	y of Portland, Mai Congress Street, 041		U				08-1310	Issue Dat	e:	045 E01	9001	
Location of Construction: Owner Name:				14. (201) 011 0110		_	Owner Address:			Phone:		
68	WINTER ST		PULASKI MICHAEL & AMY GRO			68	68 WINTER ST					
Bus	iness Name:		Contractor Nan	ne:		Co	ntractor Address	s:		Phone		
			Ocean Gate Plu	umbing	& Heating	21	Ridge Terrace	Drive Casco)	207418600	06	
Less	see/Buyer's Name		Phone:				r mit Type: Alterations - Dup	lex			Zone:	
Past	t Use:		Proposed Use:		-	Pe	rmit Fee:	Cost of Wo	rk: (CEO District:		
Duplex Dup			Duplex - add n	ew bath	person to 3rd		\$50.00	\$2,5	00.00	2		
			floor			FII	RE DEPT:	Approved	INSPEC			
								Denied	Use Gro	oup:	Type	
D												
	posed Project Description I new bathroom to 3rd					Signature: Si			Cianatur	Signature:		
		11001				_	PEDESTRIAN ACTIVITIES DISTI					
								_		Condition	Denied	
						A	ction Appro	ved App	proved w/	Condition	Dellied	
						Sig	gnature:			Date:		
Permit Taken By: Date Applied For							Zoning	Approva	l			
		/2008										
1.	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		•	Special Zone or Rev		iews	<u> </u>			Historic Preservation		
			able State and	Shoreland			☐ Variance	e		Not in District or Lands		
2.	Building permits do not include plumbing, septic or electrical work.			Wetland			☐ Miscella	nneous		Does Not Re	equire Revie	
3.	within six (6) months of the date of issuance.			☐ Flood Zon			Condition Condition	onal Us		Requires Rev	view	
	False information mappermit and stop all wo	a building	☐ Su	bdivision		☐ Interpre	etatio		Approved			
				Site Plan			Approv	ed		Approved w/Condition		
				Maj 🔲 Mino 🔲 MM			☐ Denied		[☐ Denied		
				Date:			Date:		Date:			
I ha juris shal	ereby certify that I am the veel authorized by saliction. In addition, if I have the authority to uch permit.	the owner to a permit for	o make this appli r work described	med proication a	as his authorize application is is	he p d ag suec	ent and I agree t l, I certify that th	to conform to	to all app cial's aut	olicable laws horized repre	of this sentative	
SIG	SNATURE OF APPLICAN	ſ			ADDRES	S		DATE	<u> </u>	P	НО	

Business Name: Contractor Name: Ocean Gate Plumbing & Heating 21 Ridge Terrace Drive Casco 2074186006	Location of Construction: 68 WINTER ST	Owner Name: PULASKI MICHAEI	L & AMY GRO	Owner Address: 68 WINTER ST		Phone:	
Pept: Zoning Status: Approved with Conditions Reviewer: Marge Schmuckal Approval Date: 10/17/200 Note: Ok to Issue: ✓ 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District. 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals. 3) This property shall remain a two (2) family dwelling. Any change of use shall require a separate permit application for review and approval. 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. Dept: Building Status: Pending Reviewer: Tom Markley Approval Date: Ok to Issue: □ Comments: 10/20/2008-tm: called Amy for more detailed info on framing for new bathroom and also went to her office but she is out.		Contractor Name:		Contractor Address:			
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	Note:	us: Pending	Reviewer	: Tom Markley	Approval Da		: 🗆
10/20/2008-tm: Amy stopped by and provided details.	Note: Comments:					Ok to Issue	: 🗆
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	Note: Comments: 10/20/2008-tm: called Amy for recommendation of the comments	more detailed info on framir				Ok to Issue	: 🗆
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	Note: Comments: 10/20/2008-tm: called Amy for recommendations and the second	more detailed info on framir				Ok to Issue	

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	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK TIT		DATE	PHO