Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 080045

This is to certify thatMCCAIN MELISSA D /Ben	igel		
has permission to removal of existing 7' x 15' D	terior re	rations of Kitchen, PERMITASSUED	
AT 31 MACKWORTH ST		_ 139 D 0 4100	
provided that the person or persons,	m or ation	epting this permit shaft comply with	all
of the provisions of the Statutes of	ine and of the	ances of the City of Portland regulat	ing

of buildings and sa

of the provisions of the Statutes of I the construction, maintenance and u this department.

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

p fication inspect in must g hand we in permission procuble re this leding or at thereof last or described or described or described in the IR NOTICE IS REQUIRED.

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

ctures, and of the application on file in

OTHER REQUIRED APPROVALS

Fire Dept.

Health Dept.

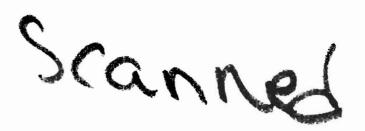
Appeal Board

Other

Department Name

Momas Mar Day 2/20/08

PENALTY FOR REMOVING THIS CARD



City of Portla	nd. Maine	- Buile	ding or U	Use Po	ermi	Application	n [Permit No:	Issue Date	:	CBL:		
389 Congress S	-		_				- 1	08-0045			139 D0	41001	
Location of Construction: Owner Name:			ne:				Owner Address:			Phone:			
31 MACKWORTH ST MCCAIN ME			MEL	ELISSA D			MACKWORT						
Business Name:			Contractor Name:				Co	ntractor Address:	Phone				
			Ben Weig	gel			12	2 Madokawando	Landing F	almoutl	h 20777646	535	
Lessee/Buyer's Name		Phone:			Per	mit Type:		Zone:					
							A	Iterations - Dw	ellings			K-3	
Past Use:			Proposed U	se:		<u></u>	Pe	rmit Fee:	Cost of Wor	k:	CEO District:		
Single Family Home			Single Fa	mily H	Home - removal of			\$1,270.00 \$125		00.00	0 4		
						new 5' x 10'	FI	RE DEPT:	Approved	INSPE	CTION:		
			deck, inte						Denied	Use G	roup: <i>R</i> 3	Type: 573	
			Kitchen,	bath &	bedro	om		L	_ Beined		•		
											IRC 2	32)_5	
Proposed Project De	escription:										IPC 2	, ,	
removal of existi		eck, new	v 5' x 10' de	eck, int	erior 1	enovations of					<u></u>	2/20/5	
Kitchen, bath &	bedroom							DESTRIAN ACT	IVITIES DIST	TRICT ((P.A.D.)		
							Action: Approved Approved w				/Conditions	Denied	
									_		_		
								gnature:			Date:		
Permit Taken By:		1	plied For:				Zoning Approval						
ldobson		<u> </u>	5/2008	-	Sna	oial Zone or Davi	03WC		ng Anneal		Historic Preservation		
	application d						CWS						
Applicant(s) from meeting applicabl Federal Rules.			able State a	ble State and Shoreland			☐ Variance				Not in District or Landmar		
2. Building permits do not include plumbing,					Wetland			Miscellaneous			Does Not Require Review		
septic or electrical work.								Conditional Use			Requires Review		
3. Building permits are void if work is not started within six (6) months of the date of issuance.				Flood Zone			Conditional Use			Requires Review			
False information may invalidate a building				Subdivision D			Interpretation			Approved			
	top all work.		<i>g</i>			odivision 6 r			tation .				
				i	Sit	e Plan		Approv	ed		Approved w/	Conditions (
						• • • • • • • • • • • • • • • • • • • •							
FREMANT ISSUED				Maj Minor MM			Denied			Denied			
			1	1									
				Date: ABM 2/1/			Date:			ARM Date:			
	i i	t. No	1 1	<u> </u>	•	44	00		-				
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		13 15 25	7										
1													
•													
					C	ERTIFICAT	ON		,				
I hereby certify th													
I have been autho													
jurisdiction. In ac													
shall have the autisuch permit.	normy to eme	r all area	as covered	by suci	n pern	iit at any reasc	парі	e nour to entor	ce the provi	sion oi	the code(s) ap	plicable to	
zam pomint.													
	_									_			
SIGNATURE OF AF	PPLICANT					ADDRES	S		DATE		PHO	NE	
RESPONSIBLE PER	RSON IN CHAR	GE OF W	ORK. TITLE				_		DATE		PHO		
			,						2.11		1110		