



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 54 North St 013-K-009

Issued to Joe Cooper

Date of Issue 16 June 1998

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 970283, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Entire

Four Family Dwelling

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

6/16/98 *Marland Wang*
(Date) Inspector

G. Samuel Hoffee
Inspector of Buildings

AWW

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

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

Location of Construction: <u>54 North Street</u>		Owner: <u>Joe Cooper</u>		Phone: <u>871-7084</u>		Permit No: 970283 PERMIT ISSUED Permit Issued: APR - 8 1997 CITY OF PORTLAND		
Owner Address: <u>P.O. Box 491, Portland 04112</u>		Lessee/Buyer's Name:		Phone:			BusinessName:	
Contractor Name:		Address:		Phone:				
Past Use: <u>3 Unit</u>		Proposed Use: <u>Add additional unit</u>		COST OF WORK: <u>\$8,000.00</u>			PERMIT FEE: \$125.00 <u>60.00</u>	
Proposed Project Description: <u>Add apartment in rear of existing building as per plans</u>		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <u>A-2</u> Type: <u>5B</u>		Signature: <u>[Signature]</u>		
		Signature: <u>[Signature]</u>		Signature: <u>[Signature]</u>		Date: _____		
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Permit Taken By: <u>Vicki Dover</u>		Date Applied For: <u>4/1/97</u>		Signature: _____ Date: _____		Zoning Approval: <u>3 units of pre-1957 dw with conditions</u> Special Zone or Reviews: <u>CR-2</u> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <u>4/7/97</u> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm		

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..

Mail to owner

PERMIT ISSUED WITH 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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: [Signature] ADDRESS: P.O. Box 491, Portland 04112 DATE: 4/1/97 PHONE: _____
 Joe Cooper

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

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: 4/2/97

[Signature]

CEO DISTRICT 1

[Signature]

COMMENTS

4/1/97 Rechecked framing all wall & joists exposed, inspected ok to Close in May
4/98 Inspected interior work checked smoke Detector Ok
5/5/98 Super Final Inspection everything completed ok
Send Cert. of Occupancy Foundation work complete

Inspection Record

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

**Additional Plans or Technical
Submissions may not be shown in this
format.**

**If you wish to see additional information,
Please ask the support staff.**