

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
**CITY OF PORTLAND**

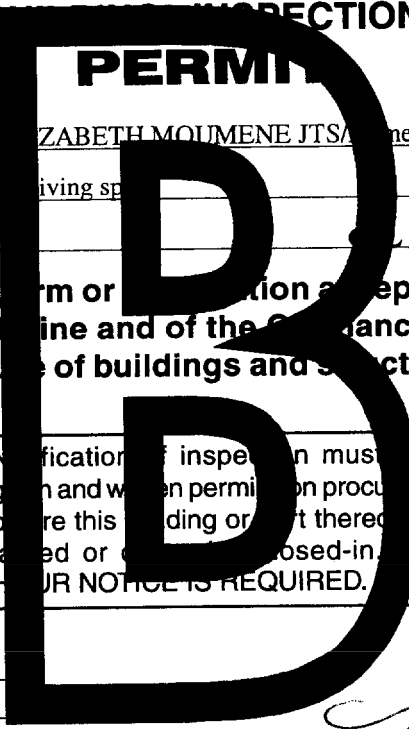
Please Read Application And Notes, If Any, Attached

**BUILDING INSPECTION**  
**PERMIT**

PERMIT ISSUED  
Permit Number: 060203  
FEB 14 2006  
CITY OF PORTLAND

This is to *certify* that MOUMENE MISSOUM & ZABETH MOUMENE JTS/ one o  
has permission to Remove 2 walls to create more living space  
AT 150 MIDDLE ST #03A 029 A00103A

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.



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

Notification of inspection must be given and when permission procured before this building or part thereof is started or closed-in. 24 HOUR 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

*[Signature]* 2/14/06  
Director - Building & Inspection Services

**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: 06-0203	Issue Date:	CBL: 029 A00103A
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Location of Construction: 150 MIDDLE ST #03A	Owner Name: MOUMENE MISSOUM & ELIZA	Owner Address: 150 MIDDLE ST #3A	Phone: 607-965-3457
Business Name:	Contractor Name: Home owner	Contractor Address: CITY OF PORTLAND Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	Zone:

Past Use: Residential / Condo	Proposed Use: Residential / Condo remove 2 walls to create more living space	Permit Fee:	Cost of Work: \$300.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>12-2</i> Type: <i>5</i> <i>IBC 2003</i>	

Proposed Project Description:  
Remove 2 walls to create more living space

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action  Approved  Approved w/Conditions  Denied

Permit Taken By: dmartin	Date Applied For: 02/14/2006	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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: <i>2/14/06</i>	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <i>Interior only</i> <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>2/14/06</i>
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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 Permit

<b>Permit No:</b> 06-0203	<b>Date Applied For:</b> 02/14/2006	<b>CBL:</b> 029 A00103A
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<b>Location of Construction:</b> 150 MIDDLE ST #03A	<b>Owner Name:</b> MOUMENE MISSOUM & ELIZA	<b>Owner Address:</b> 150 MIDDLE ST #3A	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Home owner	<b>Contractor Address:</b> Portland	<b>Phone</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Multi Family	

<b>Proposed Use:</b> Residential / Condo remove 2 walls to create more living space	<b>Proposed Project Description:</b> Remove 2 walls to create more living space
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**Note:**

**Ok to Issue:**

**Note:**

**Ok to Issue:**

- 1) Separate permits are required for any electrical, plumbing, or heating.



# 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.

Location/Address of Construction: 150 Middle St, 3-A Portland 04101		
Total Square Footage of Proposed Structure NA		Square Footage of Existing 1220
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#	Owner: Missum Elizabeth Mowene	Telephone: (617) 965-3457
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Cost Of Work: \$ 300 Fee: \$ C of O Fee: \$
Current Specific use: Residence		
If vacant, what was the previous use?		
Proposed Specific use: Living Room enlargement		
Project description: Removing 2 walls to open up living room space. The walls are now load bearing & the ceiling are original joist beams the floors above. The original support beams are intact & support the load		
Contractor's name, address & telephone: self		
Who should we contact when the permit is ready: Elizabeth Mowene		
Mailing address: 150 Middle St, #3-A Portland ME 04101		Phone: (617) 965-3457

Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections office, room 315 City Hall or call 874-8703

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: EM Mowene	Date: 2/10/06
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This is not a permit; you may not commence ANY work until the permit is issued.

check # 295 - enclosed

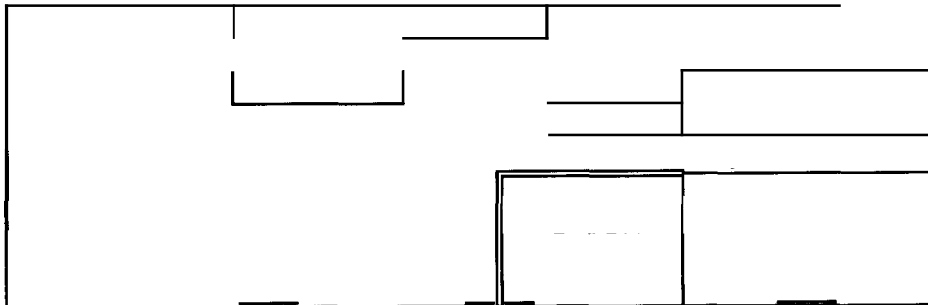
10-Feb-06

Site Drawing for Permit to remove 2 non-load bearing walls

150 Middle Street, #3-A, Portland, ME 04101

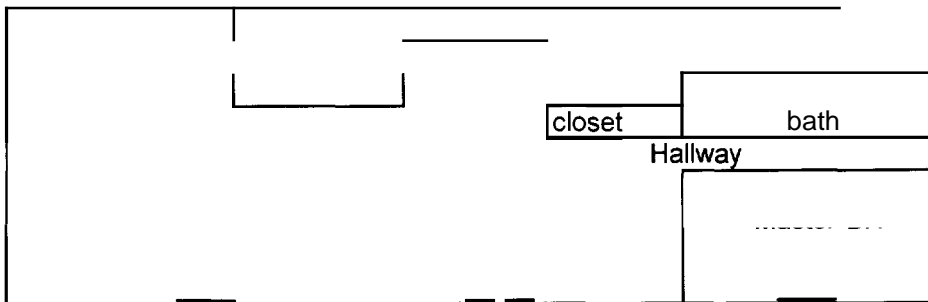
**NOT TO SCALE**

**Floor Plan**



- double window
- x supportpost
- || walls to be removed

**Floor Plan with walls removed**



We, Missoum Moumene and Elizabeth Moumene, owners of this condo, request a permit to remove two non-load bearing walls so that the front double window will not be split between two rooms and so that the living room space will be enlarged.

The condo's ceilings are drop ceilings that were installed when this building was converted into housing units and they are several feet below the original ceilings. The original support beams were left intact and they carry the load. There are several other units in the building that have removed other walls and/or raised ceilings.

Please contact us at 617.965.3457 with any questions you may have.