

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED

AUG 29 2005

Permit Number: 051218

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

This is to certify that O'leary Daniel E & /Michael ams
 has permission to Restoring columns & reinforcing with po
 AT 358 Spring St 061 F001001

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.
24 HOUR 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

Janine Bonke 8/29/05
 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 ISSUED

Permit No: 05-1218	Issue Date: AUG 29 2005	CBL: 061 F001001
-----------------------	-----------------------------------	---------------------

Location of Construction: 358 Spring St # 364	Owner Name: O'leary Daniel E &	Owner Address: 364 Spring St	Phone:
Business Name:	Contractor Name: Michael Adams	Contractor Address: 80 Cottage St Westbrook	2078566709
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R4

Past Use: Single Family	Proposed Use: Single Family Restoring columns & reinforcing with posts	Permit Fee: \$75.00	Cost of Work: \$6,000.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB	

Proposed Project Description: Restoring columns & reinforcing with posts	Signature:	Signature: <i>JMB 8/29/05</i>
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: 08/25/2005	Zoning Approval		
-----------------------------	---------------------------------	------------------------	--	--

<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>OK w/in existing Footprint</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB 8/29/05</i>	<p>Zoning Appeal</p> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<p>Historic Preservation</p> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>8/25/05</i>
	<i>Approved per D.A.</i>		

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