

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

Please Read Application And Notes, If Any, Attached

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME

Permit Number: 050708  
APR 10 2006

RECEIVED

This is to certify that BORNSTEIN BRUCE E / Applicant  
*New*  
 has permission to Repair Fire escape extend deck add stairs  
 AT 19 LEWIS ST

PERMIT ISSUED

AUG - 2006

056 B023001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and written permission procured before this building or part thereof is altered or closed-in. **HEAVY NOTICE IS REQUIRED.**

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

**OTHER REQUIRED APPROVALS**  
 Fire Dept. Greg Cass 4-4-06  
 Health Dept. \_\_\_\_\_  
 Appeal Board \_\_\_\_\_  
 Other \_\_\_\_\_  
 Department Name \_\_\_\_\_

*[Signature]*  
 Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

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

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME

Permit No: 05-0708  
056 B023001

**PERMIT ISSUED**  
AUG - 8 2006

Location of Construction: 19 LEWIS ST  
Owner Name: BORNSTEIN BRUCE E  
Owner Address: PO BOX 15  
Phone: 838-8888 Cell  
772-9009

Business Name: [Blank]  
Contractor Name: [Blank]  
Contractor Address: [Blank]  
Phone: [Blank]

Applicant: [Blank]  
Permit Type: Alterations - Multi Family  
Zone: R-6

**CITY OF PORTLAND RECEIVED**  
APR 10 2006

Past Use: Multi Family  
Proposed Use: Multi Family / new Fire escape extend deck, add stairs

Permit Fee: \$48.00  
Cost of Work: \$2,500.00  
CEO District: 2

FIRE DEPT:  Approved  
 Denied  
NFPA 101 chapter 7.2.8

INSPECTION: Use Group: R-2 Type: SB  
8/7/06

Proposed Project Description: new fire escape extend deck, add stairs  
Current legal use: 3 family - see permit # 04-0941 for legalization of illegal units

Signature: [Signature]  
Signature: [Signature]

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)  
Action:  Approved  Approved w/Conditions  Denied  
Signature: [Blank] Date: [Blank]

Permit Taken By: Idobson  
Date Applied For: 06/07/2005

**Zoning Approval**

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.  
2. Building permits do not include plumbing, septic or electrical work.  
3. 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..

Special Zone or Reviews  
 Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan  
Maj  Minor  MM  -  Denied  
Date: 3/17/06

Zoning Appeal  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied  
Date: [Blank]

Historic Preservation  
*within*  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review  
 Approved  
 Approved w/Conditions  
 Denied  
Date: [Blank]

D. Andrews  
3/30/06

**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 \_\_\_\_\_

10/12/06 - Framing inspection done - O.K.

Meets Sec. 3404.4

Type 5 constr. -

Historic dist. waiver on fire rated assembly.

Ch. M.