

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

Location of Construction: 1 St Lawrence St		Owner: Leary Kevin		Phone: 773-9782		Permit No: <b>941340</b>	
Owner Address: 48 Stapleford Dr Falmouth, ME		Leasee/Buyer's Name: 04105		Phone:		BusinessName:	
Contractor Name: self		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>DEC 13 1994</b>  <b>CITY OF PORTLAND</b> </div>	
Past Use: 3-fam		Proposed Use: 4-fam w/int reno		COST OF WORK: \$ 500.			
Proposed Project Description:  Ch ge Use from 3-fam to 4-fam Make Int Reno (1st fl)		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied  Signature: _____ Date: _____		INSPECTION: Use Group: _____ Type: _____		Zone: CBL: 016-F-024	
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>  Signature: _____ Date: _____		Zoning Approval:  <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"/>	
Permit Taken By: Mary Gresika		Date Applied For: <del>XXXXXXXXXX</del> 8 Dec 94					

1. This permit application doesn't 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.

**PERMIT ISSUED  
WITH LETTER**

**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 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: <i>Kevin Leary</i>		ADDRESS:		DATE: 8 Dec 94		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE:			

- Zoning Appeal**
- Variance
  - Miscellaneous
  - Conditional Use
  - Interpretation
  - Approved
  - Denied

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

**Action:**

- Approved
- Approved with Conditions
- Denied

Date: *12/9/94*

CEO DISTRICT 1

COMMENTS

1-6-95 This item has been part of the work  
smoke detectors to be installed.

12/20/96 Checked all apto. cellar sprinkled over boiler &  
all safety equipment installed ok  
Did housing inspection ST:W/SUP.  
to install New ext. pipe on HWY.  
OK for cert. of OCC. for 4 AM

mit# 941340  
3L# 016-F-024

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



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 1 St Lawrence St (016-F-024)

Issued to Kevin, Leary

Date of Issue 27 January 1997

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. 941340, 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:

1-27-97 *Samuel H. Coffey*  
.....  
(Date) Inspector

*Samuel H. Coffey*  
.....  
Inspector of Buildings

*H. H. H.*

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.