

Location of Construction: 143R Washington Ave		Owner: Fenton		Phone:	
Owner Address:		Leasee/Buyer's Name:		Phone:	
Contractor Name: Paul Davis Systems		Address: 1932 Broadway So. Ptld, ME		Phone: 04106 775-0070	
Past Use: 1-fam		Proposed Use: Same		COST OF WORK: \$ _____ PERMIT FEE: \$ 25.00	
Proposed Project Description: Fire repairs - no structural - all cosmetic		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____		INSPECTION: Use Group: <i>93</i> Type: <i>507</i> Signature: <i>[Signature]</i>	
Permit Taken By: Mary Gresik		Date Applied For: 06 September 1996		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____	

Permit No:
960895

PERMIT ISSUED

SEP 10 1996

CITY OF PORTLAND

Zone: **CBL**
R6 ? 012 G011

Zoning Approval:
OK

Special Zone or Reviews:

Shoreland *without*
 Wetland *Sept 2nd*
 Flood Zone *perm 9/96*
 Subdivision
 Site Plan maj minor mmi

1. This permit application doesn't 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..

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

30 YC 15011/30-3192

PERMIT ISSUED
NO OTHER REQUIREMENTS

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 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 provisions of the code(s) applicable to such permit

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

SIGNATURE OF APPLICANT Mark Johnson ADDRESS: _____ DATE: 06 September 1996 PHONE: _____

Mark W. Johnson *Contractor* *780-1301*

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

Action:

Approved
 Approved with Conditions
 Denied

Date: 9/6/96

J. Andrew

CEO DISTRICT 1

m.w.

COMMENTS

checked apt. renovations done. Hand
coil detectors installed OK approx
10/16

Completed
[Signature]

CBL# 012-9-520
Permit# 960895

	Type	Inspection Record	Date
Foundation:	_____	_____	_____
Framing:	_____	_____	_____
Plumbing:	_____	_____	_____
Final:	_____	_____	_____
Other:	_____	_____	_____