Cit	y of Portland, Main	e - Build	ling or Use Pe	ermit A	Application	Per	rmit No:	Issue Dat	e:	CBL:	
	Congress Street, 0410		0				03-1462			045 E02	3001
Location of Construction: Owner Name:						Owner Address:				Phone:	
203 Spring St Soule George &				ķ 2		203 \$	203 Spring St #1				
Business Name: Contractor Na				ie:		Contr	actor Address	s:		Phone	
Chaos Manag			ement		26 Noyes Street Portland			207774020	08		
Lessee/Buyer's Name Phone:						Permit Type:				•	Zone:
				Alte			Alterations - Dwellings				
Pas	t Use:		Proposed Use:			Permit Fee:		Cost of Work: CI		CEO District:	
_				ebuild rear stairs		\$48.00		\$3,0	00.00	00 2	
					FIRE DEPT:		Approved	INSPE	PECTION:		
						_		Denied	Use Gr	Ise Group: Type	
							_	_ Domea			
Pro	posed Project Description	ı <b>:</b>				1					
reb	ouild rear stairs					Signature:		Signatu	Signature:		
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (I	T (P.A.D.)	
						Action: Approved Approved w				v/Condition Denied	
						Signa	ture:			Date:	
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval					
tm	nm	11/26	/2003			Zolinig Approvai					
1.	This permit application does not p		preclude the	Spec	ial Zone or Revi	ews	Zoning Appeal			Historic Preservation	
1.		Applicant(s) from meeting applicable State and		Shoreland			☐ Variance			Not in District or Landm	
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			☐ Does Not Require Revie		
3.				☐ Flood Zon			Conditional Us			Requires Review	
False information may invalidate a building permit and stop all work			Subdivision			☐ Interpretatio			Approved		
				Site Plan			Approved			Approved w/Condition	
				Maj Minor MM[			Denied			☐ Denied	
				Date:			Date:		D	Date:	
					CERTIFICATIO						
I ha juri: shal	ereby certify that I am the tive been authorized by the sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit fo	o make this appli r work described	cation a	as his authorized application is iss	l agen ued, I	t and I agree to certify that the	to conform the code office	o all ap cial's au	plicable laws of thorized repres	of this sentative
SIC	GNATURE OF APPLICAN				ADDRESS	S		DATE	2	P	НО

Location of Construction:	Owner Name:	Owner Address:	Phone:	
203 Spring St	Soule George &	203 Spring St #1		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Chaos Management	26 Noyes Street Portland	2077740208	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		Alterations - Dwellings		

Dept: Note:	Historical	Status: Not Applicable	Reviewer:	William B. Needelman	Approval Date: Ok to Issue: ✓
Dept: Note:	Zoning	Status: Approved	Reviewer:	Tammy Munson	Approval Date: 11/26/2003 Ok to Issue: ✓
Dept: Note:	Building	Status: Approved	Reviewer:	Tammy Munson	Approval Date: 11/26/2003 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	РНО
			_
RESPONSIBLE PERSON IN CHARGE OF WORK. TIT		DATE	PHO