



Permitting and Inspections Department
Michael A. Russell, MS, Director

General Building Permit Application

Project Address: 14 Orchard Street Portland, ME (REVISED 8/15/17)

Tax Assessor's CBL: _____ Chart # _____ Block # _____ Lot # _____ Cost of Work: \$ 16,209

Proposed use (e.g., single-family, retail, restaurant, etc.): Single Family

Current use: Domestic Shelter Housing Past use, if currently vacant: _____

Commercial Multi-Family Residential One/Two Family Residential

Type of work (check all that apply):

<input type="checkbox"/> New Structure	<input type="checkbox"/> Foundation Only	<input type="checkbox"/> Change of Ownership - Condo Conversion
<input type="checkbox"/> Addition	<input type="checkbox"/> Fence	<input type="checkbox"/> Change of Use
<input checked="" type="checkbox"/> Alteration	<input type="checkbox"/> Pool - Above Ground	<input type="checkbox"/> Change of Use - Home Occupation
<input type="checkbox"/> Amendment	<input type="checkbox"/> Pool - In Ground	<input type="checkbox"/> Radio/Telecommunications Equipment
<input type="checkbox"/> Shed	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Radio/Telecommunications Tower
<input type="checkbox"/> Demolition - Structure	<input type="checkbox"/> Replacement Windows	<input type="checkbox"/> Tent/Stage
<input checked="" type="checkbox"/> Demolition - Interior	<input type="checkbox"/> Commercial Hood System	<input type="checkbox"/> Wind Tower
<input type="checkbox"/> Garage - Attached	<input type="checkbox"/> Tank Installation/Replacement	<input type="checkbox"/> Solar Energy Installation
<input type="checkbox"/> Garage - Detached	<input type="checkbox"/> Tank Removal	<input type="checkbox"/> Site Alteration

Project description/scope of work (attach additional pages if needed):

Majn floor bathroom will have the door widened, the toilet placed on another wall and a wall removed between toilet and shower area to accomodate ADA requirements.

Applicant Name: Family Crisis Services Phone: (207) 767 - 4952

Address: 14 Orchard Street, Portland, ME Email: jenny_s@familycrisis.org

Lessee/Owner Name (if different): _____ Phone: (____) _____ - _____

Address: _____ Email: _____

Contractor Name (if different): See attached estimates (2) Phone: (____) _____ - _____

Address: _____ Email: _____

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: _____ Date: 8/15/17

This is a legal document and your electronic signature is considered a legal signature per Maine state law.

Review of this application will not begin until the permit payment is received. This is not a permit. Work may not commence until the permit is issued.