



Permitting and Inspections Department  
Michael A. Russell, MS, Director

### General Building Permit Application

Project Address: 105 Sherman St Portland, Maine 04101

Tax Assessor's CBL: 048 002 5001 Cost of Work: \$ 3,000  
Chart # Block # Lot #

Proposed use (e.g., single-family, retail, restaurant, etc.): Multi-Family Residential

Current use: Rental Property Past use, if currently vacant: \_\_\_\_\_

- Commercial
- Multi-Family Residential
- One/Two Family Residential

Type of work (check all that apply):

<input checked="" type="checkbox"/> New Structure	<input type="checkbox"/> Foundation Only	<input type="checkbox"/> Change of Ownership - Condo Conversion
<input type="checkbox"/> Addition	<input type="checkbox"/> Fence	<input type="checkbox"/> Change of Use
<input type="checkbox"/> Alteration	<input type="checkbox"/> Pool - Above Ground	<input type="checkbox"/> Change of Use - Home Occupation
<input type="checkbox"/> Amendment	<input type="checkbox"/> Pool - In Ground	<input type="checkbox"/> Radio/Telecommunications Equipment
<input type="checkbox"/> Shed	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Radio/Telecommunications Tower
<input checked="" type="checkbox"/> Demolition - Structure	<input type="checkbox"/> Replacement Windows	<input type="checkbox"/> Tent/Stage
<input type="checkbox"/> Demolition - Interior	<input type="checkbox"/> Commercial Hood System	<input type="checkbox"/> Wind Tower
<input type="checkbox"/> Garage - Attached	<input type="checkbox"/> Tank Installation/Replacement	<input type="checkbox"/> Solar Energy Installation
<input type="checkbox"/> Garage - Detached	<input type="checkbox"/> Tank Removal	<input type="checkbox"/> Site Alteration

Project description/scope of work (attach additional pages if needed):

Tear down old staircase (exterior) and rebuild.

after fact

Applicant Name: Shereen Alghamen Phone: (207) 393 - 0163

Address: 780 Broadway South Portland 04106 Email: shereen@aquariuspm.com

Lessee/Owner Name (if different): \_\_\_\_\_ Phone: ( ) -

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor Name (if different): Ian Taber Phone: (207) 272 - 6556

Address: 548 Stevens Ave Portland, ME 04103 Apt 2 Email: iant.propainting@gmail.com

*I hereby certify that I am the owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.*

Signature: Shereen Alghamen Date: 3/1/17

**Review of this application will not begin until the permit payment is received. This is not a permit. Work may not commence until the permit is issued.**