

Application Number:	Date Issued:	Permit Number:	FEE: \$	Check No. :	Date Paid :
<i>G-14-3237</i>	<i>4/14/2014</i>	<i>G-14-0105</i>	<i>55</i>	<i>18170</i>	<i>4/14/2014</i>



Building Location

*105 POND ST*

Owner's Name

*MARONEY, DENNIS M &*

Type of Occupancy

*RES*

**Edit**

New  Renovation  Replacement  Plans  
 Submitted: Yes  No

APPLIANCES	BOILER	BOOSTER	CONVERSION BURNER	COOK STOVE	DIRECT VENT HEATER	DRYER	FIREPLACE	FRYOLATOR	FURNACE	GENERATOR	GRILLE	INFRARED HEATER	LABORATORY COCK	MAKEUP AIR UNIT	OVEN	POOL HEATER	ROOM/SPACE HEATER	ROOF TOP UNIT
BSMT									1									
1 <sup>st</sup> FLOOR																		
2 <sup>nd</sup> FLOOR																		
3 <sup>rd</sup> FLOOR																		
4 <sup>th</sup> FLOOR																		
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12 <sup>th</sup> FLOOR																		
13 <sup>th</sup> FLOOR																		
14 <sup>th</sup> FLOOR																		

**Edit**

Installing Company Name	<i>MICHAEL RUSSO PLBG &amp; HTG CO.,INC.</i>
Address	<i>510 WASHINGTON ST. LYNN, MA. 01901</i>
Business Telephone	<i>7815952732</i>
Name of Licensed Plumber or Gas Fitter	<i>MICHAEL RUSSO JR.</i>

Select one:	Certificate
<input checked="" type="radio"/> Corporation	825
<input type="radio"/> Partnership	
<input type="radio"/> Firm/Co.	

**INSURANCE COVERAGE :**  
 I have a current liability insurance policy or its substantial equivalent which meets the requirements of MGL Ch. 142.

