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

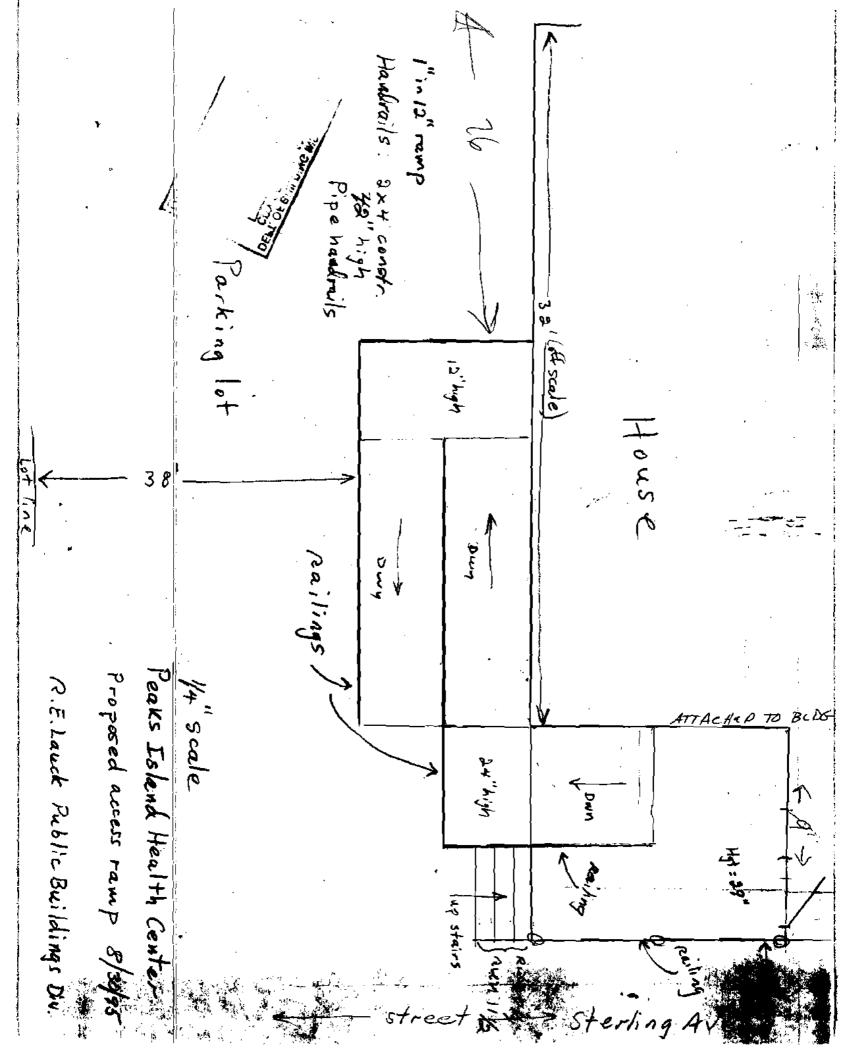
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Location of Construction: Sterling St (?) Peaks Isla	Owner:		Phone:	Permit No: =0095
Owner Address:	and City of Port! Leasee/Buyer's Name:	Phone:	BusinessName:	9 509 2 5
Owner Address.	Peaks Island Health Center		Dusmessivane.	PERMIT ISSUED
Contractor Name:	Address:	Phone:		Permit Issuedi
City			C W	and orn Cloor
Past Use:	Proposed Use:	COST OF WORK:	COLL P	SEP - 6 1995
		\$ 2,000.00	\$ 30.00 (wastved)	83,145
Health Care Benter	Same	FIRE DEPT.		CITY OF PORTLAND
			1 1 1	Zone: CBL:
		Signature: 14	Signature: Hoffen	1-3 087-E (?) 24
Proposed Project Description:			TIVITIES DISTRICT (PAVA)	Zoning Approval:
			oproved	Special Zone or Reviews:
Constants Handless STO	□ □ Shoreland			
Construct Handicap### ramp] 🗆 Wetland			
		0:		Flood Zone Subdivision
Permit Taken By:	Date Applied For:	Signature:	Date:	Site Plan maj minor mm D
Mary Gresik	Sate Applied For. 30	August 1995		
				Zoning Appeal
1. This permit application doesn't preclude the A		e and Federal rules.		□ Miscellaneous
2. Building permits do not include plumbing, sep	ptic or electrical work.		~	Conditional Use
3. Building permits are void if work is not started	□ Interpretation			
tion may invalidate a building permit and stop	Approved Denied			
				Li Denied
				Historic Preservation
				 Not in District or Landmark Does Not Require Review
				Requires Review
				Action:
	CERTIFICATION			Appoved
I hereby certify that I am the owner of record of the				
authorized by the owner to make this application as				
if a permit for work described in the application is				Date: 3/145
areas covered by such permit at any reasonable ho	ur to enforce the provisions of the code(s	s) applicable to such pe	ermit	Date.
				A like to
1 and the second		30 August 1		1 Min la
SIGNATURE OF APPLICANT Richard Lauch	ADDRESS:	DATE:	PHONE:	- Call
	Ale marth as a	NIAT		
RESPONSIBLE PERSON IN CHARGE OF WORK	K, TITLE		PHONE:	
White De	rmit Desk Green-Assessor's Canar		ic File Ivory Card-Inspector	
white-Per	Assessor's Canar	y-D.F.W. PILIK-PUDI	ic rile livery card-inspector	A. Zoul

Type Inspection Record Foundation: 0 K Framing: 0 K Plumbing: 0 K Final: 0 ther:			COMMENTS G/19/46 Ned ballister to Londrash. M. 4-17 9) Mussey Sallister Londrash. M.
cord Date			

Applicant: Richard Lawek Date: 8/31/95 Staling St. Pents Is Address: 101. Island AUE ? Stuling 87-E-24 Assessors No.: CHECK LIST AGAINST ZONING ORDINANCE Date -Zone Location - I-B Interior or corner lot Use -Sewage Disposal -Rear Yards - 10/10g - 26'Shown side Yards Aside ST _ 10'reg - 38' Show Front Yards - 20/01 AVELAGE depth - 16'shown - on some foot print MS Projections -Height -Lot Area -Building Area -Area per Family -Width of Lot -Lot Frontage -Off-street Parking ~ Loading Bays -Site Plan ~ Shoreland Zoning -Flood Plains -Steps New or Just ramp on side RENV Set PACK ?



please check off the appropriate description

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	FOUNDATION		Frost Wall, min 4 8"thick	below grade.	
· •			Sono Tube, 4 ⁻ be) 6 ^m min. on footin bedrock. Ocher		•
	SILL	· · · · · ·	Size		
• •Þ. •	SPAN OF SILL Joist e Span	 9'-	Distance between	foundation supports	
•	JOISTS SIZE		(6 <u>····</u> 2 x 8	2 x.10	
	DISTANCE BETWEEN JOISTS	····/·/·16·	'0.c24	O.Cother	
	DECKING		oche	c explain	
	GUARD HEICHT		36"	42"	
•	DISTANCE BETWEEN BALUSTER	<u> </u>	4" spacing be	Ween	
			9 ⁹ tread 81/4" rise	:	
•	please use space below for dr	cawing of a	ieck with measure	DENCS	
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