							
	LOS	S N	HES	S	STA	HER	R.S	TR	ACH,	E E	ဟ	SX	RAII	PS		G FO	AIR	100	AIN	×	E				П			
	R.	N H	101	TUB		WAS	OSE	DRY	Ĭ.	¥ ¥	LES	S	A D	TRA	ALS	KIN	DR	RP	DR	FLO	E 1							
	VATI	KITCHEN SINKS	AVA	BATHTUBS	SHOWER	HSI	DISPOSERS	AUN	ASH	10	TANKLESS	SLOP SINKS	FLOOR DRAINS	GAS TRAPS	URINALS	RIN	REA	WATER PIPING	ROOF DRAINS	ACK	THE				П			
	*	Ľ	-	_	S	<u> </u>	^		*	Ļ	Ľ	S	<u> </u>		2		4	Ľ	-	_	3	_	1	_	Н	\dashv	4	\dashv
SUB-BSMT. BASEMENT	-	H	┝	\vdash	H	H	H	_	\vdash	\vdash	\vdash	\vdash		\vdash	\vdash	Н	Н	-	\vdash	-	-	\vdash	├	┝	Н	\dashv	\dashv	\dashv
1ST FLOOR	H	7	H	H	-				Н					H	H	H	H		H	-		-	\vdash	\vdash	H	\dashv	\dashv	\dashv
2ND FLOOR	Т	Ė	T																				T	\vdash	П			٦
3RD FLOOR																							Π	Г	П			
4TH FLOOR				720																								
5TH FLOOR				Ш			Ш																		Ц			
6TH FLOOR				Ц			Щ	_					Ц	L		Ц					L			_	Ш	_	4	_
7TH FLOOR	H	L	H	Н	\vdash	Н	Н	-	\dashv	Н	_	\vdash	Н		Н	Н	Н	_	H		_	_	H		Н	\dashv	+	\dashv
STH FLOOR	Ш	Ш		Ш	Щ	Ц	Ш	\sqcup					ب				Ų		Щ		_					ᆜ	_	٢
(PRINT OR TYPE) Installing Compa	mv f	Jam		1	1/	20	1	,	D	1		n	611	20	ò		Г	_	k Or Corp							Cert		ие
Address	,	00	0 /	40	20	va	10	1,	Di	~			(1				_	Part		hin							
71001000			1/	11	no	20	F	h'	1	11	A						_	-	irm/		•							
Business Telepho	one		6	0	Ž	/	7	47	7_	10	16)					-						lum'	ber c	or Ga	sfit	ter
,					0)		_											-	Ta	V	1	V	00	d	5			
INSURANCE CO	VEF	RAG	Œ:														Che	eck (one	1							Paris	7
I have a current I															na tl		Yes				E	(į ()	M	13	-11	
A liability insurar	ice p	olic	:x _z î								Oth	er ty	уре	of in	dem	nity			1	10)	-		-		ond I	_		1
the Mass. General	RAN II La	CE '	WAI and	VEF tha	<mark>}:</mark> Ia t my	m av	ware natu	tha	t the	elic nis p	ense erm	ee d e	oes i	not h	nave n wa	the gives	insu s this	ran	ce c	over eme	age nt.	rag)(i)re	g pl	ф99	oter	142	QI
										·										[lo] * ∩\	" C	hec		A	TO T		_	
Signature of Owner or Ov				d info	rmatic	n I ba		mitta	d (or i	antar	ad) in	abaua	annlie	nation	0.00			ata ta	tha h	, 3	ull	Bu	ildi	กฎ	Der	art	me	111
I hereby certify that a installations performed un	der P	ermit	issued	d for th	nis ap	plicati	on wil	l be in	comp	dianc	e with	all pe	ertinen	l provi	sions	of the	Massa	achus	etts Si	tate G	as Co	de and	d chap	o that a oter 14	2 of the	Gene	vork a	ws.
1011	1												_	LICI		E:					L	m		11	1/-	ارد	2	
Ву (/ РС	/				-					_		K	•	umb				8=	- ,	X	0/	Sig	nati	ure c	of Lic	ense	<i>U</i>	
Title	V	1	7:	<	_	_	_	_		-			1	asfitt					0	/						sfitte		
Fee: \$	Z		_)_						_		7	*	aster								{{1}}	2	Dec	<u> </u>) <u> </u>		_
APPROVED (OF	FIC	E US	E O	NLY)								Jo	urne	evm?	ลก						ı	_ice	nse l	Num	oer		

	T					M	ASS	ACH	USE	ιτs	UNI	FOR	M A	PPL	ICAT	ION	FO	R PE	RMIT	TO	DO F	PLUN	1BIN	NG				
		`itv	/Tov	vn:	F	1	[[, M/	١. ا	Date	: <i>6</i>	/	8/	11		Per	mit#	F	_/	/-	-0	2C	9
							2 1	1	D.	. c	_		÷		A.	-		arc B	/// Name	. <i>l</i>	1	. /H	. 5	-				
	- 1																											
P	1	Гур	e of	Occ	upa	ncy:	C	omn	nerc	ial [Edu	ıcati	ona		1r	rdus	trial		Inst	ituti	onal		Re	side	ntia		
	1	Vev	/: []	Alte	ratio	on:		Re	nov	atio	n: [Re	plac	eme	nt:		Pl	ans S		nitte	_					
							1					F	IXT	JRE	S			Р	hone	#:		781-	- 5	25				
							Indiv																		-	DICA (STE		
	AREA DRAINS	BACKFLOW PREVENTER	BATHTUBS	DISHWASHERS	DISPOSERS	FLOOR DRAINS	HOT WATER TANKS $\hat{\mathcal{L}}_{\mathcal{A}^{\mathcal{S}}}$	KITCHEN SINKS	LAUNDRY TRAYS	LAVATORIES	ROOF DRAINS	SHOWER STALLS	SLOP SINKS	TANKLESS	URINALS	WASHING MACH. CONN	WATER CLOSETS	WATER PIPING	OTHER FID			107	The state of the s	ACID- & HAZARDOUS	GAS - OIL - SAND	GREASE	GRAY WATER	WASTE WATER
SUB BSMT.																			-	in in	11.	40	1		-	-	-	
BASEMENT 1 ST FLOOR	-			_																10 1.	711	Z		5	1			
2 ND FLOOR	\dashv				-															1	2	3		1 ===	1	-		
3 RD FLOOR																				11 ==				100	+	+	-	
4 TH FLOOR	_												-			-		-	\vdash	1			+	1	1			
5 TH FLOOR	-	_	_					-				-				_				11		= 1		=	=			
6 TH FLOOR 7 TH FLOOR	-																				14 *	200	I					
8 TH FLOOR																		-					-415	ficate	. #	1		Щ
Installing Con	ıpan	y N	ame	_A.	lvi	n_H	oll	is								-			eck O		•	·-		327	, w			
Address1_Ho	11 i	s (St_			City/	Tow	n: <u>S</u>	We	/mo l	uth		Sta	te: -	MA-	-			Partn								-	
Business Tel:	78	1-3	335	-21	00			Fax	=	_7	<u>81-</u>	335	-61	34					Firm/	Com	pany	-					-	
Name of Lices	nsed	Plu	mbe	r:	Mi	cha	el	Car	ere	elle	0													-				
INSURANCE	E CC)VE	RAC	GE:	ance	e pol	icy	or it	s su	bsta	ntial	equ	ivale	ent v	vhicl	n me	ets	the r	equir	emen	ts of	MGL	L, CI	h. 142	? Yes		No [ם
If you have c	heck	ed]	<u>Yes</u> ,	plea	ase i	ndic	ate 1	the t	уре о	of co	vera	ige l	y cl	neck	ing 1	the a	ppre	opria	ate bo	x bel	ow.							
A liability in	sura	anc	e po	licy		ĺ			Oth	er ty	ype	of i	nde	mnit	y [Вог	nd [
OWNER'S IN	SUR Its G	AN(ene	CE W	/AIV aws	ER: , an	l am d tha	awa it my	are tl y sig	nat ti natu	he lie re o	cens n thi	ee <u>c</u> is pe	loes rmit	not app	<u>have</u> licat	e the	waiv	<u>es</u> u	1119 161	4ane)ne	quire t. Only Age	,		pter	142	of th	е
Signature of C I hereby cert Knowledge a Pertinent pro	ify th	at a	li of t	he d	etail	and	nd ir	10 PO II	STIAN	2 20		ien II	noer	INH	CHERTINI	11 153	rding	this	applic	ation	are t	rue at	nd ac	ccurat	te to t	he b vith a	est of	my
Ву							Ty	уре с	of Lie	ens	e:			r	X	-	21	16	/							-		
Title] Plu Ma		r									lumb	er		e e		1	4	5	0	_
City/Town APPROVED (0	FFIC	E U	SE O	NLY				Jou		man	l ——	L	icen	se l	Num	ber	-	155	55			-		4	5		<u>ر</u>	

APPLICATION FOR PERMIT TO DO PLUMBING



P	Build AT: Loca	ing tion	2 120	4	F. 12	ra	s f	Dec	1	Q	Ne	O\ Na	ermi wne ame	5	J'i i	M banc	y _	a									_	
I			Nev	VΘ						Rer	nova	ation	0			E)								f	ソ	0	0-	- /
			FIX	TUF	RES	_			_	_				_	_		Pla	ns S	ubn	itte	d: Y	es C		No				
		WATER CLOSETS	KITCHEN SINKS	LAVATORIES	BATHTUBS	SHOWER STALLS	DISHWASHERS	DISPOSERS	LAUNDRY TRAYS	WASH, MACH. CONN.	HOT WATER TANKS	TANKLESS	SLOP SINKS	FLOOR DRAINS	GAS TRAPS	URINALS	DRINKING FOUNTAIN	AREA DRAIN	WATER PIPING	ROOF DRAINS	BACKFLOW PREV.	OTHER FIXTURES:						
/	SUB-BSMT.																		_									
ک	BASEMENT	1		1	/												Ш		/	_						Ц		_
	1ST FLOOR																Ш							1		Ž.	Щ	_
	2ND FLOOR																						4	2	54	7		_
	3RD FLOOR																Ц				2		2		N.		Ų	_
30	4TH FLOOR																				12	A		0			7	
	5TH FLOOR																						1	Ľ	_	1		
-	6TH FLOOR																					13	1	L	5		4	7
	7TH FLOOR																						2	1			15	1/2
	STH FLOOR																							1			- American	
	or Type) ling Company Na lss [5	- P	31	رمان من	x 1	C er W	in la	o y	Tel F	Le Tu	6	-	no			_	De Co	ock (Cor Part Firm	p	ship		<u>-</u>	\ 	10	Certi	ficat	e	
Busin	ess Telephone _	L	#7	1	٦	1/2	3	SE	2	Nai	me (of Li	cen	sed	Plur	nbe	r	<u>U</u>	O	21	٦ (N	M	出		
INSU If you	RANCE COVERA have checked YE ER'S INSURANC ass. General Law	ES, p	olea /AIV	se i ÆR	ndic : I a	ate m a	the war	type A e th	of of the of the office of the	ity i e lic	erag insu ens	e by rand ee d	/ ch ce p d oe :	ecki olicy s no	ng ti () it ha	ne a ive t	ppro Oth he i	opria her t nsur	ite b ype anc	ox. of in e co men	nder overa	nnit age	req	uire		B Cha		٥
	Signi	iture of	Owne	er or C) wner's	Agen	ıt						_	l he	reby d	ertify	that a	il of th	e deta	ils an	d info	rmatio	n I ha	ve su	bmitte	d (or e	entered plumb	d) in a

Fee: \$ APPROVED (OFFICE USE ONLY)

Signature of Licensed Plumber
Type of Plumbing License

License Number d'Master D Journeyman

S S S S S S S S S S S S S S S S S S S		ΓΟ'	۱۸۸	NI -	∩F	= +	41.1																,				IBIN	
To			V V I	•		•	10						2				Da	te	. 3"		۷	/	1	9	_ 1	9_	89 7 -	<u> </u>
	AT: L	ui.	ldi ati	.ng		20	f	f	PR	0.	St	PE	~	7	A	V&	Pe Ow: Na:	rm: ne: me	:'5	#- J*	- / m	e Z	/ 	h	14.	1		25
T)			.01.											- 01													0.0
	_		_							_					-						CCI	upa	anc	:y:		10	<u>s</u>	
	New L				R	end	ova	ti	on						Rep			mer									/	e.
											Fi	ΧT	UF	RES	3				Su	an ıbm	it	ted	0	1	Yes	2	Tayo	, 🔲
		Γ								ż	S						AIN						그		89		ART	П
		ST	S			ST			ΥS	CON	ANK			,,	GAS TRAPS		THI		,,,	ROOF DRAINS	EV.	RES:	1		MAY 2 2 1989		BUILDING DEPART	1.
		CLOSET	KITCHEN SINKS	S II		SHOWER STALLS	ERS	S	TRA	CH.	T T		S S	AIN	S		FOL	2	PIN	SNI	BACKFLOW PREV.	OTHER FIXTURES	PECE	5	2			
			N N	ORI	BATHTUBS	R S	ASH	SER	RY	MA	ATE	ESS	SINI	DR	RAP	LS.	ING	DRA	- B	DRA	101	E	L	6	MA	-	3	
		WATER	E	VAT	THT	OWE	3HW	PO	ND	SH.	≯ ⊢	NKL	0	008	T S	INA	INK	EA	TE	90	CKF	HER	0			-	1	
		3	X	\$	BA	SH	ă	018	LA	WA	¥	TA	SL	표	GA	UR	DA	AB	×	80	BA	0					=	
	SUB-BSMT.	T																		_		F	Ħ					-
	BASEMENT									1		1									1	1			983		1	
	1ST FLOOR	1	1	1	Ļ	_	1				Ш	0	L	_								1	A	Ц	7		3	Н
	2ND FLOOR	1	_	1	/_	(7	VT	υK	8	_	K	DU	6 W	12	6	0	N	Y)	H	-	I,	H	7	-		H
	3RD FLOOR	╁	-	\vdash	H	_	_	H		\vdash	Н	_	_	-	-		Н	H	_		-	i	6	Н	N. T.	+	-	Н
	4TH FLOOR 5TH FLOOR	⊢	\vdash	\vdash	Н	-		-	-	-	Н	_	H	_	-	_	Н		_	_	Н	1	4	Н	\dashv	+	1	H
	6TH FLOOR	┢	\vdash	-	Н	-	-	Н				-		\vdash	-	-	Н	-			Н	- 20	H	Н	\dashv	Ť	=	Н
	7TH FLOOR	-	H	H	Н		,	a	V		Н		H	\vdash		-	H	Н			Н	_	\vdash	H	1	+	+	Н
	8TH FLOOR	╁	H		1 1		00.0				Н									Н	Н	_	H	H	\dashv	\forall	+	H
J	(Print o	r	Tvr	pe)	ш				7	Et) /	21	DK	TUX	14/	NS	2/5	_										
	Instal					any	y N	lam											Ch	ec)	k C	ne	-				ific	ate
	Addres				?	. 1.35	¥1											_		[9		rp		- 1	1/3		
		-			š		,		M											Ţ	_				rsh	-20		
	-												, /							L					qmo	any	¥	
	Busine	ss	Τe	ele	ph	one	e /	4	7	. 0	5.	5	7	_ 1	Nam											,.	1 4 .	
																-6	5) .	E	51		P	AL	1 K	111	1	AL	<u>ر</u>
	I hereby certify nowledge and that a sions of the Massacl	li piu	nıbin	g wo	rk ar	nd in	stalla	tion	s per	forn	icd u	nde	Peri	mit i	sued	for	in ab this a	ove :	appli catio	catio n wi	n are	true	and impli	acci	urate : with	to th	ie best d ertineni	of my t pro-
		1		2		-	1		1)				/	N	1	1		7	1	Ü	a	w	1	h	~	_	

Title

Fee: \$5000

APPROVED (OFFICE USE ONLY)

7 Type 6f

Signature of Licensed Plumber
Type of Plumbing License

License Number Master Journeyman

APPLICATION FOR PERMIT TO DO PLUMBING

STULE OF THE PERSON NAMED IN COLUMN TO PERSO			\٨/	N	OI	= }	-1 1]]		•													, ,		P L.	U	пb	1140	4
P			• •	•	O .	•			_								Da	te	1	1	1		1	/		19	9	ter	
1. 100	17A9C9						,)	α) j'	4	 D =		9	ı.	(-					 1.:Z::	1-	to d	
	В	ui:	1.d:	inc	ſ					1	^			14	6 -	- 1	Ow	rm ne:	ıt r's	#_ 5	J	4/	ne.	S	_()	1	1/	~ (<u>_</u>
	AT: L	oca	at:	ior	0	4	Pro	A.	C	t,	4	e			_		Na	me				V	_		_1	V	_		
						•		/																			.000		
-	_								_				_	_	-		Ту	рe	01	E C	CC	up	and	У	S	79	de	2	
	New 🗓				R	en	ova	ati	.on]				Rep	ola	ce	me	nt							V			
	,																		P]	Lan	s					_	_		
			_		_	_	_							RES			-		Sı	ıbn	it	te	d:	_	Ye	s L		No	KA .
										ż	S				GAS TRAPS		Z												
		S L	ا د			L'S			9	NO.	XX						F			ROOF DRAINS	۳. ۲.	ES:	1	ĺ					
		CLOSET	X	S		AL	RS		RA	Ŧ.	F		ر س	N N	١.,		O	z	N	SN	P.R	12.							1
		2	S	1 2 2	BS	S	SHE	ERS	<u>+</u>	AAC	E	SS	X	DRA	APS	l "	9	A P	4	RAI	≷	Ě							1
	1		표	15	Ę	ÄEF	X A	SO	5	i.	¥	Ę	S	E E	H	AL	ΙŽ	0	EB	0 4	Ē	E	l						
		WATER	KITCHEN SINKS	LAVATORIE	BATHTUBS	SHOWER STALL	ISH	ISP	LAUNDRY TRAYS	IAS	to 1	Z	10	LO LO	AS	2	A. H	RE.	VAT	00	AC	F							
		Ľ	×	Ľ	<u> </u>	S	-	<u>^</u>	Ľ	>	Ĺ	Ľ	L"	<u> </u>	Ľ	٦	L	_	Ľ	LE	L	-	-	L		Ц		_	_
	SUB-BSMT.	L	L	-	L	H	-	_	-		_	H	H		H	\vdash	H	-	-	_	_	_	-	L		Н	_	\dashv	-
	BASEMENT	H	├	+	H	H	_	H		1		_	_			\vdash	H	H	\vdash	\vdash	L	\vdash	-	-	\vdash	Н	\dashv	+	4
	1ST FLOOR	,	┝	⊬,	H	7	\vdash	H	H	<u> </u>	_	\vdash	\vdash	-	-	\vdash	H	-	-	H	-	-	\vdash	\vdash	\vdash	\vdash	\dashv	+	-
	2ND FLOOR	-	H	1	-	-			\vdash			-	-			\vdash	\vdash	\vdash	-	H	_	-	\vdash	\vdash	\vdash	\vdash	\dashv	+	-
	4TH FLOOR	H	\vdash	\vdash				Н								-	Н			\vdash	-	H	H	H		H	\dashv	+	\dashv
	5TH FLOOR	H	H	H		_		H	Н	_	Н	H	H	Н			Н	Н	-	-		-	\vdash	Н	Н	H	\dashv	+	-
	6TH FLOOR	H	H	T	Н			H	П	П	П						H						Н	Н		H	7	\dashv	-
V	7TH FLOOR		Н	\vdash	П			П		П	П		Н	Н		-	Н					-	H	\vdash		\forall	ᅥ	十	-
2,	8TH FLOOR		Г	Г	П		П	П	П	П			П	П			П	П		_			Н	Н	\neg	\forall	7	\dashv	7
ζ,	(PRINT OR TYPE)	_	_	_	_		_	_		_		_						<u>ر</u>	heci	Or	ie:	-					Cer	tificat	te
2	Installing Compa	any f	Nan	ne_	W	100	0	5	1	1/0	10	6	11	19	_	_] c	orp									
3	Address	0	h	60	10	d		D						V		_]	Part	ners	hip.							
7	PI	y	m	00	1	h	1	11	7		0	2	36	0		-			X F	irm/	Cor	npa	ny_						
7	Business Teleph	one.		6	0	8/	2	4	6	~ <	4	2	3											ed P	lumb	oer c	or Ga	asfitte	er
6	>																		V	e l	/	10	6	ða	13	٩			
2	INSURANCE CO	VEF	RAG	E:														Che	eck o	one									
<u></u>	I have a current I	iabil	ity i	nsu	ranc	e po	olicy	or i	ts su	ubst	anti	al e	quiv	alen	t. ocki	na ti				No									
,	A liability insurar					ii iui	Juio	1110	, y p	01		_			of in	-			JPIII		,OA.				Вœ	ond I			
	OWNER'S INSUI																						requ	uire	d by	Cha	pter	142 c	of
	the Mass. Genera	ai La	1443,	ariu	ıııa	LIIIy	sig	Hait	ire c	nı tı	iis p	em	и ар	opac	auo	II.W	aives	s trus	sred	quire		C	hec	k or	ne:				
	Signature of Owner or Ov	vner's	Agen	ıt											-						Ö۷	vne	r 🗆	F	\gen	t 🗆			
	I hereby certify that a installations performed u	ili of th nder P	ne det Permit	ails an	id info d for th	rmatio	on I ha plicati	ive sul	bmitte I be in	d (or a	entere	ed) in a	above all pe	applic rtinen	ation t provi	are tru	ue and of the	accur Mass	rate to achus	the be	est of rate G	ny kn as Co	owled de and	ge and	that a	ill plun 2 of the	nbing Gene	work an	d s.
			١										TY	PE	LICI	ENS	E:				1	7		1	1		1	,	/
	Ву / 9	3	1										Ŕ	Į Pli	umb	er			_			6	h	2	4	- 0	V	000	
	Title	/				_								Ga	asfitt	er					//	/				f Lic			
	Fee: \$ 30.00										_		Q	Ма	aster					1				7	75	18	8		
	APPROVED (OF	FIC	E US	SE O	NLY))							Ž	λJo	urne	eyma	an						Ĺ	ice	nse h	Num	ber		- 1