

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 2013-01960	Issue Date:	CBL: 129 B008001
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Location of Construction: 12 IRVING ST	Owner Name: TRIPALDI VICTORIA A & ANTOINETTE TROPALDI LADDIMAN	Owner Address: 10 STARBOARD DR CAPE ELIZABETH, ME 04107	Phone: (619) 203-6605
Business Name:	Contractor Name:	Contractor Address: ME	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Two Family	Zone: B2 R5
Past Use: entire property 3 residential dwellings : 2 family dwelling in the principal bldg and 1 Dwelling unit in what was garage	Proposed Use: Same: entire property is 3 residential dwelling units: 2 families in the principal structure and 1 dwelling unit in what was the garage	Permit Fee: \$170.00	Cost of Work: \$15,000.00
Proposed Project Description: Remodel and repair existing space including rebuild deck and stairs, repair and remodel bath and new entry in rear (After the Fact?)		INSPECTION:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
		Signature: _____ Date: _____	

Permit Taken By: bjs	Date Applied For: 08/30/2013	Zoning Approval		
<ol style="list-style-type: none"> 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.. 		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: _____	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 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: _____

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 _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ DATE _____ PHONE _____