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: 050411

epting this permit shall comply with all

ances of the City of Portland regulating

of buildings and statures, and of the application on file in

This is to certify that	Dye Jason /self				
has permission to	Removal of third floor deck r				DIEC
AT 270 Brackett St			d	. 063 D002001	

ine and of the

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ation

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 in must go hand with permission procubing or the third in ding or the thereof is ed or consed-in.

H. R. 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

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Cit	y of Portland, Maine	- Building or Use l	Permi	t Applicatio	n Pe	rmit No:	Issue Date	:	CBL:		
	Congress Street, 04101	•			- 1	05-0411			063 D0	002001	
Location of Construction: Owner Name:						r Address:		Phone:			
270	0 Brackett St Dye Jason					Brackett St #	1		207-232-5417		
Busi	ness Name:	Contractor Name	Contractor Name:						Phone		
n/a		self	self			tland				,	
Less	ee/Buyer's Name	Phone:			Permit Type:					Zone:	
n/a		n/a	n/a			erations - Mu	lti Family		184		
Past Use: Proposed Use:			<u> </u>	Permit Fee: Cost of			Cost of Wor	rk: CEO District:		7	
	lti Family / 4 Units	•	val of third floor deck		\$30.00		\$300.00		2		
111	in a mining of the control	roof.			FIRE DEPT:		- INCDE		CTION:		
							Approved		Use Group: Typ		
	^	,				Denied					
رفا	galuse: 4 rosidi	intell Dil									
Prop	osed Project Description:				1						
Rer	noval of third floor deck re	oof.			Signature: Sig				ignature:		
						STRIAN ACT	IVITIES DIS				
								`			
					Actio	n: Appro	ved Ap	proved w	/Conditions	Denied	
					Signa	iture:			Date:		
Pern	nit Taken By:	Date Applied For:				Zonino	Approva				
gg		04/19/2005				Zomng	Approv	aı			
1.	This permit application d	oes not preclude the	Spe	cial Zone or Revi	ws	Zoni	ng Appeal		Historic Preservation		
1.	Applicant(s) from meetin			amalam d					Not in District or Landman		
	Federal Rules.	g applicable state and	Sn	oreland	Variance				Not in District of Landman		
1	Divitaling mannels decrees to			etland	Miscellaneous				Does Not Require Review		
2. Building permits do not include plumbing, septic or electrical work.			w	енапо	Miscenaneous				Boes Not Require Review		
-			Flood Zone			Conditional Use			Requires Review		
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				ood Zone	Conditional Osc				Requires Review		
			s,,	bdivision	Interpretation  Approved				Approved w/Conditions		
			50	barvision							
			Sit	e Plan							
			Site Fian			/ прриочец					
			Maj Minor MM			Denied			Denied to D.A.		
Wild William											
			Date:	enth cox	Date:				Date: D. Andru B.		
			Date.	9 4/2	105 Date:				10.100 J. 1440 40 J		
				) (10	11				4/	24/05	
									l	l	
			C	ERTIFICATI	ΩN						
I her	eby certify that I am the ov	wner of record of the na				nosed work is	s authorized	by the	owner of reco	rd and that	
I hav	ve been authorized by the o	owner to make this appli	cation a	is his authorize	d agen	t and I agree	to conform	to all a	owner of recon	of this	
juris	diction. In addition, if a pe	ermit for work described	l in the	application is is	ssued,	I certify that	the code of	ficial's a	authorized repr	resentative	
shall	have the authority to enter	r all areas covered by su	ch pern	nit at any reason	iable f	nour to enforce	ce the provi	ision of	the code(s) ap	plicable to	
such	permit.										
SIGNATURE OF APPLICANT			_	ADDRESS			DATE			NE	
_											
RES	PONSIBLE PERSON IN CHAR	GE OF WORK, TITLE					DATE		PHO	NE	