Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

	CI	TY OF	PORTL	AND			
Please Read Application And Notes, If Any, Attached		B	RMIT	N	P[ ermit Num	RMIT ISSUED	
This is to certify that	DROMGOOLE THOM	IAS P applican				JUN 1 3 2005	
has permission to	install bulk head and re	locate throom/	rk with permit #	751			
AT 0 ISLAND AVE				_ 090 O01	001 CIT	Y OF PORTLAN	D
of the provision	ne person or persons of the Statutes on, maintenance a	of Name and	of the ar	nces of the	e City o	shall comply was f Portland regularization or	ulating
1 ' ' '	orks for street line re of work requires	N ication gi and wi be re this t	inspec n must n permis n procu ding or t thereo	A		e of occupancy m	

OTHER REQUIRED APPROVALS

such information.

Fire Dept. Health Dept. Appeal Board\_\_\_ Other \_\_\_\_ Department Name ed or declared losed-in. R NOTICE IS REQUIRED.

ing or part thereof is occupied.

Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Building or Use	Permit Applicatio	n Permit No:	+	Is de Indie	SSUED		
<b>389</b> Congress Street, 04101	Tel: (207) 874-8703	8, <b>Fax:</b> (207) 874-871	16 05-0	662		090	O01	0001
<b>Location of Construction:</b>	Owner Name:			s:	JUN 1	3 2005hone		
0 ISLAND AVE	DROMGOOLE THOMAS P		7 WARE A					
Business Name:	Contractor Name	<b>:</b>	Contractor Ad		CITY OF DO	Phone		İ
Applicant		<u> </u>	Portland Permit Type:		CITY OF PC	RTLLAND		Zone:
Lessee/Buyer's Name Phone:			Additions - Dwellings		ings			IR.2
Past use:	Proposed Use:	<u>-</u>	Permit Fee:		Cost of Work:	CEO Distr	ict:	-
Single Family Home	1 -	Home/ install bulk	\$30	.00	\$950.00	2		[
head and reloc within permit #		ate bathroom/ work #041751	FIRE DEPT: Approved IN U		Approved Use	SPECTION: se Group: [2-3 Type: 5B] IRC 2903		
Proposed Project Description:	h-41		$\begin{bmatrix} 1 & 1 \end{bmatrix}$	_/ /			$\langle \mathcal{A} \rangle$	
install bulk head and relocate	pathroom/ work within	permit #041/31	Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
			Action: Approved Approved w/Conditions Denied					Denied
			Signature:			Date:		
Permit Taken By:	Date Applied For:		Zo	ning .	Approval			
ldobson	05/31/2005	Constal 7 and Door		77	- 41	Historic	Duone	- Continu
1.		Special Zone or Revi			g Appeal	^		
		Shoreland		'ariance		<b>U</b> Not in	District	t or Landmarl
2. Building permits do not in septic or electrical work.	Wetland	_	Iiscellan	neous	Does N	lot Req	uire Review	
3. Building permits are void within <b>six</b> (6) months of the		Floori Zone		Condition	nal Use	Require	es Revi	ew
False information may investigate and stop all work	validate a building	☐ Subdivision	I	nterpreta	ation	Approv	ed	
1		Site Plan		pproved	I	Approv	ed w/C	Conditions
		Maj Minor MM		Denied		Denied		/
		Date: 6 10 05	Date:			Date: 6/	10/	05
		( "				1	1	
		CERTIFICATI	ION					

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

## **All Purpose Building Permit Application**

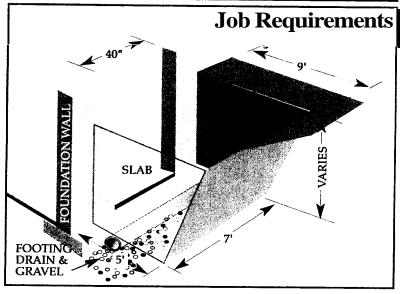
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Total Square Footage of Proposed Structu	ure	Square Footage of Lot		2203/		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	Thomas Dromgode 115 Island noe Pents Island		Telephone: 766 3047 617 686 9584		
Lessee/Buyer's Name (If Applicable)		Applicant name, address & telephone:		cost Of Work: \$ 450.00 Fee: \$ 3000		
Current use: New 5 mg le FA	m_ly_	TO Original PIA	NS			
If the location is currently vacant, what wa	as prior use:			_		
Approximately how long has it been vaca	ınt:	OING	INS	PECTION		
Approximately how long has it been vacant:  Proposed use: #NSTAIL BULK Heard and STOR OF BUILDING INSPECTION  Project description: Relocate BATH room B Side of House  N 2 7 2005						
Contractor's name, address & telephone: Tom Dromy oute 417 Is Investigate 766 3049						
Who should we contact when the permit is ready: Quree RECEIVED						
Mailing address: 7 wine me						
5 AUIN HILL MA 02125						
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 766 3649						
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.						
I hereby certify fhat I am the Owner of record of the n have been authorized by the owner to make this appl						

I hereby certify fhat 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 upplication 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 of applicant:	Van I Dr	Date:	5-27-05

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



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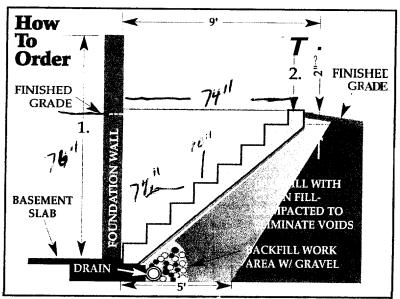
P 1.

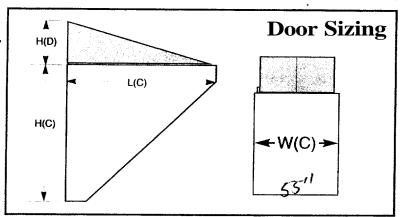
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**3.** 

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16 Casco Street • Portland. Maine 04101-2979 • 207/774-0424 • FAX: 774-0511 • ohi@owenhaskell.com

May 25,2005

Thomas Dromgoole 7 Wave Avenue Savin Hill, MA 02125

RE: 411-415 Island Avenue Peaks Island Portland, Maine

Dear Tom:

Owen Haskell has as-built the foundation of your new building at the above referenced site and has found it to be in compliance with the current zoning setbacks for that site. Should you require any additional information please give me a call.

Very truly yours,

OWEN HASKELL, INC.

William C. Shippen, PLS #21 18

File: 2005-003-03-WCS