

City of Portland, Maine - Building or Use Permit

89 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-1472	Date Applied For: 12/03/2003	CBL: 124 DO08001
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Location of Construction: 180 Beacon St	Owner Name: Coffman Arlene J &	Owner Address: 150 Bolton St	Phone: 207-7731662
Business Name:	Contractor Name: no contractor / self	Contractor Address: Portland	Phone:
Applicant/Owner/Buyer's Name:	Phone:	Permit Type: Additions - Multi Family	

Proposed Use: build Handicap Ramp	Proposed Project Description: Build Handicap Ramp
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 12/10/2003
Vote: **Ok to Issue:** @!

) This permit is for the ramp only. It DOES NOT verify the legal use of the building.

Dept: Building **Status:** Approved **Reviewer:** Tammy Munson **Approval Date:** 12/10/2003
Vote: **Ok to Issue:**

) The ramp shall remain detached from the structure and under 200sf so frost protection is not required

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BIDDING WON

PERMIT

Permit Number: 03 1472

Please Read Application And Notes, If Any, Attached

This is to certify that Coffman Arlene J &/no contractor / self

has permission to Build Handicap Ramp 18 x 25'

at 180 Beacon St Permit No. 124 DO08001

Provided that the person or persons, firm or corporation, by accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in his department.

Notification of inspection must be given and when permission is procured before this building or part thereof is opened or closed-in. **HEAVY NOTICE IS REQUIRED.**

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 _____

Other _____

Department Name

[Handwritten Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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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,

Location/Address of Construction: <u>100 Beacon St</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>lztc</u> <u>D</u> <u>B</u>	Owner: <u>JJ% h c & O...</u>	Telephone: <u>773-1662</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Douglas Kyles</u> <u>100 Beacon St</u> <u>Portland ME 772-4345</u>	Cost Of Work: \$ <u>1500</u> Fee: \$ <u>39</u>
Current use: _____		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Build handicap ramp</u>		
Project description: _____		
Contractor's name, address & telephone: _____		
Who should we contact when the permit is ready: _____		
Mailing address: _____		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and view 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: _____		

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.

Signature of applicant: [Signature] Date: 1-20-00

This is NOT a permit, and 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