



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>116 WALTON ST</u>		
Total Square Footage of Proposed Structure/Area <u>EXISTING GROSS S.F. - 6,131 S.F.</u>		Square Footage of Lot <u>15,525</u>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>142 H 002</u>	Applicant * <u>must be owner, Lessee or Buyer*</u> Name <u>WHIPPLE CALLENDER</u> Address <u>ARCHITECTS</u> <u>P.O. BOX 1276</u> City, State & Zip <u>PTLD., ME 04101</u>	Telephone: <u>603-536-</u> <u>5500</u> <u>03264</u>
Lessee/DBA (If Applicable) <u>None</u>	Owner (if different from Applicant) Name <u>SSB HOLDINGS</u> Address <u>446 MAINE ST.</u> City, State & Zip <u>PLYMOUTH NH</u> <u>03264</u>	Cost Of Work: \$ <u>300,000</u> C of O Fee: \$ _____ Total Fee: \$ <u>3,200</u>
Current legal use (i.e. single family) <u>SINGLE FAMILY</u> If vacant, what was the previous use? <u>NA</u> Proposed Specific use: <u>SINGLE FAMILY - HANDICAP FAMILY UNIT</u> Is property part of a subdivision? <u>NO</u> If yes, please name _____ Project description: <u>RENOVATION OF EXISTING SINGLE FAMILY RESIDENCE AS HANDICAP LIVING UNIT. WORK INCLUDES HEATING SYSTEM, INTERIOR BATHRM RENOVATION, NEW KITCHEN ADDITION, 13D SPRINKLER, AND SITEWORK.</u>		
Contractor's name: <u>TO BE DETERMINED</u> Address: _____ City, State & Zip _____ Telephone: _____ Who should we contact when the permit is ready: <u>JOE DELANEY 775-2696</u> Telephone: _____ Mailing address: <u>P.O. BOX 1276 PORTLAND ME 04101 X101</u>		

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature: Joe Delaney Date: 6/11/13

This is not a permit; you may not commence ANY work until the permit is issue

app.
email: Joe @ whipplecallender.com
owner
email: www.theplymouthhouse.com