Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PULL DING INSPECTION

PERM

Permit Number: 030772

Allactied	1 221111			
This is to certify that Fisk James L &/Owner				
has permission to Repair/Replace Railings	on Land 3rd Land			
AT 11 Cushman St	056 B016001			
provided that the person or person of the provisions of the Statutes of the construction, maintenance and this department.	of the line and or the Organices of the City of Portland regulating			
Apply to Public Works for street line and grade if nature of work requires such information.	ification if Inspection must be n and with an appearance of the process of the pr			
OTHER REQUIRED APPROVALS				
Fire Dept.				
Health Dept.				
Appeal Board	- Must Thoras			
Other Department Name	Director - Building & Inglection Services			
PE	NALTY FOR REMOVING THIS CARD (

City of Portland, Maine	- Building or Use	Permit Application	Permit No:	Issue Date:			
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-8716	6 03-0772		056	B016001	
Location of Construction:	Owner Name:		Owner Address:		Phone		
11 Cushman St	Fisk James L a		11 Brown St		985-0		
Business Name:	Contractor Name	:	Contractor Address:				
	Owner		Portland				
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
			Alterations - Multi Family			<u> KO</u>	
Past Use:	Proposed Use:		Permit Fee:	Cost of Worl	k: CEO Distr	ict:	
Multi Family/ 3 Units	Multi Family/	3 Units	\$30.00	\$20	0.00 3		
			FIRE DEPT:	Approved	INSPECTION;	2	
				Denied	Use Group:	Type S 3	
		C_{I}	_	_	一分/	1/1/13.	
legal-use: 3tz	muly D. U. f	les micro troh	2		\ \tag{\chi}		
Proposed Project Description:							
Repair/Replace Railings on 1	st and 3rd Floors		Signature:		Signature.	CXC	
	•		PEDESTRIAN ACT	IVITIES DIST	RICT (P.A.D.)	(
			Action: Approx	ved 🗌 App	roved w/Conditions	Denied	
	•		Signature:		Date:		
Permit Taken By: Date Applied For:			Zoning Approval				
gad	07/01/2003		2011116	, ixpprovu	•		
1. This permit application d	oes not preclude the	Special Zone or Review	ws Zoni	ng Appeal	Historic	Preservation	
Applicant(s) from meeting		Shoreland	☐ Varianc	e	☐ Not in I	District or Landmark	
Federal Rules.		pomereksem	- Ardyddu .				
2. Building permits do not include plumbing,		Wetland D.W.	Miscella	aneous	☐ Does N	Does Not Require Review	
septic or electrical work.	у.						
3. Building permits are voice	l if work is not started	☐ Flood Zone ☐ C		Conditional Use		es Review	
within six (6) months of the date of issuance.							
False information may in	_	Subdivision	☐ Interpre	tation	Approv	ed +·	
permit and stop all work.	•				W/2X	emphan	
		Site Plan	Approve	ed	Approv	ed w/Continues	
		Mai 🗔 Minos 🗔 M	Denied		Denied	V	
		Maj Minor Mor				$\Lambda \Lambda$	
		01-1-12	2		Date: TO	DIN	
		Date:	Date:		Date:		
		., .,			D And	MARS	
					V.1110	2/22	
					7	9/05	
					- 1	(
		CERTIFICATIO	ON				
I hereby certify that I am the o	wner of record of the na	med property, or that the	e proposed work is	authorized	by the owner of	record and that	
I have been authorized by the							
jurisdiction. In addition, if a p							
shall have the authority to ente such permit.	r all areas covered by su	ich permit at any reason	adie nour to enforc	the provis	sion of the code(s	s) applicable to	
such permit.							
****						<u> </u>	
SIGNATURE OF APPLICANT		ADDRESS		DATE		PHONE	

City of Portland, Ma	ine - Building or Use Permit	ţ	Permit No:	Date Applied For:	CBL:
•	101 Tel: (207) 874-8703, Fax: (03-0772	07/01/2003	056 B016001
Location of Construction:	Owner Name:	Owner Name:			Phone:
11 Cushman St	Fisk James L &		11 Brown St		() 985-6598
Business Name:	Contractor Name:	C	Contractor Address:		Phone
	Owner		Portland		
Lessee/Buyer's Name	Phone:	F	ermit Type:		
		L	Alterations - Mult	i Family	
Proposed Use:		Proposed	Project Description:		
Multi Family/ 3 Units		Repair	Replace Railings	on 1st and 3rd Floors	}
Dept: Historical Note: 1) w/exemption request	Status: Approved with Condition	s Reviewer:	Deborah Andrew		ate: 07/09/2003 Ok to Issue:
Dept: Zoning Note:	Status: Approved with Condition equires a separate review and approv		Marge Schmucka		ate: 07/07/2003 Ok to Issue: ✓
2) This is NOT an appronot limited to items su	val for an additional dwelling unit. uch as stoves, microwaves, refrigerat main a three (3) family dwelling. An	You SHALL NO ors, or kitchen si	T add any addition	pecial approvals.	
upprovar.					
Dept: Building Note:	Status: Approved with Condition	s Reviewer:	Mike Nugent	Approval Da	ate: 07/10/2003 Ok to Issue: ✓
1) Guards on First Floor See Section 3406. BO	ONLY can be 36 inches w/ opening CA 99	s less than 4 inch	es all others must	be 42"	

Application for Exemption From Building Code Railing Height Requirements

* Exemptions apply only for designated landmark structures and structures located in historic districts, per BOCA regulations. Requests need approval from both the Historic Preservation and Building Inspections divisions of the Planning Dept. 7.1.03 VANES PIGE Application Date **Applicant** II COSHMAN ST. Applicant's Mailing Address Address of Subject Property Contact Person/Phone Number Description of Project (please attach photograph of existing conditions and/or plan of project) recour & rectace execting various en Please provide the following information: 1. Current Use of Property (If multi-family residence, please indicate # of units): 2. Proposed Use, if applicable: porth of rear access 3. The distance from the porch deck to the ground: 4. The number of existing stair risers: 5. The current railing height and/or documented original railing height: 30" ON 1ST PLOOR STAIRS AMUNG TO MATCHERIST 6 6. The railing height requested: Planning Office Use Only: Historic Preservation Committee/Staff Recommendation: Inspections Staff Recommendation:

Exemption Granted Conditional Exemption Exemption Denied

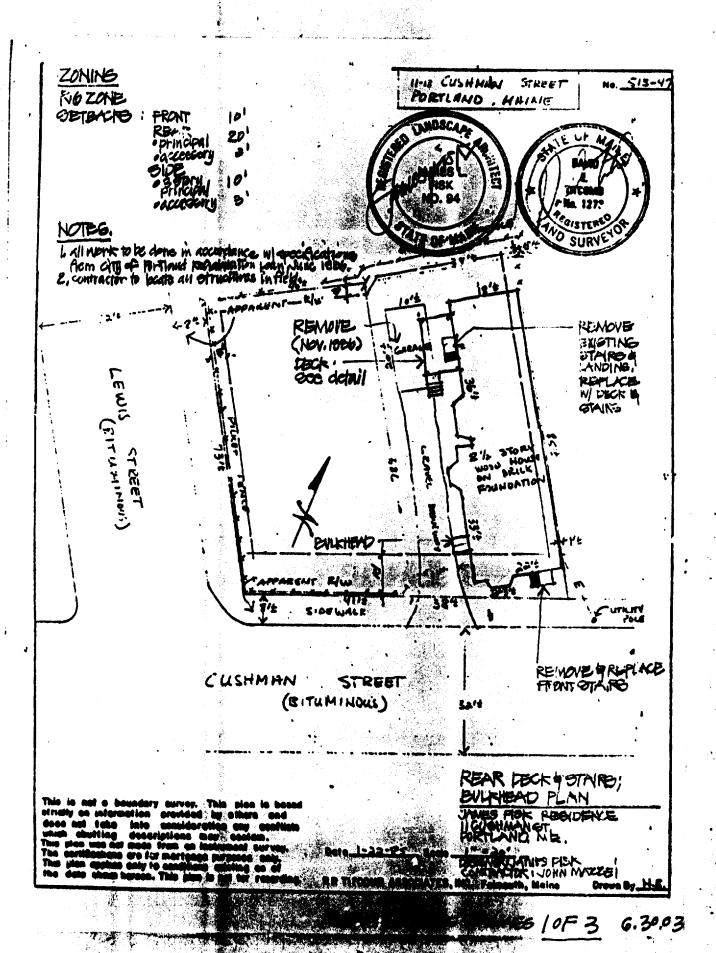
Signature Uluy Date: 7/10/03

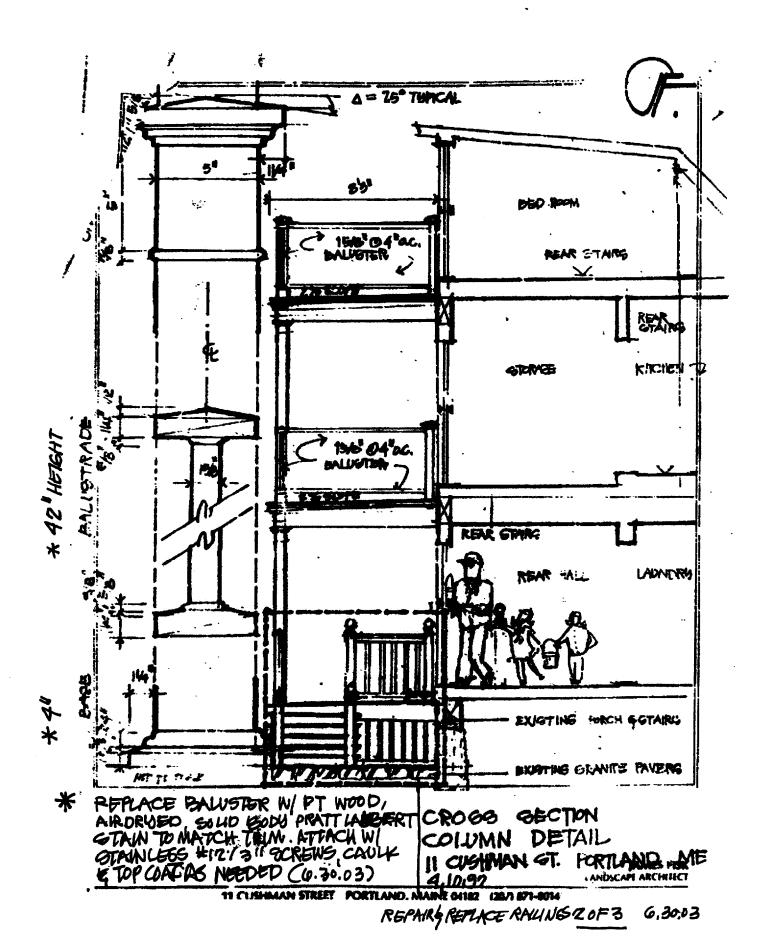
All Purpose Building Permit Application

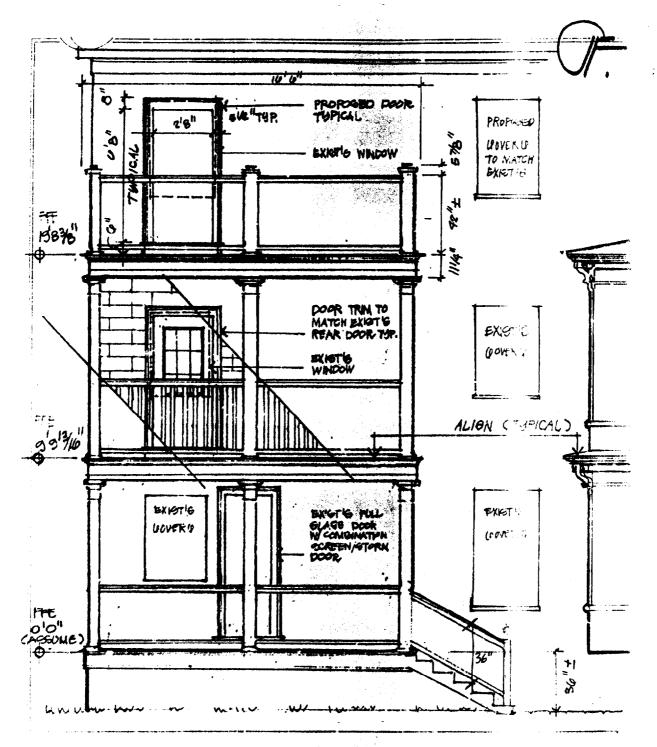
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

				<u> </u>	
Location/Address of Co	enstruction:	11 60	GHMAN GT	•	
Total Square Footage o		ON PARCA	gauare Footage of	Lot SE	E PLAN
Tax Assessor's Chart, Block#		Owner:	FIGK		Telephone: 985 '6598
Lessee/Buyer's Name (If	Applicable)	telephone:	nme, address & NST FBUNK 04		st Of rk: \$ 200,00 o: \$ 30
Current use: POF	CH (RAILING vacant, what was	3 600	70000	18 1	PLANS ARE ON PILE
Approximately how long	has it been vacar	nt:		· · · · · · · · · · · · · · · · · · ·	:
			PAILINGS		SAME AS ZOOR STAYRS
Contractor's name, addr	ess & telephone:	· · · · · · · · · · · · · · · · · · ·			
Who should we contact was Mailing address:	when the permit is	11	AMEG PROWN S	ア	ur a/a/7
We will contact you by p review the requirements t and a \$100.00 fee if any v	petore starting any	rmit is ready. work, with a	Plan Reviewer. A st	and pick up top work or	p the permit and
THE REQUIRED INFORMATENIED AT THE DISCRETION OF THE DISCRETION OF THE DISCRETION IN ORDER TO	ION IS NOT INCLUE OF THE BUILDING/I APROVE THIS PERI	DED IN THE SUB PLANNING DEI MIT.	MISSIONS THE PERM PARTMENT, WE MAY	REQUIETY.	
nereby certify that I am the Own ave been authorized by the owr risdiction. In addition, if a permit all have the authority to enter a this permit.	ner to make this applica for work described in th	ation as his/her au his application is is	ithorized agent. I agree isued, I certify that the C	to spindim to	proposed work and injury of all applicable laws of this applicable applicable in the first open applicable applicable.
Signature of applicant:	AMOS FR	Ne .	Date:	6.30.	03
•		-		•	•

This is NOT a permit, you may not commence ANY work until the permit is issued. if you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall







ELEVATION

II CUGHMAN OT PORTLAND MY 4.10.92 JAMES FISK ANDSCAPE ARCHITECT

11 CUSHMAN STREET PORTLAND, MAINE 04102 (207) 871-0014

MEMINE PREMICE RALINES 3.0F3 6.30,03