

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1801	Issue Date:	CBL: 003 C007001
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Location of Construction: 108 EASTERN PROMENADE	Owner Name: SALEM ANTHONY	Owner Address: 1433 RYDAL RD	Phone:
Business Name:	Contractor Name: Casco Bay Ventures	Contractor Address: 223 Woodville Road Falmouth	Phone 2077977752
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Dwellings	Zone:

Past Use: Condos 4	Proposed Use: Condos 3 remove one kitchen and make 2 condos 1 unit	Permit Fee: \$30.00	Cost of Work: \$105.00	CEO District: 1
Proposed Project Description: Remove one kitchen and make 1 condos 1 unit		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
		Signature:	Date:	

Permit Taken By: dmartin	Date Applied For: 12/13/2005	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date:	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date:	

CERTIFICATION

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

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

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Dept: Zoning	Status: Approved with Conditions	Reviewer: Ann Machado	Approval Date: 12/15/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) This property shall remain as 3 dwelling units. Any change of use shall require a separate permit application for review and approval. By removing one dwelling unit from the building you may not be able to change back to 4 dwelling units in the future if the lot is legally nonconforming as to minimum area required per dwelling unit.			
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 12/16/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) This is a Change of Use ONLY permit.			
2) This permit DOES NOT authorize any construction activities. It only authorizes the removal of the kitchen.			
Dept: Fire	Status: Approved with Conditions	Reviewer: Cptn Greg Cass	Approval Date: 12/15/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) All building construction to comply with NFPA 101			

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