



Permitting and Inspections Department  
Michael A. Russell, MS, Director

### General Building Permit Application

Project Address: 113 Newbury Street Suite 105

Tax Assessor's CBL: 020 D013 001 Cost of Work: \$ 3000  
Chart # Block # Lot #

Proposed use (e.g., single-family, retail, restaurant, etc.): \_\_\_\_\_

Current use: Townhouse Past use, if currently vacant: \_\_\_\_\_

- Commercial
- Multi-Family Residential
- One/Two Family Residential

Type of work (check all that apply):

<input type="checkbox"/> New Structure	<input checked="" type="checkbox"/> Fence	<input type="checkbox"/> Change of Ownership - Condo Conversion
<input type="checkbox"/> Addition	<input type="checkbox"/> Pool - Above Ground	<input type="checkbox"/> Change of Use
<input type="checkbox"/> Alteration	<input type="checkbox"/> Pool - In Ground	<input type="checkbox"/> Change of Use - Home Occupation
<input type="checkbox"/> Amendment	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Radio/Telecommunications Equipment
<input type="checkbox"/> Shed	<input type="checkbox"/> Replacement Windows	<input type="checkbox"/> Radio/Telecommunications Tower
<input type="checkbox"/> Demolition - Structure	<input type="checkbox"/> Commercial Hood System	<input type="checkbox"/> Tent/Stage
<input type="checkbox"/> Demolition - Interior	<input type="checkbox"/> Tank Installation/	<input type="checkbox"/> Wind Tower
<input type="checkbox"/> Garage - Attached	<input type="checkbox"/> Replacement Tank Removal	<input type="checkbox"/> Solar Energy Installation
<input type="checkbox"/> Garage - Detached		<input type="checkbox"/> Site Alteration

Project description/scope of work (attach additional pages if needed):

Iron gate at unit entrance set back from the face of the building.

Applicant Name: 113 Newbury Street LLC Phone: (413) 244-9092

Address: 2730 Transit Road Email: Joedasco@comcast.net  
West Seneca, NY 14224

Lessee/Owner Name (if different): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor Name (if different): LMC Light Iron, Inc Phone: (207) 793-9957

Address: ERose Rd Limerick, ME 04048 Email: \_\_\_\_\_

*I hereby certify that I am the owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter on areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.*

Signature: [Signature] Date: 8-23-17

This is a legal document and your electronic signature is considered a legal signature per Maine state law.

**Review of this application will not begin until the permit payment is received. This is not a permit. Work may not commence until the permit is issued.**

389 Congress Street/Portland, Maine 04101/ <http://portlandmaine.gov> /tel: (207) 874-8703/fax: (207) 874-8716