89 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874		5, 1 ax. (20/) 6/4-6/	_=	· Address:	+=		119 E00	
16 Beacon St			16 B	eacon St	CITY	OF P	0 774-6270	
Business Name: Contractor Name		e:	Contra	actor Address:			Phone	
	Creative Mase	Creative Masonry		8 West Sand Pond Road Limingto			n 2076718779	
Lessee/Buyer's Name	Phone:			t Type: endment to S	Single Family	/		R-5
Past Use:	Proposed Use:	•		it Fee:	Cost of Worl		CEO District:	
Single Family	Single Family	•		\$93.00	\$10,00	1-3	3	<u> </u>
			FIRE	DEPT:	Approved	Use Gr	CTION:	Type:
					Denied	R	3	5B
			ĺ			0	301A 199	9
Proposed Project Description	on:					-	0.0	1.1
Amend Permit # 02-099	90- Adding a Single Flu	Fwo Flu Chimney	Signat			Signatu		19/02
		mille	PEDE	STRIAN ACT	IVITIES DIST	CRICT (1	P. M. D.)	'
:			Action: Appro				Denied	
			Signa	ture:			Date:	
Permit Taken By:	Date Applied For:			Zoning	g Approva	al		
gad	10/02/2002			7			Historic Prese	
 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 Re	views		ing Appeal		Not in Distric	
		Wetland		Miscell	laneous		Does Not Req	uire Review
		☐ Flood Zone		Conditi	ional Use		Requires Rev	iew
		Subdivision		_ Interpre	etation		Approved	
		Site Plan		Approv	/ed		Approved w/G	Conditions
		Maj Minor M	IM 🗍	Denied			_ Denied	
		Date: 10/9/02		Date:		D	Date: 10/9/0	2
		•					, ,	

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

02-1120

All Purpose Building Permit Application

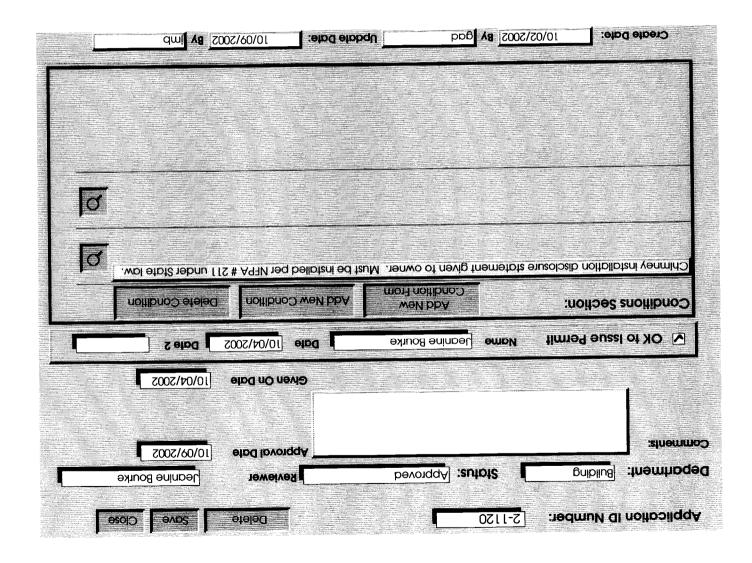
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 16	REAG	n 87.	
Total Square Footage of Proposed Structu	ure enu	Square Footage of Lot	7283
Tax Assessor's Chart, Block & Lot Chart# 119 Block# E Lot# 9	Owner:	BICK STONES	Telephone: 541-6027 (心) 774-6270 (4)
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: 15 Beacon		Cost Of Work: \$ 10,000.
If the location is currently vacant, what we Approximately how long has it been vacant. Proposed use: Project description:	as prior use:		A SINGLE FLOW AND
Contractor's name, address & telephone: Who should we contact when the permit Malling address: We will contact you by phone when the review the requirements before starting a	is ready:	dy. You must come in and a a Plan Reviewer. A stop	d pick up the permit and work order will be issued
We will contact you by phone when the r	permit is reac ny work, with the permit	dy. You must come in and a Plan Reviewer. A stop is picked up. PHONE:	work order will be issued

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 that 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 application 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:	Date: LU/SloS
This is NOT a permit, you may not commence A	ANY WORK UNTIL TO DEPROPEUR DING INSPECTION
If you are in a Historic District you may be subject to	additional permitting concrete with the
Planning Department on the 4 ^t	th floor of City Hall



Chimney #1

Top d'ubore 101eur Il Air Racell 8 x8 FLU TUES Blueb

comprover 10/1/02 Chimney # restarion biplace male of Brick Flis one for Pirebre (13x13) & 5 motors for wood stone (8 "88") chimner shall 36" bingplan All NEP-DI STate there heart so" Codes. wordstove with 888 blue block , 89 12 " on 4 36" for Jacks will only you .

CREATIVE MASONRY & DESIGN, INC. SCOTT MAC DONALD

8 WEST SAND POHD ROAD LIMITIGTORE MARIE 04049 207-642-5472 207-642-5647 gifff@adelphia.net 2671,6779

PROPOSAL

July 26, 2002

JOEL POIRIER CONSTRUCTION CHURCH STREET WESTBROOK, MAINE

SINGLE FLU BRICK CHIMNEY......\$2,000.00

2 FLU FIREPLACE TO EXISTING MANTEL WITH 32" FIREBOX ALL BRICK OUTSIDE.......\$8,000.00

TOTAL MATERIAL AND LABOR\$10,000.00

THANK YOU

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGEER MITWORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

ECTION

OCT 9 2002 Permit Number: 021120 CITY OF PORTLAND

epting this permit shall comply with all

ances of the City of Portland regulating

of buildings and statures, and of the application on file in

This is to certify that Stover Patrick J/Creative Max ry

has permission to _____ Amend Permit # 02-0990- Acc g a Sing Flu & wo Flu C they

AT 16 Beacon St _____ Stover Patrick J/Creative Max ry

This is to certify that ____ Stover Patrick J/Creative Max ry

Amend Permit # 02-0990- Acc g a Sing Flu & wo Flu C they

The stop of t

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tion

provided that the person or persons, of the provisions of the Statutes of the construction, maintenance and u this department.

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

N fication inspect in must go and with a permit in procuum to the procuum field or discontinuous for the procum field of the procum

ne and of the

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

OTHER REQUIRED APPROVALS

Fire Dept.

Health Dept.

Appeal Board

Other

Department Name

PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 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 inspection procedure and additional fees from Work Order Release" will be incurred if the policy.	a "Stop Work Order" and "Stop
Pre-construction Meeting: Must be schreceipt of this permit. Jay Reynolds, Developme also be contacted at this time, before any site wo single family additions or alterations.	ent Review Coordinator at 874-8632 must
Footing/Building Location Inspection:	Prior to pouring concrete 10/9/02
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electrical:	Prior to any insulating or drywalling
use.	r to any occupancy of the structure or NOTE: There is a \$75.00 fee per ection at this point.
Certificate of Occupancy is not required for certa you if your project requires a Certificate of Occup inspection	pancy. All projects DO require a final
<u>∧</u> H If any of the inspections do not occur, t phase, REGARDLESS OF THE NOTICE OR	
CERIFICATE OF OCCUPANICES M BEFORE THE SPACE MAY BE OCCUPIED	
The same	10/9/02
Signature of applicant/designee	$\frac{ v a v }{ b a a }$
Signature of Inspections Official	Date / /
CRI : $119 - E - 9$ Building Permit # 02	-1120