

COMMENTS

12/18/76 Building has been removed +
demolished
lot has been leveled off
with gravel. *mmw*

022-L-003
96-1120

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

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

Location of Construction: 44 Oxford St		Owner: Bell, George/City of Prld ?		Phone:		Permit No: 961120	
Owner Address:		Leasee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Roland Chabot		Address: 949 Minot Ave Auburn, ME 04210		Phone: 782-6042		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED NOV 12 1996 CITY OF PORTLAND </div>	
Past Use: 2-fam		Proposed Use: Vacant Land		COST OF WORK: \$ 14,300.00.			
Proposed Project Description: Demolish Building		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:		Signature: _____ Date: _____	
						PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
Permit Taken By: Mary Gresik		Date Applied For: 31 October 1996		Signature: _____ Date: _____		Zoning Approval: R-2 022-L-003 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 <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

1. This permit application doesn't 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..

B Dump # 15269 } Single Axle
 15268
 15271
 15270

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 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: Bonnie Chabot		ADDRESS: 949 MINOT AVE		DATE: 31 October 1996	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: ROLAND CHABOT OWNER				PHONE: 1-207-782-6042	

- 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: **10/31/96**
KT for DT

CEO DISTRICT 1