Form # P 04	DISPLAY	THIS	CARD C	N PRINC	CIPAL F	RONTAGE	OF WC)RK	
Please Read Application And Notes, If Any, Attached		C	TTY (PERM	CTIO	N	it Number: 050	O464 2 6 2005	
This is to certify the		MARY JO /. Railing on ex		R			CITY O	F PORTLAN	<u> </u>
AT 214 BRACKETT ST					9	055 B041001			
provided the of the provi	-	-		or e and of the				comply wit	

Apply to Public Works for street line and grade if nature of work requires such information.

this department.

the construction, maintenance and use of buildings and sa

N fication inspect in must go hand with an permit on procubing or the third ding or the thereof is added to the second of the se

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

ctures, and of the application on file in

OTHER REQUIRED APPROVALS

Fire Dept. _______

Health Dept. ______

Appeal Board ______

Other ______

Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, Main	ıe - Buil	ding or Use l	Permi	t Application	l Peri	mit No:	Isocalia	MIK	SSI CEF:	2	L. I	
389 Congress Street, 0419	01 Tel: (2	207) 874-8703	, Fax:	(207) 874-8710	6	05-0464		p. 100.00 - 1 a. 4. 4. 100.000	055	B04	001	
Location of Construction: Owner Name:					Owner	Address:	16.7 8.4.6 N	['] 2 5	2005			
214 BRACKETT ST	SPURR MARY JO				RACKET T	2003						
Business Name:	Contractor Name:				214 BRACKETT ST # 1 AY 2 Contractor Address:							
		Jeff Girardin			Mere	Point Brun	sw ek y r	F.pn	2076	71525	: }	
Lessee/Buyer's Name	Phone:			Permit Type:						Zone:		
					Alter	rations - Dv	vellings				Kb	
Past Use:		Proposed Use:	-		Permit	t Fee:	Cost of Wor	k:	CEO Distri	ict:		
Single Family Home	angle Family Home/ rebuild			\$30.00 \$700.00				0 2				
Thee	Railing on existing deck			FIRE DEPT: Approved INS				SPECTION:				
						[Denied	Use G	roup: A	т (Гуре: 📆	
						L	Deliled	1	1 1/			
									\wedge			
Proposed Project Description:									1	200	1.1	
rebuild Railing on existing	deck				Signatu	ıre:		Signat	ure:	VIZ	Spaspy	
					PEDESTRIAN ACTIVITIES DISTRIC				CT (P.A.D())			
					Action	: Appro	oved Ap	proved w	//Conditions	□ I	Denied	
		_			Signati	ure:			Date:			
Permit Taken By:	_	pplied For:			Zoning Approval							
ldobson	04/25	5/2005	-		т				TT*.4*	D		
1. This permit application			Spe	cial Zone or Revie	ws Zoning Appeal				Historic Preservation			
Applicant(s) from mee	able State and Shoreland			Variance				Not in District or Landmark				
Federal Rules.	•											
2. Building permits do not include plumbing,				☐ Wetland ☐ Miscellaneous					Does Not Require Review			
septic or electrical work.												
3. Building permits are void if work is not started				ood Zone	Conditional Use				Requires Review			
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work												
				bdivision	Interpretation				Approved			
pormit and stop air wor	к.,			α	1204	odini.					**.*	
				te Plan	Pool	Approv	/ed		Approv	ed w/Co	onditions	
			Mail	√	_	□ Damiad			☐ Dominal			
			Maj	Minor MM	1	Denied		- 1	Denied	_		
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			Date: N	1000 5 2 3	0.1	Date:		1	Date:	pw		
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			(ERTIFICATIO	ON							
I hereby certify that I am the	owner of	record of the na				osed work i	s authorized	hy the	owner of i	record	and that	
I have been authorized by th												
jurisdiction. In addition, if a	permit fo	r work describe	d in the	application is is	sued, I	certify that	the code of	ficial's	authorized	repres	sentative	
shall have the authority to en	iter all area	as covered by su	ich perr	nit at any reason	able ho	our to enfor	ce the provi	ision of	f the code(s	s) appl	licable to	
such permit.												
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE			
DECDONGINE PROCESS	A D CE CE CE	IODIK FEET =								D		
RESPONSIBLE PERSON IN CH.	akge of W	OKK, ITILE					DATE			PHON	Ł	