

Scanned

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 070386

Please Read Application And Notes, If Any, Attached

This is to certify that WORSTER TASHA ANN for Noone  
has permission to replace in kind rotted deck joists, sill, ic box wall

AT 255 WESTERN PROMENADE

063 A010001

APR 19 2007

provided that the person or persons firm or person 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  
APR 19 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 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

*[Signature]* 4/13/07  
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: 07-0386	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: Amendment to Single Family	Zone:

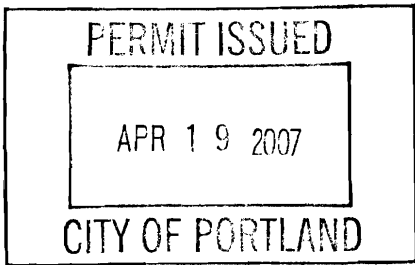
Past Use: Single Family Home	Proposed Use: Single Family Home replace in kind rotted deck joists, sill, ice box wall	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 2
Proposed Project Description: replace in kind rotted deck joists, sill, ice box wall		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>NA</i>	INSPECTION: Use Group: <i>12-3</i> Type: <i>5B</i> <i>IRC 2003</i>	
		Signature:	Signature:	

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: 04/11/2007	<b>Zoning Approval</b>		
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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"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input checked="" type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date:	Date:	Date: <i>4/11/07 SEA</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