Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

	ITY OF PORTLAN	ID
Please Read Application And	ECTION	ITY OF PORTLAND
Notes, If Any, Attached	PERMIT	Permit Number: 040941
This is to certify that Bornstein Bruce E/Ow	ner	700S 8 S MAL
has permission to <u>legalize 2 non-conform</u>	ning ur	PERMIT ISSUED
AT 19 Lewis St		B023001
provided that the person or pers	ons, am or a station as epting	g this permit shall comply with
of the provisions of the Statutes		of the City of Portland regulati
the construction, maintenance a		s, and of the application on file
this department.		,
Apply to Public Works for street line and grade if nature of work requires	N fication inspect in must generally and with permission procu- bare this inding or at thereof	A certificate of occupancy must be procured by owner before this build
such information.	la ed or de losed-in. H JR NOTICE IS REQUIRED.	ing or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Fire Dept		
Health Dept		1 1
Appeal Board		do PI+ ONI
Other Department Name		Director - Building Inspection Services
·	ENALTY FOR DEMOVING THIS CAL	

PENALTY FOR REMOVING THIS CARD

City of Portland, Mair	ne - Buildi	ing or Use	Permi	t Application	n Permit No:	Issue Date	::	CBL:		
389 Congress Street, 0410		_			04.0041			056 B0	23001	
Location of Construction: Owner Name:			Owner Add				Phone:			
19 Lewis St Bornstein Bru		ce E		Po Box 15			772-9009			
Business Name: Contract Owner		Contractor Name	tor Name:		Contractor Address:			Phone		
		Owner	wner		Portland			0000000000		
Lessee/Buyer's Name Phone:		hone:			Permit Type:			Zone:		
					Legalization of Non-Conforming			g Units Z-C		
Past Use:	P	roposed Use:			Permit Fee:	Cost of Wor	k:	CEO District:	7, (
3 family residence 5 family re		5 family reside	lence		\$675.00	\$675.00 \$0.		00 2		
	1				I ADDIOVED I			SPECTION:		
	1				Denied U			se Group: R-2 Type: 513 CO 2003		
	1									
					<u> </u>			100 x		
Proposed Project Description:								Signature: 1250 0		
legalize 2 non-conforming u	units									
					PEDESTRIAN ACT	IVITIES DIST	CRICT (P.A.D.)			
					Action: Approved Approved			ed w/Conditions Denied		
					Signature:			Date:		
Permit Taken By:	Date Appli	ied For:	т							
jodinea	07/09/2		}		Zoning Approval					
			Spe	cial Zone or Revie	ws Zoni	ng Appeal		Historic Pres	ervation	
1. This permit application Applicant(s) from meet	-				<u> </u>	1 _		Necto District on London 1		
Applicant(s) from meeting applicable State and Federal Rules.		ne State and	Shoreland		Variance		[Not in District or Landmark		
2 Ruilding permits do not include plumbing		$\mid \Box_{w}$	Wetland Miscellaneous			Does Not Require Review				
2. Building permits do not include plumbing, septic or electrical work.		'' ''	Chang	Wiscendicous		ĺ	Does Not Require Review			
3. Building permits are void if work is not started			□ Fle	ood Zone	Conditional Use			Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building		1				}	1			
		building	Subdivision		Interpretation		ļ	Approved		
permit and stop all work	k				1					
			Sit	e Plan	Approve	ed		Approved w/C	Conditions	
PERMIT ISSUED			Maj [Minor MM	Denied			Denied (in w	
			of	wyn con	WY 15	r S			any exterior wo	
			Date:	9 1/25	Date:		D	ate: Cefu	rs A.	
JAN 2	6 2007			, , ,			(epzist	i levy	
							Ĺ	12/100	Louzk	
0.777.05.00	0071 631F	1					r	me who		
CITY OF PO	JKILAN!)								
			_	DDmrs. c ·	227					
Thanks and the state of		. 1 6.1		ERTIFICATION				2		
I hereby certify that I am the of I have been authorized by the	owner of rec	cord of the nai	med pro	perty, or that the	e proposed work is	authorized	by the	owner of record	d and that	
jurisdiction. In addition, if a	permit for w	vork described	l in the	application is is:	sued. I certify that	the code off	icial's a	uthorized repre	sentative	
shall have the authority to ent	ter all areas	covered by su	ch pern	nit at any reason	able hour to enforc	e the provi	sion of	the code(s) app	licable to	
such permit.						-				
SIGNATURE OF APPLICANT		ADDRESS			DATE		PHONE			
				ADDRESS		DAIL		HOU		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE		PHON	IE	

DATE

PHONE