

Location of Construction: 134 Congress St.		Owner: Mike Taylor		Phone: 734-7771		Permit No: 970190	
Owner Address:		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Joseph Theriault		Address: 134 Congress St., Portland		Phone: 551-3370		<div style="border: 2px solid black; padding: 5px;"> PERMIT ISSUED Permit Issued: <div style="border: 1px solid black; padding: 5px; text-align: center;"> MAR 11 1997 </div> CITY OF PORTLAND Zone: CBL: </div>	
Past Use:		Proposed Use:		COST OF WORK: \$ 31,000.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: [Signature]			
				PERMIT FEE: \$ 200.00 INSPECTION: Use Group: 42 Type: 5B BOCA 96 Signature: [Signature]		Zoning Approval: 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	
Proposed Project Description: [Faint text]				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: Date:			
Permit Taken By: Mike Taylor		Date Applied For: 3/11/97					

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..

PERMIT ISSUED WITH REQUIREMENTS

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

SIGNATURE OF APPLICANT [Signature]		ADDRESS:		DATE: 3/11/97		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: _____

CEO DISTRICT

COMMENTS

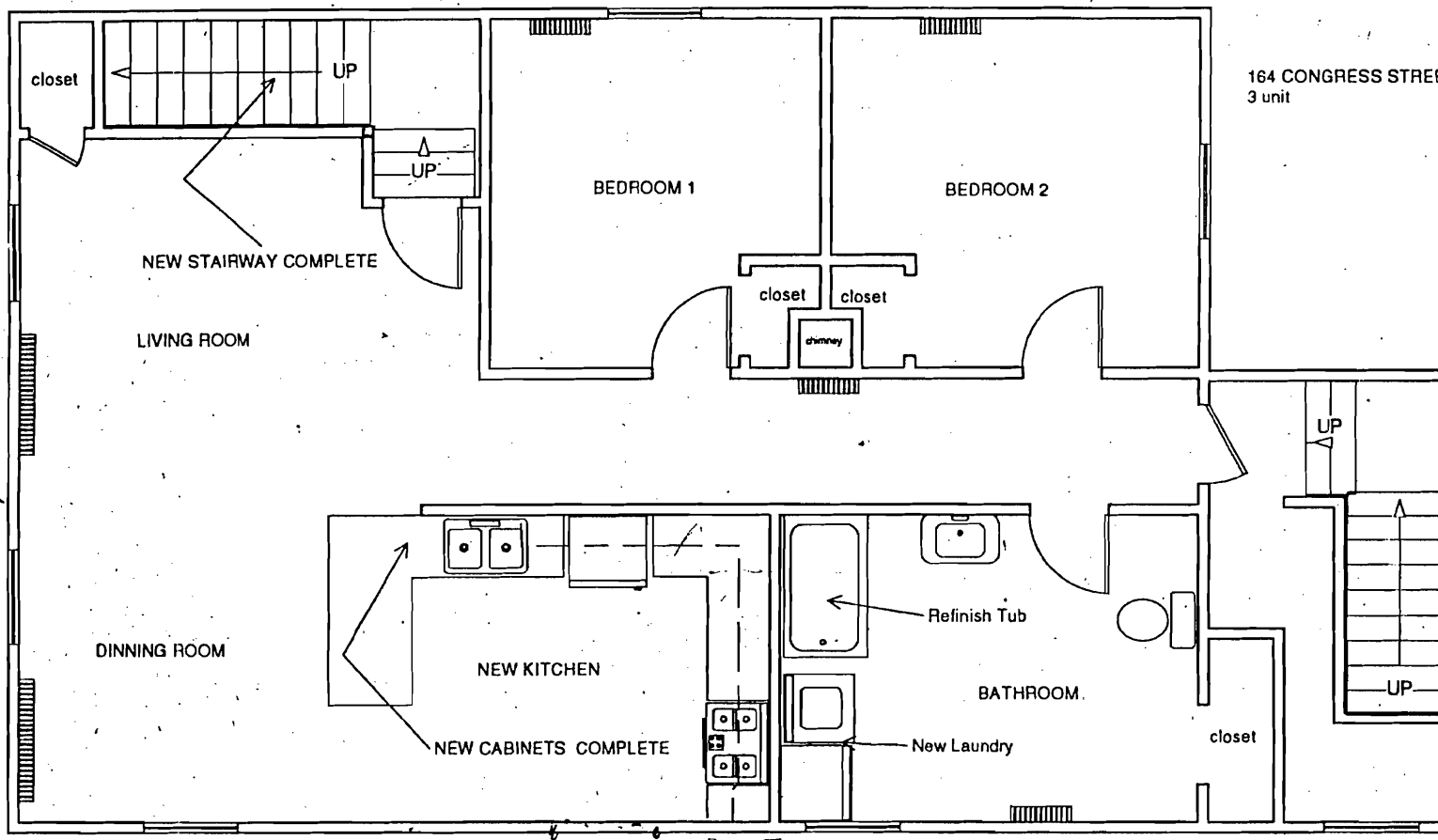
5-99 checked interior wall studs
& partitions framing OK, rough
plumbing installed exits OK

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

- 10 Anna Becker
- 20 164 Congress St.
- 30 Rehab 3rd floor to make an apt.
- 40 Add Kitchen - Dinette - Liv. Rm.
- 50 Re-furbish Bath - 2 BR
- 60 100 Amp service & new wiring
- 70 Replace mansard siding
- 80 Repair loose ceilings
- 90 Repair trim
- 100 Add new stairs to 3rd floor front
- 110 Add heat (Hot H₂O) to 3rd floor
- 120 Pour 3" slab in basement

28435
17965

164 Congress St
3 unit



164 CONGRESS STREET
3 unit

2.6-

38'