•	,	Building or Use Pe Tel: (207) 874-8703,				rmit No: 07-0431	Issue Date	e:	CBL: 122 G010	0001
	ocation of Construction: Owner Name: 28 LAWN AVE MEZOIAN GRE					Owner Address: 28 LAWN AVE			Phone:	
Business Name: Contractor Nam Maine State Bu				Contractor Address: 245 Warren Ave Portland				Phone 2077735504		
Lessee/Buyer's Name Phone:		Phone:	Permit Type: Additions - Dwellings				Zone:			
-		Proposed Use: new garage /sa	Proposed Use: new garage /same footprint		Perm	nit Fee:	Cost of Wo	rk: C \$0.00	CEO District: 5	
					FIRE DEPT: Approved			SPECTION: se Group: Type		
Proposed Project Description: Demo old garage /foundation only					Signature: PEDESTRIAN ACTIVITIES DIST		Signature	-		
					Actic				,	Denied
					Signature:		I	Date:		
Permit Taken By: cshDate Applied For: 04/25/2007				Zoning Approval						
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 			Special Zone or Reviews		iews	Zoning Appeal			Historic Preservation	
		g applicable State and	Shoreland		Variance			Not in District or Landma		
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellaneous			Does Not Require Revie		
 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	
					Interpretatio			Approved		
			Site Plan		Approved			Approved w/Condition		
			Maj [Mino MM		Denied			Denied	
			Date:			Date:		Dat	te:	

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

Location of Construction:	Owner Name:		Owner Address:		Phone:		
28 LAWN AVE	MEZOIAN GREGORY G		28 LAWN AVE				
Business Name:	Contractor Name:		Contractor Address:		Phone		
	Maine State Builders		245 Warren Ave Portland		2077735504		
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
			Additions - Dwellings				
Dept: Zoning Status: A Note:	pproved with Condition	ns Reviewer:	Chris Hanson	Approval Dat	te: 04/ Ok to Issue	25/2007 e: 🔽	
 Your present structure is legally nonconforming as to setbacks. If you are to demolish this structure on your own volition, you will only have one (1) year to replace it in the same footprint (no expansions), with the same height, and same use. Any changes to any of the above shall require that this structure meet the current zoning standards. The one (1) year starts at the time of removal. It shall be the owner's responsibility to contact the Code Enforcement Officer and notify them of that specific date. This approval is associated with the review done by Marge Schmuckal on 1/12/07 Permit # 06-1082 As discussed during the review process, the property must be clearly identified prior to pouring concrete and compliance with the required setbacks must be established. Due to the proximity of the setbacks of the proposed addition, it may be required to be 							
located by a surveyor. Dept: Building Status: Approved with Conditions Reviewer: Chris Hanson Approval Date: 04/25/2007							
Note:	approved with condition				Ok to Issue		
1) This permit is for foundation only and in same footprint as demo'd garage only							
 Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans. 							
 Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process. 							
Comments:							
5/22/2007-csh: Need more details on framming and stair construction CSH							

CERTIFICATION

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