

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

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| Permit No: 02-0456 | Issue Date: MAY 14 2002 | CBL: 123 J009001 |
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| Location of Construction: 116 Revere St | Owner Name: Johnson Kristin E & | Owner Address: 116 Revere St | Phone: 207-761-0524 |
| Business Name: | Contractor Name: Connolly, Thomas | Contractor Address: 56 Carlton Street Portland | Phone: 2077750255 |
| Lessee/Buyer's Name | Phone: | Permit Type: Amendment to Single Family | Zone: R-5 |

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|---|--|--|---|--------------------|
| Past Use: single family | Proposed Use: single family, amendment to 02-0212 change in roof line | Permit Fee: \$30.00 | Cost of Work: \$1,000.00 | CEO District: 3 |
| Proposed Project Description: change in roof line 02-0212 | | FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied J/A | INSPECTION: Use Group: R-3 Type: SB BCVA 1999 | |
| | | Signature: | Signature: [Signature] | |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | | | | |
| Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | | | | |
| | | Signature: [Signature] | Date: | |

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| Permit Taken By: jodinea | Date Applied For: 05/02/2002 | Zoning Approval | | |
| 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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.. | Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 5/13/02 | Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: | Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 5/13/02 | |

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.

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|---|---------|------|-------|
| SIGNATURE OF APPLICANT | ADDRESS | DATE | PHONE |
| RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE | | DATE | PHONE |

02-0456

All Purpose Building Permit Application

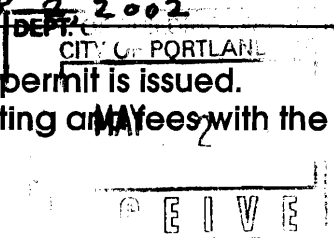
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

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| Location/Address of Construction: 116 REVERE ST. | | |
| Total Square Footage of Proposed Structure 120 | Square Footage of Lot 8,216 | |
| Tax Assessor's Chart, Block & Lot Chart# 123 Block# J Lot# 009 | Owner: KRISTEN JOHNSON DAVE BEAM | Telephone: 761-0524 |
| Lessee/Buyer's Name (If Applicable) | Applicant name, address & telephone: KRISTIN JOHNSON 116 REVERE ST 761-0524 PORTLAND, ME 04103 | Cost Of Work: \$ 1,000- Fee: \$ 30- |
| Current use: HOME, SINGLE FAMILY | | |
| If the location is currently vacant, what was prior use: _____ | | |
| Approximately how long has it been vacant: _____ | | |
| Proposed use: _____ | | |
| Project description: EXPAND FAMILY ROOM *ROOF line change | | |
| Contractor's name, address & telephone: THOMAS LONNOLLY 56 CARLETON ST PORTLAND, ME 04102 | | |
| Who should we contact when the permit is ready: PORTLAND, ME 04102 | | |
| Mailing address: 116 REVERE ST PTLD → KRISTIN JOHNSON | | |
| We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 761 0524 | | |

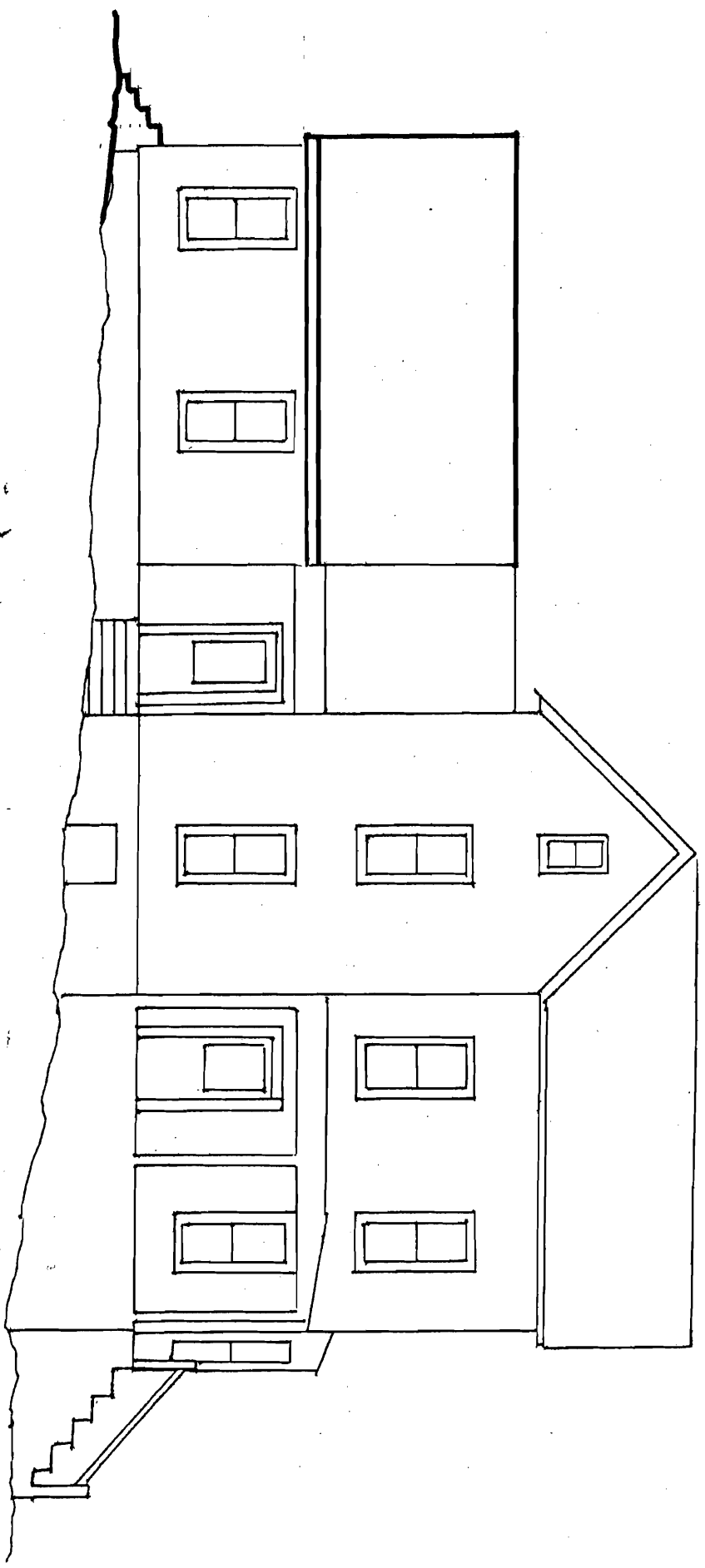
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

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| Signature of applicant: [Signature] | Date: MAY 2, 2002 |
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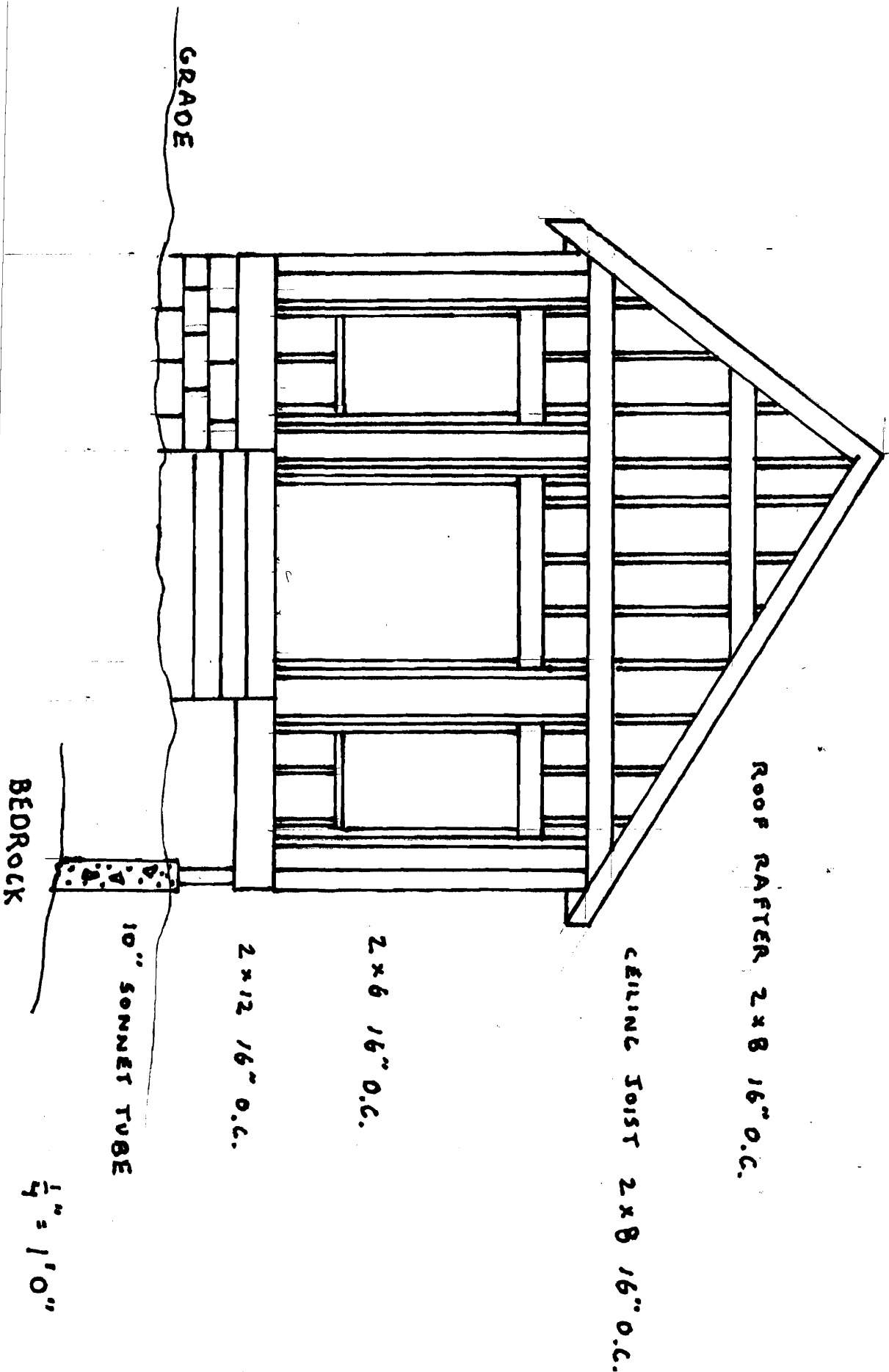
This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting ~~and~~ fees with the Planning Department on the 4th floor of City Hall



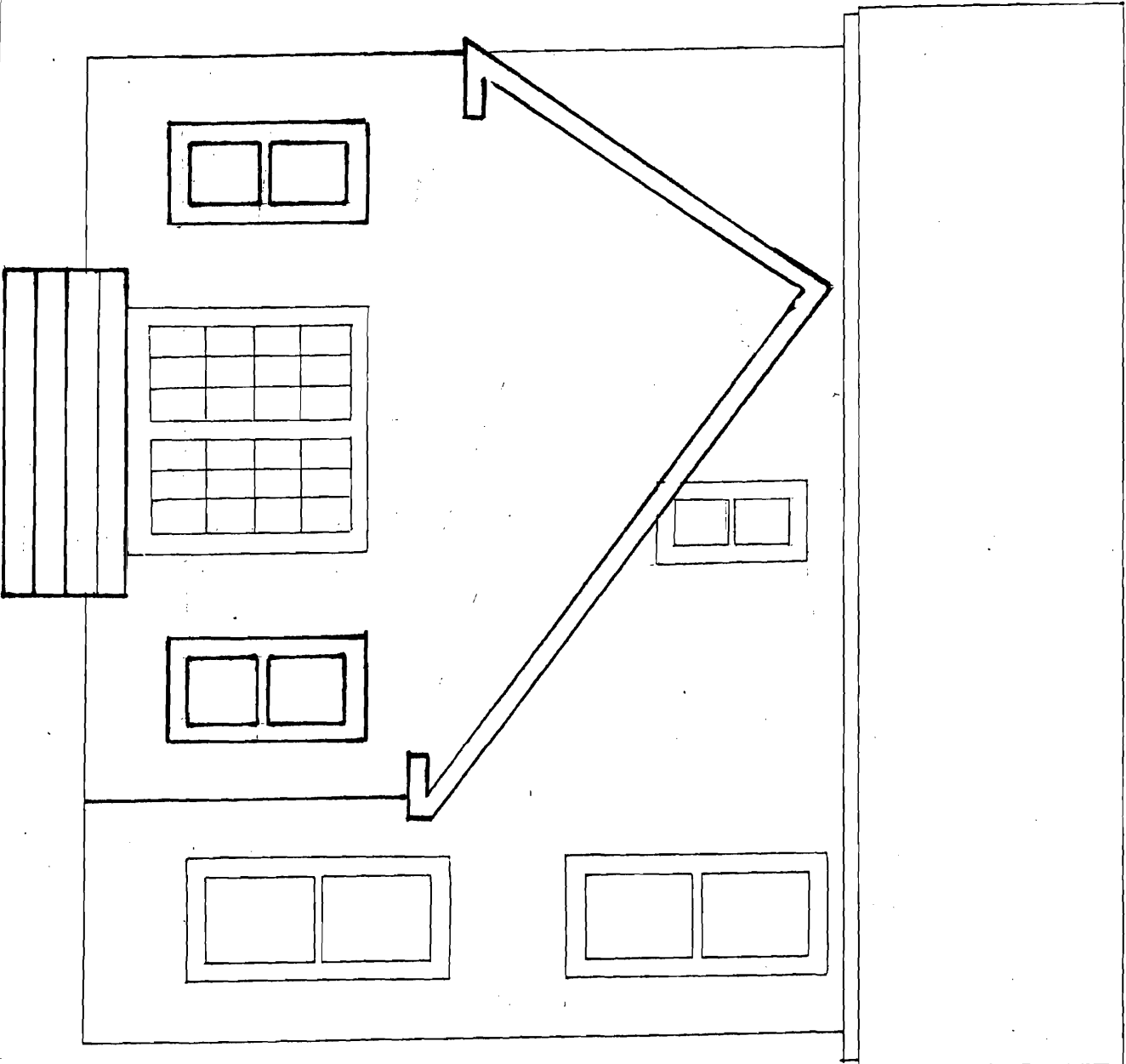
**AMENDED
PROPOSED ADDITION FOR
116 REVERE STREET**

SCALE 1/8" = 1'-0"

AMMENDED ADDITION FOR
116 REVERE ST.



AMMENDED PROPOSED ADDITION



1/4" = 1'0"