

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

**CITY OF PORTLAND**

Please Read  
Application And  
Notes, If Any,  
Attached

PERMIT ISSUED

 Permit Number: 060391  
 APR 20 2006

CITY OF PORTLAND

This is to certify that WALSH ED /Kennedy & Walsh Const.has permission to amendment to Multi-Family Enclose drivewayAT 94 ATLANTIC ST

L 016 D006001

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 written permission procured before this building or part thereof is opened or service closed-in. 4  
 YOUR NOTICE REQUIRED

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

## OTHER REQUIRED APPROVALS

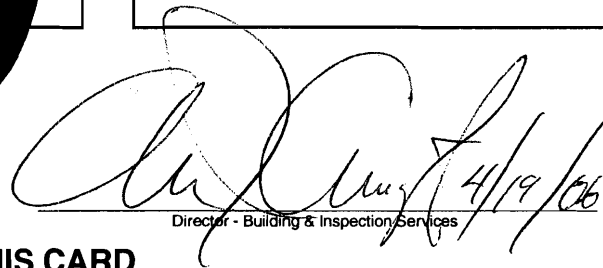
Fire Dept. Craig Cass 3-30-06

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name


 4/19/06  
 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: 06-0391	Issue Date: CITY OF PORTLAND	CBL: 016 D006001
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Location of Construction: 94 ATLANTIC ST	Owner Name: WALSH ED	Owner Address: 147 DEEPWOOD DR	Phone: CITY OF PORTLAND
Business Name:	Contractor Name: Kennedy & Walsh Const.	Contractor Address: 91 Johnson Rd Falmouth	Phone: 2077842071
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Multifamily	Zone: R-15

Past Use: Multi- Family Home  legal use:	Proposed Use: Multi- Family Home/ amendment to Multi-Family - Enclose entryway (permit # 05-0842)  3 residential condos (406-0268)	Permit Fee: \$39.00	Cost of Work: \$2,000.00	CEO District: 1
Proposed Project Description: amendment to Multi-Family - Enclose entryway		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: 42 Type: 55 Signature: Carey Cross Signature: [Signature]		
		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: Idobson	Date Applied For: 03/24/2006	<b>Zoning Approval</b>		
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..		<b>Special Zone or Reviews</b> <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"/> Date: 3/27/06 [Signature]	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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 Date: [Signature]

## 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