	y of Portland, Maine - Congress Street, 04101	O			Pe	rmit No: 10-0043	Issue Dat	e:	CBL: 176 C00)3001	
	ation of Construction:	Owner Name:	1 ax. (2	207) 874-8710	Owne	er Address:			Phone:		
	5 WOODFORD ST		LEONARD EDWARD J & SARAH L			435 WOODFORD ST			541-4817		
Bus	iness Name:		Contractor Name: Gerald Muto			Contractor Address: 115 Raymond Road Brunswick			Phone		
	/D								2077514382		
Less	see/Buyer's Name	Phone:				it Type: erations - Dwe	llings			Zone:	
	t Use:	Proposed Use:	_		Pern	nit Fee:	Cost of Wo		CEO District:		
Sin	gle Family Home	Single Family for family roon		/renovation of attic				000.00 3			
		insulation, elec	trical & new		FIRE DEPT: Approved Denied		INSPECTION: Use Group:		Type		
		windows inclu	ung eg	1033							
	posed Project Description:			-t-i1 0							
	novation of attic for family andows including egress	room, kneewalls, insulat	j		Signature: Signature: Signature: Signature: Action Approved ApproveDpt Approved ApproveDpt				Signature: (RICT (P.A.D.)		
					Signature:				Date:		
Permit Taken By: Date Applied For: 01/19/2010			Zoning Approval								
1.	This permit application does not preclude the		Special Zone or Reviews		ews	ws Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting Federal Rules.	-				☐ Variance			☐ Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.		Wetland			Miscellaneous			Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon		Conditional Us			Requires Review			
	False information may investigate permit and stop all work	validate a building	ouilding Subdivision			☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition		
			Maj Mino MM			☐ Denied			☐ Denied		
			Date:			Date:		D	ate:		
I ha juri: shal	ereby certify that I am the overve been authorized by the consistion. In addition, if a pell have the authority to entenuch permit.	owner to make this appliermit for work described	med procession a	as his authorized application is iss	ne pro l agen ued, l	it and I agree to the certify that the	o conform t e code offic	to all ap cial's au	plicable laws thorized repre	of this sentative	
SIC	SNATURE OF APPLICAN			ADDRESS	<u> </u>		DATE	<u> </u>	P	HO	
							212		•	-	

Location of Construction: 435 WOODFORD ST	Owner Name: LEONARD EDWARD	Owner Address: 435 WOODFORD ST	Phone: 541-4817 Phone 2077514382	
Business Name:	Contractor Name: Gerald Muto	Contractor Address: 115 Raymond Road Brunswick		
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone	

Dept: Zoning Status: Approved with Conditions Reviewer: Jeanine Bourke Approval Date: 01/19/2010

Note: Ok to Issue: ✓

- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

 Dept:
 Building
 Status:
 Approved with Conditions
 Reviewer:
 Jeanine Bourke
 Approval Date:
 01/19/2010

 Note:
 Ok to Issue:
 ✓

- 1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

C	Λn	nn	101	nts:
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1/19/2010-jmb: Same day appointment

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 APPLICAN	ADDRESS	DATE	PHO