

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

Location of Construction: 10 Albee St.		Owner: Page, Bruce		Phone:		Permit No: 971343	
Owner Address: SEA Side, Portland		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Merrill, Fred		Address: P.O. Box 7547 Portland, ME 04104		Phone: 773-2510		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: DEC 30 1997 CITY OF PORTLAND </div>	
Past Use: Retail		Proposed Use: Retail		COST OF WORK: \$ 7,300.00 PERMIT FEE: \$ 600.00			
Proposed Project Description: REAR PORCH ENCLOSURE - 400 sq. ft.				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____	
Permit Taken By: Merrill, Fred		Date Applied For: 19 December 1997					

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..

Closed out
11/06/07

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT <i>[Signature]</i>		ADDRESS:		DATE: 19 December 1997		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						PHONE:	

Zoning: **CBL:** 100-0-115

Zoning Approval:

Special Zone or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: _____

CEO DISTRICT

COMMENTS

1-28-98

Framing Inspection - Have requested a nailing plate be added to exterior wall in stairway where electrician cut through 2x4 @ Balloon Framing. Everything Electric = sub. Also requested cut back framing @ Chimney - 2" clearance to maintain. (One egress Size window only - is A Bedroom)



Inspection Record

Type	Date
Foundation: _____	_____
Framing: <u>Int.</u>	<u>1-28-98</u>
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____