Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BERNIT

Permit Number: 081501

This is to certify that	THAXTON STEVEN I	Mair iners			
has permission to	Partition wall in kitchen	, new pubing in	th same nting sy	n	
AT 94 NEAL ST UNIT	Γ-#18		9	063 G01	601S
of the provisions	, maintenance an	of Mage and o	of the	es of the	permit shall comply with all City of Portland regulating I of the application on file in
Apply to Public Wor and grade if nature such information.		Not ation o give nd writt befor this buil lath or oth DHOL NOTICE	permissic procured or procured in sed-in. 20 IS REQUIRED.	A pro	certificate of occupancy must be ocured by owner before this buildgroup or part thereof is occupied.
OTHER REQUIRE					
Fire Dept		The state of the s			
Appeal Board				-//	be Cot 10h
Other	Ont Name		_	12/3/	Pector - Building & Inspection Services
	PEN	IALTY FOR RE	EMOVING THIS	CARD	·

City of Portland, Mai	ne - Building or Use	Permit Applicatio	n Permit No:	Issue Date:	,	CBL:		
389 Congress Street, 041	•		l l	12/2/	08	063 G0	1601S	
Location of Construction:	Owner Name:		Owner Address:	 		Phone:		
94 NEAL ST UNIT #1S	THAXTON	STEVEN P	94 NEAL ST # 1	S				
Business Name:	Contractor Nan	ne:	Contractor Address: Phone			Phone		
	Mainetainers		14 Lotts Drive Windham			20731088	367	
Lessee/Buyer's Name	Phone:		Permit Type:				Zone:	
			Additions - Mul	ti Family			1 K-6 Pr	
Past Use:	Proposed Use:		Permit Fee:	Cost of World	c CF	O District:		
Multi-unit Condo	1 -	ondo - Partition wall in	\$190.00 \$17,00			2	11.4	
Width diff Condo		plumbing in bath same	FIRE DEPT:		INSPECTI			
	venting syste		TIRE BEI I.	Approved	Use Group	\sim	Type:	
		,		Denied	Ose Group	10	رون ۱	
local use' Cox	residential Co	ndominiums	^			250	, -000 ,	
Proposed Project Description:	CS(Very TIA)	WICHTON (WINC.	4		4			
Partition wall in kitchen, no	yy nlumbing in both come	vanting system	C:		C:	01	17/0/0	
raitition wan in kitchen, no	w plumonig in oath same	e venting system	Signature: PEDESTRIAN ACT	IVITIES DIST		Signature: 12/3/08		
,			,				V	
			Action: Appro	ved App	roved w/Cor	nditions	Denied	
			Signature:		De	ite:		
Densit Teles Den	Date: A sulled Fam.							
Permit Taken By: ldobson	Date Applied For: 12/01/2008		Zoning	g Approva	I			
		Special Zone or Revi	ews Zoni	ng Appeal		Historic Pres	ervation	
1. This permit application		Special Zone of Kevi	<u> </u>					
	ting applicable State and	Shoreland	☐ Variano	☐ Variance		Not in District or Landmark		
Federal Rules.								
2. Building permits do no	·	Wetland	Miscellaneous		Does Not Require Review			
septic or electrical wor	k.							
	oid if work is not started	Flood Zone	Conditional Use Interpretation			Requires Review		
within six (6) months of		1				Approved		
False information may	_	Subdivision						
permit and stop all wor	rk		1		1			
		Site Plan	Approv	ed		Approved w/	Conditions	
		}						
	***************************************	Maj Minor MM	Denied			Denied (
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	1	Date:	Date:		Date	500	Lwwst	
		514	1109)			<u> </u>	Honey	
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					`	voor,	150	
CITY OF	PORTLAND					1.11	Ĺ	
<u>L VIII UE I</u>	GARAGE V							
		CERTIFICATI	ON					
I hereby certify that I am the	owner of record of the n	amed property, or that t	he proposed work i	s authorized	by the ow	ner of recor	d and that	
I have been authorized by the								
jurisdiction. In addition, if a	a permit for work describ	ed in the application is i	ssued, I certify that	the code off	icial's auth	orized repr	esentative	
shall have the authority to en	nter all areas covered by s	such permit at any reaso	nable hour to enfor	ce the provis	sion of the	code(s) ap	plicable to	
such permit.								
SIGNATURE OF APPLICANT		ADDRES	<u> </u>	DATE		РНО	NE	
or in the month		ADDICES	~	DAIL		1110		
RESPONSIBLE PERSON IN CH	ARGE OF WORK, TITLE			DATE		РНО	NE	

City of Portland, Maine - Building or Use Permit				Permit No:	Date Applied For:	CBL:	
389 Congress Street, 04101 Tel: (· ·		-8716	08-1501	12/01/2008	063	G01601S
Location of Construction: Owner Name:			Owner Address: Phone:				
94 NEAL ST UNIT #1S	EAL ST UNIT #1S THAXTON STEVEN P			94 NEAL ST # 1S			
Business Name: Contractor Name:			(Contractor Address:		Phone	·
Mainetainers			14 Lotts Drive Windham		(207) 310-8867		
Lessee/Buyer's Name	Phone:		F	Permit Type:			
			Additions - Multi Family				
Proposed Use:		I	Proposed	d Project Description:			
Six Residential Condos - Partition wa	all in kitchen, new plumb	ing in	Partitio	on wall in kitchen,	new plumbing in bat	h same	venting system
bath same venting system							
•					•		
Dept: Zoning Status: A	Approved with Condition	s Rev	iewer:	Marge Schmucka	al Approval D	ate:	12/01/2008
Note:				· ·		Ok to	Issue: 🗹
	1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic						
District.	parate review and approv	ar una m	istoric i	reservation. This	property is located w	itilli ali	Tristorie
2) This is NOT an approval for an a	dditional dwelling unit.	You SHA	LL NC	T add any addition	nal kitchen equipmen	t includ	ling, but
not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.							
3) This property shall remain a six residential family condominium building. Any change of use shall require a separate permit							
application for review and approv	val.						
4) This permit is being approved on	the basis of plans submit	tted. Any	deviat	ions shall require a	separate approval be	efore sta	arting that
work.							
Dept: Building Status: A	Approved with Conditions	s Rev	iewer:	Chris Hanson	Approval D	ate:	12/03/2008
Note:	••				••	Ok to	Issue: 🗹
1) Separate permits are required for any electrical, plumbing, HVAC or exhaust systems. Separate plans may need to be submitted for							
approval as a part of this process.		, -1		y 000 20puiu	r ramo may mood to	20 540	
2) ANY exterior work requires separate review and approval thru Historic Preservation							
,							

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.						
X Framing/Rough Plumbing/	Electrical: Prior to Any Insulating or drywalling					
X Final inspection required a	at completion of work.					
1 7 1	d for certain projects. Your inspector can advise you if ecupancy. All projects <u>DO require</u> a final inspection.					
If any of the inspections do not occur REGARDLESS OF THE NOTICE O	r, the project cannot go on to the next phase, DR CIRCUMSTANCES.					
CERIFICATE OF OCCUPANICES THE SPACE MAY BE OCCUPIED.	MUST BE ISSUED AND PAID FOR, BEFORE					
Signature of Applicant/Designee	Date					
Signature of Inspections Official	 Date					

CBL: 063 G01601S **Building Permit #**: 08-1501

General Building Permit Application

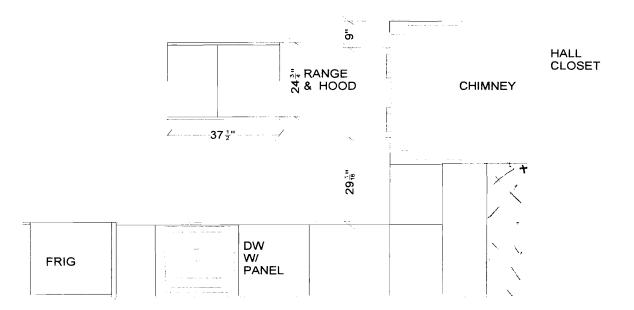
property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 94	Veal	St.		
Total Square Footage of Proposed Structure,		Square Footage of Lot		Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Name 77	1 must be owner, Lessee or Buy 1. tch Lehigh 14 Letts Dr. 2. & Zip Wiwham ME.O.		Telephone: 310-8862
Lessee/DBA (If Applicable) DEC 1 2003	Name 7	different from Applicant) Haxtor 94 Mal St. & Zip Portland, MR	Co	st Of ork: \$ 17, 007 - 00 of O Fee: \$ tal Fee: \$
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: CONDO Is property part of a subdivision? Project description: Some yeting sy Contractor's name: Maine Tain I	vall in	If yes, please name		
Address: 14 Lo HS Dr. City, State & Zip Wind ham, V Who should we contact when the permit is rea Mailing address: 5 A MF	ME. ady: MHC	04062 T		. <u> </u>
Please submit all of the information do so will result in the		on the applicable Checking the denial of your permit.	ist. F	allure to
n order to be sure the City fully understands the nay request additional information prior to the is his form and other applications visit the Inspections office, room 315 City Hall or call 874-8703.	ssuance of a p	ermit. For further information of	or to d	lownload copies of
hereby certify that I am the Owner of record of the rat I have been authorized by the owner to make this ws of this jurisdiction. In addition, if a permit for wo athorized representative shall have the authority to errovisions of the codes applicable to this permit.	application as rk described in	his/her authorized agent. I agree t this application is issued, I certify	o confe that the	orm to all applicable e Code Official's
ignature: M. L. J. J. J.	Dat	e: 12/1/08		
This is not a parmit; you may		ice ANV work until the norm		

WASHER DRYER

HALL BATH

> MUDROOM HALL



All dimensions size designations given are subject to verification on job site and adjustment to fit job conditions.	TECHNOLOGIES	This is an original de not be released or co applicable fee has be order placed.	pied unless	Designed: 11/3/2008 Printed: 12/1/2008
Thaxton Kitchen Bath FINAL	•	All	Drawing #: 1	Scale: 0 3/8" = 1'

