

Location of Construction: 68 St Lawrence St		Owner: Bill Simpson	Phone:	Permit No 971050
Owner Address: P.O. Box 641 Freeport, ME		Lessee/Buyer's Name: 04032	Phone: 865-6600	Business Name: X13
Contractor Name: SAA		Address:		Phone:
Past Use: 10-fam	Proposed Use: Same	COST OF WORK: \$ 22,500.00	PERMIT FEE: \$ 135.00	<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED SEP 30 1997 CITY OF PORTLAND </div>
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R2 Type: 5B	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
Proposed Project Description: General Rehab/Interior Reconstruct Exterior porches/addition to same		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zone: <i>R-6</i> CBL: 016-H-005 <i>26</i> Zoning Approval: <i>10 units so far</i> <i>microtiche</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>14-433</i> <input type="checkbox"/> Flood Zone <i>ext. hazard</i> <input type="checkbox"/> Subdivision <i>OK conditions</i> <input type="checkbox"/> Site Plan <i>ma</i> <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <i>9/25/97</i>
Permit Taken By: Mary Gresik	Date Applied For: 12 Septmeber 1997			

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..

- 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: 9/16/97

[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 provisions of the code(s) applicable to such permit

William P. Simpson
 SIGNATURE OF APPLICANT Bill Simpson ADDRESS: DATE: 12 September 1997 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT 1

M. Wing

COMMENTS

9/11/97 started painting trim & exterior cleaning out
building vacating tenants took removed around exterior
ground mowing Met with owner & Tom person from
state of main EHE mowing

11/17/97 ~~Replaced~~ Replaced walls on left side of lobby.
New floor grade being installed & ports opening

2/3/98 Re-inspected with owner Bill Lupton 3rd floor
New unit ready to occupy New kitchen cabinets, sink &
counters New bathroom fixtures make left side unit OK
inspected other units WIP -

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