PERMIT ISSUED

DATE

PHONE

_	· ·	ne - Building or Use l		on (rmit No: 03-0140	Issue Date: FEB 2 7	CBL: 2603 061 1001001
	congress Street, 0410	Owner Name:	, Fax: (207) 874-8			I LU & I	
	Danforth St		& Marjorie R Jts		r Address: Danforth St	ACTV OF DOG	Phone:
	ess Name:	Contractor Name			actor Address:	CHITCHPU	Phone
ua.u n∕a	ESS IVALUE.	Heritage Fine		1	Box 3662 Au	huen	2077830650
	e/Buyer's Name	Phone:	nomes		t Type:		207/830630 Zone:
va 1∕a	e payer 3 Manne	n/a		4	• -	allings	Q / /
=		<u></u> _	<u></u>	<u> </u>	erations - Dwe		
ast l		Proposed Use:		Perm	it Fee:	Cost of Work:	CEO District:
ing	de Family		/ Add 3/4 bath to		\$72.00	\$6,500.0	
>rom-	osed Project Description:	existing closet		FIRE	DEPT:	1 VODIOACT	SPECTION: ie Group: L-3 Type: SE BOLA 99
-	3/4 bath to existing clo	cet		6			
700	274 Oute to evisiting CIO	····		Signa		VITIES DISTRIC	gnature:
				FEDE	o i rian ac i i		
				Actio	n: Approv	ed Approve	ed w/Conditions Denied
				Signa	ture:		Date:
	it Taken By:	Date Applied For:			Zoning	Approval	
gg		02/25/2003	Special Zone or Re	views	Zonir	ng Appeal	Historic Preservation
	This permit application Applicant(s) from meet Federal Rules.	does not preclude the ing applicable State and	Shoreland		☐ Variance		Not in District or Landar
2.	Building permits do no septic or electrical worl		□ Wetland †0	en e	☐ Miscella	neous	Does Not Require Revie
3,	Building permits are vowithin six (6) months o	oid if work is not started f the date of issuance.	☐ Flood Zone	nly	Condition	onal Use	Requires Review
	False information may permit and stop all work	_	Subdivision		Interpret	ation	☐ Approved
			Site Plan		☐ Approve	xd.	Approved w/Conditions
			Maj □ Minor M	MIZ	Denied		Denied January
	•		10/02		1		myerten
			Date: 2 20	<u>/</u>	Oate:		Date: Paures
							pendit c reve
hav irise iall	e been authorized by the diction. In addition, if a	e owner to make this application of the comment of	ication as his authorized in the application is	the prozed agen	t and I agree I certify that	to conform to a the code officia	the owner of record and tha ill applicable laws of this al's authorized representativ n of the code(s) applicable t
SIGN	NATURE OF APPLICANT		ADDR	ESS		DATE	PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



CITY OF PORTLAND, MAINE

Department of Building inspections

		2/2	5 20	<i>0</i> 3
Million AOS	•	,		
Manager of Short L			Ct.	
	72.0	<u> </u>		
Bellefrig (B.) Z Plumbir	og (15) E)	ectrical (I2)	_ Site Plan	(U2)
G61-I	-001			
dat Lush		Fotal Colle	ected s/	2.00
				•

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 Capy PINK - Permit Copy

Form # P 04	

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

PERMIT

Permit Number: 030140

epting this permit shall comply with all

of buildings and state tures, and of the application on file in

ances of the City of Portland regulating

This is to certify that Shaw David E & Marjorie R

has permission to _____Add 3/4 bath to existing close

Heritage

061 1001001

AT 400 Danforth St

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

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

N ication inspect n must grand w n permis n procuble this lading or at thereof and or described in the second in t

R NOTICE IS REQUIRED.

ne and of the

adion.

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

OTHER REQUIRED APPROVALS
Fire Dept. PERMIT ISSUED

Health Dept. __

Other

Appeal Board FED 2 7 2003

Ospertment Name

CITY OF PORTLAND PENALTY FOR REMOVING THIS CARD

Sirector - Building & Inspection Services

Cit	y of Portland, Maine	e - Building or Use	Permit Application	<u>,</u> [Permit No:	Issue Date:		CBL:	
	Congress Street, 0410	_			03-0140			061 100	1001
Loca	tion of Construction:	Owner Name:		Ov	vner Address:			Phone:	
400	Danforth St	Shaw David E	& Marjorie R Jts	40	00 Danforth St			207-773-9	638
Busi	ness Name:	Contractor Name		Co	ntractor Address:	· · · · ·		Phone	
n/a		Heritage Fine	Homes	P.	.O. Box 3662 Au	ıb <u>ur</u> n		20778306	50
Less	ee/Buyer's Name	Phone:		Pe	rmit Type:			-	Zone:
n/a		n/a			Alterations - Dwe	ellings		_	
Past	Use:	Proposed Use:		Pe	ermit Fee:	Cost of Work	: CE	O District:	7
Sin	gle Family		/ Add 3/4 bath to		\$72.00	\$6,50	0.00	3	
		existing closet		F		Approved Denied	INSPECTI Use Group		Туре:
Prop	osed Project Description:	· -		1					
Ade	d 3/4 bath to existing close	et.		Si	gnature:		Signature:		
				PE	DESTRIAN ACTI	VITIES DIST	RICT (P.A.	.D.)	
				A	ction: Approv	ed 🗌 Appı	roved w/Coa	nditions [Denied
			_	Si	gnature:		Da	ite:	
Peru gg	nit Taken By:	Date Applied For: 02/25/2003			Zoning	Approva	1		
		-	Special Zone or Revie	ws	Zonin	g Appeal		Historic Prese	ervation
1.	This permit application of Applicant(s) from meeting Federal Rules.		☐ Shoreland		☐ Variance				t or Landmark
2.	Building permits do not septic or electrical work.		☐ Wetland		☐ Miscella	neous		Does Not Req	pire Review
3.	Building permits are voi- within six (6) months of		Flood Zone		Condition	nal Use		Requires Rev	iew
	False information may in permit and stop all work	_	Subdivision		☐ Interpret	ation		Approved	
			Site Plan		Approve	d		Approved w/0	Conditions
			Maj Minor MM		☐ Denied			Denied	
			Date:		Date:		Date:		
			CERTIFICATION	ON	ī				

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.

such permit.			
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
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.

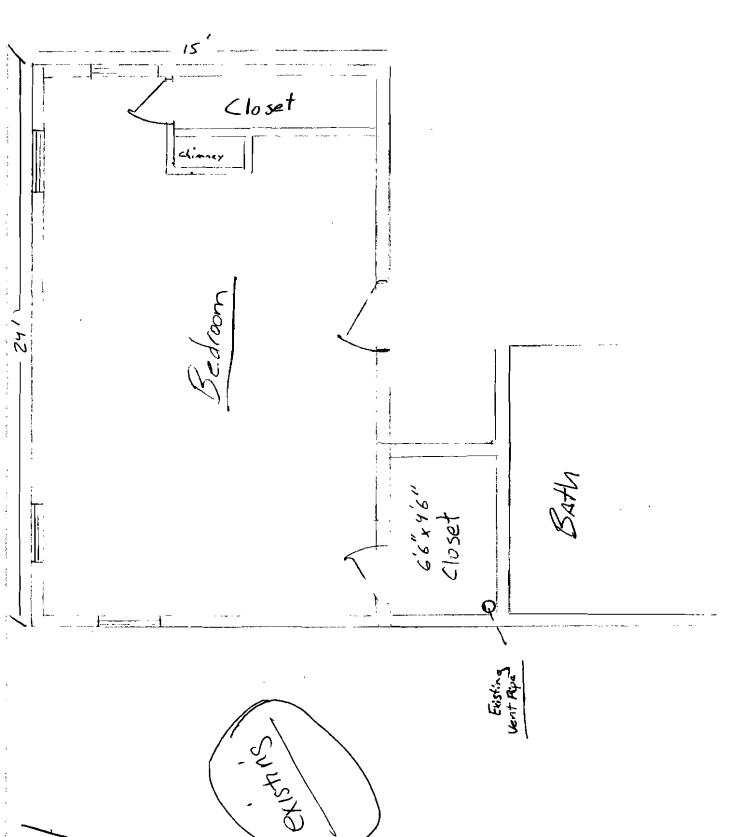
Location/Address of Construction: 40	O DANSons	th st.	<u> </u>
Total Square Footage of Proposed Structu NO CHANGE	ure So	quare Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# 061 Block# I Lot# 001	Owner Marjo	rie Shaw	Telephone: 773-9638
Lessee/Buyer's Name (if Applicable)	Applicant nan telephone:	ne, address &	Cost Of Work: \$ 6,500.
If the location is currently vacant, what wo			
Approximately how long has it been vaca Proposed use: Project description: Turn existing	walkin close		465 Yoland Spring Me.

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.

		- //L x	
Signature of applicant:	/// +	H2	Date: Feb 24 02
		7	

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



Roposed Layout

2xy franing 2x6 haders Will have vent All non-bearing Closet Sedioon 36 BATH 961x46 > Bath

> Ensting Vent Apr

4305G

•	e - Building or Use Permit Tel: (207) 874-8703, Fax: (207)		Permit No: 03-0140	Date Applied For: 02/25/2003	CBL: 061 I001001
Location of Construction:	Owner Name:		Owner Address:		Phone:
400 Danforth St	Shaw David E & Marjo	orie R Jts	400 Danforth St		207-773-9638
Business Name:	Contractor Name:		Contractor Address:		Phone
n/a	Heritage Fine Homes	l l	P.O. Box 3662 Au	ıburn	(207) 783-0650
Lessee/Buyer's Name	Phone:		Permit Type:		
п/a	n/a		Alterations - Dwe	ellings	
Single Family / Add 3/4 bath	to existing closet.	Add 3	/4 bath to existing	cioset.	
Dept: Zoning St	atus: Approved with Condition		Marge Schmuck		_
Dept: Zoning St. Note:		s Reviewer:	: Marge Schmuck		Oate: 02/26/2003 Ok to Issue: ☑
Dept: Zoning Standard Note: 1) ANY exterior work requires	atus: Approved with Condition	s Reviewer :	: Marge Schmuck	al Approval I	Ok to Issue: ✓
Dept: Zoning St. Note: 1) ANY exterior work require 2) This property shall remain approval.	atus: Approved with Conditions	s Reviewers al thru Historic change of use sh	: Marge Schmuck	al Approval I	Ok to Issue:

Location of Construction:	1 Tel: (207) 874-8703, Fax:	<u> </u>	Owner Address:		Phone:
400 Danforth St	Shaw David E & Mar		400 Danforth St		207-773-9638
Business Name:	Contractor Name:	Jone K 1ts	Contractor Address:		Phone
n/a	Heritage Fine Homes	Į	P.O. Box 3662 Au	hurn	(207) 783-0650
Lessee/Buver's Name	Phone:		Permit Type:		(201) 703-0030
n/a	n/a		Alterations - Dwel	lines	
-	to existing closet.	Add 3			
-	tatus: Approved with Condition		: Marge Schmucka		_
Note:		ns Reviewer:	: Marge Schmucka		Date: 02/26/2003 Ok to Issue: ☑