

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 08-0782	<b>Issue Date:</b>	<b>CBL:</b> 063 D016001
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<b>Location of Construction:</b> 50 CARLETON ST	<b>Owner Name:</b> CABOT OLIVIA A	<b>Owner Address:</b> 50 CARLETON ST	<b>Phone:</b> 207-770-2230
<b>Business Name:</b>	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Change of Use - Dwellings	<b>Zone:</b>

<b>Past Use:</b> Two Family Residential	<b>Proposed Use:</b> Two Family Residential - Change Legal Use to Single Family Residential	<b>Permit Fee:</b> \$105.00	<b>Cost of Work:</b> \$0.00	<b>CEO District:</b> 2
<b>Proposed Project Description:</b> Change Legal Use to Single Family Residential		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type	
		Signature:	Signature:	
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
		Signature:	Date:	

<b>Permit Taken By:</b> lmd	<b>Date Applied For:</b> 06/30/2008	<b>Zoning Approval</b>		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.  2. Building permits do not include plumbing, septic or electrical work.  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..	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied
	Date:	Date:	Date:

**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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

<b>Location of Construction:</b> 50 CARLETON ST	<b>Owner Name:</b> CABOT OLIVIA A	<b>Owner Address:</b> 50 CARLETON ST	<b>Phone:</b> 207-770-2230
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<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Change of Use - Dwellings	<b>Zone:</b>

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 07/01/2008

**Note:** **Ok to Issue:**

- 1) The reduction of dwelling units with the removal of one kitchen and its associated facilities extinguishes all and any nonconforming rights. Future addition of units shall meet the requirements of the underlying zone at that time.
- 2) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 3) This property shall remain a single family dwelling with the issuance of this permit and subsequent issuance of a certificate of occupancy. Any change of use shall require a separate permit application for review and approval.
- 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Jeanine Bourke      **Approval Date:** 07/03/2008

**Note:** **Ok to Issue:**

- 2) This is a Change of Use ONLY permit. It does NOT authorize any construction activities.

**Comments:**

7/1/2008-mes: Olivia Sawyer is the same person as Olivia Cabot - She recently got married.

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SIGNATURE OF APPLICAN

\_\_\_\_\_  
ADDRESS

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DATE

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PHO

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

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DATE

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