City of Portland, Maine - Build	Permit No: 08-1296		Issue Date:		CBL:	CBL: 409 D026001				
389 Congress Street, 04101 Tel: (207) 874-8703, Location of Construction: Owner Name:			Pax: (207) 8/4-8/16 Owner Address:				Phone:			
35 TORONITA ST FERRAR AN				35 TORONITA ST		i none.				
Business Name:		Contractor Name:		Contractor Address:				Phone		
property of Lessee/Buyer's Name Phone:		1		Permit Type: Additions - Dwellings				Zone:		
Past Use: Single Family Home	Proposed Use: Single Family detached gara	Home - build new		Permit Fee:   Cost of Wo   \$220.00   \$20,00		000.00 4				
	detached guruge			FIRE D	Approved			NSPECTION: Use Group: Type		
Proposed Project Description: build new detached garage	Signature:		Signature:							
			PEDESTRIAN ACTIVITIES DISTE  Action							
			Signature:			Date:				
ermit Taken By: Idobson Date Applied For: 10/14/2008				Zoning Approval				24.0.		
This permit application does not	preclude the	Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			☐ Variance			Not in District or Landm		
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland			Miscellaneous			☐ Does Not Require Revie		
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			☐ Flood Zon		Conditional Us			Requires Review		
			ubdivision		☐ Interpretatio			☐ Approved		
			ite Plan		Approved		☐ Approved w/Condition			
			Mino MM		Denied			☐ Denied		
			Date:		Date:			Date:		
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all art to such permit.	o make this appl or work described	med projection in the	as his authorized application is iss	ne propo d agent a sued, I c	and I agree to ertify that th	o conform t e code offic	o all app cial's aut	olicable laws of horized repres	of this sentative	
SIGNATURE OF APPLICAN			ADDRESS	S		DATE		Pl	НО	

Location of Construction:	Owner Name:		Owner Address:	Phone:									
35 TORONITA ST	FERRAR ANTHONY		35 TORONITA ST										
Business Name: Contractor Name:			Contractor Address:	Phone									
	property owner												
Lessee/Buyer's Name	Phone:		Permit Type:		I	Zone:							
			Additions - Dwellings										
		1											
<b>Dept:</b> Zoning <b>Status:</b> A	approved with Condition	ns <b>Reviewer:</b>	: Marge Schmuckal	Approval Date	e: 10/	/17/2008							
Note: Ok to Issue: ✓													
1) PLEASE NOTE: Accessory detached structures can not be higher than 18' measured from average grade to the midway point on a pitched roof. Your submitted scaled plan shows this structure to be exactly at 18' high. The Code Enforcement Officer will be confirming this maximum height once the roof structure is in place.													
2) Setbacks are always from property lines. The owner is responsible for knowing where the property lines are located.													
3) As discussed during the review process, the property must be clearly identified prior to pouring concrete and compliance with the required setbacks must be established. Due to the proximity of the setbacks of the proposed addition, it may be required to be located by a surveyor.													
4) Separate permits shall be required for future decks, sheds, pools, and/or garages. This garage is considered to be accessory to your single family dwelling. This 18,000 sq ft lot is considered one lot with the principal use of a single family with an accessory garage. Any changes to this lot SHALL require separate permits and reviews PRIOR to any changes.													
5) This is NOT an approval for an ad limited to items such as stoves, mi	_		•		ncluding, b	ut not							
6) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.													
7) This permit is being approved on work.	the basis of plans subm	itted. Any devi	ations shall require a sepa	rate approval be	efore starti	ng that							
Dept: Building Status: P	ending	Reviewer:	Residential Plan Revie	Approval Date	e:								
Note:	chang	THE VIEWEL	1 Residential Flair Revie		C. Ok to Issu	o. 🗆							
Note.				· ·	OK to Issu	г <b>.</b> Ш							
	1	CERTIFICATIO	N										
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

ADDRESS

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

to such permit.

SIGNATURE OF APPLICAN

DATE

DATE

PHO

PHO