A1

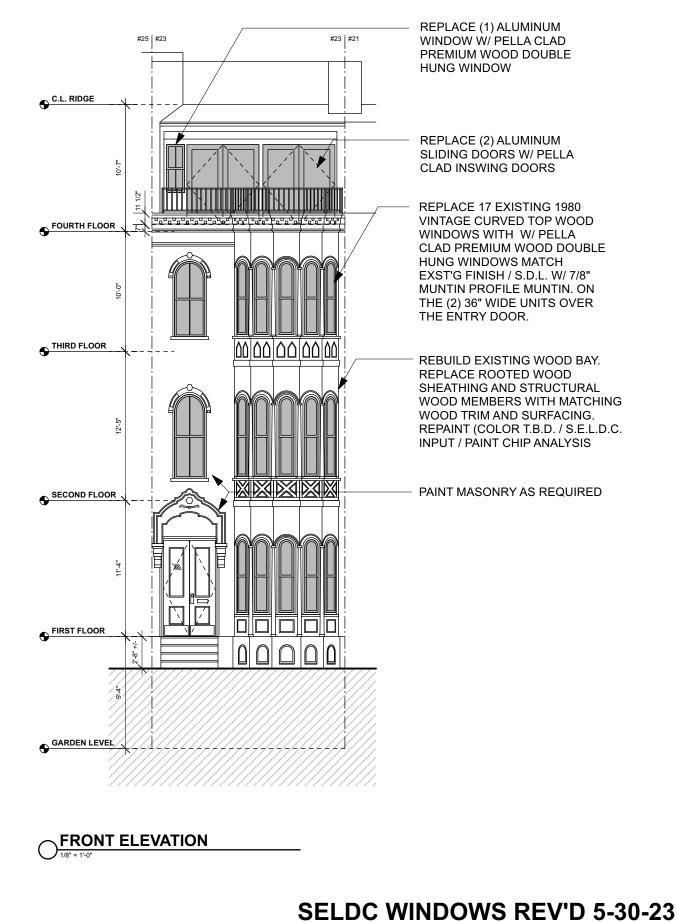
- REPLACE (2) ALUMINUM SLIDING DOORS W/ PELLA CLAD INSWING DOORS REPLACE (1) ALUMINUM WINDOW W/ PELLA CLAD PREMIUM WOOD DOUBLE DECK HUNG WINDOW

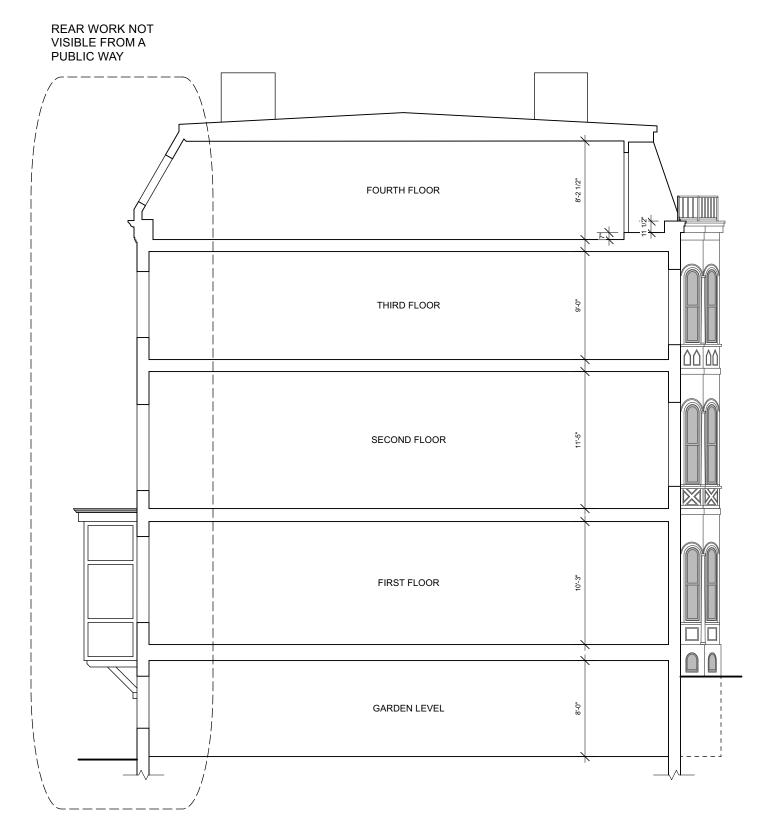
FOURTH FLOOR PLAN
1/8" = 1'-0"

ROOF PLAN

1/8" = 1'-0"

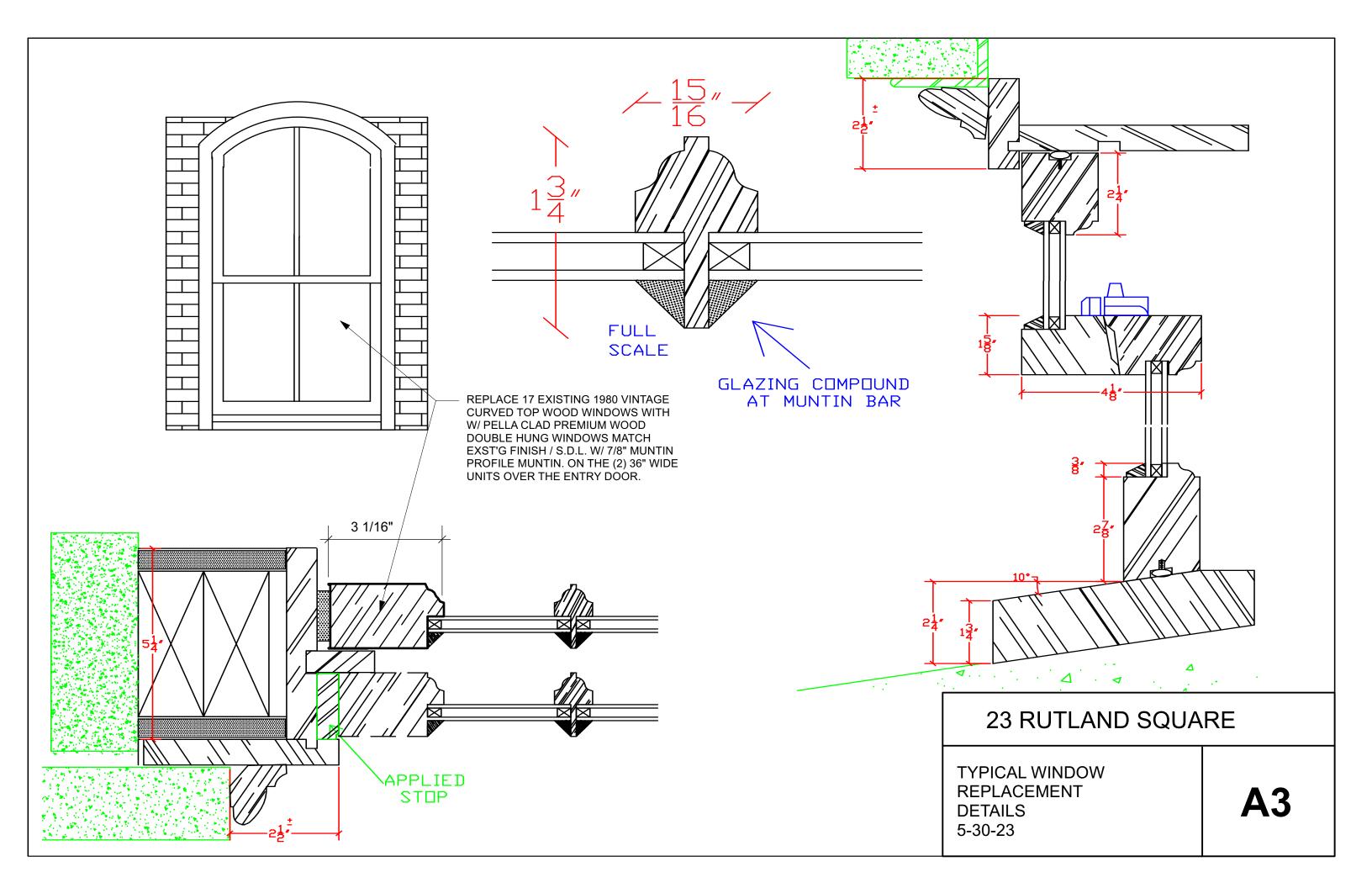
A2





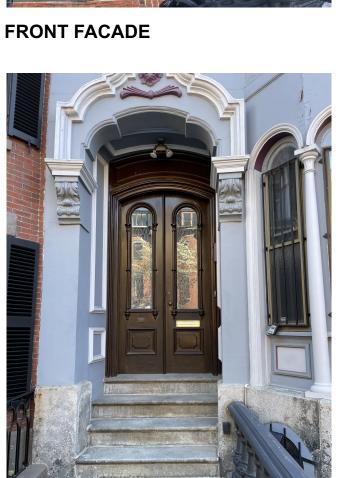
BUILDING SECTION

1/8" = 1'-0"









FRONT ENTRY



WOOD BAY CLOSE-UP



WOOD BAY ROT / WATER DAMAGE



BASEMENT WINDOWS



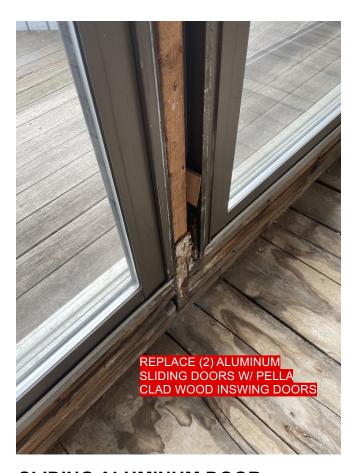
WOOD BAY ROT / WATER DAMAGE

A5



1980 VINTAGE D/H WOOD REP. WINDOW

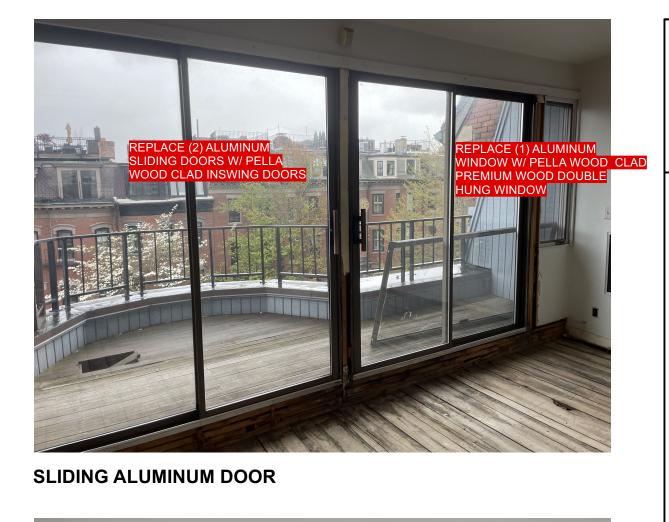
EXST'G D.H. WINDOW CLOSE-UP



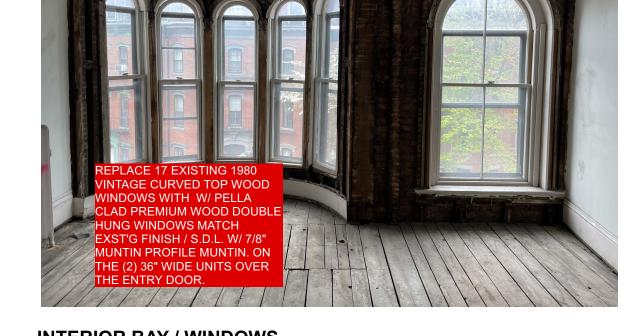
SLIDING ALUMINUM DOOR



EXST'G D.H. WINDOW CLOSE-UP







INTERIOR BAY / WINDOWS

A	6

START DATE: 5/10/23 DRAWN BY: TS SCALE: 1/8" = 1'-0" PROJECT #: 2023-12

APPLICANT MUST USE TYPEWRITER IN FILLING IN THIS APPLICATION CITY OF BOSTON AU05 Application to the Building Commissioner for Permit for Alterations, Repairs or Change of Occupancy Location, 23 RUTLAND SQUARE Name of owner is? FRANK & CAROL FELDMAN Name of owner is? FRANK & GARGE FRANKS
Name of architect or engineer is? JOAN WOOD
Material of building is? BRICK & WBtyle of roof? MANSARD
Size of building, feet front? 15; feet rear? 15; Lic. No. 1955 Construction of roof? TAR & GRAVEL

; feet deep? 44 ; No. of stories? 4

Material of foundation? STONE & CONO
Party walls? 12 No. of feet in height from sidewalk to highest point of roof? scription Thickness of external walls?..... Present Party walls?..... LEGAL OCCUPANCY OR USE (Applicant is not to fill in this box) uilding NO RECORD OF LEGAL OCCUPANCY Front stairs? Back stairs? Fire escape? Is building equipped with automatic sprinkler system) no Type of construction? 2-3 Building to be occupied for ONE FAMILY IF EXTENDED ON ANY SIDE OR VERTICALLY cription Size of extension, No. of feet long?.....; No. of feet wide?.....; No. of feet high above sidewalk?... No. of stories high? ; style of roof? ; material of roofing? posed Of what material will the extension be built? How will the extension be occupied?.... GENERAL DESCRIPTION OF THE PROPOSED WORK AND ITS LOCATION. (ALL STRUCTURAL, MECHANICAL, ELECTRICAL, ETC., SHALL BE INCLUDED) AT TOP FLOOR COMBINE TWO BEDROUMS INTO ONE STUDY FOR OWNER-: 1. Install insulation at roof 2. New plaster ceiling
3. Install new insulated glass front and rear
4. Add to present heat system 3 electric heat units 29 JULY Date..... The facts I have set forth above in this application and accompanying plans are a true statement to the best of my knowledge and belief. Carol G Feldman M. D. Person Signing. Type Name of R. CAROL FELDMAN (Signature of Owner) 23 RUTLAND SQUARE, BOSTON Type Name of DONALD A. MACARTHUR Person Signing... (Signature of Licensed Builder) D.A. MACARTHUR INC CONTRACTOR (Address)...same. (Name of Contractor) Lic. No. 759 Class C (Address)....276 ORCHARD STREET My license expires 4/23/81 WATERTOWN, MASS