

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

SECTION

PERMIT

Permit Number: 071070

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME

This is to certify that SOMERO SCOTT /Home Owner
has permission to Foundation repair back left corner of building
AT 151 CUMBERLAND AVE

SEP - 4 2007

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 be given and when permission is procured before this building or part thereof is closed or closed-in. 24 HOUR 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

[Handwritten Signature]
9/4/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

*Close-out.
Final O.K.
Scan also*

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1070	Issue Date:	CBL: 022 J028001
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Location of Construction: 151 CUMBERLAND AVE	Owner Name: SOMERO SCOTT	Owner Address: 13 ATLANTIC ST	Phone:
Business Name:	Contractor Name: Home Owner	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Foundation Only/Commercial	Zone: R-6

Past Use: 3 unit residential	Proposed Use: 3 unit residential - Foundation repair back left corner of building <i>legal use: 3 du. (per 1957 assessment cad)</i>	Permit Fee: \$30.00	Cost of Work: \$700.00	CEO District: 1
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Proposed Project Description: Foundation repair back left corner of building	FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i> Signature:	INSPECTION: Use Group: <i>R-2</i> Type: <i>SB</i> <i>IBC 2003</i> Signature:
	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied Signature: _____ Date: _____	

Permit Taken By: ldobson	Date Applied For: 08/31/2007	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"/> <i>OK w/conditions</i> Date: <i>8/31/07</i> <i>ASH</i>	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 Date: _____	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 checked="" type="checkbox"/> Denied <i>ASH</i> Date: _____
	SEP - 4 2007		

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