City of Portland, Maine - H	tanumg or Osc	ւ բեւուս Խիհո	cation [Permit No:	Issue Date;	CBL:	
389 Congress Street, 04101 Te		3, Fax: (207) 87		08-0135		027 C0	1007W
21 CHESTNUT ST 7W	Owner Name: SAWYER N	ANOVO		ner Address:		Phone:	
Business Name:	Contractor Nam			CHESTNUT ST	#7W		
	David Nowli		i	5 Oxford St Portl	and	Phone 20783176	607
Lessee/Buyer's Name	Phone:	<u> </u>		mit Type:	and	20/031/0	Zone:
			1	lterations - Multi	Family		3-3
Past User	Proposed Use:		,	mit Fee: C	ost of Work:	CEO District:	7
Chestnut Street Lofts 7 W	Chestnut Stre tenatnt Fit-up	et Loft 7W - Inter for unit 7 W	···	\$495,00 RE DEPT: (17)	\$40,000.00		
	ondos wit	1 Comme	برنياو		Denied Use	PECTION: Group: RZ/M TBC 2-0	
Próposed Project Description: Interior tenatnt Fit-up for unit 7 W	, on The	1st (1001	~ 5e	echan		<u></u>	~! !:
metror window i trup tos unit i in	# 06- 6	1447)	<u> </u>	ESTRIAN ACTIVI	FIES DISTRICT	ature: 7m	<u>2/27/08</u>
			Acti	ion Approved			Denied
			Sign	nature:	_	Date:	
	Applied For: /15/2008			Zoning A	pproval		
1. This permit application does n	ot preclude the	Special Zone of	r Reviews	Zoning A	ppest	Historie Prese	rvation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		. Variance		ot in District or Landman	
Building permits do not includ septic or electrical work.	e plumbing,	☐ Weiland		Miscellaneo	ns	Does Not Require Review	
 Building permits are void if we within six (6) months of the da False information may invalidate. 	te of issuance.			_ Conditional	ĺ	Requites Review	
permit and stop all work		Subdivision		Interpretation	n	Approved	
		Site Plan		Approved		Approved w/Co	onditions
· ·	:	Maj Minor	MM Ch	Denied		Denied)
1140		Date:	nauje	Date:	1.	Date:	\supset
1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		$\overline{}$	440	[[]"" ———	<u>-</u>	7	<u>/</u> i
		CERTIFIC					
nereby certify that I am the owner on nave been authorized by the owner risdiction. In addition, if a permit f all have the authority to enter all ar th permit.	io make inis applic or work described	ation as his autho in the application	rízed ageni is issued	t and I agree to co	nform to all a	pplicable laws of	this
GNATURE OF APPLICANT	1000 1100	ADD	RESS		DATE	PHONE	
SPONSIBLE PERSON IN CHARGE OF V							

City of Portland, Maine Inspections Division Inspection Schedule

	t.# e Insp	Sch. Date: ParcelNo Contact:	Appl. Type Inspector	Schedule Type Comments	Appl#:	Location
1		04/24/2008 027 C01007W	Building Permit	Close-in/Elec./Plmb./Framing	08-0135	21 CHESTNUT ST
		SAWYER NANCY C	Michael Collins	rough in - Paul 229-6213 Late as CODE NEEDED TO ENTER TH	possible MUS E BUILDING	ST CALL DAVID 831-7697
1	Υ	03/17/2009 027 C01007W	Building Permit	Certificate of Occupancy/Final	08-0135	21 CHESTNUT ST
		SAWYER NANCY C	Michael Collins	Final Inspection, Certificate of O	ccupancy - Da	vid Nowlin. #831-7697. Unit
1	Υ	03/30/2009 027 C01007W	Building Permit	Certificate of Occupancy/Final	08-0135	21 CHESTNUT ST
	;	SAWYER NANCY C	Michael Collins	ALL PERMITS FOR 7W would lill out gave him a punch list has con		831-7697 David we have beer

Total Listed: 3

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY)

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

Footing/Building Location Inspection: Prior to pouring concrete Re-Bar Schedule Inspection: Prior to pouring concrete Foundation Inspection: Prior to placing ANY backfill Framing/Rough Plumbing/Electrical: Prior to any insulating or drysvalling Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point. Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES. CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED Signature of Applicant/Designee... Signature of Inspections Official Building Permit #:

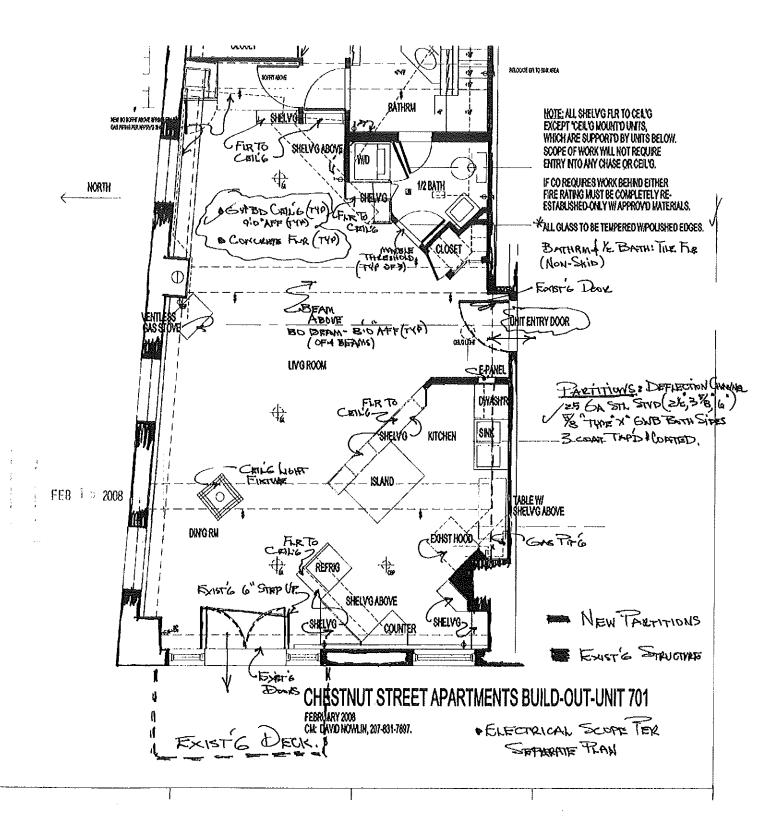
General Building Permit Application

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.

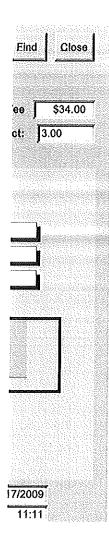
nereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and at I have been authorized by the owner to make this applicable was of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's otherized representative spall have the authority to external areas covered by this permit at any reasonable hour to enforce the		_	
Total Square Footage of Proposed Structure (Area DOO 54 Tax Assessor's Chart, Block & Lot Chatt# Block# Lot# Applicant 'must he owner, Lessee on Buyer' Telephone: Address 215 Oxford 55. City, State & Zip Fortham ME O410 Lessee/DBA (If Applicable) Owner (if different from Applicant) Work: \$ 40,000 Name NAN SAMMER. Address	Location/Address of Construction:	THAT STREET LOFTS - UM	701 7W
Tax Assessor's Chart, Block & Lot Chatt# Block# Lot# Address 2-15	Total Square Footage of Proposed Structure/A	rea Square Footage of Lot	
Address 215 Oxford St. City, State & Zip Tortham, ME 04101 Lessee/DBA (If Applicable) Owner (If different from Applicant) Name NAN SAWYER. Address City, State & Zip Portham, ME 04101 If vacant, what was the previous use? Cuttent legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Shape Shap		Applicant *must he owner, Lessee or Buy	rer' l'elephone:
Address 2.15 OxFOXD ST. City, State & Zip POXTLAMD, ME ONE Correct legal use (i.e. single family) If vacant, what was the previous use? Cuttent legal use (i.e. single family) If vacant, what was the previous use? City, State & Zip POXTLAND, ME Total Fee: \$ 495 Contract of a subdivision? Internation Internation If yes, please name If yes, please name Contractor's name: LANTO NONLIN Address: 2.15 OXFOXD ST. City, State & Zip TOXTLAND, ME Contractor's name: LANTO NONLIN Telephone: Who should we contact when the permit is ready: LANTO NONLIN Telephone: Please submit all of the information outlined on the applicable Checklist, Pailure to do so will result in the automatic denial of your permit, order to be sure the City fully understands the full scope of the project, the Planning and Development Department ay request additional information sylic the Inspections Division on-line at www.portlandmaine.gen, or stop payled information insist the Inspections Division on-line at www.portlandmaine.gen, or stop payled information insist the Inspections Division on-line at www.portlandmaine.gen, or stop payled inspections insist to make this application as his/ber authorized agent. I gare to conform to all applicable work and at 1 have been authorized by the owner of record of the named property, or that the owner of record authorized by the owner to make this application as his/ber authorized agent. I gare to conform to all applicable work fine for the cody applicable. In addition, if a permit for work exercibed in this application is issued, I certify that the Code Official's theories depresentative full have the authority to eye of all areas covered by this permit at any reasonable hour to enforce the the inspections of the cody applicable to this greys? Date: Date: Date: Date: The Bolton Total Fee: \$ 495 Total Fee	Chatt# Block# Lot#	Name T ANT Name	-705
City, State & Zip PORTLAND, ME ONID Lessee/DBA (If Applicable) Owner (if different from Applicant) Name NAN SAWYER. Address City, State & Zip PORTLAND, ME Total Fee: \$ 49.5 Cuttent legal use (i.e. single family) If vacant, what was the previous use? NA Proposed Specific use: Is property part of a subdivision? No If yes, please name Project description: NTERIOR FIT—Ut, PLUMBS & ELECT & BOLLER ROUGH WITHOUT Address: LID X FORD ST. City, State & Zip TORTLAND, ME ONID Telephone: Who should we contact when the permit is ready: Naling address: Naling address: Naling address: Naling address: Naling address: OND ST. Please submit all of the information outlined on the applicable Checklist, Failure to do so will result in the automatic denial of your permit, order to be sure the City fully understands the full scope of the project, the Planning and Development Department ay request additional information syicit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections in Source of the project, the Planning and Development Department ay request additional information prior to the issuance of a permit. For further information or to download, species of its form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections in Source of the proposed work and at I have been authorized by the owner of record of the named property, or that the owner of record authorize the proposed work and at I have been authorized by the owner to make this application as his/ber authorized agent. I garee to conform to all applicable was of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's thorized representative Applicable to this green? Date: Date: Date: Date: Date: FEB 08	97 C 10		W). 7107
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If vacant, what was the previous use? Proposed Specific use: Sproperty part of a subdivision? If yes, please name Project description: INTERIOR FIT—Ut, PLUMBE ELECT & BOWEN WORTH WITHER Contractor's name: LAVID NOMEN ELECT & BOWEN WORTH WITHER TOWN FORD ST. City, State & Zip TORTLAND WE ONION Who should we contact when the permit is ready: LAVID NOW		City, State & Zip POZILAND, ME	_
Proposed Specific use: Is property part of a subdivision? No If yes, please name Project description: INTERIOR FIT—UT, PLUME ELECT A BOWER WORTH The property part of a subdivision? Address: LITERIOR FIT—UT, PLUME ELECT A BOWER WORTH Telephone: Note the Exploration of the permit is ready: DAVID Telephone: Please submit all of the information outlined on the applicable Checklist, Pailure to do so will result in the automatic denial of your permit. A order to be sure the City fully understands the full scope of the project, the Planning and Development Department any request additional information prior to the issuance of a permit. For further information or to download, so the property was additional information with the Inspections Division on-line at www.postlandmain.gov, or stop by the Inspections ivision office, room 315 City Hall or call 874-8703. Percept certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and at I have been authorized by the owner to make this application as is such careful and in this application is issued. Ligate to conform to all applicable who of the project of the permit for work described in this application is issued. Lectify that the Code Official's thorized representative Mall have the authority to exter all areas covered by this permit at any reasonable hour to enforce the ovisions of the code applicable to this permit.			<u> </u>
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Contractor's name: David Nonline Address: 215 XFORD ST. City, State & Zip Tortland Mt Offol Telephone: 207-831-7637 Who should we contact when the permit is ready: David Notatial Telephone: Mailing address: 215 XFORD ST Please submit all of the information outlined on the applicable Checklist, Pailure to do so will result in the automatic denial of your permit. The order to be sure the City fully understands the full scope of the project, the Planning and Development Department any request additional information prior to the issuance of a permit. For further information or to download, eagles of its form and other applications visit the Inspections Division on line at www.portlandmine.gov, or stop by the Inspections insists of office, room 315 City Hall or call 874-8703. Thereby certify that I am the Owner of record of the named property, or that the owner of record green to conform to all applicable as of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's theorized representative stall have the authority to ever all areas covered by this permit at any reasonable hour to enforce the ovisions of the code applicable to this permit. Date: 15 FB O8	Proposed Specific use:	- SHOPE TO I PEDRI	W · ONIT
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ay request additional information prior to the issuance of a permit. For further information or to download sogles of its form and other applications visit the Inspections Division on line at www.portlandmaine.gov , or stop by the Inspections visits on office, room 315 City Hall or call 874-8703. Thereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and at I have been authorized by the owner to make this application as his/ber authorized agent. I agree to conform to all applicable was of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's otherwise depresentative shall have the authority to exter all areas covered by this permit at any reasonable hour to enforce the invisions of the codes applicable to this permit. Date: Date: Possible 1.5 P	and the second of the control of the second	Call annua a Calina manina pina Dia antina and	Davidan was t Danish
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This is not a permit; you may not commence ANY work until the permit is issue

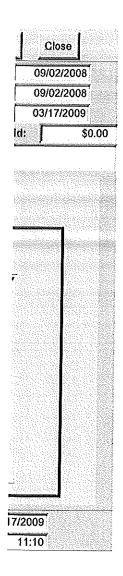
City of Portland, Maine - Bu	llding or Use Permit	į.	Permit No:	Date Applied For:	CBL;
389 Congress Street, 04101 Tel:	· ·		16 08-0135	02/15/2008	027 C01007W
Location of Construction:	Owaer Name:		Owser Address:		Phone:
21 CHESTNUT ST 7W	SAWYER NANCY C		21 CHESTNUT S	T#7W	
Businesa Name:	Contractor Name:		Contractor Address:		Phone
	David Nowlin		215 Oxford St Por	tland	(207) 831-7697
Lessee/Buyer's Name	Phones		Permit Type:		
			Alterations - Mul		
Proposed Use:		Prop	sed Project Description:		
Chestnut Street Loft 7W - Interior te	natnt Fit-up for unit 7 W	Inte	rior tenatnt Fit-up fo	r unit 7 W	
			•		
Dept: Zoning Status:	Approved with Condition	8 Reviewa	r: Marge Schmucka	d Approval D	ate: 02/20/2008
Note:	-FF		II Mage Semination	. прротигь	Ok to Issue: 🗹
1) This is NOT an approval for an a	dditional dwalling unit	Von QUATT	IOT add swy addition	ol bloker continue	
not limited to items such as stove	s, microwaves, refrigerat	ors, or kitcher	sinks, etc. Without s	iai kitchen equipmer pecial approvals.	it including, but
 This property shall remain a 27 reuse shall require a separate perm 	esidential condominium v it application for review a	vith commere nd approval.	al uses on the 1st flo	or (permit #06-0492)	. Any change of
This permit is being approved on work.	the basis of plans submit	ted. Any dev	iations shall require a	separate approval b	efore starting that
Dept: Building Status: A	Approved with Conditions	Reviewe	r: Tom Markley	Approval D	ate: 02/27/2008
Note:	••				Ok to Issue: 🗹
Separate permits are required for Separate plans may need to be su					
 Application approval based upon and approrval prior to work. 	information provided by	applicant. An	y deviation from app	roved plans requires	separate review
Dept: Fire Status: A	approved with Conditions	Reviewe	r: Capt Greg Cass	Approval Da	nte: 02/21/2008
Note:	-pp	100110110	er cupi dieg cuss	**	Ok to Issue: 🗹
Non-combustable construction of	Fikia etaratura vaanissa -1	 	to be Man and to the		OK to issue: and
The Fire alarm and Sprinkler syst Compliance letters are required.	ems shall be reviewed by	a licensed co	ntractor[s] for code c	ompliance.	



State Id	10594	City Permit Id	2008-8097	Sche	dule Invoicing	Add Save		
Туре	New Plumbi	ng		Inspe		Aud Save		
			1E+05					
Addr: CHESTNUT	ST	[21	GBL 027 C010	07W	Appl Date	04/15/2008 Min I		
Building Permit#	80135	Inspector		A	ppl Approval Date	04/15/2008 C Tra		
Status:	Closed	Unit:	District	1	Insp. Approval Date	03/17/2009		
	Other Per	mils Referenced						
Applicant Name;	David Robe	erts) Ov	/ner Name	: SAWYER NANC	Y C		
Mall Address:			Mall Address: 21 CHESTNUT S			ST # 7W		
City, State, Zip:		ME	City, State, Zip:		ip: PORTLAND, MI	PORTLAND, ME 04101		
Phone:			Ph	one:				
Structure Type	Multi-Family	7	Installation By		Master Plumber			
Site Eval, Date		Inspector						
GreatedBy Idol	oson	CreateDate	04/15/2008	ModBy	mc Mo	odDate 03/1		
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First Nam	e Alan		Middle C.		Last	Eger		Suffix T	***************************************
4	\ddress:	12 Peninsu	la Drive		Phone	(207) 856	-9979		
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Other Permits Refe	renced				∉Add New	
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Company Name	Snyder Electric	Í				
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First Name Paul Address:	P.O. Box 1333	Phor			Suffix	
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