Form # P 04 DISPLAY THIS CAR	D ON PRINCIPAL FRONTA	AGE OF WORK
Please Read		
Attached	PERMIT	Permit Number: 070882
This is to certify thatHALEY KATHERINE C &	NIEL T	PERMIT ISSUED
has permission toRepair fire damage in Left h	na unit Kite n & Be om 2nd or	
AT _166 CUMBERLAND AVE	– – – – – – – – – – – – – – – – – – –	D02001 JUL 2 3 2007
provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.	ne and of the sences of	his permit shall comply with all the City of Portland regulating and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	N ication inspection must gin and when permission procu- bore this to ding or to thereo land or constructionsed-in. H R NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept Health Dept Appeal Board		nie Bouk 7/23/17
Other Department Name	ALTY FOR REMOVING THIS CARD	Director - Building & Inspection Services
PEN	ALI I FUR REMOVING I HIS CARD	

1

City of Portland, Maine - I	Building or Use	Permi	t Application	<b>1</b>	Permit No:	Issue Date:		CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						021 E002001				
Location of Construction:	n: Owner Name:			Ov	wner Address:			Phone:		
166 CUMBERLAND AVE	HALEY KAT	HERIN	E C & DANIE	ANIE 19A EASTERN PROMENADE						
Business Name:	Contractor Name	:		Contractor Address: Phone		Phone				
	James McDona		nald		96 Quaker Ridge	Road Case	0	2079393803		
Lessee/Buyer's Name	Phone:			Permit Type:			Zone:			
				A	Alterations - Com	mercial			BIb	
Past Use:	Proposed Use:			Permit Fee: Cost of Wo		Cost of Work	K: CE	EO District:	7	
2 Unit Apartment w/ commercial		ent w/ commercial on		\$60.00 \$4,000.00		1				
lst flr	1st flr - Repair			FIRE DEPT: Approved INSP		INSPECT	CTION:			
		hen & Bedroom 2nd		Denied		Use Group	1000 RZ/B Type: SB BC-2003 1110 AMB 7/22/07			
10.1	va - 1st floor	الم مرس	2.1		; 1			í 	<u>ح</u>	
	- 2 AUC	bur (	ashisia y)				TB	C-200	2	
Proposed Project Description:		_					:	And.	16-1-	
Repair fire damage in Left hand u	unit Kitchen & Bedro	oom 2nd	d floor	Signature: Signature: Signature:			1.2.101			
				PE	DESTRIAN ACTIV	THES DIST		<i>.</i> D.)	<b>(D</b> .)	
			Action: Approved Approved w/Conditi			nditions	Denied			
				Si	gnature:		Da	ate:		
Permit Taken By: Date Applied For:				Zoning Approval						
ldobson 0	07/20/2007									
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		ws Zoning Appeal			Historic Preservation			
						Not in District or Landmark				
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellar	Miscellaneous		Does Not Require Review			
<ol> <li>Building permits are void if work is not started within six (6) months of the date of issuance.</li> </ol>			ood Zone		Conditional Use		Requires Review			
False information may invalidate a building permit and stop all work		Subdivision					Approved			
		Si	te Plan		Approved	i	1	Approved w/	Conditions	
PERMIT ISSUET		Maj	Minor MM				i L	Denied		
reading to		Date: 7/20/07 Ash		~4		ABM.				
	AND	Date: T	F] 20 [ 07 A	50	Date:		Date	:		

## 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

DATE

City of Portland, Maine - Bui	ilding or Use Permit	Ļ	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel:	(207) 874-8703, Fax: (	207) 874-871	6 07-0882	07/20/2007	021 E002001		
Location of Construction:	Owner Name:		Owner Address:	Phone:			
166 CUMBERLAND AVE	HALEY KATHERINI	E C & DANIE	19A EASTERN P				
Business Name:	Contractor Name:		Contractor Address:		Phone		
	James McDonald		696 Quaker Ridge Road Casco		(207) 939-3803		
Lessee/Buyer's Name	Phone:		Permit Type:				
		Alterations - Commercial					
Proposed Use:		Propos	sed Project Description:				
2 Unit Apartment w/ commercial on 1st flr - Repair fire damage in Left hand unit Kitchen & Bedroom 2nd floor Repair fire damage in Left hand unit Kitchen & Bedroom 2nd floor							
Dept: Zoning Status:	Approved with Condition	s Reviewei	: Ann Machado	Approval D	ate: 07/20/2007		
Note:					Ok to Issue:		
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.							
2) The legal use of this property is retail on the first floor and two dwelling units above.							
Dept: Building Status: A	Approved with Condition	s Reviewer	: Jeanine Bourke	Approval D	ate: 07/23/2007		
Note:					Ok to Issue:		
<ol> <li>Separate permits are required for Separate plans may need to be su</li> </ol>							
2) This permit is approved with the through fire separation assemblie	•	-		n interior walls only.	Any penetrations		

PERMIT ISSUED	
JUL 2 3 2007	
CITY OF PORTLAN	)

## **General Building Permit Application**



If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

				Left	uelunt.		
Location/Address of Construction: /64	-166 CU	LMGPRLAD Square Footage of I	Ar. i	>700	04/01		
Total Square Footage of Proposed Structure		Square Footage of L	ot				
Apt 500 Sq.		2107					
Tax Assessor's Chart, Block & Lot	Owner: DA	niel I, HALEY	JR+	Telepho	ne:		
Chart# Block# Lot#	KATHORNE CHARLEY JTS			207.772-8984			
21 E 2							
Lessee/Buyer's Name (If Applicable)		me, address & teleph		Cost Of			
		T. HAVEY JR	\ \	Work: <b>\$</b>	der -		
		ERN PRO, neroll.		Fee: <b>\$</b> (	led		
	PUNTIAN	PUNTANDD. ME 04101					
			(	C of O Fee:	\$		
Current legal use (i.e. single family)	RTMENTY R	and tim Al	sove st	DRE			
Proposed Specific use: <u>Readed House</u>	<del></del>						
Is property part of a subdivision?	If	yes, please name					
Project description:				/			
Repair of FIRE I	Amy	on 12' 2x	4 Wal	I teeili	y Keppen		
	V						
Contractor's name, address & telephone:	JAMES A	CIDONAN) 6	96 QuA	les PSiz	y RA		
Contractor's name, address & telephone: JAMES MCDONAW 696 QUALEN BIX, RD Who should we contact when the permit is ready: DAN I. HALEY TA							
Mailing address:	Phone: $2^{\circ}$	7-931-3803					
0							
					10°		
Please submit all of the information out			cation Ch	eckligt?	$\sim$		
Failure to do so will result in the automa	atic denial of	your permit.					
In order to be sure the City fully understands the ful	ll scope of the pr	oject, the Planning and	Developpe	nt Departme	nt may		
request additional information prior to the issuance of a permit. For further information visit us on the at the second							
www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874 8703							
			$\langle 0, \langle \rangle$	22	1824		
I hereby certify that I am the Owner of record of the nam							
been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this utrisdiction. 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 all areas covered by this permit at any re	easonable hour to e	enforce the provisions of	he codes app	licable to this I	permit.		
	4.		,	$-\underbrace{\checkmark}_{i}$			
Signature of applicant:	Nely/	/ Dat	e: 7/19	7/07			
	17V			ı			
	/						

This is not a permit; you may not commence ANY work until the permit is issued.

164-166 CUMBERAND. 21 E 2 - 14'-K. Felm BedRoom 1 12'5' what hat 16"OC 12's"WALL S'High 2X4 *O*.: 1/2" Sheet Rock . . Ceiling 1/2" Sheet Rock R-30 F.G. Insulation 2.. 3 2×4 wall an outside Interior wall. F ea Lin = 1'