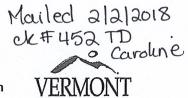


VERMONT DEPARTMENT OF PUBLIC SAFETY

DIVISION OF FIRE SAFETY



Office of the State Fire Marshal, State Fire Academy and State HAZMAT Team WWW.FIRESAFETY.VERMONT.GOV

Change of Use or Ownership Inspection Request

Name of Building or Asso	ociation: High F	tills Condomini	um
Physical 911 Address:	087 Stowe Holle	ow Road city:	Stowe
Building Number: <u>68</u>	Unit Number:_	A Number o	f Units in Building:3_
Current Owner Contact Ir	nformation		
Contact Name: Rich	ocurd and Anne	Adler	
Contact Phone: N	E-Mail:	NJA	
New Owner /Condominiu	m Association Contact I	<u>nformation</u>	
Contact Name: Juc	di Pepper (con	do manager)	
Contact Phone: 802 3			mail.com
☐ Change of Use Requ	ıest - Current Use:	Proposed	I Use:
Change of Ownershi	p Request:	Date of C	Closing: 3 30 2018
Contact Name to Schedu	le Inspection:	oline Marhefk	<u> </u>
Relationship:			Association
Phone: 802 272 15	550 E-Mail: .	caroline.mar	nefka@pallspera.
Please remember	to give the Division o	of Fire Safety Staff a	t least 15 days' notice
We do our best to	meet your deadlines but c	an only do so if enough ac	dvanced notice is given.
Fee: \$1	25 – Please make check pa	ayable to: <u>Department of Pu</u>	ublic Safety
Williston Regional Office 380 Hurricane Lane, Suite 101 Williston, VT 05495 Phone: 802-879-2300	Barre Regional Office 1311 US Route 302, Suite 500 Barre, VT 05641 Phone: 802-479-4434	Rutland Regional Office 56 Howe Street Building A; Suite 200 Rutland, VT 05701 Phone: 802-786-5867	Springfield Regional Office 100 Mineral Street, Suite 307 Springfield, VT 05156 Phone: 802-885-8883
Diameter ID.	* FOR OFFICE		Data
Structure ID:	Work Item ID:	Received	Date:
Check From:	Check#:	Amount:	Inspector: