

PERMIT ISSUED

# City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0567	Issue Date: JUL 22 2003	CBL: 055 B016017
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Location of Construction: 17 Blythe Ct		Owner Name: Filene Daniel R <i>-Susan</i>		Owner Address: 17 Blythe Ct <i>CITY OF PORTLAND</i>		Phone: 780-1962 287-7425	
Business Name:		Contractor Name: Applicant		Contractor Address: Portland <i>287-5509 Fax</i>		Phone:	
Lessee/Buyer's Name		Phone:		Permit Type: Additions - Dwellings			
Past Use: Condominium/SF		Proposed Use: Condominium/SF		Permit Fee: \$30.00		Cost of Work: (CEO District): \$370.12	
Construct an 8' x 10 Platform Free Standing Deck				FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>R3</i> Type: <i>5B Accessory</i>	
				Signature:		Signature: <i>JMB 7/22/03</i>	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		Signature: Date:	

Permit Taken By: gg	Date Applied For: 05/22/2003	Zoning Approval				
<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, 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> </ol>		<div>Special Zone or Reviews</div> <input type="checkbox"/> Shoreland <i>previous condo permit # 02-097</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Denied <i>OK with conditions</i> Date: <i>7/17/03</i>			<div>Zoning Appeal</div> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
		<div>Historic Preservation</div> <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <i>not visible</i> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>TO D.A. 7/17/03</i> Date: <i>7/21/03</i>				
		<p><i>7 p</i></p>				

## 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	

9-14-03

Inspected deck framing  
& lot lines clearly marked ok  
to continue ahead set-backs  
making

4/23/04 Finn ok to close go

# PLUMBING APPLICATION

Department of Human Sciences  
Division of Health Engineering

## PROPERTY ADDRESS

Town or Plantation	
Street Subdivision Lot #	
PROPERTY OWNERS NAME	
Last: KLEFF	First: SHIL
Applicant Name:	WALTER SPENCER
Mailing Address of Owner/Applicant (If Different)	1000 Main St, Portland, ME 04101

PORTLAND Date Permit Issued: 10/11/2002 \$ 1178.99 TOWN COPY 8184 L.P.I. # 0.736

Local Plumbing Inspector Signature: [Signature]

Double Fee Charged: ☐

## Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit

Signature of Owner/Applicant

date

## Caution: Inspection

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature

Date Approved

## PERMIT INFORMATION

### This Application is for

- ☒ NEW PLUMBING
- ☐ RELOCATED PLUMBING

### Type of Structure To Be Served:

- ☐ SINGLE FAMILY DWELLING
- ☐ MODULAR OR MOBILE HOME
- ☒ MULTIPLE FAMILY DWELLING
- ☐ OTHER-SPECIFY

### Plumbing To Be Installed By:

- ☐ MASTER PLUMBER
- ☐ OIL BURNERMAN
- ☐ MFG'D. HOUSING DEALER/MECHANIC
- ☐ PUBLIC UTILITY EMPLOYEE
- ☐ PROPERTY OWNER

LICENSE#

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 Number Type of Fixture
<b>OR</b> <b>HOOK-UP:</b> to an existing subsurface wastewater disposal system. <b>OR</b> <b>PIPING RELOCATION:</b> of sanitary lines, drains, and piping without new fixtures.	Hosebibb/ Sillcock	Bathtub (and Shower)
	Floor Drain	Shower (Separate)
	Urinal	Sink
	Drinking Fountain	Wash Basin
	Indirect Waste	Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.	Clothes Washer
	Grease/ Oil Separator	Dish Washer
	Dental Cuspidor	Garbage Disposal
	Bidet	Laundry Tub
	Other:	Water Heater
TRANSFER FEE [\$6.00]	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Fixtures (Subtotal) Column 2
		Total Fixtures
		Fixture Fee
		Transfer Fee
		Hook-Up & Relocation Fee
		Permit Fee (Total)

\* NO inspections done

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