

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 02-0880	Issue Date:	CBL: 114 B001001
------------------------------	--------------------	----------------------------

Location of Construction: 86 Winslow St	Owner Name: University Of Maine System	Owner Address: 96 Falmouth St CITY OF PORTLAND	Phone: 207-780-4160
Business Name: n/a	Contractor Name: Pinkham, Peter P.	Contractor Address: PO box 279 Bar Mills	Phone: 2079295562
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Demolitions	Zone: R-5

Past Use: Offices	Proposed Use: Demolition of 2 1/2 story wood structure and detached garage for construction of temporary parking lot.	Permit Fee: \$268.00	Cost of Work: \$35,000.00	CEO District: 2
-----------------------------	---	--------------------------------	-------------------------------------	---------------------------

Proposed Project Description: Demolition of 2 1/2 story structure.	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: QB Type: N/A 8/8/02 Signature: <i>[Signature]</i>
--	--	--

Permit Taken By: gg	Date Applied For: 08/06/2002	Zoning Approval	
-------------------------------	--	------------------------	--

<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>OK 8/7/02</i>	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 Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>[Signature]</i>
---	--	---	---

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 _____

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

DEMOLITION PERMIT

Permit Number: 020880

This is to certify that University Of Maine System, Gorham, ME

has permission to Demolition of 2 1/2 story structure.

AT 86 Winslow St 114 B001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and work on permit must be completed before this building or part thereof is leased or occupied. CLOSED-IN. HOURS NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. [Signature]

Health Dept. _____

Appeal Board _____

Other _____
Department Name

[Signature] 8/9/02
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD