Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

	ITY OF PORTLA	ND
Please Read Application And	BUILDING INSPECTION	
Notes, If Any, Attached	PERIM	PERMIT ISSUED
This is to certify that Morning Street Cond	do Owne ssoc/Phoenix Associates	
has permission to demo exterior brick	wall & it stigate e	JUN 1 1 2004
AT _55 Morning St		003 B005011 CITY OF PORTLAND
provided that the person or per		ng this per mit shall comp ly with all
of the provisions of the Statute the construction, maintenance		s of the City of Portland regulating res, and of the application on file in
this department.	and d or buildings and btu	res, and or the application on the in
Apply to Public Works for street line and grade if nature of work requires such information.	N ication inspect in must git and wron permis in procuble this to ding or roll thereo land or contrained sed-in. H R NOT SUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIF ED APPROVALS PERMIT ISSUED Health Dept. Appeal Board JUN 1 1 2004		6/11/04
Other		Director -Building & Respection Services
Departin ent Name OF PORTLAND	PENALTY FOR REMOVING THIS C	

			_		PERMIT ISSUE		
City of Portland, Maine	e - Building or Use 1	Permit Application	n	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-871	6	04-0785	JUN 1 1 2004	003 B00)5011
Location of Construction:	Owner Name:		Ow	ner Address:		Phone:	
55 Morning St	Morning Stree	Morning Street Condo Owner Assoc		Morning St	CITY OF PORTLAND 207-77		052
Business Name:	Contractor Name	:	Co	ntractor Address:		Phone	
	Phoenix Assoc	iates		PO Box 349 Gray		2072330506	
Lessee/Buyer's Name	Phone:		1	mit Type:			Zone:
			느	Demolitions			2-6
Past Use:	Proposed Use:		Pe			CEO District:	
condo's		exterior brick wall	_	\$246.00	\$25,000.00	1	
	& investigate e	extent of rot	FI	RE DEPT:	Approved Use Gro	1	Туре:
				BN 4 1999		99	
Proposed Project Description:			┨	\mathcal{N}/\mathcal{I}			
demo exterior brick wall & in	vestigate extent of rot		Sig	gnature:	Signatur	re: V	
			PE	DESTRIAN ACTIV	VITIES DISTRICT (P	P.A.D.)	$\overline{}$
			Ac	etion: Approv	ed Approved w/	Conditions	Denied
		<u> </u>	Sig	gnature:		Date:	
Permit Taken By:	Date Applied For:			Zoning	Approval		
tmm	06/11/2004	Special Zone or Revie		Zonin	ng Appeal	Historic Prese	pryation
 This permit application d Applicant(s) from meetin Federal Rules. 		Shoreland	-ws			Not in Distric	
2. Building permits do not i septic or electrical work.	☐ Wetland		Miscellar	neous	Does Not Req	uire Review	
3. Building permits are voic within six (6) months of t	☐ Flood Zone ☐ Subdivision		Conditional Use Interpretation		Requires Review		
False information may invalidate a building permit and stop all work					Approved		
		Site Plan		Approved	d	Approved w/0	Conditions
\f	PERMIT ISSUED	Maj Minor MM		Denied		☐ Denied	/,,
	JUN 1 1 2004	Date:		Date:	Da	ate: ///	9
	CITY OF PORTLAND	()				ι ,	
L							
		CERTIFICATI	ſΝ				
I hereby certify that I am the o I have been authorized by the jurisdiction. In addition, if a p shall have the authority to enter	owner to make this appli permit for work described	med property, or that the cation as his authorized in the application is in	he p d ag ssue	proposed work is gent and I agree t ed, I certify that t	to conform to all ap the code official's a	oplicable laws outhorized repr	of this esentative
such permit.							

ADDRESS

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

SIGNATURE OF APPLICANT

DATE

PHONE

City of	Portland, N	laine - Buil	lding or Use Permit		Permut No:	Date Applied For:	CBL:	
389 Con	gress Street,	04101 Tel: (207) 874-8703, Fax: (2	207) 874-8716	04-0785	06/11/2004	003 B005011	
Location o	f Construction:		Owner Name:		Owner Address:		Phone:	_
55 Morn	ing St		Morning Street Condo	Owner Assoc	55 Morning St		207-775-2052	
Business N	ame:		Contractor Name:	(Contractor Address:		Phone	
			Phoenix Associates		PO Box 349 Gray		(207) 233-0506	
Lessee/Buy	ver's Name		Phone:	I	Permit Type:			
					Demolitions			
Proposed V	Use:			Proposed	Project Description:	· · · · · · · · · · · · · · · · · · ·		
condo's -	demo exterior	brick wall &	investigate extent of rot	demo e	exterior brick wall	& investigate extent of	of rot	
							-	
							0.01110004	_
Dept:	Zoning	Status: A	approved	Reviewer:	Tammy Munson	Approval Da	_	
Note:							Ok to Issue:	
	Duilding	Status A	nnrayed with Conditions	. Poriorrom	Tommy Muncon	Approval Da	nte: 06/11/2004	
} -	Building	Status: A	approved with Conditions	Keviewer:	Tammy Munson			
Note:							Ok to Issue:	
1) This	permit is for th	e demolition of	only, as discussed, a sepa	rate permit is re-	quired to rebuild b	rick and repair extent	of rot.	



City of Portland, Maine - Bui 389 Congress Street, 04101 Tel:	C		Permit No: 04-0785	Date Applied For: 06/11/2004	CBL: 003 B005011
Location of Construction:	Owner Name:		wner Address:		Phone:
55 Morning St	Morning Street Condo]	55 Morning St		207-775-2052
Business Name:	Contractor Name:	C	ontractor Address:		Phone
	Phoenix Associates	I	PO Box 349 Gray		(207) 233-0506
Lessee/Buyer's Name	Phone:		ermit Type: Demolitions		
condo's - demo exterior brick wall &	investigate extent of rot	demo e	xterior brick wall d	& investigate extent o	f rot
Dept: Zoning Status: A Note:	Approved	Reviewer:	Tammy Munson	Approval Da	te: 06/11/2004 Ok to Issue: ✓
Dept: Building Status: A Note: 1) This permit is for the demolition	Approved with Condition	s Reviewer:	Tammy Munson	Approval Da	te: 06/11/2004 Ok to Issue: ✓



All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 5	5 Marning STri	20 (
Total Square Footage of Proposed Struct	Square Footage of Lot	6000-
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# D 3 0050	Owner: 55 Marking 5th	
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of 25,000 1 Work: \$ 25,000
		Fee: \$ 246
Current use: CondoS		*
If the location is currently vacant, what was Approximately how long has it been vacant Proposed use: Project description:		
Contractor's name, address & telephone: Who should we contact when the permit is Malling address: PoBoX 349 We will contact you by phone when the pereview the requirements before starting an and a \$100.00 fee if any work starts before	ermit is ready. You must come in and in work, with a Plan Reviewer. A stop w	
THE REQUIRED INFORMATION IS NOT INCLU	<u>_</u> <u>~</u>	

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

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Signature of applicant: /		10	Charinas	Date: 6-10-2-004	,
· · ·	\mathcal{I}		()/	,	

This is NOT a permit, you may not commence ANY work until the permit is issued.

If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

bkg TKE 17X5] Plate At Line of coling FLOW WOLLD = X SONDING