Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application]	Permit No:	Issue Dat	e:	CBL:	
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		06-0146			014 B00	5001
Location of Construction: Owner Na			Owner Name:	::		Owner Address:			Phone:		
16 CUMBERLAND AVE			CARLSON DALE A & JUDITH A JT			61 WESTWOOD RD					
Business Name:			Contractor Name:			Contractor Address:			Phone	Phone	
Lessee/Buyer's Name Phone:			Phone:		Permit Type: Change of Use - Condo Conversi		version	Zone:			
Past Use: Proposed Use:						Permit Fee: Cost of Work:			rk:	CEO District:	<u>. </u>
4 unit residential Condominium Condominium			/ Change of Use		\$900.00			00.00			
			Condominium Condominiums	Conversion -4		FIRE DEPT: Approved		INSPE	INSPECTION: Use Group: Ty		
Proi	posed Project Description:										
	ange of Use Condominium	Convers	sion -4 Condomi	niums		Signature: Signature:		Signatu	gnature:		
						PEDESTRIAN ACTIVITIES DISTRIC			<u> </u>		
									proved w	w/Condition Denied	
						Sig	gnature:			Date:	
Peri	mit Taken By:	Date A	pplied For:		Zoning Approval				l		
lde	obson	01/30	/2006								
1.	This permit application	does not	preclude the	Spec	ial Zone or Revi	ews Zoning Appeal			Historic Pres	ervation	
	Applicant(s) from meeting applicable State and Federal Rules.		able State and	Shoreland			☐ Variance			Not in District or Landma	
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscella	Miscellaneous		☐ Does Not Require Revie		
3.	Building permits are voice within six (6) months of	the date	of issuance.	☐ Flood Zon			☐ Conditional Us			Requires Review	
False information may invalidate a building permit and stop all work			Subdivision			☐ Interpretatio			Approved		
				☐ Si	te Plan		☐ Approv	ed		Approved w	Condition (
				Maj Minor MM		☐ Denied			☐ Denied		
				Date:			Date:		D	Date:	
I ha juris shal	reby certify that I am the over been authorized by the sdiction. In addition, if a place the authority to entuch permit.	owner to permit for	o make this appli r work described	med procation a	as his authorized application is iss	ne pa d ago	ent and I agree t I, I certify that th	to conform to ne code offic	to all ap cial's au	oplicable laws of othorized repres	of this sentative
SIG	SNATURE OF APPLICAN				ADDRES:	S		DATE	Ξ.	Pl	НО

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

	eation of Construction:	Owner Name:	(Owner Address:	Phone:		
	CUMBERLAND AVE	CARLSON DALE A & J		61 WESTWOOD RD	r none.		
Business Name:		Contractor Name:	-	Contractor Address:	Phone		
Lessee/Buyer's Name		Phone:]	Permit Type:	1 0 '		Zone:
				Change of Use - Cond	10 Conversion		
De	ept: Zoning Status	: Approved with Conditions	Reviewer:	Marge Schmuckal	Approval Date	e: 02/	15/2006
	house 2/15/06 received the mem PLEASE NOTE: Under the C	Carlson - he will drop off a me o	emo giving the) BEFORE a develope	hey bought a		unit,
	preexisting written lease. C) irrevocable option to purchas The developer shall post a co	For a sixty (60) day period fol e during which time the devel- py of the permit in a conspicuo	llowing the not oper may not cous place in each	ice of intent to convert, convey or offer to conve	the tenant has an ey the unit to any copies available t	exclusive and other person to prospection	nd n. D)
	BEFORE the tenant is require		t relocation pay	ments, they SHALL be	e paid a CASH PA	YWENI	
2)	BEFORE the tenant is require			•			g that
2)	BEFORE the tenant is required. This permit is being approved work.	d to vacate.	ed. Any devia	tions shall require a se	parate approval be	efore startin	
3)	BEFORE the tenant is required. This permit is being approved work. This property shall remain a fapproval. This is NOT an approval for a	d to vacate. I on the basis of plans submitt our (4) family dwelling. Any c	ed. Any devia hange of use shou SHALL NO	tions shall require a senall require a senall require a separate p	parate approval be ermit application to the then equipment in	efore startin	nd
3)	BEFORE the tenant is required. This permit is being approved work. This property shall remain a frapproval. This is NOT an approval for a limited to items such as stove	d to vacate. I on the basis of plans submittour (4) family dwelling. Any contact and additional dwelling unit. You	ed. Any devia hange of use shou SHALL NO or kitchen sinks	tions shall require a senall require a senall require a separate p T add any additional kiss, etc. Without special a	parate approval be ermit application to the then equipment in	efore startin for review a ncluding, bu	nd
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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	РНО
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