

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

Please Read Application And Notes, If Any, Attached

## BUILDING INSPECTION PERMIT

PERMIT ISSUED  
Permit Number: 051392  
DEC 21 2005  
CITY OF PORTLAND

This is to certify that Leibowitz, Lenora/Owner  
has permission to Create Personal Storage in A  
AT 8 Alba St

133 C012001

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is occupied or service is closed-in. 4 HOUR NOTICE 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 Name

*Jeanie Bourke* 12/19/05  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

*Closeout  
11/8/07*

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 05-1392	Issue Date: DEC 21 2005	CEL: 133 C012001
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<b>Location of Construction:</b> 8 Alba St	<b>Owner Name:</b> Leibowitz, Lenora	<b>Owner Address:</b> 70 Irving Street	<b>Phone:</b> 207-773-7603
<b>Business Name:</b>	<b>Contractor Name:</b> Owner	<b>Contractor Address:</b> CITY OF PORTLAND	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	<b>Zone:</b> RS

<b>Past Use:</b> Single Family	<b>Proposed Use:</b> Single Family/ Create Personal Storage in Attic	<b>Permit Fee:</b> \$48.00	<b>Cost of Work:</b> \$3,000.00	<b>CEO District:</b> 5
<b>Proposed Project Description:</b> Create Personal Storage in Attic		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: R3 Type: SB LRC-2003 Signature: JMB 12/19/05	
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 09/19/2005	<b>Zoning Approval</b>		
<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <i>OK</i> <input type="checkbox"/> Site Plan <i>w/condition</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB 12/19/05</i>	<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 Date: _____	<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>JMB</i>	

**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