City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						Permit No:Issue Date:07-0220		CBL: 031 J002	CBL: 031 J002313	
Location of Construction:Owner Name:313 CHANDLERS WHARFGRISWOLD ST			Owner Address: FEPHEN L & MARGA PO BOX 660			Phone:				
Business Name: Contractor Na Todd Sawyer					Contractor Address: 131 Orchard Hill Rd. Dresden			Phone 2077378283		
Lessee/Buyer's Name Phone:					Permit Type: Alterations - Multi Family			·	Zone:	
	Use: lti-Residential Condo Unit 3		Proposed Use: Multi-Residential Condo Unit 3.13 - Interior renovations - Removel of interior walls & New floor plan		Pe	ermit Fee: \$1,320.00	Cost of Wo \$130,0		CEO District: 1	
					Apploved			PECTION: e Group: Type		
Proposed Project Description: Interior renovations - Removel of interior walls & New						CDESTRIAN ACTIVITIES DISTRICT				
				Signature:			Date:			
Permit Taken By:Date Applied For:ldobson03/05/2007			Zoning Approval							
1. This permit application does not preclude the			Special Zone or Reviews		s Zonii	Zoning Appeal		Historic Preservation		
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		U Varianc	Variance		Not in District or Landma		
2.	2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscella	Miscellaneous		Does Not Require Revie		
 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 		Flood Zon		Conditional Us			Requires Review			
		Subdivision			Interpretatio		Approved			
			Site Plan		Approved			Approved w/Condition		
			Maj 🗌 Mino 🗌 MM 🗌] Denied			Denied		
		Date:			Date:		D	Date:		

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 APPLICAN	ADDRESS	DATE	РНО
DESDONSIDI E DEDSON IN CHADCE OF WORK TIT		DATE	PHO

Location of Construction: 313 CHANDLERS WHARF	Owner Name: GRISWOLD STEPHEN	Owner Name: GRISWOLD STEPHEN L & MARGA		Owner Address: PO BOX 660		Phone:	
Business Name:	Contractor Name: Todd Sawyer			Contractor Address: 131 Orchard Hill Rd. Dresden		Phone 2077378283	
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Multi Fam	ily		Zone:	
	us: Approved with Condition	ns Reviewer	: Marge Schmuckal	Approval Da		05/2007	
· · · · · · · · · · · · · · · · · · ·	an additional dwelling unit.		2	1 1	Ok to Issu t including, b		
2) This property shall remain a review and approval.	single family condominium d	lwelling. Any cl	nange of use shall require	a separate perm	nit application	n for	
3) This permit is being approve	ed on the basis of plans subm	itted Any dev	iations shall require a sep	arate approval	before starti	ng that	

 Dept:
 Building
 Status:
 Approved with Conditions
 Reviewer:
 Tom Markley
 Approval Date:
 03/08/2007

 Note:
 Ok to Issue:
 V

1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.

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SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
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