

Location, ownership and detail must be correct, complete and legible. Separate application required for every building. Plans must be filed wal, this application,

Application for Permit to Build

	Porlland, Me.,	May 20,	
g ∞ Torus	romano, me, sense establishe		1916
INSPECTOR OF BUILDING	•		
The undersigned he	reby applies for a penio	it to bolld, secon	ing to the following
Npecifications p	<u>.</u>		and district and the
Location128. Crant. Bt		19693	wa/,,,,,
Name of mechanic ist . B. A. Rocher	**************************************		
8 Name of architect is?			
	ina		
Proposed occupancy of building (purpose)? Ave.11. If a dwelling or tenement house, for how many families?. Are there to be stored in lower story?			······
The there to be stores in lower story?			2
A 2156 of 10th No. of feet fronts, with this is No. of feet	rearra MO. S	No atter ver	<i>), §</i> β6, ∫ € C
Size of his day, No. of feet front? 44 A No. of feet	rear ? 44	No. of lext deep	1 to
No. of stories, health,, three,	prear?	hrae	
	lighted part of the roo	Q.,,Qb.,X1 , ,,	, m
B Distance from lot lines, from?. 12 leet; slde?	ice condects aldered, in	55; Systeet: res	Para Marahat m
g Pirestop to be used?;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;			· ••••••••
Will the foundation be laid on earth, rock, or plies?		31311311111111111111111111111111111111	· · · · · · · · · · · · · · · · · · ·
If on piles, No. of rows?distance on	centres?	factorial	.,,,,,,,,, [©]
Diameter, top of ?,	er, bottow of }		
Size of posts?	tudding, Exe., i	Sed navor ve	ularn M
girlat	ooi.roiteru.Ext	3, 16, in. o	o gentera.
" floor timbers? 1st floor2x0;, 2d,	X8,	(1)	IJ
O. C. " " " " " " " " " " " " " " " " " "	16	.16,,,,,,	
Span " " " " " " 12 12	12	14	
Braces, how put in ?			Ω
Duilding, how framed? #1rto	apus established		Z
Underpinning, material of height of a	793 773 1071 6. 771	id with mortar?	:::::::::: Ž
Will the toof be tlat, pijch, mansard, or hip?	Material of ro	mekness or Mark ter or	o sroval
Will the building be heated by steam, furnaces, stoves or gr	uc)atema. Will	The flues by limit	, , , , , , , €
Will the building conform to the requirements of the law?	y.49,		······································
No. of brick walls?	aced?	and the	español de Santo e 🛱
Means of egress? Louvestatawaya.com			
If the building is to be occupied as a Tenem	ent House, give the	following part	liculars:
What is the height of collar or basement?		*******	
What will be the clear height of first story? 03			
State what means of egress is to be provided? Tour to			
and the Sales of the Commission of Sales			



City of Partland, Mainc

CERTIFICATE OF INSPECTION

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City of Portland, Maine - Bu	ilding or Use	Permit Applicat	ion [Permit No: Issue	e Date:	CBL:	
	9 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871					048 C004001	
128 Grant St	Owner Name:			Owner Address:		Phone:	
Business Name:	Adlex Lic			21 Rockaway Rd		207-797-5127	
n/a	Contractor Name:			Contractor Address:		Phone	
Lessee/Buyer's Name	Scott McCowen			21 Rockaway RD. Falmouth		2077975127	
n/a	n/a	Phone: n/a		nit Type:		Zone:	
Multi family / 6 units Legal NSC: 6 Dwelling Proposed Project Description;	units to make	ed a wall to 4 of the (a third bedroom to as already been done, permit.			INSPI	INSPECTION: Use Group: Type TC/(8/C4)	
Added a wall to 4 of the 6 units to m fact permit.	ake a third bedro	oom to each. After th	e Sign	ature 44 MN	Signat	tuk: UX	high
			Acti		Approved w		Denied
Permit Taken By: Date A	pplied For:		Sign	Signature:		Date:	
	0/2004			Zoning Appr	oval		
		Special Zone or Reviews		Zoning Appea	<u> </u>	Historic Preservation	
		Shoreland	Shoreland		#	Not in District or Landmark	
		☐ Wetland				☐ Does Not Require Review	
				Conditional Use		Requires Review	
			☐ Subdivision ☐ Interpretation ☐ Site Plan ☐ Approved		☐ Interpretation ☐ .		
						Approved willout	
	Maj Minor MM Denied Date: Date: Date:		la	Denied late:			
		, v.1	~ <i>[</i>		,, L		
nereby certify that I am the owner of a nave been authorized by the owner to isdiction. In addition, if a permit for all have the authority to enter all area ch permit.	work described	in the application is i	ne prop	and I agree to confor.	m to all ap	plicable laws of	this
GNATURE OF APPLICANT		ADDRES	3	DA	ГЕ	PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland. Maine	" Building or Use Permi	it	Permit No:	Date Applied For:	CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703. Fax:	u (207) 874-871	6 04-1402	09/20/2004	048 C004001	
Location of Construction:	Owner Name:	(207) 074 071				
128 Grant St	Adlex Llc		Owner Address;		Phone:	
Business Name:	Contractor Name:		21 Rockaway Rd		207-797-5127	
n/a	Scott McCowen		Contractor Address:	Phone		
Lessee/Buyer's Name	Phone:	The second secon	21 Rockaway RD. I	(207) 797-5127		
n/a			Permit Type:			
	IVA	n/a Alterations - Multi Family				
Proposed Use: 6 Units / Added a wall to 4 of the 6 units to make a third bedroom to each. Work has already been done, after the fact permit. Proposed Project Description: Added a wall to 4 of the 6 units to make a third bedroom to each. After the fact permit.						
Note: 1) Separate permits shall be re 2) This is NOT an approval for	tus: Approved with Condition equired for future decks, sheds or an additional dwelling unit. s stoves, microwaves, refrigera	, pools, and/or p	OT add any addition		Ok tobsue: 💆	
 This property shall remain approval. 	a six (6) family dwelling. Any	change of use	sinks, etc. Without s shall require a separa	pecial approvals. ite permit applicatio	n for review and	
 This permit is being approve that work. 	ed on the basis of plans submi	itted. Any devia	ntions shall require a	separate approval b	efore starting	
Dept: Building State	us: Pending	Reviewer:	(4)	Approval Date	p•	
Note:					Ok tobsue:	
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