Form # P 04

Other _

Department Name

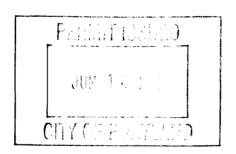
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

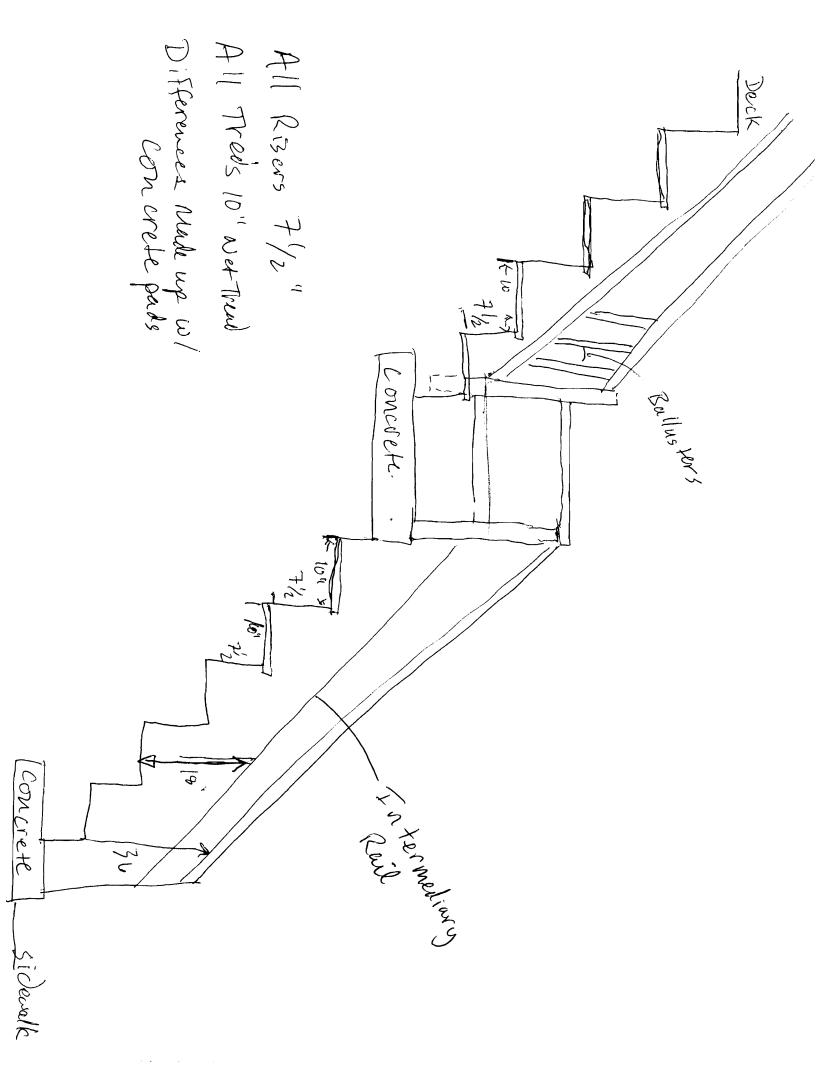
	ITY OF PORTLAI	ND
Please Read Application And	EMPECTION	
Notes, If Any,		
Attached	PERMI	Permit Number: 070694
		Penint (Salar)
This is to certify that MILLARD JAMES A	& KR TINE S MILL ARD/Owner	Control of the Contro
has permission toRemodel_existing_stai	rs	JUN 14 C.
AT _365_STEVENS_AVE		2 G002001
provided that the person or pers	ons. I'm or a septin	gthis permit shall comply wi
of the provisions of the Statutes the construction, maintenance a		of the City of Portland regules, and of the application on f
this department.	and to or bandings and several	o, and or the apphoanon on t
Apply to Public Works for street line	N fication inspect in must be good and with a permit on procu	A certificate of occupancy mus
and grade if nature of work requires	b re this ding or t there	procured by owner before this b
such information.	la ed or consed-in.	ing or part thereof is occupied.
	H JR NOTHOL 15 MEQUIRED.	
OTHER REQUIRED APPROVALS		
Fire Dept		
Health Dept.		
Appeal Board		

PENALTY FOR REMOVING THIS CARD

City of Portland,	Maine - Bui	ilding or Use	Permi	t Application	ı P	ermit No:	Issue Date	:	CBL:	
389 Congress Street	, 04101 Tel:	(207) 874-8703	B, Fax:	(207) 874-871	6 L	07-0694	06	/14/200	7 122 G	002001
Location of Construction:	:	Owner Name:			Owner Address:				Phone:	
365 STEVENS AVE		MILLARD JAMES A & KRISTINE			365 STEVENS AVE				871 1382	
Business Name: Contractor Nam		1.		Contractor Address:				Phone		
		Owner			Po	rtland				
Lessee/Buyer's Name Phone:		Phone:			Permit Type:				Zone:	
					Al	terations - Dw	ellings			R-5
Past Use:		Proposed Use:		_	Per	mit Fee:	Cost of Wor	k:	CEO District:	
Single Family Single Fam		Single Family	y			\$50.00	\$2,50	00.00	5	
					FIR	E DEPT:	Approved	INSPEC	CTION:	-0
							Denied	Use Gro	oup: K-3	Type: 5 13
							_		+00	-2003
										O y
Proposed Project Descript									111	06 01
Remodel existing sta	irs				Signature: S PEDESTRIAN ACTIVITIES DISTR		Signatu	Use Group: R-3 Type: 59 TRC-2003 Signature: 6/14/01 CLN		
					PED	ESTRIAN ACTI	VITIES DIS	FRICT (P	P.A.D.)	
					Acti	ion: Approv	ved 🗌 App	proved w/	Conditions [Denied
					Sign	nature:			Date:	
Permit Taken By:	Doto 4	Applied For:	1		Jigi			<u> </u>	Date.	
csh		4/2007				Zoning	Approva	l l		
			Spe	cial Zone or Revie	ws	Zoni	ng Appeal	<u> </u>	Historic Pre	servation
1. This permit appli Applicant(s) from		•	l							
Federal Rules.	ii iiiceting appii	icable State and	Shoreland			☐ Varianc	e		Not in District or Landma	
		1 1		أد سمالهم		Miscella			Door Not P	anira Daviaw
2. Building permits septic or electrical		plumbing,	Wetland Miscella		ineous	eous Does Not Requir		equite Review		
•		ek is not started	Flood Zone		Conditional Use			Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building			Subdivision		Interpretation			Approved		
permit and stop a	ll work	_		1		, k				
			☐ Si	te Plan	•	Approve	ed		Approved w	/Conditions
				O						
au	VIII	•	Maj [Minor MM		Denied			Denied	
UN	AJTS			1./	۸	,			1.7	O 4 4
		a contained.	Date: (olylor C		Date:		Da	ate: 6/14/01	Chil
:				7 11	,	-				
		beli								
n i wil na damah igin daya ang										
				CERTIFICATION						
I hereby certify that I a										
I have been authorized jurisdiction. In addition										
shall have the authority										
such permit.	,		1	,			1		(-)]	•
SIGNATURE OF APPLICA	ΔΝΤ		_	ADDRESS	3		DATE		Ditt	ONE
SIGNATURE OF APPLICA	DINI			ADDKES:	,		DATE		rno	NAID.
RESPONSIBLE PERSON	IN CHARGE OF	WORK, TITLE					DATE		PHO	ONE

City of Fortiand, Maine - Building of Ose Fernint				Date Applied For:	CBL:	
389 Congress Street, 04101 Tel: ((207) 874-8703, Fax: (207) 874-8716	07-0694	06/14/2007	122 G002001	
Location of Construction: Owner Name:			wner Address:	Phone:		
365 STEVENS AVE	MILLARD JAMES A	& KRISTINE 3	665 STEVENS AV	871 1382		
Business Name:	Contractor Name:		ontractor Address:		Phone	
	Owner		Portland			
Lessee/Buyer's Name	Phone:		Permit Type:			
		Alterations - Dwellings				
Proposed Use:		Proposed	Project Description:			
Single Family		Remode	el existing stairs			
		ì				
Dept: Zoning Status: A	Approved	Reviewer:	Chris Hanson	Approval Da	ate: 06/14/2007	
Note:					Ok to Issue:	
Dept: Building Status: A	Approved with Condition	s Reviewer :	Chris Hanson	Approval Da	ate: 06/14/2007	
Note:					Ok to Issue:	
1) Fastener schedule per the IRC 20	03					
Application approval based upon and approrval prior to work.	information provided by	applicant. Any d	eviation from app	roved plans requires	separate review	





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.

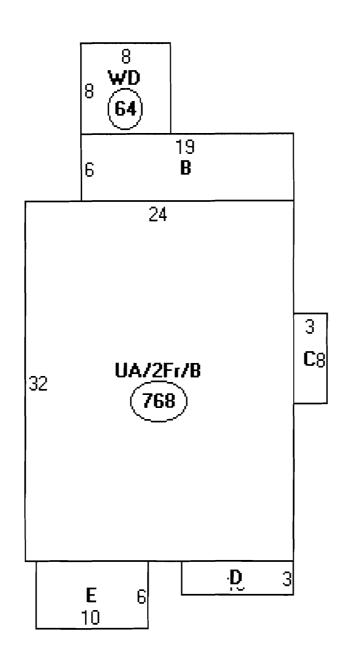
The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are 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 Presconstruction Meeting will take place upon receipt of your building permit

Footing/Building Location Inspection:	Prior to pouring concrete
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
	to any occupancy of the structure or NOTE: There is a \$75.00 fee per
inspectate of Occupancy is not required for certain your project requires a Certificate of Occupation	ancy. All projects DO require a final
inspections of Occupancy is not required for certain your project requires a Certificate of Occupation III any of the inspections do not occur, to	n projects. Your inspector can advise ancy. All projects DO require a final se project cannot go on to the next
inspectate of Occupancy is not required for certain your project requires a Certificate of Occupation III any of the inspections do not occur, to, REGARDLESS OF THE NOTICE OR	n projects. Your inspector can advise ancy. All projects DO require a final ne project cannot go on to the next CIRCUMSTANCES.
inspectate of Occupancy is not required for certain your project requires a Certificate of Occupation of the inspections do not occur, to, REGARDLESS OF THE NOTICE OR CERIFICATE OF OCCUPANICES MORE THE SPACE MAY BE OCCUPIED	n projects. Your inspector can advise ancy. All projects DO require a final ne project cannot go on to the next CIRCUMSTANCES. UST BE ISSUED AND PAID FOR;
inspectate of Occupancy is not required for certain your project requires a Certificate of Occupation If any of the inspections do not occur, to, REGARDLESS OF THE NOTICE OR CERIFICATE OF OCCUPANICES MORE THE SPACE MAY BE OCCUPIED	n projects. Your inspector can advise ancy. All projects DO require a final ne project cannot go on to the next CIRCUMSTANCES.





Descriptor/Area

A: UA/2Fr/B 768 sqft

B:1Fr 114 sqft

C:FBAY/B 24 sqft

D:2FBAY/B 30 sqft

E: OFP 60 sqft

F: WD 64 sqft

General 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: 365	Stevi	ens Ave f	ortlan	n)				
Total Square Footage of Proposed Structure		Square Footage o	CT - 4					
? Set of stains to replace &	existing	50 X100	50	000				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	11100	ان م	Telephone:				
Chart# Block# Lot#		and Kris	TIME	871-1382				
I /D L >		Millard						
Lessee/Buyer's Name (If Applicable)	Applicant na	me, address & telep	ohone:	Cost Of Work: \$ 2,500.00				
	James	M. Mill	and	71 02221				
		·		Fee: \$				
				C of O Fee: \$				
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use:	be fami	19						
Proposed Specific use: Same								
Is property part of a subdivision? NO								
Project description:		·	1/ 441.	- china of				
Replace often 3 tairs (wood +	onareic) h) ma	8/200				
Replace exerting stairs (Same dimensions to meet	t curre	it codes (Same	-foot Print)				
Contractor's name, address & telephone:			}					
Who should we contact when the permit is ready: James H. Milland Mailing address: Home Phone: 971-1382								
365 Stevens Ave Cell	7 id	2-0784						
Portland 04103	719							
Please submit all of the information outli	ned in the (Commercial App	lication C	Checklist.				
Failure to do so will result in the automa-								
In order to be sure the City fully understands the full								
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.								
p zamaning mspec	dons office, for	in 515 Ony 11au or or	11 07-1-0703					
hereby certify that I am the Owner of record of the named	d property, or tha	t the owner of record 20	uthorizes the	proposed work and that I have				
peen 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 reas	sonable hour to e	nforce the provisions of	f the codes ap	plicable to this permit.				
	1-0-							
Signature of applicant: Que Tu. &	willy	/ Da	ite: 6/	14/07				

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

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