

26-0-19

PERMIT

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

Permit No: 02-0483	Issue Date:	CBL: 026 0019001
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Location of Construction: 229 Cumberland Ave	Owner Name: Toothaker Crandall K	Owner Address: Po Box 4271 CITY OF PORTLAND	Phone: 329 6007
Business Name:	Contractor Name: Applicant	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	Zone: B-2

Past Use: Multi Family 227 3 legal units 229 5 legal units	Proposed Use: Multi Family 227 shall remain 3 legal units 229 shall remain 5 legal units	Permit Fee: \$303.00	Cost of Work: \$40,000.00	CEO District: 1
Proposed Project Description: Interior renovations on doors, bathrooms and smoke detectors.		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R2 Type: 5B 5/29/02 Signature: [Signature]	
		Signature: [Signature]	Signature: [Signature]	
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: jodinea	t Applied For: 13	Zoning Approval		
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<p>1 This p application does preclude the ()s from applicable § at Federal E les</p> <p>2 g permits include it g, : electrical</p> <p>3 di permits are if work is t t (6) th of the date of False information d t t t work..</p>	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"/> Date: 5/15/02	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: [Signature]	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: [Signature]
	<p>No change of use approved</p>		

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

712962 close in plumbing/framing. ok. to proceed ja

5/3/05 completed.

