



# General Building Permit Application

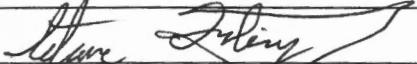
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Address/Location of Construction: 264 Brackett Street Portland ME		
Total Square Footage of Proposed Structure:		
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#	Applicant Name: Adam Ginsberg Address 17 Mast Rd City, State & Zip Scarborough ME 04074	Telephone: 207 317 0961 Email: adam@mastconstructioncorp.com
Lessee/Owner Name : (if different than applicant) Address: Anna Prescott City, State & Zip: 264 Brackett Street Portland ME 04102 Telephone E-mail:	Contractor Name: (if different from Applicant) Mast Construction Address: 17 Mast Rd City, State & Zip: Scarborough ME 04074 Telephone 317 0961 E-mail: adam@mastconstructioncorp.com	Cost Of Work: \$10,500 C of O Fee: \$ Historic Rev \$ Total Fees : \$
Current use (i.e. single family) <u>Multi-Family</u>		
If vacant, what was the previous use? _____		
Proposed Specific use: _____		
Is property part of a subdivision? <input type="checkbox"/> If yes, please name _____		
Project description: <u>Bathroom Renovation - Drywall Removal Plaster + adding</u>		
Who should we contact when the permit is ready: <u>Adam Ginsberg</u>		
Address: <u>17 Mast Rd</u>		
City, State & Zip: <u>Scarborough ME 04074</u>		
E-mail Address: <u>adam@mastconstructioncorp.com</u>		
Telephone: <u>207 317 0961</u>		

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

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 <http://www.portlandmaine.gov/754/Applications-Fees> 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: 	Date: 6/25/15
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This is not a permit; you may not commence ANY work until the permit is issued.