

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
**CITY OF PORTLAND**

Please Read  
 Application And  
 Notes, If Any,  
 Attached

BUILDING DEPARTMENT  
**PERMIT**

Permit Number: 090032

JAN 15 2009

This is to certify that BLIND FAITH LLC/L.R. Higgins, Inc./E

has permission to Remove non-load bearing wall and 1/2 bath expansion kitchen

AT 102 WOODFORD ST

CITY OF PORTLAND  
 125 N02100

provided that the person or persons, firm or corporation 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 this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise finished-in. 24 HOURS NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. \_\_\_\_\_

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Notes

*Thomas H. McLaughlin* 01/3/09  
 Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

Permit No: 09-0032	Issue Date:	CBL: 125 N021001
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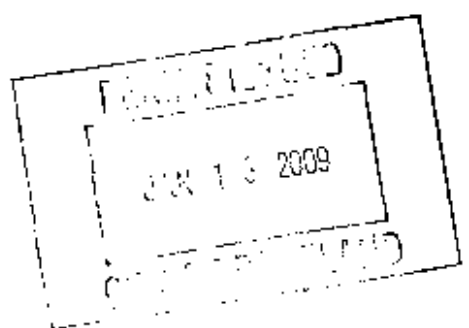
Location of Construction: 102 WOODFORD ST	Owner Name: BLIND FAITH LLC	Owner Address: PO BOX 1008	Phone:
Business Name:	Contractor Name: L R Higgins, Inc. /Eric Higgins	Contractor Address: PO Box 600 Scarborough	Phone: 2078562448
Lessor/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R3

Past Use: Single Family Home	Proposed Use: Single Family Home - remove non-load bearing wall, add 1/2 bath & expand kitchen	Permit Fee: \$270.00	Cost of Work: \$25,000.00	CEO District: 3	71364
Proposed Project Description: Remove non-load bearing wall, add 1/2 bath & expand kitchen		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group R3 Type SB IRC 2003		

Signature:	Signature: <i>[Signature]</i> 01/13/09
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	Date:

Permit Taken By: Idobson	Date Applied For: 01/12/2009	<b>Zoning Approval</b>	
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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.



<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoveland <i>NA</i> <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"/>	<b>Zoning Appeal</b> <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	<b>Historic Preservation</b> <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: <i>S 1/13/09</i>	Date:	Date:

**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 APPLICANT	ADDRESS	DATE	PHONE
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03/23/09 Close - in okay

Plumbing

Electrical

Framing



04/29/09 Firm okay

