Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

has permission to _

WERECTION

PEDM

Permit Number: 061795

epting this permit shall comply with all

nances of the City of Port and regulating uctures, and of the application on file in

120 A029001

| Γhis | is to certify that | Turnipseed, | Kathie I. |
|------|--------------------|-------------|-----------|
| | | , | |

Change of use from single fact y home Single mily Hor // Office

rm or

aine and or the control of buildings and

tion 2

PERMIT ISSUED

JAN 2 2 2007

AT 112 CRAIGIE ST

Other _

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and

this department.

ificatio of insperion must even and ven permeton proceed or ilding of the control of the control

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

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

OTHER REQUIRED APPROVALS

Fire Dept. ______

Health Dept. _____

Appeal Board _____

Department Name

PENALTY FOR REMOVING THIS CARD

Scanned

| 389 Congress Street, 04101 Tel: (207) 874-8703 | | | | | | 120 A029001 | | | | |
|--|--|---|--|---------------------------------|---|------------------------------|---------------|---|--|--|
| Location of Construction: Owner Name: | | | | Owner Address: | | | Phone: | | | |
| 112 CRAIGIE ST Turnipseed, | | | | 112 CRAIGIE ST | | | ni. | | | |
| Business Name: Contractor Na | | e: | | Contractor Address: | | | Phone | | | |
| KAST Shuttle Service | | | Bounit Times | | _ | | | I Zamar | | |
| Lessee/Buyer's Name Phone: Kathie Turnipseed 207-8 | | 207-899-1422 | | | Permit Type: Change of Use Home Occupation | | | | Zone: 2 | |
| <u></u> | | | | | | | | | | |
| | | Proposed Use: | | | Permit Fee: Cost of Work: Cost of Work: | | | District: | | |
| Single Pain | ny nome | | Single Family Home - Change of use from single family home to Single Family Home w/ Office | | Trop prom | | | | | |
| | | | | | IKE DEI 1. | Approved | Use Group: | ∩. 0-ス | Type:, 5 2 | |
| | | | | | L | Denied | س و الم | トノ | 1000 | |
| | | | | | | | ĺ | Use Group: R-3 Type: 52 [R-3003] Signature: 1/4/07 CSH. | | |
| Proposed Pro | ect Description: | | | | | | | | | |
| | - | mily home to Single Fan | nilv Home w | / Office | Signature: Signat | | | iture: 1/a/07 cslt. | | |
| Simple of the from single family nome to single I | | , | J | | PEDESTRIAN ACTIVITIES DISTRICT | | | (P.A.D.) | | |
| | | | |], | action: Approv | ved 🗀 App | roved w/Cond | litions [| Denied | |
| | | | | | Approv | veu App | ioved wicond | indons | Deliled | |
| | | | | S | ignature: | | Date | : : | | |
| Permit Taken | By: | Date Applied For: | | | Zoning | Approva | ıl | | | |
| ldobson | | 12/18/2006 | | | | | | | | |
| 1. This pe | rmit application of | does not preclude the | Special 2 | Zone or Reviews | e or Reviews Zoning Appeal | | H | Historic Preservation | | |
| Applicant(s) from meeting applicable Stat Federal Rules. | | ng applicable State and | Shoreland | | Variance | | | Not in District or Landma | | |
| 2. Building permits do not include plumbing, septic or electrical work. | | Wetland Miscellaneo | | ineous | Does Not Require Review | | | | | |
| 3. Building permits are void if work is not started within six (6) months of the date of issuance. | | | Flood Zone Conditional | | onal Use | Requires Review | | | | |
| False information may invalidate a building permit and stop all work | | Subdivision | | Interpre | rpretation | | Approved | | | |
| | magnetic state throughout the state and a supplement of the party. The | magazang in ny yanahin sakanda akkand dina in | Site Pla | n . 1 | Approve | ed | | Approved w/ | Conditions | |
| PERMIT ISSUED R R R | | | Maj Milor MM Deni | | Denied | bs C | | ☐ Denied | | |
| | | | Date: | Date: | | | Date: | | / | |
| | | | | 5 191 | | | <u> </u> | | / | |
| C | TY OF FORT | LAND | | | (| | | | | |
| | | | CED | TIDICA TION | .T | | | | | |
| [harahı: : | ify that I am the | owner of record of the na | | TIFICATION | | | la a ala a | | العاملية | |
| I have been a jurisdiction. shall have th | nuthorized by the In addition, if a p | owner to make this applipermit for work describer all areas covered by su | ication as hi d in the app | s authorized a lication is issu | gent and I agree ed, I certify that | to conform t the code off | to all applic | able laws orized repr | of this resentative | |
| such permit. | | | | | | | | | | |
| SIGNATURE | OF APPLICANT | | | ADDRESS | | DATE | | PHC | ONE | |
| | | | | | | | | | | |

62/21/67- Checked new Office space for home occupation. OK for new Coff. Jun M

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CITY OF PORTLAND, MAINE Department of Building Inspection



Certificate of Occupancy

LOCATION 112 CRAIGIE ST

CBL 120 A029001

Issued to Turnipseed, Kathie L

Date of Issue 02/23/2007

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 06-1795 , has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Entire

Single Family Ocupancy With Home Occupation, Use Group R-3, Type 5b, IRC 2003

Limiting Conditions:

This does not certify City of Portland Building Code compliance, only a change of use.

| This certificate supersedes certificate issued | |
|--|------------------------|
| Approved: | |
| (Date) Inspector | Inspector of Buildings |

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.