

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

INSPECTION PERMIT

Permit Number: 070298

This is to certify that WORSTER TASHA ANN / Ter Noone

has permission to replace in kind rotted deck joists PT 2 x

AT 255 WESTERN PROMENADE

063 A010001

provided that the person or persons responsible for 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.

PERMIT ISSUED
MAR 23 2007
CITY OF PORTLAND

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

Notification of inspection must be given and when permission proceeds before this building or part thereof is started or closed-in. 4 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

3/23/07 *Cheryl M.*
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

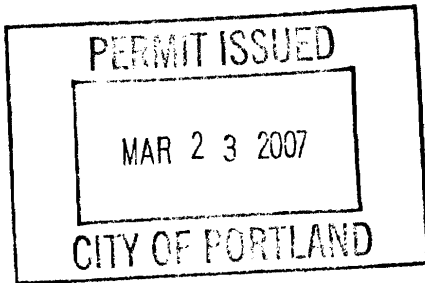
Permit No: 07-0298	Issue Date:	CBL: 063 A010001
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Location of Construction: 255 WESTERN PROMENADE	Owner Name: WORSTER TASHA ANN	Owner Address: 255 WESTERN PROMENADE	Phone:
Business Name:	Contractor Name: Peter Noone	Contractor Address: 246 Main Street Westbrook	Phone 2077490519
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone:

Past Use: Single Family Home	Proposed Use: Single Family Home - replace in kind rotted deck joists PT 2 x 8	Permit Fee: \$30.00	Cost of Work: \$500.00	CEO District: 2
Proposed Project Description: replace in kind rotted deck joists PT 2 x 8		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB IRC-2003	
		Signature: <i>3/24/07 [Signature]</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: Idobson	Date Applied For: 03/23/2007	Zoning Approval		
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <i>SOME FOOTPRINT</i> <input type="checkbox"/> Site Plan <i>OK</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>3/24/07 [Signature]</i>	<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: _____	<input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input checked="" type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>walk to be done as per scopes walk submitted by homeowner</i> Date: <i>3/28/07</i> <i>D. Anderson</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.

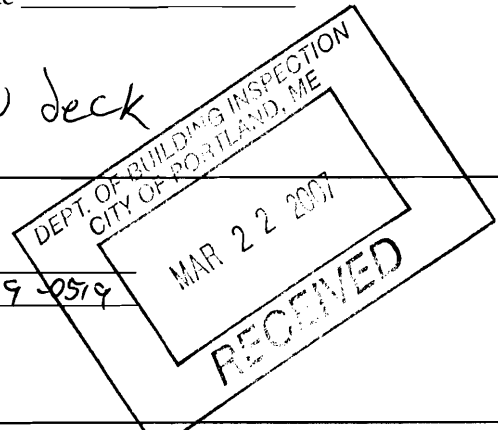
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



General 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: <u>255 WESTERN PILEMAN AVE</u>		
Total Square Footage of Proposed Structure <u>(800 FT²)</u> <u>REPLACE ROTTEN JOIST - 8 X 10 DECK</u>	Square Footage of Lot <u>0.16 ACRE (7200 SQ FT)</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>(63-A-10) OR (21161-252)</u>	Owner: <u>JASON VICORY</u>	Telephone: <u>207 775-2207</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Peter Noone</u> <u>246 MAIN ST WEST BRIDGE</u> <u>207 749-0519</u>	Cost Of Work: \$ <u>500</u> Fee: \$ _____ C of O Fee: \$ _____
Current legal use (i.e. single family) <u>SINGLE FAMILY</u> If vacant, what was the previous use? _____ Proposed Specific use: _____ Is property part of a subdivision? _____ If yes, please name _____ Project description: <u>REPLACE ROTTEN JOIST ON DECK</u>		
Contractor's name, address & telephone: Who should we contact when the permit is ready: <u>Peter Noone</u> Mailing address: _____ Phone: <u>207 749-0519</u>		



Please submit all of the information outlined in the Commercial Application 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 visit us on-line at www.portlandmaine.gov, stop by the Building Inspections 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 of applicant: <u>Peter Noone</u>	Date: <u>3/23/07</u>
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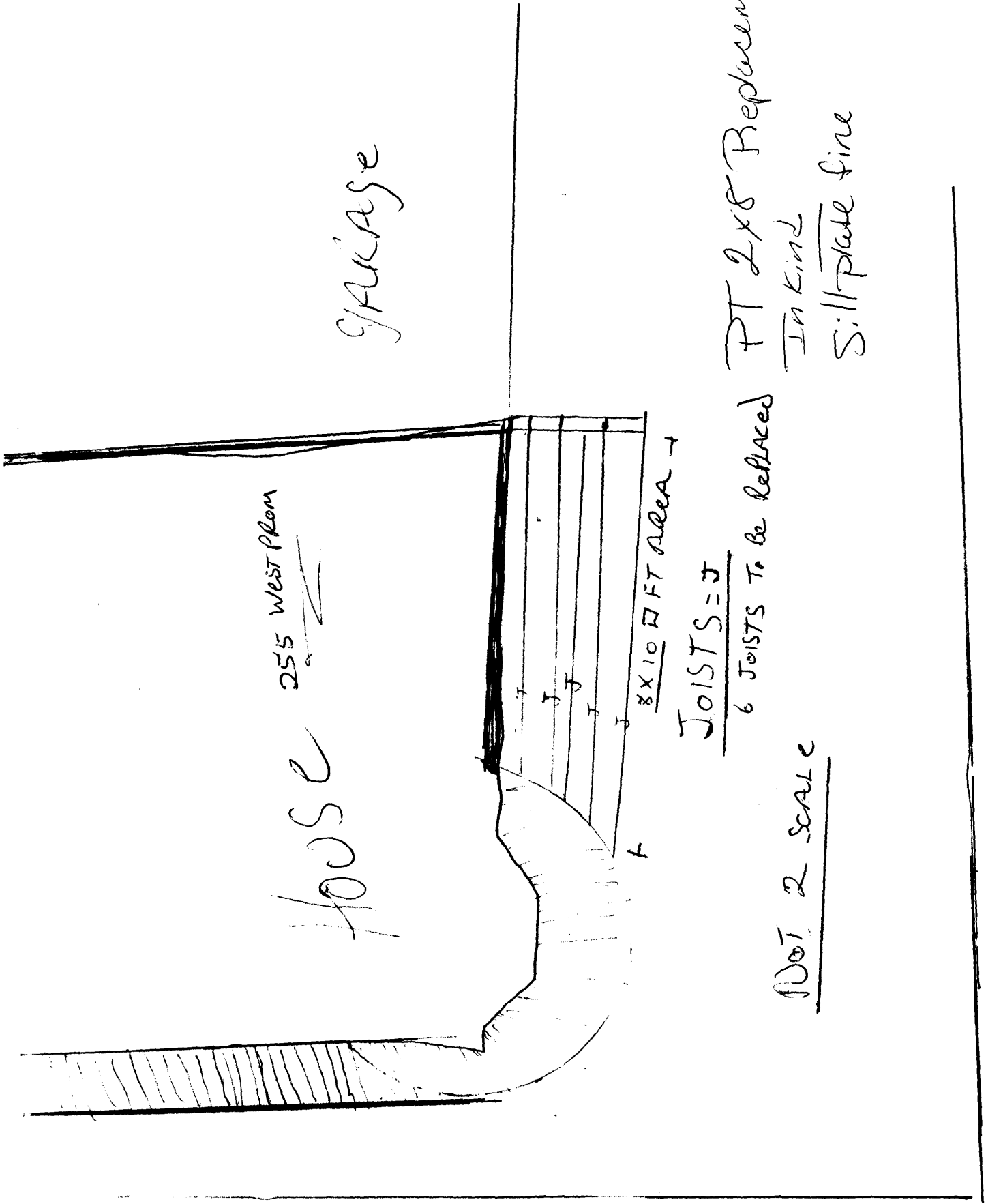
This is not a permit; you may not commence ANY work until the permit is issued.

WESTERN FROM side

HOUSE

255 WEST FROM

Garage



JOISTS = J

6 JOISTS TO BE REPLACED

PT 2x8 REPLACEMENT
IN KIND
Sill plate fine

NOT 2 SCALE