

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-1399	Issue Date: 1 5 2001	CBL: 033 C009001
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Location of Construction: 49 Hanover St	Owner Name: Stetson Edward Heirs	Owner Address: Po Bx 1093 OF PORTLAND	Phone:
Business Name: n/a	Contractor Name: Garys Trucking Co., Inc.	Contractor Address: 56 Blackpoint Road Scarborough	Phone: 2078835454
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Demolitions	Zone:

Past Use: Single Family	Proposed Use: Demolition of Single Family	Permit Fee: \$96.00	Cost of Work: \$12,000.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied N/A	INSPECTION: Use Group: N/A Type: Signature: [Signature] Date: 11/15/01	

Proposed Project Description:
Demolition Single Family

Signature: [Signature] Date: 11/15/01

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 11/09/2001	Zoning Approval	
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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.. 	Special Zone or Reviews <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: 11/15/01 [Signature]	Zoning Appeal <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: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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

DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT Asst DATE 11/9/01

RECEIVED FROM Greys Trucking

ADDRESS 44 Harbour

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
1	Demo Permit		96.00
	CPB/33-C-9		
	44 Harbour		
	# 275-4		
<input type="checkbox"/> CASH <input checked="" type="checkbox"/> CHECK <input type="checkbox"/> OTHER		TOTAL	

RECEIVED BY 