Form # P 04	DISPLAY	THIS CA	ARD OI	N PRIN	<b>CIPAL</b>	FRON	TAGE	OF V	VORK	•	
Please Rea Application A Notes, If An Attached	nd	Cľ			INDECT			t Number:			
This is to cert	ify that <u>OBAC</u>	HELDER PROP	PERT	C /Bill Simp	son			PE	RMITI	SSUED	<b>1</b>
has permissio	n toRebuild	l egress in same	foot							<u>~ 2007</u>	 
AT _779.CON	IGRESS ST					. 047	A015001		JAN -	4 2007	
of the pro	that the pers ovisions of th truction, main artment.	e Statutes	of <b>I</b> ine	and of t		ances c	of the <b>C</b> i	ty of P	ortiand		ting
Apply to Public Works for street line and grade if nature of work requires such information.				fication of insperion muses n and ween permit on proceed or this olding or part there is ed or the process of the process of the process of the process JR NOTICE TS REQUIRED.						ore this bu	
OTH Fire Dept. (> Health Dept Appeal Board	<u> </u>	ROVALS							01/0	3/07	
Other	Department Name						Director	- Building & Int	Spection Serv	ices	
		PE	ENALTY F	OR REM	OVING T	HIS CAR	D				
	(		n,O	ſΝ,	66					· · · · · · · · · · · · · · · · · · ·	

City of Portland, Mai	ne - Building or Use	Permi	t Applicatior	1 Per	mit No:	Issue Date:		CBL:	
389 Congress Street, 041	.01 Tel: (207) 874-870	3, Fax: (	(207) 874-871	6	06-1698			047 A0	15001
Location of Construction: Owner Nam				Owner Address:			Phone:		
779 CONGRESS ST O BACHI		DER PROPERTIES LL		PO BOX 6636					
Business Name:	Contractor Nam	Contractor Name:		Contractor Address:			Phone		
	Bill Simpson	Bill Simpson		P.O. Box 641 Freeport			2078656678		
Lessee/Buyer's Name	Phone:	Phone:		Permit Type:				Zone:	
				Alte	rations - Dw	ellings			626
Past Use:	Proposed Use:	roposed Use:		Permit Fee: Cost of Work: CE			O District:	7	
Residential 10 unit	Residential 1	Residential 10 unit rebuild egress in same footpriint			\$30.00	\$70	0.00	2	
	same footprii			FIRE DEPT: Approved INSPECT			ION:		
				Denied Use Group			): R-Z Type: 54		
				1			_	-00 1	~3
				See Conditions			I	Group: R-2 Type: 52 IBC 2003	
Proposed Project Description:				_ See Conditions Signature Green Canada Si		ب	-IA		
Rebuild egress in same foo	otprint		<b>`</b>	Signature Green CA-S Signature:					
Connected to pormit 06-0470 - legalization of Snonconforming units for a lohal of 10 units.			han of	PEDESTRIAN ACTIVITIES DISTRICT (P.A				.D.)	$\mathbf{i}$
Snorchforming units for a to halof			lounits. Action		Action: Approved Approved w/C		roved w/Cor	Conditions Denied	
				Signature:			Da	Date:	
Permit Taken By: Date Applied For:				Zoning Approval					
dmartin 11/27/2006									
1. This permit applicatio	n does not preclude the	Spe	Special Zone or Reviews		Zoning Appeal			Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		St	Shoreland					Not in District or Landmar	
			Shoreland Wisk by the Wetland place within Unic First		Miscellaneous			Does Not Require Review	
<ul> <li>septic or electrical work.</li> <li>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</li> </ul>			Flood Zone Subdivision		Conditional Use		Requires Review		
					Interpretation		Approved		
		Si	te Plan			ed		Approved w/	Conditions
	ISSUED	or	Minor MM		Denied			Denied	
1		Date:	12/4/06 AGAN		Date:		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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE