Month Day Y	Application ——ear	n for Permit Permit No	
		Ÿ	
	Please Print A	ll Information	
This Section To 1	Be Filled Out By I	Lot Owner Or Person D	loina Waula
		20t Owner Of Terson D	oing work
Name	<i>*</i>)		
First	Middle	Last	
Address			ria.
	Street Address		
City	State	Zip	
Phone	- ALLOVANI COL-HI		
Location where work is t	to be done if differ	ent than above	
2			
Street Addre		1 1 1 1 1	
Give a brief description of structures to be erected of	r altered. Indicate	ormed and show the loce size of lot and show d	ation of any istance from lot
lines of structures to be e		9	" N
Cost of construction \$			W - WAI C
Give description of work	below	L.	s
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×			Sec
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