

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 070882

Please Read Application And Notes, If Any, Attached

This is to certify that HALEY KATHERINE C & DANIEL T. PERITS/Iam Mc

has permission to Repair fire damage in Left hand unit Kitchen & Bathroom 2nd floor

AT 166 CUMBERLAND AVE

PERMIT ISSUED

JUL 23 2007

CITY OF PORTLAND

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must given and when permission procured before this building or part thereof lashed or closed-in. HOURS NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____ Department Name

Jamie Burke 7/23/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

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

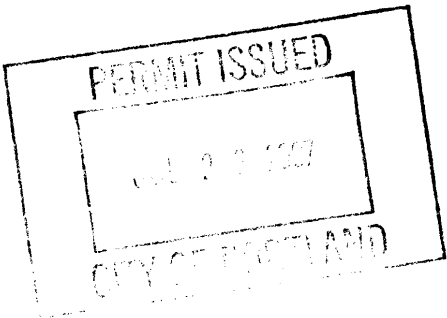
Permit No: 07-0882	Issue Date:	CBL: 021 E002001
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Location of Construction: 166 CUMBERLAND AVE	Owner Name: HALEY KATHERINE C & DANIE	Owner Address: 19A EASTERN PROMENADE	Phone:
Business Name:	Contractor Name: James McDonald	Contractor Address: 696 Quaker Ridge Road Casco	Phone: 2079393803
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B1b

Past Use: 2 Unit Apartment w/ commercial on 1st flr	Proposed Use: 2 Unit Apartment w/ commercial on 1st flr - Repair fire damage in Left hand unit Kitchen & Bedroom 2nd floor <i>legal use - 1st floor retail - 2nd floor (assessing)</i>	Permit Fee: \$60.00	Cost of Work: \$4,000.00	CEO District: 1
Proposed Project Description: Repair fire damage in Left hand unit Kitchen & Bedroom 2nd floor		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R2/B Type: SB <i>IBC-2003</i>	
		Signature:	Signature: <i>JMB 7/23/07</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 07/20/2007	Zoning Approval		
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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..	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 <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>ARM</i>
	Date: <i>7/20/07 ARM</i>	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	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE