

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

Location of Construction: 347 Island Ave, Peaks Isl		Owner: Ross, David & Katherine		Phone: 768-2239		Permit No: 9 50968	
Owner Address: SAA Pctld, ME 04108		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: SEP 13 1995 CITY OF PORTLAND </div>	
Past Use: 1-fam		Proposed Use: 1-fam w/daycare		COST OF WORK: \$			
Proposed Project Description: Change Use from 1-fam to 1-fam w/daycare Max 6 Children		Signature:		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>93</i> Type: <i>513</i>	
				Signature:		Signature: <i>Hoffner</i>	
Signature:		Date:		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>OK with conditions</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>meeting All</i> <input type="checkbox"/> Wetland <i>Home Secy</i> <input type="checkbox"/> Flood Zone <i>requirements</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>major</i> <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: Mary Gresik		Date Applied For: 12 September 1995		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied			

1. This permit application doesn't 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..

PERMIT ISSUED WITH REQUIREMENTS

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 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 provisions of the code(s) applicable to such permit

Katherine Foss
SIGNATURE OF APPLICANT Katherine Foss ADDRESS: _____ DATE: 12 September 1995 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT 6
A. Rowe

COMMENTS

6/19/96 Needs smoke detector. Will call us when it's in.
12-12-96 No longer dry case. Spoke with owner. *aw*

Inspection Record

	Type	Date
Foundation:	N/A	
Framing:	N/A	
Plumbing:	N/A	
Final:		
Other:		

Line 24 Col 78 #1 Ready 12:52pm

RPP095 CAMA Real Property System - Residential Display

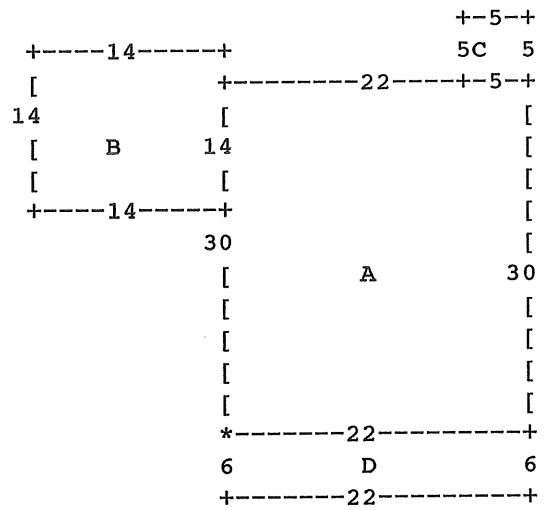
9/12/95

Parcel Id: 087- - H-004-001 01/01 Acct: F2455096

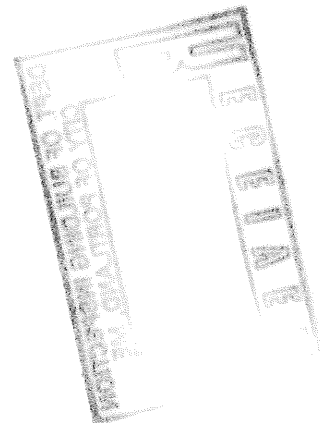
13:26

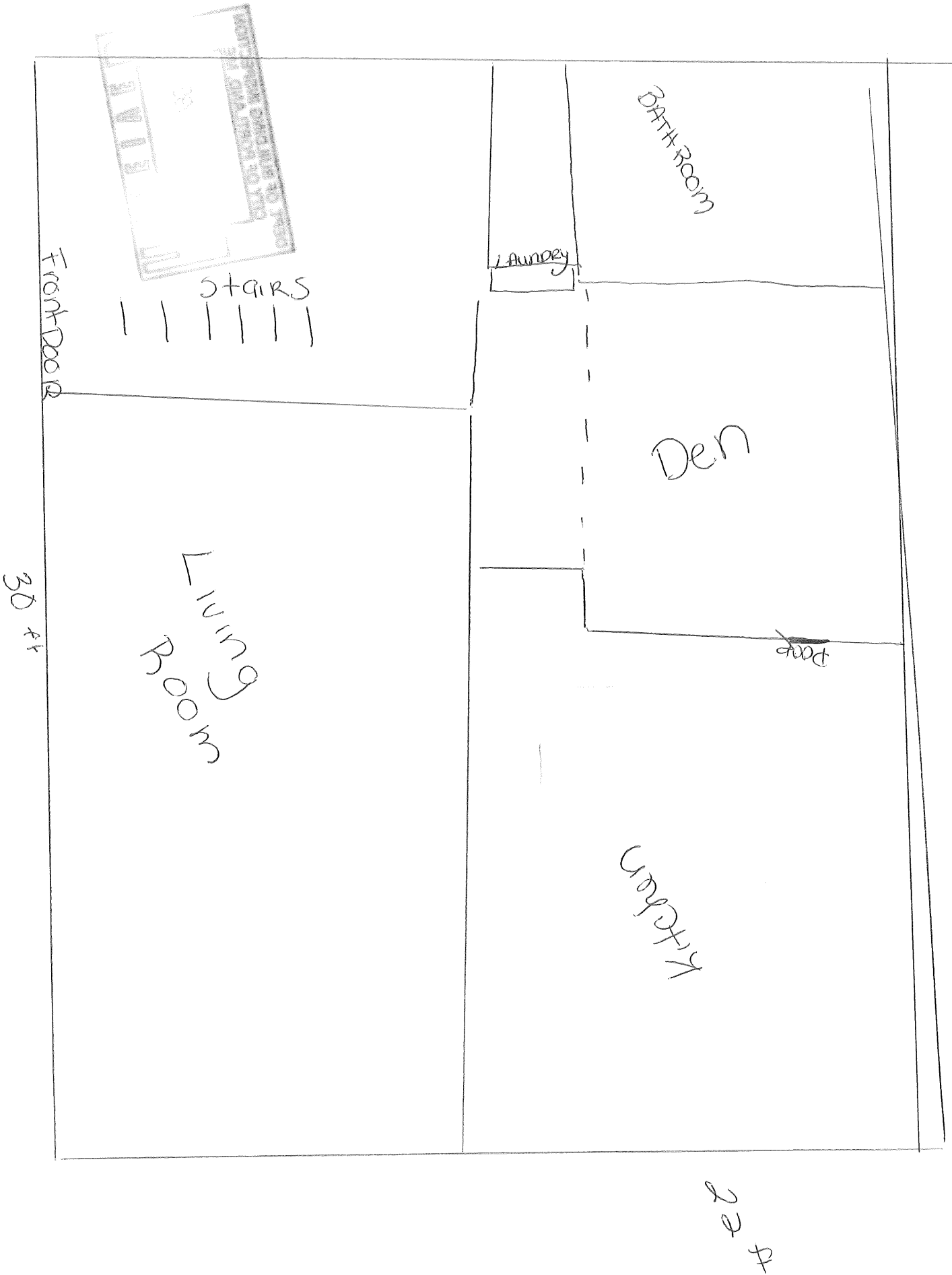
LWR	1ST	2ND	3RD	AREA
A	MAIN	STR		0660
B	14			0196
C	11			0025
D	11			0132
E				
F				
G				
H				
I				

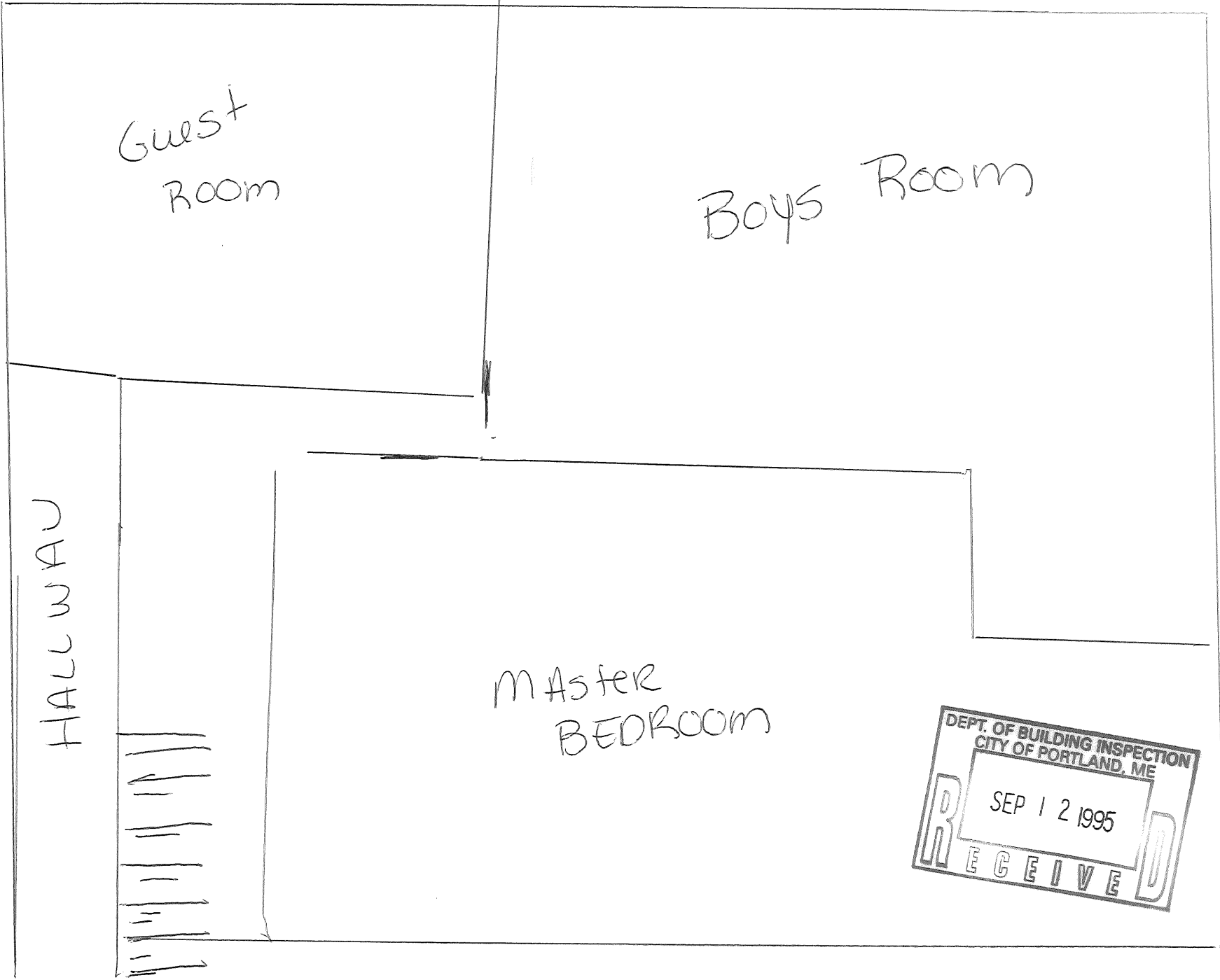
TOTAL AREA: 1155



Return []







Guest
Room

Boys Room

Master
BEDROOM

HALLWAY

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
SEP 12 1995
RECEIVED