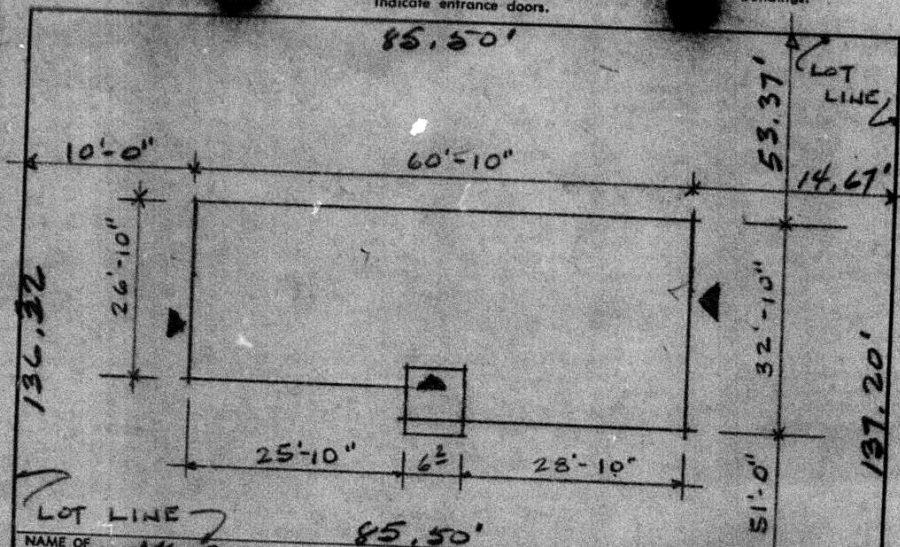


PLOT PLAN: Draw this plan accurately from survey if possible. Show dimensions of lot and locate all buildings by dimensions from property lines. Dimension all buildings. Indicate entrance doors.



NAME OF SUBDIVISION: McGREGG HEIGHTS If A Corner Lot is Concerned, Check Here

Number	Street	Lot	Blk.
1609	WASHINGTON AVE	54 1/2	F
Owner: <u>KENNETH POWELL</u>		Map No. <u>7</u>	Census Tract <u>78</u>
Address: <u>2222 EDISON</u>		Zone: <u>R-1</u>	Occupancy: <u>A</u>
Arch. or Engr.:		Inspection Dept.:	Type of Const.: <u>W</u>
Address:		Land Area: <u>15,968</u>	No. Dwelling Units: <u>1</u>
Contractor: <u>CONCRETE ASSOCIATES</u>		Purpose of Bldg.: <u>RESIDENCE - Remodel</u>	
Address: <u>P.O. Box 253</u>		Fire Limits? <u>Plans?</u>	
Floor Area: Heated _____ Unheated _____		Septic Tank: _____	
No. Habitable Rms.: <u>7</u>	No. Bath Rms.: <u>3 1/2</u>	Bsmnt.? <u>PARTIAL</u>	
Estimated Cost: \$ <u>8000.00</u>	(Including Fire Sprinklers, If Any)	No. Stories: <u>2</u>	
(Nearest \$100)		Police Dept. _____	
To be installed but not included in above cost:		Insur. Dept. _____	
Electrical : <u>400.00</u>	Work to be done by the following, under separate permit.	Traffic Engr.: _____	
Plumbing : <u>500.00</u>		Health Dept. <u>OK</u>	
Heating : <u>1300.00</u>		Bond? <u>Yes</u> License? _____	
Other : _____		Incinerator? _____	
Total Cost : <u>10,100.00</u>	Connected to City System:	Type Heat: <u>Gas</u>	
	Water? <u>YES</u> Sewer? <u>YES</u>	Fuel: <u>J. I. A.</u>	
	NOTE: Separate Permits Are Required For Signs.	Type Chimney: _____ No. _____	
		Size: _____	
		Date of Application: <u>1-27-69</u>	

The undersigned hereby makes application to build repair remodel move demolish RESTORE a building or structure at the location designated above and agrees to conform to all applicable laws of the City of Charlotte and the State of North Carolina.

Remarks: THIS BUILDING MOVE TO THIS LOT FROM VAN BUREN ST. WORK TO BE DONE: FOOTINGS, FOUNDATION, BRICK VENEER, REPAIR INTERIOR WALLS -

Signature of Applicant: Concrete Associates by Constance Smith 15-25

Not valid unless validated and approved below.
 CITY PERIMETER
 CID 04503 JAN 28 01 1525 CH
 Permit No. _____ Date _____ Type Clerk _____ Fee _____ Acct. No. _____ Approval _____