City of Portland, Maine - Building or Use Permit Application							ermit No:	Issue Dat	te:	CBL:		
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		05-1775			120 D00	1001	
Location of Construction: Owner Name:						Owne	Owner Address:			Phone:		
99	Edwards St	Mulligan Marg	Mulligan Margaret M			Edwards St						
Busi	iness Name:		Contractor Nan			Cont	ractor Address	s:		Phone		
			Carey Monsell & Co.			23 Glenwood Ave. Portland			207775398	34		
Less	see/Buyer's Name		Phone:			Permit Type:			l .	Zone:		
and the second s						Alterations - Dwellings						
Past	t Use:		Proposed Use:			Permit Fee: Cost of Work:			ork:	CEO District:		
Sin	gle Family		-	add 64sf shed dormer n 2nd floor			\$129.00	\$12,0	00.00	3		
			for new bath o			FIRE DEPT:		· .		CTION:		
						Approved		Use G		Type		
							L	Denied				
Prop	posed Project Description	:	<u> </u>									
_	d 64 sf dormer for new b		l floor			Signature: Signat			Signatu	ture:		
						PEDESTRIAN ACTIVITIES DISTRICT						
										/C 1:4:		
						Actio	on: Appro	ved Ap	proved w	v/Condition	Denied	
						Signa	ature:			Date:		
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval						
dn	nartin	12/07	/2005				Zomig	, ripprovu	-			
1.	This permit application	does not	preclude the	Spec	Special Zone or Review		Zoning Appeal			Historic Preservation		
1.	 This permit application does not pred Applicant(s) from meeting applicable Federal Rules. 			Shoreland			☐ Variance			☐ Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			☐ Does Not Require Revie			
3. 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				☐ Flood Zon			Conditional Us			Requires Review		
				Subdivision			☐ Interpretatio			☐ Approved		
			Site Plan			Approved			Approved w/Condition			
				Maj Minor MM		☐ Denied			☐ Denied			
				Date:			Date:		D	Date:		
					CERTIFICATIO	ON						
I ha juris shal	reby certify that I am the we been authorized by the sdiction. In addition, if a Il have the authority to er uch permit.	e owner to permit for	o make this appli r work described	cation a	as his authorized application is is	d agen sued, l	nt and I agree to the certify that the	to conform ne code offi	to all ap	oplicable laws of athorized repres	of this sentative	
SIG	GNATURE OF APPLICAN				ADDRES	S		DATI	Ξ	Pl	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:	Owner Address:	Phone:	
99 Edwards St	Mulligan Margaret M	99 Edwards St		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Carey Monsell & Co.	23 Glenwood Ave. Portland	2077753984	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
Alterations - Dwellings				

Reviewer: Dept: Zoning Status: Approved with Conditions Jeanine Bourke **Approval Date:** 12/12/2005 Ok to Issue: ✓ Note: 1) Approved using Sec. 14-436 to allow a 50% expansion of the first floor footprint if nonconforming to min. Land area. This construction only adds 36sf Building Status: Approved with Conditions Dept: **Reviewer:** Jeanine Bourke **Approval Date:** 12/12/2005 Ok to Issue: Note:

1) As discussed, the energy conservation code requires wall to be R-19, ceiling R-38 and windows to have max u-factor of 0.35

Comments:

12/07/2005-jmb: customer requested same day review

12/12/2005-jmb: Left vm w/Carey M. &spoke w/owner about energy code

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 APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО