dr. Ins. Form 1	BUILDING I	NIVISION-BUILD	ING INSPE	CTOR	REPORT CARD	
		TYPE E	BUILD	ING	S	
PERMIT NO. 3 -2 -6 -1 -0 DATE 11 - 1 7 -4 9 ZONE	OWNER	Ra	956 -	gle	Time	
VAL #	CONT'R,	STORIES	ROOM	<u> </u>	APTS.	SIZE
LIGHT SHAFTS				ELEVATOR . SHAFTS		
VENT SHAFTS				BOILER ROOMS		
OWNER'S NSPECTOR				SPRINKLER SYSTEM		
LATH				GAS VENTS		
FIRE ESCAPES				CHIMNEYS		
STAND PIPES				SKYLIGHTS		