

LOCATION 3517 Fairview Ave.

OWNER _____

OCCUPANCY CLASS _____ CONSTRUCTION TYPE _____

HEIGHT } _____ STORIES
 _____ FEET AREA _____ SQ. FT.

VOLUME _____ CU. FT. CERTIFICATE NO. _____

DIV.	15
SEC.	26
BL'K	2920
LOT	1
B'L'DG	

APPLICATION RECEIVED	PURPOSE OF APPLICATION	PERMIT		CONSTRUCTION COST	DATE OF COMPLETION	REMARKS
		NUMBER	DATE			
6-27-46	^{wood, shingles, slate roof} Repair garage, repl. sheathing, frame	43765	6-27-46	250 ⁰⁰		