Form # P 04	DISPLAY	THIS	CARD	ON	PRINCIPAL	FRON	TAGE	OF	WORK	
Please Read Application And Notes, If Any, Attached	1	C	BU					it Numb	er: 091047	
	toAmmer	TS DOUGL ad permit# 09		emen	t to est wall two	l spac	$+ \top$		TISSUED	
AT _90_CRESC	hat the perso	on or per	sons, fi	or	composition and of the C	ac pting	this pe	rmit s	2 3 2009 hall comp	ly with all
the construction this depart	uction, main	tenance	and use	f bu	ildings and s	stru, res	, and of	thea	plication	on fil e in
	blic Works for s f nature of work ation.		Not give befo lath HOl	ation nd wi this t or c NOT	ritte permission pui ig or pr	nust b procured hereof i d-in. 2 ED.	procur	ed by d	of occupanc owner before ereof is occup	this build-
	REQUIRED APPR									
•										
						N			11	
Other	Department Name					Thom		- Building &	Inspection Services	23/09

PENALTY FOR REMOVING THIS CARD

.

City of Portland, N	/laine - Bui	lding or Use	Permit	t Application	Permit No:	Issue Date:		CBL:	
389 Congress Street,		0						083A E	007001
Location of Construction:	Owner Name:	Dwner Name:			Owner Address:		Phone:		
90 CRESCENT AVE	ROBERTS DO	ROBERTS DOUGLAS S ETAL			745 JACKSON VALLEY RD				
Business Name:		Contractor Name	:		Contractor Address:			Phone	
Lessee/Buyer's Name		Phone:	Phone:		Permit Type:				Zone:
					Amendment to Single Family				TRZ
Past Use:		Proposed Use:				Cost of Work	1	District:	
Single Family Home -	connnected	Single Family			\$30.00		0.00	1	
w/ permit#090584		permit# 09058		asement to	FIRE DEPT: Approved INSPECTION:				
		nost wan craw	frost wall crawl space			Denied	Use Group:	RS	Type: 55
							TR	c v	103
Proposed Project Description	D n:					ľ			, ,
Ammend permit# 090:	584 full basen	nent to frost wall	crawl sp	bace	Signature:		Use Group: \mathcal{R}_{3} Type: 5 \mathcal{R}_{3} $\mathcal{I}_{\mathcal{R}_{3}}$ $\mathcal{I}_{\mathcal{N}_{3}}$ Signature: $\mathcal{I}_{\mathcal{N}_{3}}$ $\mathcal{I}_{\mathcal{N}_{3}}$		
				PEDESTRIAN		RIAN ACTIVITIES DISTRICT (P.A.D.)			
					Action: Approved App		roved w/Conditions Denied		
					Signature:		Date:		
Permit Taken By:		pplied For:			Zoning Approval				
Ldobson	09/2	1/2009							
1. This permit application does not preclude the			Spec	cial Zone or Review	ews Zoning Appeal		Historic Preservation		ervation
Applicant(s) from meeting applicable State an Federal Rules.			Shc	Shoreland Variance		e	Not in District or Landmark		t or Landmark
2. Building permits do not include plumbing,			🗌 🗌 We	Wetland Miscellaneous		aneous	Does Not Require Review		
septic or electrical work.Building permits are void if work is not started			🗌 Flo	ood Zone	Conditional Use		Requires Review		iew
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			Subdivision						
					Interpretation			Approved	
			Site	e Plan	Approv	ed		approved w/	Conditions
PERMIT ISSUED			Maj 🗌 Minor 🗌 MM 🗍		Denied			Denied	
			Date:	$m_{9/23}$	Date:		Date:	h~ 92	3
	SEP 2 3 2		•	l ·			-	'1	
CIT	Y OF POR	TLAND							

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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

SURGAL HUR

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.

Location/Address of Construction: 90	Crescent Ave GDI	 - -
Total Square Footage of Proposed Structure/1		Number of Stories
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# $\delta 3$ AE 7	Applicant * <u>must</u> be owner, Lessee or Buye Name IVAN'S BETADE Address 67 Boothby AVE City, State & ZipS. Ptld ME 04106	207-939-6572
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Narry Connolly Address & Z Scien St City, State & Zip Pt1 d, IME 04106	Cost Of Work: \$ C of O Fee: \$ Total Fee: \$
If vacant, what was the previous use? Proposed Specific use:	<u>C Flow y</u> Number of Residentia <u>JK FQuerty</u> If yes, please name to FOST WALL CRAWL	
Contractor's name: <u>FANIS</u> Bennie Address: <u>67</u> BOOTWAY AVE City, State & Zip <u>5</u> , <u>Pt1 dy</u> <u>ME</u> Who should we contact when the permit is ready Mailing address: <u>67</u> BOOTHAY AU	04/06 Te Travis Benube Te	lephone: <u>939-6572</u> lephone: <u>939-6572</u>

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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 <u>www.portlandmaine.gov</u>, 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:

This is not a permit; you may not commence ANY work until the permit is issue

Revised 07-11-08

•	e - Building or Use Permit 1 Tel: (207) 874-8703, Fax: (2	Permit No: 09-1047	Date Applied For: 09/21/2009	CBL: 083A E007001	
Location of Construction:	Owner Name:	Owner Address: Phone:		Phone:	
90 CRESCENT AVE	ROBERTS DOUGLAS	S S ETAL	745 JACKSON V		
Business Name:	Contractor Name:		Contractor Address:		Phone
Lessee/Buyer's Name	Phone:		Permit Type: Amendment to Single Family		
Proposed Use:		Propose	d Project Description		
frost wall crawl space	end permit# 090584 full basement		end permit# 09038	4 full basement to h	rost wall crawl space
Dept: Zoning S	tatus: Approved with Conditions	s Reviewer:	Tom Markley	Approval I	
Note: amendment to permi	t 09-0584				Ok to Issue: 🗸
1) This property shall remain approval.	n a single family dwelling. Any c	hange of use sh	all require a separa	te permit application	n for review and
 This permit is being appr work. 	oved on the basis of plans submit	ted. Any devia	tions shall require a	a separate approval	before starting that
Dept: Building St	tatus: Approved with Conditions	s Reviewer:	Tom Markley	Approval I	Date: 09/23/2009
Note: amendment to permi	t 09-0584				Ok to Issue: 🗹
1) Application approval bas and approrval prior to we	ed upon information provided by ork.	applicant. Any	deviation from app	proved plans require	s separate review





