Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND PERMIT ISSUE

Please Read Application And Notes, If Any, Attached

CTION

ition.

Permit Manuber: 92 php

epting this permit shall comply with all

tures, and of the application on file in

ances of the City of Portland regulating

This is to certify that

Kolbert Daniel M &/self

has permission to ___

RE-Build 10'6" x 4'3" front e

AT 90 Gray St

y way.

057 E005001

provided that the person or persons, of the provisions of the Statutes of the construction, maintenance and u this department.

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

N fication inspect in must go and with a permit on procuble re this laiding or a thereofold and or a cosed-in.

H. IR NOTICE IS REQUIRED.

of buildings and sa

ine and of the

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

Fire Dept. ____ Health Dept. ___ Appeal Board Other

OCT # 9 2000

CITY OF PORT

PENALTY FOR REMOVING THIS CARD

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:

The state of the s	
By initializing at each inspection time, you are a inspection procedure and additional fees from a Work Order Release" will be incurred if the probelow. Pre-construction Meeting: Must be sche	a "Stop Work Order" and "Stop ocedure is not followed as stated
receipt of this permit. Jay Reynolds, Development also be contacted at this time, before any site work single family additions or alterations.	t Review Coordinator at 874-8632 must
Footing/Building Location Inspection:	Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electrical:	Prior to any insulating or drywalling
use. I	to any occupancy of the structure or NOTE: There is a \$75.00 fee perction at this point.
Certificate of Occupancy is not required for certain you if your project requires a Certificate of Occupa inspection	ncy. All projects DO require a final
MASS. If any of the inspections do not occur, the phase, REGARDLESS OF THE NOTICE OR C	e project cannot go on to the next CIRCUMSTANCES.
CERIFICATE OF OCCUPANICES MU	IST BE ISSUED AND PAID FOR,
BEFORE THE SPACE MAY BE OCCUPIED	
Signature of applicant/designee	Date (a) (S) (a)
Signature of Inspections Official	Date Date
CBL: $57-E-5$ Building Permit #: $02-$	-1117

							PLRY		Souly	
•	of Portland, Maine Congress Street, 04101	_			• (mit No: 02-1117	Issue Date	T • 9	CBL 2002 ₀₅₇ E00)5001
Locat	tion of Construction:	Owner Name:			Owner	r Address:	A 1553 / 63 /		Phone:	
90 Gray St Kolbert Daniel M &			90 G	ray St	CITY OF	PO	207-879-	7019		
Business Name: Contractor Name:			Contractor Address:			Phone				
n/a self			Portland							
Lesse	Lessee/Buyer's Name Phone:						Zone:			
n/a n/a		j	Alterations - Dwellings Rb				156			
Past 1	Use:	Proposed Use:			Permit Fee: Cost of Work:			CEO District:		
Sing	gle Family	Single Family				\$30.00	\$40	00.00	3	1
front entry to e		existing	dimentions.	FIRE DEPT: Approved Denied		Approved Denied	Use G		Type:	
	osed Project Description:								BOLA 199 BULA 199	4
RE-	Build 10'6" x 4'3" front en	try way.		Signature: PEDESTRIAN ACTIVITIES DIS		WITTER DICT	Signat	ure:	0/4/00	
					Action				v/Conditions	Denied
					Signature:				Date:	
Perm	it Taken By:	Date Applied For:			<u> </u>	Zoning	Approva	al		
gg		09/30/2002				23011112	, -PP			
1.	This permit application do	oes not preclude the	Spe	ecial Zone or Revie	ws	Zoni	ng Appeal		Historic Pres	ervation
	Applicant(s) from meeting Federal Rules.		☐ SI	horeland		☐ Variano	ce		Not in Distric	ct or Landmark
2.	Building permits do not in septic or electrical work.	s do not include plumbing, cal work.		☐ Wetland W		Miscellaneous			Does Not Require Review	
3.	3. Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone		•	Conditional Use			Requires Review	
False information may invalidate a building permit and stop all work		Subdivision		Interpretation			Sapproved approved			
			☐ Si	ite Plan		Approv	red		Approved w/	Conditions
			Maj	Mínor MM		Denied		İ	Denied	
			Date:	10/9/02		Date:		I	Date: 10/9/0	2
			(' / CERTIFICATI	ON					

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.

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SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
DESCRIPTION OF DESCRIPTION OF MARKET PROPERTY.		D. 1997	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

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: 9	O GRAY ST				
Total Square Footage of Proposed Structu	re Square Footage	of Lot			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 057 C	Owner: DAN KOUSING	`\	Telephone: 879-70(9/650-765		
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: DAN KOUSSUT GO GIZAY SF, 04107	W	ost Of York: \$ 400 ee: \$ 30 —		
Current use: SIMALL FAMILY	\		10'6 X4'3		
If the location is currently vacant, what wa	as prior use:		- including		
Approximately how long has it been vacc			- Stair rur		
Proposed use: LE-BUILD FROM GMF4 TO EXISTIMA Project description: DIMENSIONS COLOGOSIUM					
Contractor's name, address & telephone: SLLF					
Who should we contact when the permit is ready: DAN LOUSUS					
Mailing address: 40 GRAY	55. 04102				
We will contact you by phone when the preview the requirements before starting a and a \$100.00 fee if any work starts before	ny work, with a Plan Reviewer.	e in and pic A stop work HONE:	k up the permit and corder will be issued		
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 n have been authorized by the owner to make this app jurisdiction. In addition, if a permit for work described is shall have the authority to enter all areas covered by to this permit.	lication as his/her authorized agent. I in this application is issued, I certify that	THE COPY OF THE PRO	h to all applicable laws of this		
Signature of applicant:	Do		30/02		
70000	V	गा। हि ए	'E II U		

This is NOT a permit, you may not commence ANY work until the permit is issued.

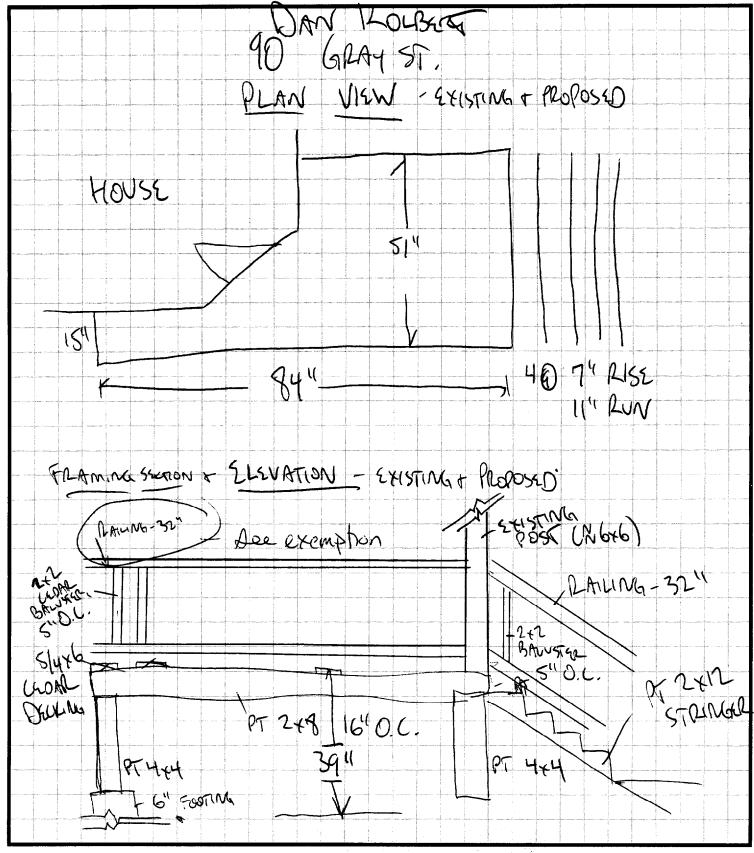
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



Brockway-Smith Company

www.brosco.com





ANDOVER, MA 01810 146 Dascomb Road 1-800-222-7981

Fax: 1-800-242-4533

COXSACKIE, NY 12051 Hudson Valley Commercial Park 1-800-222-7303 Fax: 1-800-222-7304 HATFIELD, MA 01038 125 Chestnut Street 1-800-922-0191

Fax: 1-800-922-0296

PORTLAND, ME 04103 203 Read Street 1-800-442-6734 Fax: 1-800-443-0331

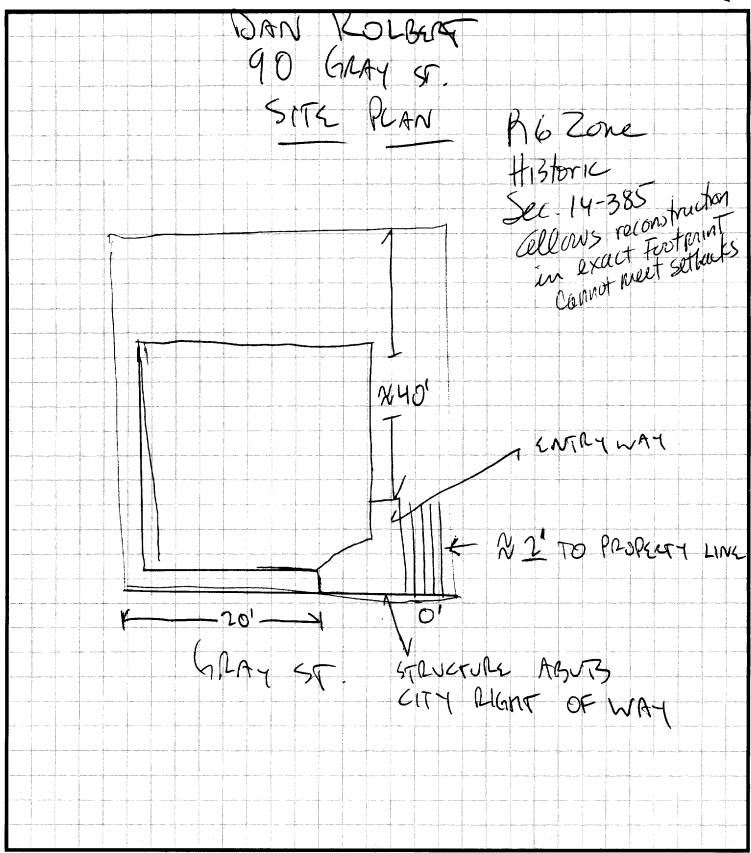


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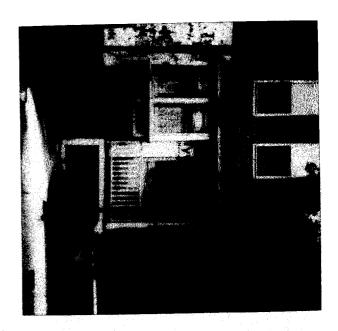
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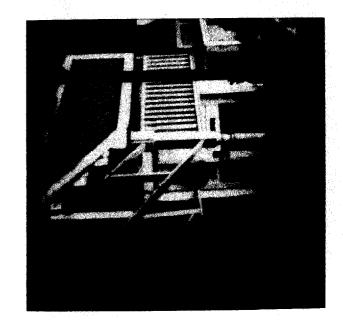
Ar	ea	Multiplier	Coefficient			
)						
Year	Unit	Coefficient	Land Value			
19 .	1300		7.96			



Surveyed by MAY 2 9 1924
(Remarks on other Side)









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. Applicant's Mailing Address Description of Project (please attach photograph of existing conditions and/or plan of project): RETURN SATRY TO ORIGINAL STATUS Please provide the following information: 1. Current Use of Property (If multi-family residence, please indicate # of units): SINGLE FAMILY 2. Proposed Use, if applicable: 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: 32" 6. The railing height requested: Planning Office Use Only: Historic Preservation Committee/Staff Recommendation: V40 wew o Inspections Staff Recommendation: Exemption Denied **Exemption Granted** Conditional Exemption

Signature

White - Planning Office (Yellow - Inspections

Pink - Applicant