Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

| | CITY | OF PORT | FLAND . | | |
|--------------------------------|-----------------------------------|---------|--------------------|--------------------|---|
| Please Read Application And | В | | TION | PERMIT ISSUED | |
| Notes, If Any, Attached | | PERMIT | Pe | mit Number: 050707 | |
| | Duran Culd Variation C. 6, 40 and | | | JUN 2 8 2005 | |
| This is to certify trust | Butterfield Kevin S & /Rent | Husbar | | | _ |
| has permission to | Repair, replace, add decking | | 056 70000 | CITY OF PORTLAND | |
| AT 46 Cushman St | | | L056_D002 0 | <u> </u> | |

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provided that the person or persons, of the provisions of the Statutes of It the construction, maintenance and uthis department.

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

ication inspec n must and w n permis n procu te this t ding or t thereo

R NOTICE IS REQUIRED.

losed-in.

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

epting this permit shall comply with all

ances of the City of Portland regulating

of buildings and statures, and of the application on file in

OTHER REQUIRED APPROVALS

Health Dept.

Appeal Board

Other

Department Name

PENALTY FOR REMOVING THIS CARD

| City | y of Portland, Maine | - Building or Use | Permit Applicatio | n Pe | rmit No: | PERMIT IS | SSIJED ^{CBL:} | |
|-------|--|-------------------------|----------------------|--------|---------------------|----------------|------------------------|----------------|
| 389 | Congress Street, 04101 | Tel: (207) 874-8703 | , Fax: (207) 874-87 | 16 | 05-0707 | PERIVITION | q 56 D | 02001 |
| Loca | tion of Construction: | Owner Name: | | Owne | r Address: | | Phone: | |
| 46 (| Cushman St | Butterfield Ke | vin S & | 46 C | Cushman St # | JUN 2 8 | 3 2009 | |
| Busin | ness Name: | Contractor Name | : | Contr | actor Address: | | I Yo L | |
| | | Rent -A- Husb | and | 173 | Neal Street Po | tland | ORTLANT97974 | 25 |
| Lesse | e/Buyer's Name | Phone: | 1 | Permi | it Type: | Chices | JICILIAND | Zque |
| | | | | Alte | erations - Dwel | lings | | 1 4/P |
| Past | Use: | Proposed Use: | <u> </u> | Perm | it Fee: | Cost of Work: | CEO District: | 7 |
| 4 U | nit Condo | 4 unit Condo/ | Repair, replace, add | | \$30.00 | \$768.00 | 0 2 | |
| | | decking | | FIRE | E DEPT: | Approved INS | PECTION: | |
| | | | | 1 | | | e Group: Q 🗸 | Type: |
| | ۱ ۲ / | $\langle \cdot \rangle$ | • | | L/ | | 112 | 20 |
| لعا | jaluse: tom (| 4) residential | condommium | ₹. | | | ^ | |
| Prop | osed Project Description: | <u> </u> | Swelling un | JHS. | | ' ' | Day B | 16-1 |
| Rep | air, replace, add decking | 3 | Julian Julian | Signa | _ | | nature: | 2015 |
| | | | • | PEDE | ESTRIAN ACTIV | TITIES DISTRIC | T (P.A.D.) | |
| | | | | Actio | n: Approve | d | d w/Conditions | Denied |
| | | A | -0829 | l | _ | | _ | |
| | Conso conve | rsion M \$ 02 | -005 | Signa | iture: | <u>_</u> | Date: | |
| l | it Taken By: | Date Applied For: | | | Zoning . | Approval | | |
| 100 | obson | 06/06/2005 | Sanatal Zana an Bard | | 7 | Amazal | Historic Pres | |
| 1. | This permit application d | | Special Zone or Revi | iews | Zomng | g Appeal | HISTORIC PTES | ervation |
| | Applicant(s) from meetin Federal Rules. | g applicable State and | ☐ Shoreland | | ☐ Variance | | ☐ Not in Distric | ct or Landmark |
| | rederal Rules. | | <u> </u> | | Í | | _ | |
| 2. | Building permits do not i | nclude plumbing, | Wetland | | Miscellan Miscellan | eous | Does Not Re | quire Review |
| | septic or electrical work. | | | | \ | | | |
| 3. | Building permits are void | | Flood Zone | | Condition | ial Use | Requires Rev | riew |
| | within six (6) months of t False information may in | | | | | | | ~ |
| | permit and stop all work. | | Subdivision | | Interpreta | tion | Approved | (1.) |
| | potate and over an event | • | C'4- Miss | | l | - | CHOVVY | ou / |
| | | | Site Plan | | Approved | | Approved w/ | Conditions |
| | | | Mai [Minor] Mi | 4 r 🗆 | Denied | | Denied to | D. J. |
| | | | Maj ☐ Minor, ☐ MN | | _ | | Denied /- | |
| | | | ok with | wyn | 75 | | 1 A | de B |
| | | | Date: S | 17/04 | Date: | | Date: | gray 1 |
| | | | , | ,,,,, | | | 6/12/ | 65 |
| | | | | | | | 4/54 | |
| | | | | | | | , , | |
| | | | | | | | | |
| | | | CERTIFICAT | ION | | | | |
| | | | CERTIFICAL | | | | | |

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 |
| DESDONISTRI E DEDSONI BI CHARCE OE WORK TETT E | | DATE | |

| ,,,,, | - Building or Use Permit | t | Permit No: | Date Applied For: | CBL: |
|---|---|--|--|--|---|
| 889 Congress Street, 04101 | Tel: (207) 874-8703, Fax: (| (207) 874-8716 | 505-0707 | 06/06/2005 | 056 D002003 |
| ocation of Construction: | Owner Name: | | Owner Address: | | Phone: |
| 46 Cushman St | nan St Leclerc Mark P | | 46 Cushman St # 3 | , | |
| Business Name: | Contractor Name: Co | | Contractor Address: | | Phone |
| | Rent -A- Husband | J | 173 Neal Street Po | rtland | (207) 879-7425 |
| Lessee/Buyer's Name | Phone: | | Permit Type: | | |
| | | | Alterations - Mult | i Family | |
| Proposed Use: | | Propose | ed Project Description: | | |
| 4 unit Condo/Repair, replace, | add decking | Repair | r, replace, add deck | ing | |
| Dept: Zoning Sta | tus: Approved with Condition | s Reviewer: | Marge Schmucka | l Approval I | |
| | er #()?-()X (V | | | | Ok to Issue: V |
| Note: condo conversion unde | | val thru Historic | Preservation. This i | is located within a H | Ok to Issue: |
| Note: condo conversion undo 1) ANY exterior work require 2) This is NOT an approval for | er #02-0839 es a separate review and approv or an additional dwelling unit. s stoves, microwaves, refrigerat | You SHALL NO | OT add any addition | nal kitchen equipme | listoric District. |
| Note: condo conversion undo 1) ANY exterior work require 2) This is NOT an approval for not limited to items such as | es a separate review and approvor an additional dwelling unit. | You SHALL No tors, or kitchen s | OT add any addition inks, etc. Without s | nal kitchen equipme pecial approvals. | Iistoric District. ent including, but |
| Note: condo conversion undo 1) ANY exterior work require 2) This is NOT an approval for not limited to items such as 3) This property shall remain for review and approval. | es a separate review and approvor an additional dwelling unit. s stoves, microwaves, refrigerat | You SHALL No tors, or kitchen s adwelling. Any o | OT add any addition inks, etc. Without shange of use shall | nal kitchen equipme pecial approvals. require a separate p | Historic District. Int including, but ermit application |
| Note: condo conversion undo 1) ANY exterior work require 2) This is NOT an approval for not limited to items such as 3) This property shall remain for review and approval. 4) This permit is being approvious. | es a separate review and approvor an additional dwelling unit. s stoves, microwaves, refrigerat a four (4) family condominium | You SHALL Notors, or kitchen so dwelling. Any otted. Any devia | OT add any addition inks, etc. Without shange of use shall | nal kitchen equipme pecial approvals. require a separate p | Historic District. Int including, but ermit application before starting that |

noted on plans.



CITY OF PORTLAND, MAINE

Department of Building Inspections

| June 6 20 05 |
|--|
| Received from tandardized tenu Janterness Location of Work 46 Cu |
| Location of Work 46 04 |
| Cost of Construction \$ 768.00 |
| Permit Fee \$ 3C \ \ |
| Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2) |
| Other |
| CBL:5(0 1) 002 |
| Check #: 140/ Total Collected \$ 30. |

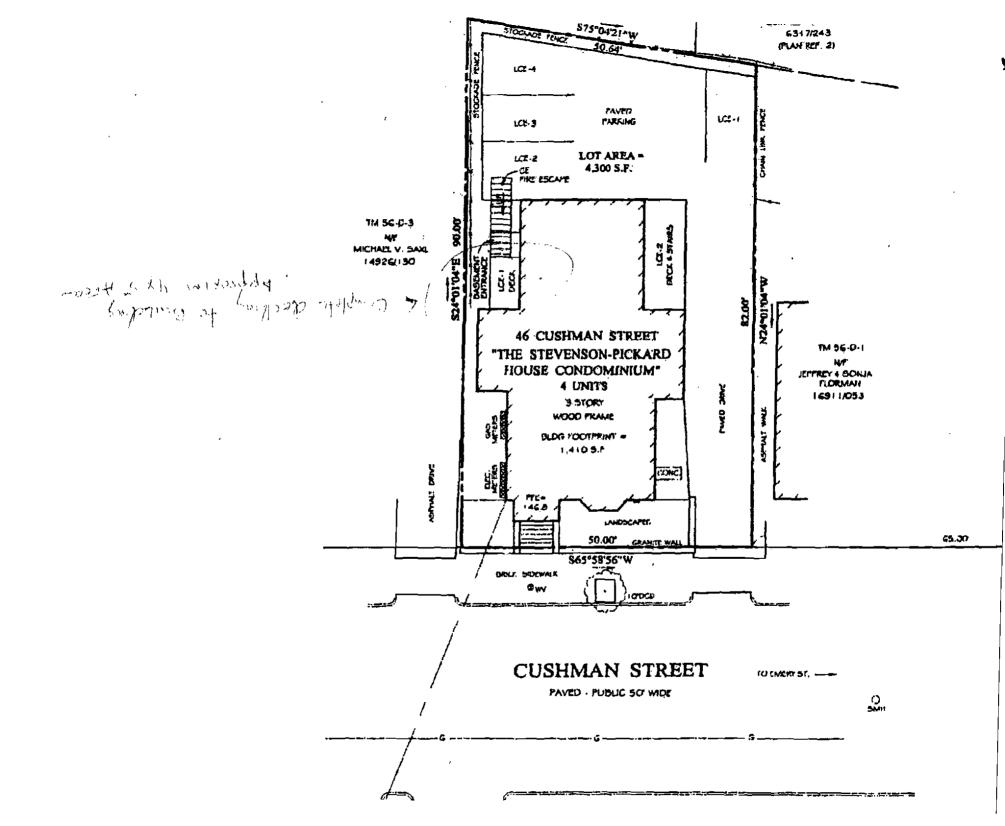
THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy
YELLOW - Office Copy

PINK - Permit Copy

| Living Space | | ļ |
|--|----------|-------------|
| Proposed DECK AREA 278 > | | 1 |
| 2 445 AREA TO be FINISH- | ed F | -)4494 V |
| Thuy existing | | |
| LIVING SPACE STORM DOOR TO Existing FINISHOOF | | ۷. |
| Hot dipped | <u>}</u> | /- |
| Joist haugers | | |
| ZNO FLOOR DECK 51 | <u>ε</u> | |
| Total Tobe, | × / | |
| 1) ADD GATE AT TOP OF STAIRS and EXISTING DECK 32×36 GATE | S T | |
| Deck to Building with 2x8 | ~ | |
| (4) Relocate Existing Railing to Three | STAIRS | |
| Number 5 | | |







BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

| A Pre-construction Meeting will take pla | ce upon receipt of your building permit. |
|--|--|
| Footing/Building Location Inspec | tion: Prior to pouring concrete |
| Re-Bar Schedule Inspection: | Prior to pouring concrete |
| MA Foundation Inspection: | Prior to placing ANY backfill |
| Framing/Rough Plumbing/Electric | ical: Prior to any insulating or drywalling |
| Final/Certificate of Occupancy: | Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point. |
| Certificate of Occupancy is not required for you if your project requires a Certificate of inspection If any of the inspections do not ocphase, REGARDLESS OF THE NOTICE | Occupancy. All projects DO require a final cur, the project cannot go on to the next |
| CERIFICATE OF OCCUPANICE BEFORE THE SPACE MAY BE OCCUPANICE TO SEE THE SEC THE SE | ES MUST BE ISSUED AND PAID FOR, PIED |
| Signature of Applicant/Designee | Date /22/05 |
| Signature of Inspections Official | Date |
| CBL: 54 DOQ Building Permit | #: <u>050707</u> |

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.

| Location/Address of Construction: 46 | Cushm | an St. | _ | |
|--|---|--|---------------------|---|
| Total Square Footage of Proposed Structu Zo Sq | | Square Footage of Lot | 4,5 | 700 00 |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# | Owner: , | MARC LECLENC | | Telephone: 207-780-0677 |
| Lessee/Buyer's Name (If Applicable) | telephone: | name, address & HUSbond ORTCHNO 279-7425 | W | ost Of ork: \$ 768.00 e: \$ 30.00 |
| Current use: Residence Deck If the location is currently vacant, what was Approximately how long has it been vaca Proposed use: Deck (ex 5) Project description: to Uning dec | us prior use: | ting) Add glooring | EPT. O | Railing to Code |
| Contractor's name, address & telephone: Who should we contact when the permit it Malling address: 173 New 57 Poetance, makes We will contact you by phone when the permit it review the requirements before starting and a \$100.00 fee If any work starts before | is ready: Re e 0410: ermit is read ny work, with | 2 y. You must come in and a Plan Reviewer. A stop | plek work 207 | JUN 6 2005 ECEIVED up the permit and order will be Issued |
| IF THE PEQUIPED INFORMATION IS NOT INC. | IDED IN THE | RURMISSIONS THE PERMIT V | VILL RI | E AUTOMATICALLY |

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

| Signature of applicant: | Stanle | R Haclet | Date: | 6/6/05 | |
|-------------------------|--------|----------|----------|-------------|--|
| | | | <u> </u> | | |

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 Hali