

*Insulation Veloc's in NEW Addition
Window, Door Mini Type + Size!*

TOWN OF TISBURY

BUILDING INSPECTION & ZONING ENFORCEMENT
POST OFFICE BOX 1239
VINEYARD HAVEN, MA 02568

Kenneth A. Barwick
Rhonda Welty

Phone: (508) 696-4280
Fax: (508) 696-7341

*John W. Meever
10-22-01*

- BUILDING PERMIT APPLICATION -

FEE: 598

OTHER PERMITS/APPROVALS REQUIRED:

BOARD OF APPEALS: _____	PLANNING BOARD: _____
BOARD OF HEALTH: <u> </u>	CONSERVATION: _____
FIRE DEPARTMENT: _____	HISTORIC DISTRICT: _____
MARTHA'S VINEYARD COMMISSION: _____	DATE OF REFERRAL: _____

PROPERTY OWNER: Alan + Ellen Breswick

MAILING ADDRESS: PO Box 4581

TELEPHONE: 693-1957 *Call 889 3420*

PREVIOUS OWNER IF PURCHASED WITHIN 1 YEAR: _____

APPLICANT NAME: John W. Meever

MAILING ADDRESS: PO Box 389 Edgartown Ma

TELEPHONE: 427-9112

PROPERTY LOCATION:

STREET: 22 Hatch Rd

ASSESSOR'S PARCEL: 5-F-3 ZONING DISTRICT: R-25 *(B2)*

DATE OF DEED TO OWNER: 10-21-92 BOOK: 31500 PAGE: 8580

DESCRIPTION OF CONSTRUCTION ACTIVITY:

Renovation - Single Family Dwelling
Additions to Existing Structure

DIMENSIONS: irregular (LIVING AREA) SQUARE FEET: 3800
 NUMBER OF EXISTING BEDROOMS: 6 BATHROOMS: 4 1/2
 NUMBER OF PROPOSED BEDROOMS: 0 BATHROOMS: 0
 DISTANCE FROM WETLANDS, BOG, MARSH, BEACH, OR BODY OF WATER: _____
 BUILDER: John W Mercier
 MAILING ADDRESS: PO Box 389 Edgartown
 TELEPHONE: 627-9112
 CONSTRUCTION SUPERVISOR: SAME
 MAILING ADDRESS: _____
 TELEPHONE: _____
 LICENSE NUMBER: CS 068012 Home Imp # 121584
 ESTIMATED COST OF STRUCTURE: 141,840.00
 (MATERIAL & LABOR)

PLANS REQUIRED (3 SETS EACH):

- A. PLAN OF LAND REQUIRED FOR NEW CONSTRUCTION OR ANY CONSTRUCTION OUTSIDE EXISTING PERIMETER OF STRUCTURE*
- B. DETAILED BUILDING PLANS INCLUDING DIMENSION LUMBER, INSULATION VALUES, MATERIALS TO BE USED, ELEVATIONS, SECTIONS, ETC.**

*All such plans and computations shall bear the Massachusetts Seal of Registration and signature of the qualified Registered Professional Land Surveyor.
 **All building plans must comply with 780 CMR Building Code.

This application will not be processed unless it is deemed complete including attachments as required.

Signed under the pains and penalties of perjury

Signature: OWNER [Signature]
 APPLICANT John W Mercier

OFFICE USE ONLY

APPROVED: X DISAPPROVED: _____
 COMPLIES WITH ZONING BYLAW SECTION: R-25 04.0
 PERMIT NUMBER: 6650 DATE OF ISSUE: 10/22/0

 SIGNATURE OF BUILDING INSPECTOR

APPLICATION FOR:

ATTACHED DETACHED ___ TEMPORARY STRUCTURE ___
 NEW - DWELLING ___ GARAGE ___ SHED ___ OTHER ___
 ADDITION TO - DWELLING GARAGE ___ SHED ___ OTHER ___

BUILDING TYPE (SELECT ONE):

BUNGALOW ___ CAMP ___ CAPE/SALTBOX ___ COLONIAL ___
 COMMERCIAL ___ (see Page 4) MODERN/CONTEMPORARY TWO-FAMILY ___
 RANCH ___ RAISED RANCH ___ SPLIT-LEVEL ___ OTHER ___

STRUCTURAL DATA (MUST BE COMPLETED FOR ALL BUILDINGS):

- A. FOUNDATION TYPE
- CELLAR 20'10"
 CRAWL SPACE 6'10"
 OTHER ___
- B. FOUNDATION
- BLOCK
 POURED CONCRETE
 OTHER ___
- C. EXTERIOR WALLS (SELECT ONE, UNLESS THERE ARE EQUAL PROPORTIONS OF TWO)
- | | |
|---|---|
| COMPOSITION/WALL BOARD ___ | WOOD ON SHEATHING ___ |
| ASBESTOS SHINGLES ___ | STUCCO ___ |
| BOARD & BATTEN ___ | STONE ON MASONRY ___ |
| BRICK ON VENEER ___ | BRICK ON MASONRY ___ |
| STONE ON MASONRY ___ | CLAPBOARD ___ |
| VINYL SIDING ___ | ALUMINUM SIDING ___ |
| CEDAR OR REDWOOD SIDING <input checked="" type="checkbox"/> | WOOD SHINGLES <input checked="" type="checkbox"/> |
| GLASS/THERMOPANE ___ | PREFAB WOOD PANEL ___ |
| PRE-FINISHED METAL ___ | CONCRETE/CINDER ___ |
| LOGS ___ | OTHER ___ |
- D. ROOF TYPE (SELECT ONE. IF MORE THAN ONE, CHOOSE THE PREDOMINANT)
- FLAT SHED ___ GABLE/HIP SALTBOX ___ MANSARD ___ GAMBREL ___
- E. ROOF COVER (SELECT ONE. IF MORE THAN ONE, CHOOSE THE GREATEST AREA)
- ASPHALT ___ WOOD SHINGLE CLAY OR TILE ___ SLATE ___
 METAL OR TIN ROLLED COMPOSITION ___ BUILT UP TAR/GRAVEL ___
 OTHER ___
- F. INTERIOR WALLS
- MASONRY ___ PANELING ___ PLASTER ___ WOOD PANEL CUSTOM ___
 DRYWALL OTHER ___

G. INTERIOR FLOORS (DO NOT COUNT KITCHEN)

PLYWOOD__ PINE OR SOFTWOODS__ TILE HARDWOOD
CARPETING PARQUET__ LINOLEUM__ VINYL__
OTHER_____

H. HEATING FUEL

WOOD/COAL/KEROSENE__
OIL
GAS__
ELECTRIC__
SOLAR__
STEAM__

I. HEATING TYPE

NONE__
CONVECTION__
FORCED AIR - DUCTED
FORCED AIR - NON-DUCTED__
HOT WATER__
RADIANT ELECTRIC__

J. AIR CONDITIONING

NONE CENTRAL__ HEAT PUMP__

K. OTHER DATA

NUMBER OF STORIES: 9 NUMBER OF FIREPLACES/WOOD STOVES: 2
OTHER SIGNIFICANT FEATURES IF ANY: _____

ADDITIONAL DATA (FOR COMMERCIAL BUILDINGS ONLY):

A. HEATING/AIR CONDITIONING

PACKAGED__ SPLIT__ NONE__

B. STRUCTURAL FRAME

NONE__ WOOD FRAME__ MASONRY__ STEEL__
FIREPROOF STEEL__ REINFORCED CONCRETE__
OTHER_____

C. CEILING & WALL (CHOOSE ONE FROM EITHER SUSPENDED OR NOT SUSPENDED)

SUSPENDED NOT SUSPENDED
CEILING ONLY FINISHED__ CEILING ONLY FINISHED__
CEILING WITH MINIMUM WALL__ CEILING WITH MINIMUM WALL__
CEILING & WALL FINISHED__ CEILING & WALL FINISHED__

D. OTHER DATA

NUMBER OF ROOMS PER FLOOR__ WALL HEIGHT__
PERCENT OF COMMON WALL__ TOTAL NUMBER OF RESTROOMS__
IF RESIDENTIAL UNITS:
NUMBER OF UNITS__ BEDROOMS PER UNIT__ BATHS PER UNIT__

Suggested Affidavit for Home Improvement Contractor Permit Application

TOWN OF TISBURY

AFFIDAVIT

Home Improvement Contractor Law

Supplement to Permit Application

MGL.c.142A requires that the "reconstruction, alteration, renovation, repair, modernization, conversion, improvement, removal, demolition, or construction of an addition to any pre-existing owner-occupied building containing at least one but not more than four dwellings units...or to structures which are adjacent to such residence or building" be done by registered contractors, with certain exceptions, along with other requirements.

TYPE OF WORK: Renovation EST. COST: \$ 191,840.00
ADDRESS OF WORK: 22 Hatch Rd.
OWNER NAME: Alan + Ellen Rasmick
DATE OF PERMIT APPLICATION: 10/16/01

I hereby certify that:

- REGISTRATION IS NOT REQUIRED FOR THE FOLLOWING REASON(S):
- WORK EXCLUDED BY LAW
- JOB UNDER \$1,000
- BUILDING NOT OWNER-OCCUPIED
- OWNER PULLING OWN PERMIT
- OTHER (SPECIFY) _____

NOTICE IS HEREBY GIVEN THAT:
OWNERS PULLING THEIR OWN PERMIT OR DEALING WITH UNREGISTERED CONTRACTORS FOR APPLICABLE HOME IMPROVEMENT WORK DO NOT HAVE ACCESS TO THE ARBITRATION PROGRAM OR GUARANTY FUND UNDER MGL c. 142A

Signed under the penalties of perjury.

I hereby apply for a permit as the agent of the owner:

10/16/01 DATE John W. Messer CONTRACTOR NAME C5 068012 REGISTRATION NO.

OR:

Notwithstanding the above notice, I hereby apply for a permit as the owner of the above property:

DATE OWNER NAME

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF INDUSTRIAL ACCIDENTS
600 WASHINGTON STREET
BOSTON, MASSACHUSETTS 02111

WORKERS' COMPENSATION INSURANCE AFFIDAVIT

I, John W. Mercier
(licensee/permittee)
with a principal place of business/residence at: 85 Meethals Rd. Edgartown Ma
(City/State/Zip) 02539
do hereby certify, under the pains and penalties of perjury, that:

I am an employer providing the following workers' compensation coverage for my employees working on this job.

The Maryland SCP 29249233
Insurance Company Policy Number

- I am a homeowner performing all the work myself.
- I am a sole proprietor and have no one working for me.
- I am a sole proprietor, ~~general contractor~~ or homeowner (circle one) and have hired the contractors listed below who have the following workers' compensation insurance policies:

Elec. Cole Powers Elec. On File
Name of Contractor Insurance Company/Policy Number
Plumb. Joe Houston On File
Name of Contractor Insurance Company/Policy Number
John Keane Eyew. On File
Name of Contractor Insurance Company/Policy Number

NOTE: Please be aware that while homeowners who employ persons to do maintenance, construction or repair work on a dwelling of not more than three units in which the homeowner also resides or on the grounds appurtenant thereto are not generally considered to be employers under the Workers' Compensation Act {GL.c. 152, sect. 1(5)}, application by a homeowner for a license or permit may evidence the legal status of an employer under the Workers' Compensation Act.

I understand that a copy of this statement will be forwarded to the Department of Industrial Accidents' Office of Insurance for coverage verification and that failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties consisting of fine of up to \$1500.00 and/or imprisonment of up to one year and civil penalties in the form of a Stop Work Order and a fine of \$100.00 a day against me.

Signed this 15th day of October, 2001
John W. Mercier _____
Licensee/Permittee Licensee/Permitter

No: 6150

COMMONWEALTH OF MASSACHUSETTS

TOWN OF TISBURY

Fee\$598.00.....

.....OCTOBER 22..... 19 2001.....

PERMIT TO BUILD OR ALTER

This May Certify that ALAN AND ELLEN BRESNICK/JOHN MERCIER

has permission to build or alter a SINGLE FAMILY building on 22 HATCH ROAD
DWELLING 5-F-3
to be occupied for RESIDENTIAL

provided that the person accepting this permit shall in every respect conform to the terms of the application on file in this office, and to the provisions of the statutes and ordinances relating to the Construction, Maintenance and Inspection of Buildings in the TOWN of TISBURY and shall begin work on said building within 80 days from the date hereof, and prosecute the work thereon to a speedy completion.

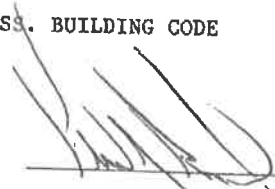
The owner or contractor must notify the Inspector when the house is ready for his inspection, before the house is lathed.

Any person who shall violate any of the provisions of the Act relating to the Construction, Maintenance and Inspection of Buildings in the TOWN of TISBURY is liable to a fine not exceeding \$100.

Conditions:

SUBJECT TO 780 CMR MASS. BUILDING CODE

TO CONSTRUCT ADDITION TO SINGLE
FAMILY DWELLING TO ENLARGE THREE EXISTING
ROOMS PER PLANS AND DESCRIPTION ONLY.


Inspector of Buildings

DEPARTMENT OF BUILDING INSPECTOR

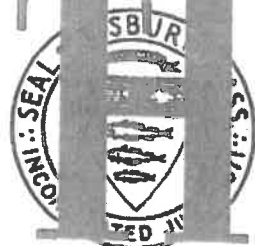
DATE OCTOBER 22, 2001 FEE 150 PARCEL 5-F-3

NAME ALAN AND ELLEN BRESN JOHN CIEN

PROPERTY ADDRESS 22 HA ROAD BURY A. C.

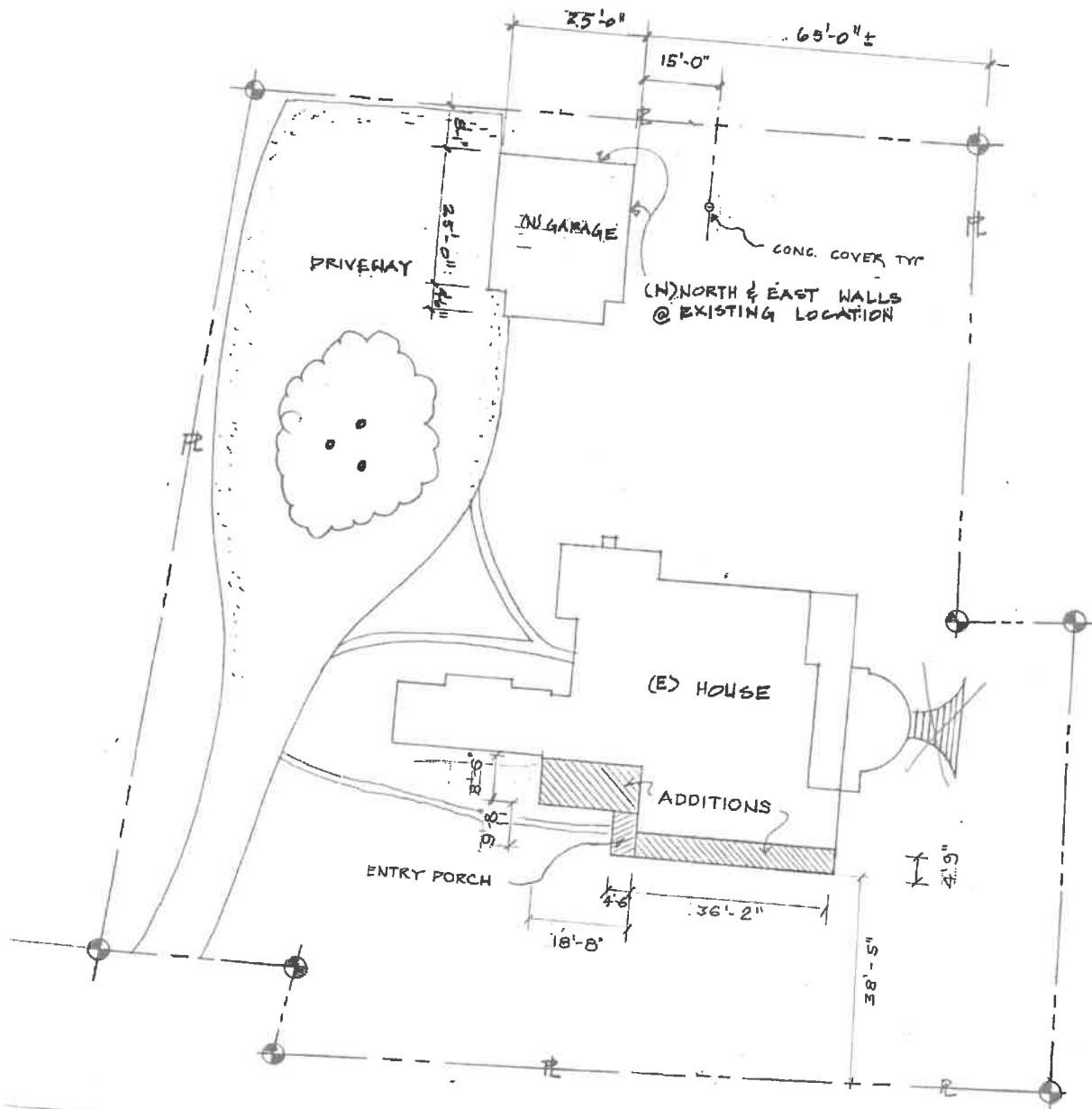
BUILDING _____ PLUMBING _____ WIRING _____ FIRE CHIEF _____ GAS INSPECTOR _____
 SITE _____ TEST _____ TRENCH _____ TEST _____ TEST _____
 FOUNDATION _____ ROUGH _____ SERVICE _____ ROUGH _____ ROUGH _____
 FRAME _____ FINAL _____ ROUGH _____ FINAL _____ FINAL _____
 INSULATION _____ ALUMINUM _____
 FINAL _____

provided that the person to whom this permit is granted shall in every particular, conform to the terms of the application on file at this office and to the Requirements of the Massachusetts Building Code and Zoning Ordinance of the Town of Tisbury.



BUILDING INSPECTOR

[Handwritten signature]



HATCH RD.

SITE PLAN 1" = 20'-0"



ALAN & ELLEN BRESNICK 22 HATCH RD. VINEYARD HAVEN MA 10-16-01	WEBB GREEN 1142 DE HARO SAN FRANCISCO CA 94107 ARCHITECTURAL DESIGN 415-648-6168	1
--	---	---