

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 071246

This is to certify that MORNING EASTERN PROJECT Copper

has permission to add 1 new bath Units 1R, 2R, 3R, move them to new location per original plans

AT 129 MORNING ST 014 N005001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission procured before this building or part thereof is lashed or closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

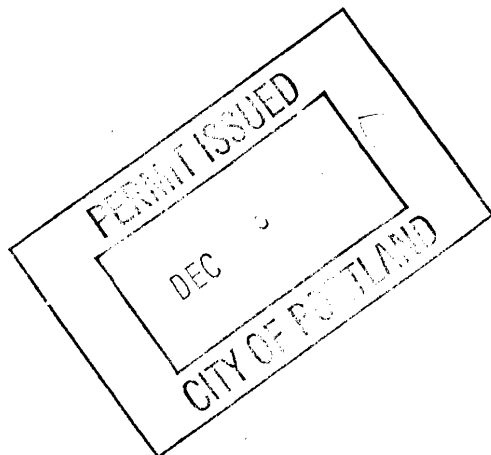
Appeal Board _____

Other _____

Department Name

[Signature]
12/4/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1246	Issue Date:	CBL: 014 N005001
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Location of Construction: 129 MORNING ST	Owner Name: MORNING EASTERN PROMENA	Owner Address: PO BOX 4271	Phone:
Business Name:	Contractor Name: Ron Copper	Contractor Address: 19 Vista Drive Windham	Phone: 2078922555
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	Zone: R-6

Past Use: 6 Family Residential	Proposed Use: 6 Family Residential - add 1 new bath Units 1R, 2R, 3R, move kitchen to new location per original plans for three units <i>legal use - 6 du (permit 06-1660)</i>	Permit Fee: \$170.00	Cost of Work: \$15,000.00	CEO District: 1
Proposed Project Description: add 1 new bath Units 1R, 2R, 3R, move kitchen to new location per original plans (not connected to permit # 06-1660) <i>(3 units)</i>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>w/ sprinkler system</i>	INSPECTION: Use Group: <i>R-2</i> Type: <i>SB</i> <i>IBC 2003</i>	
		Signature: <i>Greg C...</i>	Signature: <i>[Signature]</i>	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions	<input type="checkbox"/> Denied
Signature:	Date:	

Permit Taken By: ldobson	Date Applied For: 10/02/2007	Zoning Approval	
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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 Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>or w/conditions</i> Date: <i>10/24/07 ABH</i>	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 Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>ABH</i> Date:
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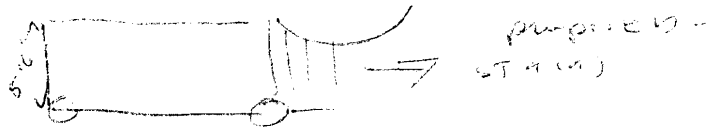
CERTIFICATION

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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

3/27/08 Plumbing all six units - pressure check OK -
OK EA plumbing B-T fire penetrations need
to be checked. SMW
Lynn Plumber 252-4302

3/22/08 - 2 STAIRS on FRONT
Structures + portion for front porch on
at 45° 8' 6" c-to-center (Below EXISTING
Roof corners)



3L TO FILL - SMW