Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

CTION

Permit Number: 070749

Attached	PERIMIN	Permit Number: 0/0/49
This is to certify thatSMITH ANDREW D &	PAN _A A JI	PERMIT ISSUED
has permission toLift_existing porch w/ 3 s	onn: pes	
AT -16 KENILWORTH ST		2006001 JUN 2 8 2007
provided that the person or perso of the provisions of the Statutes of the construction, maintenance an	of latine and of the sances of	this <u>permit shall comply</u> with all the City Of Portland tegulating , 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.	N fication inspect in must go and with permission procuble re this ding or it thereoder in the permission of the permiss	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		
OtherDepartment Name	<u> </u>	/ Director - Building & Inspection Services
	NALTY FOR REMOVING THIS CARI	D

City of Portland, Maine - Bu	ilding or Use	Permi	t Applicatio	n Per	mit No:	Issue Date		CBL:	
389 Congress Street, 04101 Tel:	0		* *	1	07-0749	6/22/	57	177 E0	06001
Location of Construction:	Owner Name:			Owner	Address:	' 		Phone:	
16 KENILWORTH ST	SMITH AND	REW D	& PAMELA	16 K	ENILWORT	TH ST			
Business Name:	Contractor Name			Contra	ctor Address:			Phone	
	Jim Foley			63 Margaret St Naples				2078072742	
Lessee/Buyer's Name	Phone:	 		Permit Type:			_		Zone:
				Sing	le Family				R-5
Past Use:	Proposed Use:			Permi		Cost of Wor		CEO District:	<u>, // /</u>
Single Family	1 -	Single Family lift existing porch w/		\$70.00 \$4,600.				3	
Single I alliniy	3 sonna tubes		man name				NSPECTION:		
						Approved	Use G	roup: R -3	Type:
					Ĺ	Denied			, , , , ,
								TRC-7	100 3
Proposed Project Description:				-					
Lift existing porch w/ 3 sonna tubes				C: o to			Ciamate	1 /-/-	DIN
Lift existing poten w/ 3 solina tubes				Signati	ure: STRIAN ACTI	WITIFG DIST	Signati	Use Group: R-3 Type: 51 TRC-2053 Signature: 427/5; CLD	
				redes	SI KIAN ACII	IVIIIES DIS	MCI (F.A.D.) [
				Action	: Appro	ved 🗌 App	proved w	//Conditions	Denied
				Signat	ure:			Date:	
Permit Taken By: Date	Applied For:				_	Approva			
<u> </u>	19/2007				Zoning	Approva	11		
		Spe	ecial Zone or Revi	ews Zoning Appeal		T	Historic Preservation		
1. This permit application does not Applicant(s) from meeting appl					_			Not in District or Landm	
Federal Rules.	icable State and	Si	noreland		Varianc	e		Not in Distri	ct or Landin
		Wotland						Done Not Bossine Bossie	
2. Building permits do not include plumbing,		Wetland		Miscellaneous			Does Not Require Review		
septic or electrical work.		Flood Zone		Conditional Use			Requires Review		
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		Subdivision		Conditional Osc			Kequites Keview		
				Interpretation			Approved		
permit and stop all work	ie a bananig	_ 30	ibuivision		interpre	tation		Apploved	
r · · · · · · · · · · · · · · · · · · ·		c:	te Plan		☐ Anneous	a.d		Approved w	/Conditions
		31	te Pian		Approve	zu		Apploved w/	Conditions
		Mail	□ Minon □ MN		Dominal			Denied	
PERMIT ISSUED		Maj	Minor MM	·	Denied		1	ABU	
		Ok w Cooding h		h	1 .			- 1 - * · · · ·	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Date:	122107/		Date:		L	Date:	
JUM 2.0									
CITY OF POTENTIAL	17								
Cill Cill Control									
		,		OM					
			CERTIFICATI						
I hereby certify that I am the owner of									
I have been authorized by the owner jurisdiction. In addition, if a permit									
shall have the authority to enter all a									
such permit.						I		(-) - P	•
CIONATURE OF A DRIVIA DE			ADDEE	10		DATE		Ditto	NIE
SIGNATURE OF APPLICANT			ADDRES	3		DATE		PHC	NIC.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE

DATE

~.				Permit No:	Date Applied For:	CBL:
	ty of Portland, Maine - Buil	O		07.07.40		
389	O Congress Street, 04101 Tel: (2	207) 874-8703, Fax: (2	207) 874-8716	07-0749	06/19/2007	177 E006001
Loc	ation of Construction:	Owner Name:		Owner Address:		Phone:
16	KENILWORTH ST	SMITH ANDREW D	& PAMELA	16 KENILWORT	H ST	
Bus	iness Name:	Contractor Name:		Contractor Address:		Phone
		Jim Foley		63 Margaret St Na	ples	(207) 807-2742
Less	see/Buyer's Name	Phone:		Permit Type:		
			L	Single Family		
Pro	posed Use:		Propose	d Project Description:		
Sir	ngle Family lift existing porch w/ 3	sonna tubes	Lift ex	isting porch w/ 3 s	onna tubes	
D	ept: Zoning Status: A	pproved with Conditions	s Reviewer:	Ann Machado	Approval D	eate: 06/22/2007
N	ote:					Ok to Issue:
1)	This permit is being issued with th	e condition that all the v	work is taking pl	ace within the exis	ting footprint.	
	This property shall remain a single				-	for raviaw and
2)	approval.	raining dweining. Any c	mange of use sna	in require a separa	е регипт аррисацог	Tor review and
3)	This permit is being approved on twork.	he basis of plans submit	tted. Any deviat	ions shall require a	separate approval b	efore starting that
	work.					
D	ept: Building Status: A	pproved with Conditions	s Reviewer:	Chris Hanson	Approval D	ate: 06/27/2007
N	ote:					Ok to Issue:
1)	Separate permits are required for a					
	Separate plans may need to be sub					
2)	Frost protection must be installed per the enclosed detail as discussed w/owner/contractor.					
3)	The existing deck shall be inspected	ed for adequate fasteners	s and bearing for	spans, and modifi-	cations may be requ	ired
4)	Permit approved based on the plan	s submitted and reviewe	ed w/owner/cont	ractor with additio	nal information as a	greed on and as

General Building Permit Application

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

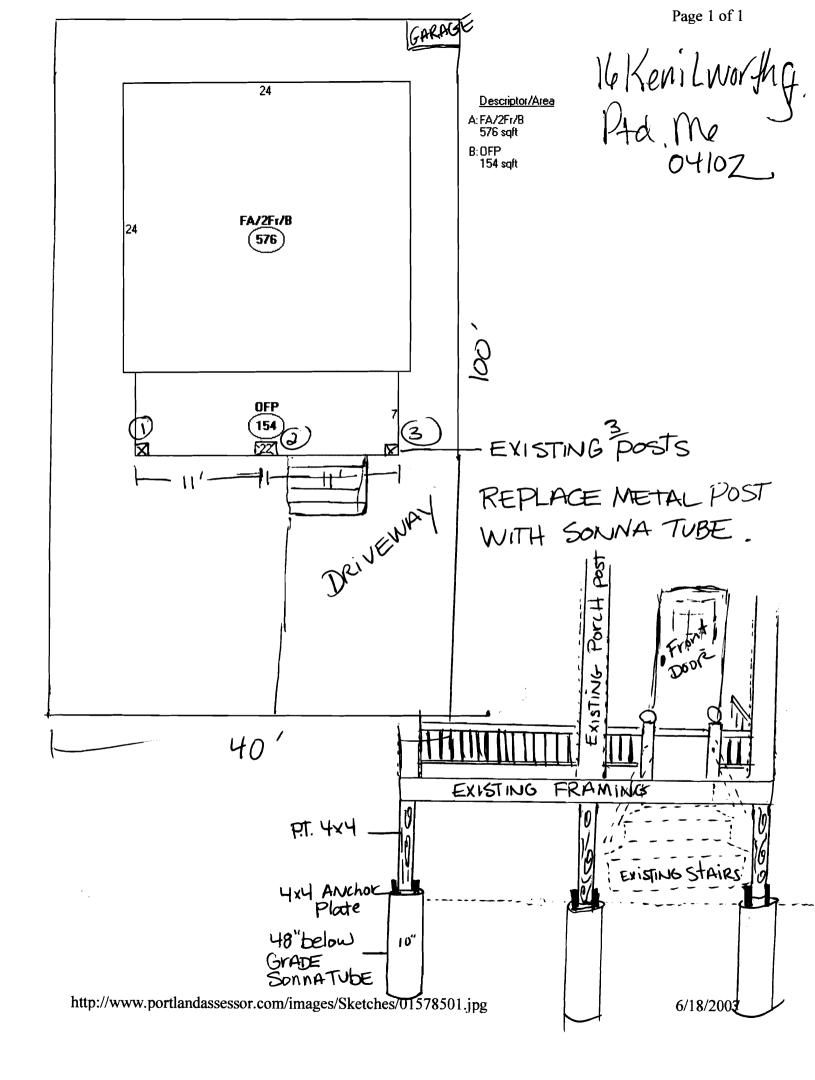
TLANY property within the City, payment arra	ingements must be made before permits	of any kind are accepted.
Location/Address of Construction: 16 K	CENILWORTH ST.	
Total Square Footage of Proposed Structure	154 Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: ANDREW+ PAMELA SMITH	Telephone: 874-1130
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: PAMELA SMITH IL KENILWORTH ST	Cost Of Work: \$ 4600.00 Fee: \$ 70.00
If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? Project description: To life LXSI LiNG	- porch with 3 C	Cof O Fee: \$
Contractor's name, address & telephone: Who should we contact when the permit is read Mailing address:	JIM FOLEY 807-2742	. (e3 Margaret St.
Please submit all of the information out Failure to do so will result in the automa		Checklist.
In order to be sure the City fully understands the ful request additional information prior to the issuance www.portlandmaine.gov, stop by the Building Inspe	of a permit. For further information visit us on-l	ine at
I hereby certify that I am the Owner of record of the nam- been authorized by the owner to make this application as I		- ·

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 of applicant:

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





16 Kenil worth St. Ptd. Me 04103 P.T. 4x4

P.T. 4x4

4x4. Anchor plaine

48" Below grade

V Sonna tube

