

II. TYPE AND COST OF BUILDING

A. Type of Improvement

- New Building
- Addition (if residential, enter number of new housing units added, if any, in Part D, 13)
- Alteration (see 2 above)
- Repair, replacement
- Wrecking (if multifamily residential, enter number of units in building in Part D, 13)
- Moving (relocation)
- Foundation only

B. Ownership

- Private (individual, corporation, nonprofit institution, etc.)
- Public (Federal, State, or local government)

C. Cost (omit cents)

Cost of improvement \$ _____

To be installed but not included in the above cost

Electrical \$ _____

Plumbing \$ _____

Heating, air conditioning \$ _____

Other (elevator, etc.) \$ _____

TOTAL COST OF IMPROVEMENT \$ _____

D. Proposed Use (for "Wrecking" choose most recent use)

Residential

- One Family
- Two or More Families - Enter number of units → _____
- Transient hotel, motel, or dormitory - Enter number of units → _____
- Garage
- Carport
- Other - Specify _____

Non-Residential

- Amusement, recreational
- Church, other religious
- Industrial
- Parking garage
- Service station, repair garage
- Hospital, institutional
- Office, bank, professional
- Public utility
- School, library, other educational
- Stores, mercantile
- Tanks, towers
- Other - Specify _____

Nonresidential - Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

III. SELECTED CHARACTERISTICS OF BUILDING

E. Principal Type of Frame

- | | |
|---|---|
| <input type="checkbox"/> Masonry | <input type="checkbox"/> Reinforced Concrete |
| <input type="checkbox"/> Wood Frame | <input type="checkbox"/> Other - <i>Specify</i> |
| <input type="checkbox"/> Structural Steel | _____ |

F. Principal Type of Heating Fuel

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Gas | <input type="checkbox"/> Coal |
| <input type="checkbox"/> Oil | <input type="checkbox"/> Other - <i>Specify</i> |
| <input type="checkbox"/> Electricity | _____ |

G. Type of Sewage Disposal

- | | |
|--|--|
| <input type="checkbox"/> Public or Private Company | <input type="checkbox"/> Private (septic tank, etc.) |
|--|--|

H. Type of Water Supply

- | | |
|--|--|
| <input type="checkbox"/> Public or Private Company | <input type="checkbox"/> Private (well, cistern) |
|--|--|

I. Type of Mechanical

- | | | |
|---|------------------------------|-----------------------------|
| Will there be central air conditioning? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will there be an elevator? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

J. Dimensions

- | | |
|--|-------|
| Number of stories | _____ |
| Total square feet of floor area, all floors,
based on exterior dimensions | _____ |
| Total land area, square feet | _____ |

K. Number of Off-Street Parking Spaces

- | | | | |
|----------|-------|----------|-------|
| Enclosed | _____ | Outdoors | _____ |
|----------|-------|----------|-------|

L. Residential Buildings Only

- | | |
|---------------------|-------|
| Number of bedrooms | _____ |
| Number of bathrooms | |
| Partial | _____ |
| Full | _____ |