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: 090827

This is to certify that Cope Samuel M Wwi	i Vet &/M ael Butl	
has permission toAdding new footing a	nd cement sicks to eating contete stairs	
AT _265 Western Promenade	СР	063_A008001
provided that the person or pers of the provisions of the Statutes the construction, maintenance a this department.	s of Mage and of the Occasion	ng this permit shall comply with al s of the City of Portland regulating es, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Notification of spectio must be given ad writte ermissic rocured before his builting or partiered is lather or other spection and ed-in. 24 HOU 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		Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Cit	y of Portland, Maii	ne - Buil	ding or Use	Permi	t Application	n Per	rmit No:	Issue Date	:	CBL:		
389	Congress Street, 041	01 Tel: (	207) 874-8703	, Fax:	(207) 874-871	6	09-0827			063 A0	08001	
Loca	tion of Construction:		Owner Name:			Owne	r Address:			Phone:		
265 Western Promenade Cope Samuel		M Wwii Vet & 2		265	West Promei	nade						
Busi	ness Name:		Contractor Name	:		Contr	actor Address:			Phone		
Michael Butle		Michael Butle	er Jr.		47 T	apley Road S	Scarborough	l	20751013	389		
Less	ee/Buyer's Name		Phone:			Permit Type:			<u> </u>	Zone:		
						Alte	erations - Dw	ellings			R4/R6	
Past	Use:		Proposed Use:			Permit Fee: Cost of Work:			k:	CEO District:		
Sin	gle Family		Single Family	y / Adding new footing locks to existing s.			\$30.00 \$800		00.00	0 2		
						FIRE			INSPE	INSPECTION:		
			concrete stairs			ļ		Denied	Use Gr	Jse Group: Type:		
							L.		ļ			
Prop	osed Project Description:			_		1						
Ado	ding new footing and ce	ment blocl	ks to existing co	ncrete s	tairs.	Signa	ture:		Signatu	ıre:		
						PEDE	STRIAN ACT	IVITIES DIST	TRICT (1	<u> </u>		
						Actio	n: 🗀 Appro	ved 🗀 And	aroved w	d w/Conditions Denied		
						Actio	и дррго	veu App	JIOVCU W/	Conditions	Dellieu	
						Signa	iture:			Date:		
Pern	nit Taken By:	Date Ap	pplied For:				Zoning	Approva	al .			
gg		08/0	<b>/</b> 2009					,				
1.	This permit application	does not	preclude the	Spe	cial Zone or Revie	ws	Zoni	ng Appeal		Historic Preservation		
••	Applicant(s) from mee			Shoreland Wetland Win		\c	∨ Variance  ☐ Miscellaneous			Not in District or Landmar		
	Federal Rules.	•				10						
2.	Building permits do no	t include r	nlumhing						l			
۷.	septic or electrical wor		Jiumomg,			7						
3.	•		Flood Zone		This	Conditional Use			Requires Review			
	within six (6) months of			المعطر								
False information may invalidate a building permit and stop all work		a building	Subdivision		☐ Interpretation			Approved				
				☐ Si	te Plan		Approv	ed		Approved w	/Conditions	
									ļ			
				Maj Minor MM		☐ Denied			☐ Denied			
				ON	culcoel, Lon	1						
				Date:	Stiplog As	M	Date:		D	ate:		
				(	CERTIFICATI	ON						
	reby certify that I am the											
	ve been authorized by the diction. In addition, if a											
	I have the authority to en											
	permit.	itor air are	as covered by si	aon pon	int at any reason	140101	nour to cintor	ee the provi	ision or	une code(s) up	pricacio to	
	-											
_												
SIG	NATURE OF APPLICANT				ADDRES	S		DATE		PHC	ONE	
RES	SPONSIBLE PERSON IN CH	ARGE OF W	VORK, TITLE					DATE		PHC	DNE	



## General Building Permit Application

. My substitute personal communication and management of the communication of the communicati

Location/Address of Construction: 265 \	western Promerade Pa	17land, Me					
Total Square Footage of Proposed Structure / A	rea						
Tax Assessor's Chart, Block & Lot Applicant *must be owner, Lessee or Buyer* Telephone:							
Chart# Block# Lot#	Name Sara Cope 307-773						
003 A 008	Address 265 Western fromenade						
	City, State & Zip Por-Hom d, MR						
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of					
	Name	Work: \$ 1 800. 50					
	Address	C of O Fee					
	City, State & Zip	Total Fee: \$ 30.00					
Total ree: \$							
Current legal use (i.e. single family)	rent Singy family home	C					
If vacant, what was the previous use?  Proposed Specific use: Making Front	Grenit Sairs - Porchaste	ST Arcosstone front power of safe					
Is property part of a subdivision?	If yes, please name	Stock consider					
Project description: Folding new f	functions and cementa bloc	as that are					
Is property part of a subdivision? NO Project description: Flding new f  8" x 8" x 16" C  Existing Frair Walls and	uncreta transfer to su	DOWN THE STYLLY					
Carlos Stair Walls and	(i) and in tweeting to see	<b>F</b> ( <b>0</b> )					
Contractor's name: Michael Butte	or Jr.	(00)					
Address: 47 Tapley Road		4					
City, State & Zip Scarbsrough 1	10 04074 TO	lephone:(207)510-1399					
Who should we contact when the permit is read		-					
Mailing address: 47 Tapley Roc.	d Scarbirough, Meuyo-	PΓ					
Please submit all of the information	outlined on the applicable Checklis	st. Failure to					

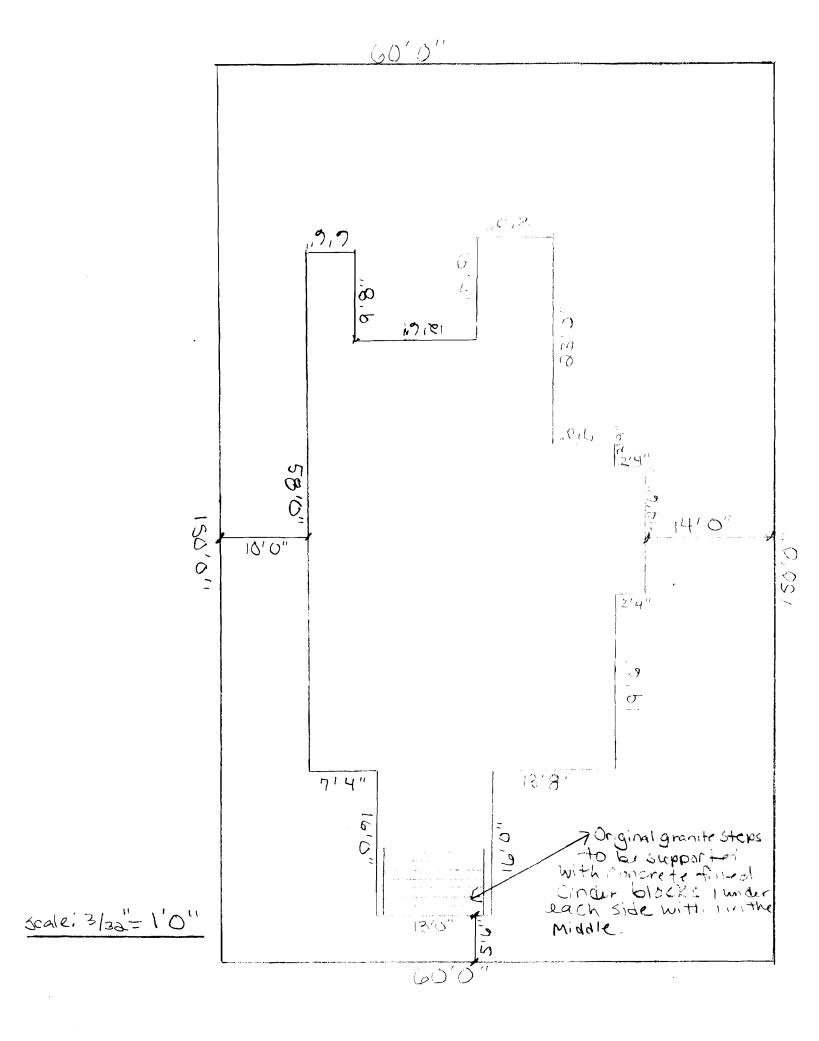
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

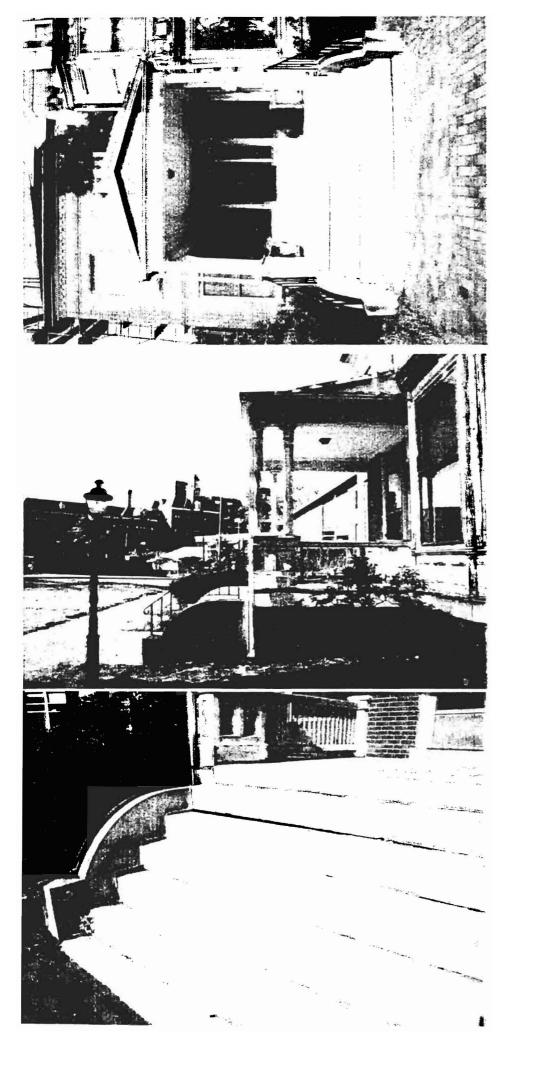
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: 🦻	nichael	Buther-	Date: 🖘   4   69	·	

This is not a permit; you may not commence ANY work until the permit is issue





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Promined Steirs Sile view at acs western

2000 Strong Let 05

Showing the creaks Album 265 Western Promonede

