Cit	y of Portland, Maine - Bu	ication	F	Permit No:	Issue Date:		CBL:					
389	Congress Street, 04101 Te	1: (207) 874-8703,	Fax: (2	207) 8	374-8716		04-0172			015 E012	2001	
Location of Construction: Owner Name:							ner Address:	Phone:				
105 North St Ckt Inc							Po Box 4271			207-774-5358		
Business Name: Contractor Nam			ie: C			Contractor Address:			Phone			
n/a n/a							n/a Portland					
Lessee/Buyer's Name Phone:			Permit Typ			mit Type:	Type: Zone:			Zone:		
n/a n/a				Alterations - Multi Family								
Past Use: Proposed Use:				Permit Fee: Cost of Work			Cost of Work:	CEO District:				
Multi Family / 3 Units						\$246.00 \$25,000.0) 1				
						FIR	E DEPT:]				
	posed Project Description:											
Rej	place 10' x 43' x 48' x 10' roof top	deck.										
						PEDESTRIAN ACTIVITIES DISTRICT				(P.A.D.)		
						Approve				ed w/Condition		
-	Da	te Applied For:										
gg	5								1			
1.	This permit application does	not preclude the	Special Zone or Revie			ews			H	Historic Preservation		
	Applicant(s) from meeting applicable State and Federal Rules.								Not in District or Landn			
2.	Building permits do not include plumbing, septic or electrical work.									☐ Does Not Require Revie		
3.	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												
										Approved w/Condition		
				Мај 🔲 👚 ММ 🗀								
I ha juris shal	reby certify that I am the owne ve been authorized by the own sdiction. In addition, if a permi Il have the authority to enter all uch permit.	er to make this applic t for work described	med pro cation a in the a	operty as his a applica	authorized ation is iss	e pr l age ued,	ent and I agree I certify that t	to conform to all he code official's	appli autho	cable laws orized repres	of this sentative	
SIGNATURE OF APPLICAN				ADDRESS			DATE			Pl	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:					
105 North St	Ckt Inc		Po Box 4271	207-774-5358		
			Contractor Address:			
n/a	n/a		n/a Portland			
Lessee/Buyer's Name						Zone:
n/a	n/a	J	Alterations - Multi Fan	nily		
Dept: Zoning Status: A	pproved with Condition	ns Reviewer:	Marge Schmuckal	Approval Dat	te: 03/0	5/2004
Note:	pproved with condition		Transe Semmeral		Ok to Issue:	
This is NOT an approval for an ad	ditional dwalling unit	Vou SHALL NC	T add any additional kit			
limited to items such as stoves, mi	_		-		including, bu	t HOt
2) This property shall remain a three approval.	•		-		n for review a	nd
3) This permit is being approved on	the basis of plans subm	itted. Any devia	ations shall require a sep	parate approval b	efore starting	g that
work.	•	·		**	·	
Dept: Building Status: Po	ending	Reviewer:	Mike Nugent	Approval Dat	te:	
Note:					Ok to Issue:	
Dept: Fire Status: A	mmnovod	Doviornom	Lt MacDayael	Ammorral Dod	02/0	8/2004
Dept: Fire Status: A Note:	pproved	Reviewer:	Lt. MacDougal	Approval Dat	Ok to Issue:	_
Note:					OK to issue:	
Comments:						
03/11/2004-mjn: Need much more info	ormation left a message v	with applicant				
	1	CERTIFICATIO	N			
I hereby certify that I am the owner of	record of the named pro	operty, or that th	e proposed work is auth	orized by the ow	ner of record	and that
I have been authorized by the owner to			= =			
jurisdiction. In addition, if a permit for						
shall have the authority to enter all are	as covered by such peri	mit at any reasor	able hour to enforce th	e provision of the	e code(s) app	licable
to such permit.						
SIGNATURE OF APPLICAN		ADDRESS		DATE	PH	0
RESPONSIBLE PERSON IN CHARGE OF	WORK, TIT			DATE	PH	0