

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

PERMIT ISSUED

Permit No: 02-0144	Issue Date: FEB 26 2002	CBL: 026 C005001
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Location of Construction: 54 Chestnut St	Owner Name: Mardigan Edward L	Owner Address: 11 Bayview Ter CITY OF PORTLAND	Phone:
Business Name: n/a	Contractor Name: Land Tech Dev.	Contractor Address:	Phone:
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Alterations - Multi Family	Zone: R-6

Past Use: Multi Family / 3 Apartments	Proposed Use: Multi Family / Renovate Unit #1; Expand bathroom using 2' x 4', and 1/2" sheetrock	Permit Fee:	Cost of Work: \$8,000.00	CEO District: 1
<i>3 D.U. OK per micro fiche</i>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-2 Type: 5B <i>BOA 1999</i>	

Proposed Project Description:
 Renovate & Expand Bathroom
*not considered A New D.U.
 see conditions*

Signature: *[Signature]* Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 02/15/2002	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
	Date: <i>2/24/02</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

02 0140

All Purpose 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.

Location/Address of Construction: <u>56 Chestnut St Unit #1</u>		
Total Square Footage of Proposed Structure <u>24x24</u>	Square Footage of Lot -	
Tax Assessor's Chart, Block & Lot Chart# <u>26</u> Block# <u>C</u> Lot# <u>5</u>	Owner: <u>Ed Mardigan</u>	Telephone:
Lessee/Buyer's Name (If Applicable) <u>26-C-5 3520</u>	Applicant name, address & telephone:	Cost Of Work: \$ <u>8000</u> Fee: \$
Current use: <u>HOUSING</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Renovate existing apartment</u> Project description:		
Contractor's name, address & telephone: <u>Land Tech Dev. 797-9531</u>		
Who should we contact when the permit is ready: <u>Dipietro</u>		
Mailing address: <u>221 Virginia St. Port. Me. 04103</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>831-7914 cell</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>2-15-02</u>
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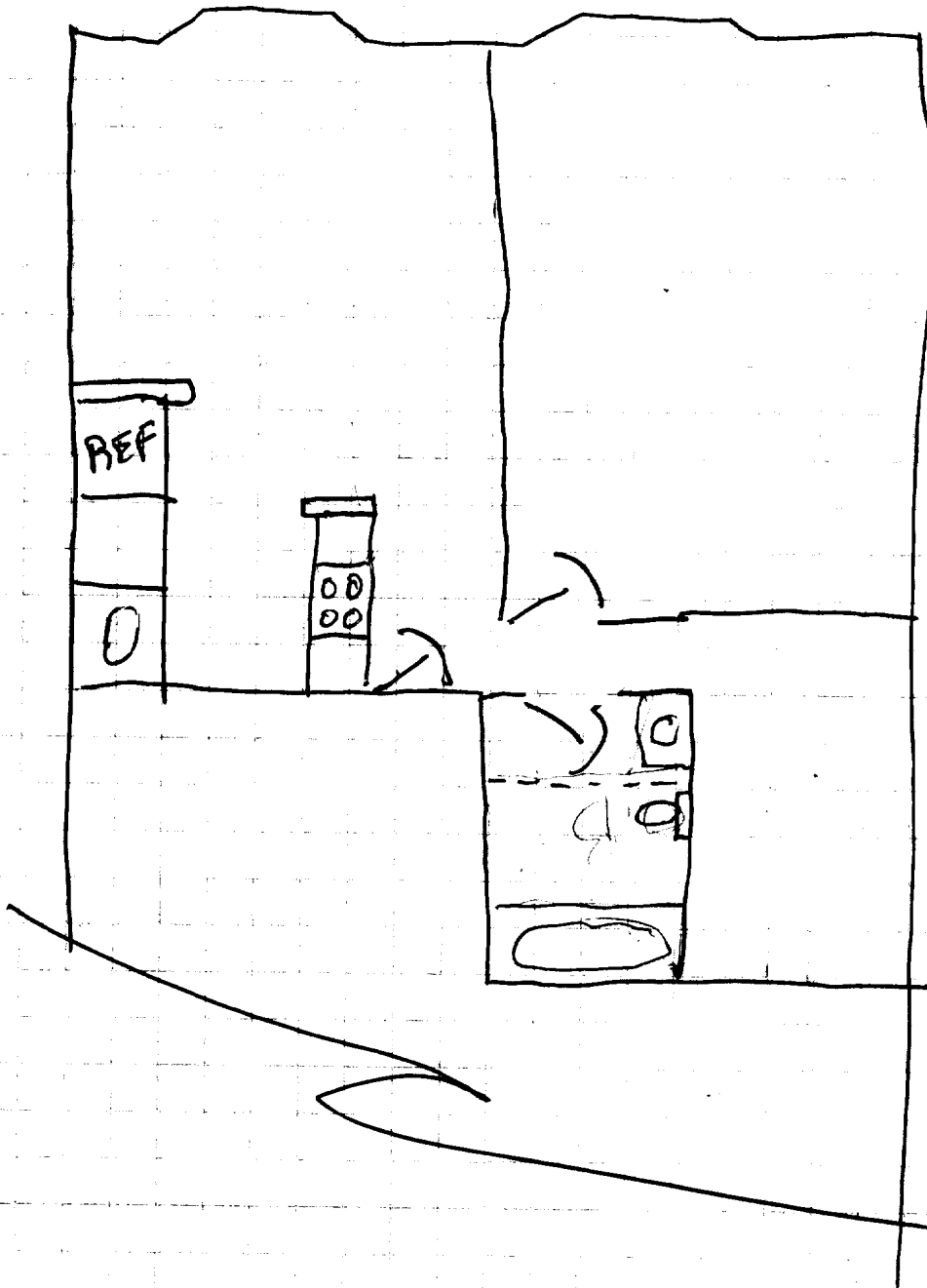
This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

1ST FLOOR FRONT UNIT
56 CHESSNUT ST

SEETROCK UNIT
EXPAND BATHROOM
ESTIMATED COST \$8,000

OWNER

MADIGAN SAME AS STORE



2x4
1/2" sheetrock
New PL Fixtures

Application ID Number: 2-0144

Department: Zoning

Status: Approved with Conditions

Reviewer: Marge Schmuckal

Comments: 54 Chestnut St

Approval Date: 02/21/2002

Issue Date: 02/20/2002

OK to Issue Permit Name: Marge Schmuckal Date: 02/21/2002

Conditions Section:

This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

This property shall remain a three (3) family dwelling. Any change of use shall require a separate permit application for review and approval.

This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.

Create Date: 02/19/2002 By: gg Update Date: 02/21/2002 By: mes

2/28/05
done