

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED

Permit Number: 050284
MAR 30 2005

CITY OF PORTLAND

This is to certify that Small Stephen R &/Thomas Connolly
 has permission to Install 2 skylights and replace double end window
 AT 15 Summer St 058 B016001

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. **HEAR 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. _____
 Health Dept. _____
 Appeal Board _____
 Other _____
 Department Name _____

[Handwritten Signature]
 3/29/05
 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

Permit No: 05-0284	PERMIT ISSUED	GBL: 058 B0 6001
Owner Address: 15 Summer St	MAR 30 2005	Phone:
Contractor Address: Portland	CITY OF PORTLAND	Phone:
Permit Type: Alterations - Dwellings		Zone: <i>R-6</i>

Location of Construction: 15 Summer St	Owner Name: Small Stephen R &
Business Name:	Contractor Name: Thomas Connolly
Lessee/Buyer's Name	Phone:

Past Use: Single family	Proposed Use: Single family install 2 skylights and replace Gable end window
----------------------------	---

Proposed Project Description:
Install 2 skylights and replace Gable end window

Permit Fee: \$48.00	Cost of Work: \$3,000.00	CEO District: 2
FIRE DEPT: <i>NA</i> Signature:	<input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i> Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: dmartin	Date Applied For: 03/21/2005	Zoning Approval		
-----------------------------	---------------------------------	------------------------	--	--

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

Date: *3/29/05*

Zoning Appeal

Variance

Miscellaneous

Conditional Use

Interpretation

Approved

Denied

Date:

Historic Preservation

Not in District or Landmark

Does Not Require Review

Requires Review

Approved

Approved w/Conditions

Denied

Date: *3/29/05*

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

4/22/05 - checked framing OK to close
in Natick

5-20-09 Work completed &
OK natick