Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

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)	ER	N	117	Permit Number:	09	
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This is to certify thatFLI	NT ANDREW E &	HALLI GILMA					·
					ē.	:	
has permission to Rep	lace sides on entry v	vay R me Doo	Replac	eads in conting	footprint		
AT _10 OAKDALE ST				CI 117	A022001	<u>:</u>	
provided that the per of the provisions of the construction, ma this department.	the Statutes o	of Marie and	of the	aces of	f the City	of Portland	nply with ald regulating on on file in
Apply to Public Works for and grade if nature of works such information.	•	Notification of giver and written before this buill lather or other HOUS NOTICE.	ermissio g or pa	éd-in. 24	procured	ate of occupa by owner befor t thereof is oc	ore this build-
OTHER REQUIRED AF	PPROVALS						
Fire Dept							
Health Dept.						17.	7
Appeal Board				\mathcal{A}_{h}	/ ì	11 ///	=110
Other	9			Mo	Mas M. I Director - Bu	Warter	, 5/17/09

PENALTY FOR REMOVING THIS CARD

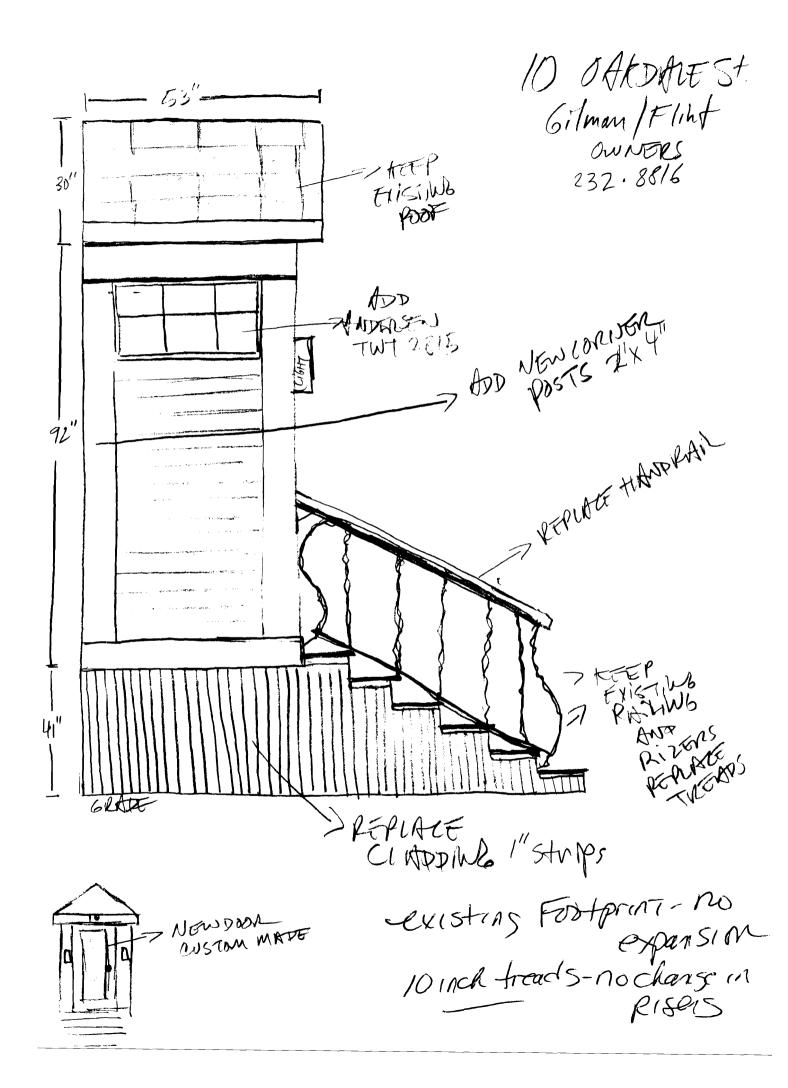
City of Portland, M	[aine - Bui]	lding or Use	Permi	t Applicatio	n P	ermit No:	Issue Date	:	CBL:	
389 Congress Street, 0	4101 Tel: (207) 874-8703	, Fax:	(207) 874-87	.6	09-0449			117 A0	22001
Location of Construction:		Owner Name:	_		Own	er Address:			Phone:	
10 OAKDALE ST FLINT AND			EW E	& HALLIE F	10 (OAKDALE S	T			
Business Name: Contracto			: :		Cont	ractor Address:			Phone	
Lessee/Buyer's Name Phone:				_		nit Type:				Zone:
		<u> </u>]	Alt	terations - Dw	ellings			165
Past Use: Proposed Use:					Pern	nit Fee:	Cost of Wor	k:	CEO District:	
Single Family Home Single Fam						\$50.00	\$3,00	00.00	2	
			s on entry way _ Reframe or - Replace treads in existing		FIR	E DEPT:	Approved	INSPE	CCTION:	Tuna:
		footprint	• www.	m vsimg			Denied	Use G	roup. R 3	Type. 5 12
									IRCZ	M3
Proposed Project Description									roup: R3 IRC2	-(
Replace sides on entry v footprint	vay _ Refram	e Door - Replace	e treads	in existing		ature:	WEIDO DIO	1 ° 1/ 3/19/01		
rootprint					PED	PEDESTRIAN ACTIVITIES DISTRIC			CT (P.A.D.)	
					Actio	on: Appro	ved Ap	proved w	//Conditions	Denied
					Sign	ature:			Date:	
Permit Taken By: Ldobson		pplied For: 2/2009				Zoning	g Approva	al		
1. This permit applica			Spe	cial Zone or Revi	ews	vs Zoning Appeal		\top	Historic Preservation	
Applicant(s) from n Federal Rules.			☐ Sh	noreland	_	☐ Variance			Not in District or Landman	
 Building permits do not include plumbing, septic or electrical work. 			│ □ w	etland		☐ Miscell	aneous		Does Not Require Review	
3. Building permits are within six (6) month	e void if work		☐ Flood Zone ☐ ☐ ☐		Conditi	Conditional Use		Requires Review		
False information mermit and stop all	nay invalidate		Subdivision Inter		_ Interpre	Interpretation		Approved		
	معا مرضو و مورسات از المو	and the second s	☐ Si	te Plan		Approv	ed		Approved w/	Conditions (
			Maj [Minor MM	[Denied			Denied	
	•1		Date:	m 5/12	107	Date:		Е	Date: J~	
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<u> </u>										
			_	epperator Ace	ON					
I hereby certify that I am	the cumar of	record of the		CERTIFICATI		magad wards :	s authorized	hu tha	oumer of rece	rd and that
I have been authorized by jurisdiction. In addition,	y the owner to	make this appli	ication a	as his authorize	d agei	nt and I agree	to conform	to all a	pplicable laws	of this
shall have the authority to such permit.										
SIGNATURE OF APPLICAN	T			ADDRES	S		DATE	;	PHC)NE
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE					DATE		PHC	NE

General Building Permit Application

I have of the property owner ower real estate of personal property takes of user charges on any property which the Chy powners arrangements have be made before permits of any since are accepted.

Total Square Footage of Proposed Struc	GAGA	
Tax Ass es sor's Chart, Block & Lot '	Applicant *must be owner, Lesse	
Chart# Block# Lot#	Name ANDREW E. F	ZINT 232-86
117 # 22	Address (O ONK D H	EST.
• • •	City, State & Zip VMTUN	Į.
Lessee/DBA (If Applicable)	Owner (if different from Applica	nt) Cost Of 2000 Work: \$
	Name	Work: \$
	Address	C of O Fee: \$
	City, State & Zip	Total Fee: \$
f vacant, what was the previous use?	If yes, please name des on enly way - Ref int street	
f vacant, what was the previous use? Proposed Specific use: Sproperty part of a subdivision? Project description: Replace Significant State State O OAK PALE Ty, State & Zip Portugue Ty, State & Zip Portugue Typical State State Typical State Typi	If yes, please name des on enly way - Ref. INTERESTREET ME 04103	Telephone: 232-8816
Proposed Specific use: s property part of a subdivision? Project description: Replace Signification of the second of the seco	If yes, please name des on entry way - Ref. Int STREET ME 04103 ready:	Telephone: 232-8816
f vacant, what was the previous use? Proposed Specific use: Sproperty part of a subdivision? Toject description: Replace Six Ontractor's name: JO DAK PIALE ity, State & Zip Portugation Tho should we contact when the permit is ailing address: Show E Please submit all of the information	If yes, please name des on enly way - Ref. INTERESTREET ME 04103	Telephone: 232-8816 Telephone: Telephone:
f vacant, what was the previous use?	If yes, please name	Telephone: 232-8816 Telephone: Telephone: Telephone: necklist. Failure to mit. and Development Department ation or to download copies of

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





Permitting By Appointment

As part of Portland's city-wide effort to improve customer service and help streamline doing business ng

and for specific construction projects. Under this new program, you may be eligible to receive a building permit on the day you have a scheduled appointment with Inspection staff.
This permitting program applies only to existing one and two family homes not located within a historic district or shore land zone.
Eligible Projects
Please submit a complete application with the required plans
☐ Interior renovations, gut rehabs including structural changes
□ Attached and detached garages
Additions, decks, sheds, pools, dormers (two family addition must be less than 500 s.f.)
Rebuild of any exterior structure listed above
Inspections are still required per City Code of Ordinance.
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 visit us on-line at www.portlandmaine.gov , stop by the Building Inspections office, room 315 City Hall or call 874-8703.
I hereby certify that this project meets the above criteria and that the work performed will not go beyond these parameters.
Signature of applicant: Date: 5 / 1 / 19

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

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

Date

Signature of Inspections Official

Date

CBL: 117 A022001 **Building Permit #:** 09-0449

City of Portland, Maine - Buile 389 Congress Street, 04101 Tel: (2	•	116	Permit No: 09-0449	Date Applied For: 05/12/2009	CBL: 117 A022001				
Location of Construction:	Owner Name:	207) 074-07		wner Address:		Phone:			
10 OAKDALE ST	FLINT ANDREW E &	HALLIE F							
Business Name: Contractor Name:			C	Contractor Address: Phone					
Lessee/Buyer's Name Phone:			Permit Type: Alterations - Dwellings						
Proposed Use:		Prop	osed	Project Description:		-			
Single Family Home - Replace sides on entry way _ Reframe Door - Replace treads in existing footprint Replace treads in existing footprint Replace sides on entry way _ Reframe Door - Replace treads in existing footprint									
Dept: Zoning Status: A	pproved with Conditions	Review	er:	Tom Markley	Approval Da	ite: 05/12/2009			
Note:					1	Ok to Issue: 🗹			
1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.									
 This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. 									
Dept: Building Status: A	pproved with Conditions	Review	er:	Tom Markley	Approval Da	te: 05/12/2009			
Note:						Ok to Issue: 🔽			
Permit approved based on the plar noted on plans.	s submitted and reviewe	ed w/owner/c	ontra	actor, with addition	nal information as ag	reed on and as			