Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

5.0	LAI IIIO OAND	011 1 1111101	AL INSINIA	NOL OI WORK	
	CITY	OF PO	RTLAND		
Please Read Application And		_	ECTION	PERMIT ISSUED	
Notes, If Any, Attached		PERM		Permit Number: 060066	
This is to certify that	MALONE JOSEPH M & A	MARIF ITS/Monagh		JAN 3 0 2005	
has permission to	Renovations to apartment #2	nd floor		CITY OF PORTLAND	
AT 41 MIDDLE ST			028 P02	022001	
of the provision	ne person or persons as of the Statutes of and an annual triangles.	ine and of the	ances of the	nis permit shall comply wi the City of Portland regula and of the application on f	atir

Apply to Public Works for street line and grade if nature of work requires such information.

this department.

fication of inspers in must a nandwar en permit on proculture this liding or at there is ed or cosed-in the JR 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. Crcq Cr488 1-25-06

Health Dept.

Appeal Board

Other

DepartmentName

PENALTY FOR REMOVINGTHIS CARD

City of Portland, M		O			Permit No	Issue Date	7 (33 H) 000	1
389 Congress Street, 0			8, Fax: (06-0066			PD22001
Location of Construction:				I	wner Address:	ST JAN 3	O 2220	
				30 HIGHLANI	191	0 2000 Phone	-	
Business Name:	iness Name: Contractor Name:				ontractor Addres	AND DESCRIPTION OF THE PERSON NAMED IN	Portland 2077	742682
Lessee/Buyer's Name	Monaghan Woodworks, Inc. essee/Buver's Name Phone:				ermit Type:	Dr Santa	Fuldand 72077	Zone:
Lessee/Buyer's Name	[*	none.			Alterations - N	··· ·· Julti Eamily		B 24
Doct Hoo	<u> </u>			L	Alterations - IV	utti Familiy		
Past Use: Residential Residential/ R			novations to \$381.00 \$40,			00.00	1	
Residential		apartment #2 (J. 61 o. a.)		INSPECTION:		
	legal vsc:	restaurant Idwellige	1stfloor unit - 2ndfloor nit - 3ndfloor		Denied Use Group: Type:			
		Idualling v.	nit -	3,26 / 150.	see Con	<i>shittons</i>	生 ノクス	2/06
Proposed Project Description					See Co	end.		
				S	ignature:	2 CA-58	Signature: (11 Clayer
				P	EDESTRIAN AC	PIVITIES DIS	TRICT (P.A.D.)	· · · · · · · · · · · · · · · · · · ·
				I I	Action: App	roved Ap	proved w/Conditions	Denied
				2	Signature:		Date:	
Permit Taken By:	Date Appl	lied For:		•	Zoniı	ng Approva	al	
Permit Taken By: ldobson	Date Appl 01/13/2				Zoniı	ng Approva	al 	
ldobson	01/13/2	2006	Spec	cial Zone or Reviews		ng Approva		Preservation
ldobson	01/13/2	2006 reclude the	l	cial Zone or Reviews		ning Appeal	Historic	Preservation District or Landmark
l. This permit applicat Applicant(s) from n	01/13/2 nion does not preeting applicate o not include plu	2006 reclude the ble State and	Sh		S Zo	ning Appeal	Historic Not in I	
This permit applicat Applicant(s) from m Federal Rules. Building permits do septic or electrical v. Building permits are	ion does not princeting application on include pluwork.	reclude the ble State and umbing,	☐ Sho	oreland	Zo	ning Appeal	Historic Not in I Does No	District or Landmark
This permit applicat Applicant(s) from n Federal Rules. Building permits do septic or electrical v	ion does not princeting applicate onot include pluwork. e void if work is of the date of any invalidate a	reclude the ble State and umbing, as not started f issuance.	Sho	oreland	Varia Misco	ning Appeal nce	Historic Not in I Does No	District or Landmark of Require Review s Review
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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

City of Portland, Maine	- Building or Use Permi	Permit No:	Date Applied For:	CBL:				
389 Congress Street. 04101	Tel: (207) 874-8703. Fax: (716 06-0066	01/13/2006	028 P022001				
Location of Construction:	Owner Name:	Owner Address:	Owner Address:					
41 MIDDLE ST	MALONE JOSEPH M	30 HIGHLAND ST	30 HIGHLAND ST					
Business Name:	Contractor Name:		Contractor Address:	Contractor Address:				
	Monaghan Woodwork	s, Inc.	100 Commercial St	100 Commercial St Suite 311 Portland				
Lessee/Buyer's Name	Phone:		Permit Type:		•			
			Alterations - Multi	i Family				
Proposed Use:		Prop	osed Project Description:	ed Project Description:				
Residential/Renovations to ap	partment #2 (2nd floor)	Rer	ovations to apartment	#2 (2nd floor)				
Dept: Fire Sta	tus: Approved with Condition	s Review	er: Cptn Greg Cass	Approval Da	ite: 01/24/2006			
Note:	ripproved with condition	is iteview	er. Epin Greg Cuss		Ok to Issue:			
1) Fire escape stairs shall con	nply with Chapter 7.2.8 of NFP	A 101						
2) Provide product description	on of Urethane Foam to be use.							

All Purpose Building Permit Application

If you or the property owner owes **real estate a** personal property taxes **or** user charges on any property within **the** City, payment arrangements must be made before permits **d** any **kind are** accepted.

Location/Address of Construction: 41 MIDDLE STREET					
Total Square Footage of Proposed Structu 905 Square Feet	Square Footage of Lot N/A				
Tax Assessor's Chart. Block & Lot Lot# O28 P022 001	SLPH M & ANN MARIE JTS ID STRLLT, PORTLAND, ME 04100	3	Telephone: 207-774-2996		
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: MARK MUELLER ARCI 107-774-9057 100 COMMERCIAL STR SUITE 105 PORTLAND, MAINE 04			ost Of ork: \$ 41,000.00 e: \$ 390.00	
Current use: RESIDENTIAL If the location is currently vacant, what was prior use: N/A Approximately how long has it been vacant: N/A Proposed use: RESIDENTIAL Project description: INTERIOR RENOVATION OF EXISTING APARTMETER CITY OF PORTUNIA 3 2005 Contractor's name, address & telephone: MONAGHAN WOODWORKS INC. Who should we contact when the permit is ready: MIKE MONAGHAN					
Contractor's name, address & telephone: MONAGHAN WOODWORKS INC. Who should we contact when the permit is ready: MIKE MONAGHAN Mailing address: 100 COMMERCIAL STREET SUITE 311 PORTLAND, MAINE 04101 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: 207-775-2683					

IF THE REQURED 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 APROVE 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. Tagree 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 for all areas covered by this permit at any reasonable

			V	
Signature & applicant:	KR	ones.	-	Date: JANUARY 10,2006
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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