General Building Permit Application

Reviewed for Code Compliance
Inspections Division
Approved with Conditions
Date: 08/27/14

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.

Address/Location of Construction: 164 MIDDLE ST.		
Total Square Footage of Proposed Structure:	NA.	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	**Applicant Name:** JOE DELANEY Address P.O. BOX 1276 City, State & Zip PORTLAND ME 04101	Telephone: 775.2696 Email: joe@whipplecallender.com
Lessee/Owner Name: MICHAEL MASTRONARDI (if different than applicant) Address: 164 MIDDLE ST. City, State & Zip: PORTLAND MAINE 04101 Telephone & E-mail: 838.0092 michael FM@maine.rr.com	**Contractor Name:** (if different from Applicant) 164 REALTY Address: G+E Roofing City, State & Zip: 669 RIVERSIDE DR. AUGUSTA 04330 Telephone & E-mail: 622-9503 slapointe@geroofing.com	Cost Of Work: $_____ C of O Fee: $_____ Historic Rev $ 50 **Total Fees : $**_____

Current use (i.e. single family) BUSINESS
If vacant, what was the previous use? N.A.
Proposed Specific use: NO CHANGE
Is property part of a subdivision? NO If yes, please name _____
Project description: REMOVE EXISTING SKYLIGHTS, INFILL SKYLIGHT OPENING & INSTALL NEW MEMBRANE ROOF

Who should we contact when the permit is ready:	MICHAEL MASTRONARDI - 838.0092
Address:	164 MIDDLE ST.
City, State & Zip:	PORTLAND ME.
E-mail Address:	michael FM@maine.rr.com
Telephone:	838.0092

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division 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: [signature] **Date:** 7/31/14

This is not a permit; you may not commence ANY work until the permit is issued.