Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

Attached		PERMIT	P <del>ermit '</del>	PERMIT ISSUED	
This is to certify that_	MCCANN DAVID C & JAI	W JTS			1
has permission to	Alterations and Relocation o	terior W		JUN 2 3 2008	1
AT 171 STEVENS A	. <del>VE</del>		L 178 E005001	- TIAND	1
provided that the	he person or persons	rm or dion a	epting this per	MIT SIDEII ROMPIO WILL	all

ine and of the

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and the of buildings and this department.

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

fication finspe n mus n and w en permi on proci re this lding or rt there ed or osed-in UR NOTICETO MEQUIRED.

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

ances of the City of Portland regulating

ctures, and of the application on file in

OTHER	REQUIRED	APPROVALS
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Fire Dept. Health Dept. Appeal Board\_ Other \_ Department Name

PENALTY FOR REMOVING THIS CARD

## **BUILDING PERMIT INSPECTION PROCEDURES**

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

order to schedule an inspection:	
By initializing at each inspection time, you are inspection procedure and additional fees from Order Release" will be incurred if the procedu	a "Stop Work Order" and "Stop Work
A Pre-construction Meeting will take place up	on receipt of your building permit.
X Framing/Rough Plumbing/Electrical	l: Prior to Any Insulating or drywalling
X Final inspection required at complet	ion of work.
Certificate of Occupancy is not required for certa your project requires a Certificate of Occupancy.	
If any of the inspections do not occur, the proj REGARDLESS OF THE NOTICE OR CIRC	•
CERIFICATE OF OCCUPANICES MUST BETHE SPACE MAY BE OCCUPIED.	E ISSUED AND PAID FOR, BEFORE
Darl C. Wan	
Signature of Applicant/Designee	Date
Though Madley	6/23/08
Signature of Inspections Official	Ďate ´

City of Portland, Maine -	<b>Building or Use</b>	Permi	t Application	n Permi	it No:	Issue Date	:	CBL:	_
389 Congress Street, 04101	· ·				08-0721			178 E0	05001
Location of Construction:	Owner Name:		-	Owner A	ddress:		_	Phone:	
171 STEVENS AVE	MCCANN DA	AVID C	& JANA W J	171 ST	EVENS A	VE		207-871-7	7278
Business Name:	Contractor Name	e:		Contractor Address:				Phone	
Lessee/Buyer's Name	Phone:			Permit T					Zone:
			_	Altera	tions - Dw	ellings			<u>  KS</u>
Past Use:	Proposed Use:			Permit F		Cost of Wor		CEO District:	]
Single Family Home	Single Family			ļ	\$30.00	\$1,00	00.00	3	
	and Relocation	n or inte	erior walls	FIRE DI	EPT:	Approved	INSPECT Use Grou	up: R 3	Type: 53
						Denied	1		
							1	AC 20 :2m 6	0.5
Proposed Project Description:								2-1	120/00
Alterations and Relocation of Ir	iterior Walls			Signature		VITIES DIST	Signature	$\frac{\text{e}}{\text{A.D.}}$	123 G
				Action:	Approv		proved w/C	•	Denied
				Signature				Date:	2 2
Permit Taken By:	Date Applied For:	Т		Signature				Date.	_
lmd	06/20/2008				Zoning	Approva	11		
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Special Zone or Reviews Zoning Ap  Shoreland Variance		ng Appeal	Historic Preservation		ervation	
					☐ Variance			Not in District or Landma	
2. Building permits do not inc septic or electrical work.	clude plumbing,	□ w	etland		Miscella	aneous		Does Not Red	quire 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 permit and stop all work		Subdivision			☐ Interpretation			Approved	
		☐ Si	te Plan		Approve	ed		Approved w/	Conditions
PERMIT	ISSUED	Maj [	Minor MM		Denied			Denied	
HIM 2	2 2000	Date: 6	12.408	D	Date:		Dat	te: In 6/2	3/08
JUN 2	3 2000		' '					r	,
CITY OF D	OPTIAND								
CITY OF P	UNTLAND								
		•	CERTIFICATION	ON					
I hereby certify that I am the own	ner of record of the na				sed work is	authorized	by the o	wner of recor	d and that
I have been authorized by the ow	vner to make this appl	ication a	as his authorized	d agent a	nd I agree	to conform	to all app	plicable laws	of this
jurisdiction. In addition, if a per shall have the authority to enter a such permit.									
SIGNATURE OF APPLICANT			ADDRESS	<u> </u>		DATE		PHO	NE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

## 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:   7	Stevens Ave					
Total Square Footage of Proposed Structure/A	rea Square Footage of Lot \$000 \times					
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buye	r* Telephone:				
Chart# Block# Lot#	Name DAJ.O MCCANN	G71-7778				
178 E 5	Address 171 Stevens AJC.	871-7278				
City, State & Zip Portland, ME 04102						
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of				
	Name	Work: \$ 1 500				
JUN 20 5008	Address	C of O Fee: \$				
1 1 1111 20 20 2	Total Fee: \$					
	single family					
If vacant what was the previous use?  Proposed Specific use:						
Is property part of a subdivision?	If yes, please name					
Proposed Specific use: (3/1/20)  Is property part of a subdivision? NO  Project description: Recunfiguring I  Also relocating and const walls. Electrical Modifica outlets	oad bearing wall to create necting new non-load tions necessary plus upgrations	one 65" spand Degring interior acting ladding				
Contractor's name: (Doing work	- myself) X For elect					
Address: 1281 New County Rd	Gary Osypod					
City, State & Zip Dayton ME ou	1005					
Who should we contact when the permit is read	y. David Millorn T	'elephone: 871-7278				
Mailing address:						
Please submit all of the information of	outlined on the applicable Checkli	ist. Failure to				

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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, 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: 6 Cura Date: 6/20/08			Ood C.	wa	Date:	$(O \mid A \mid O \mid A \mid X)$		
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Cit	ty of Portland, Maine - Bu	ilding or Use Permit	t	Permit No:	Date Applied For:	CBL:
389	Congress Street, 04101 Tel:	(207) 874-8703, Fax: (	(207) 874-871	6 08-0721	06/20/2008	178 E005001
Loc	ation of Construction:	Owner Name:		Owner Address:	-	Phone:
17	1 STEVENS AVE	MCCANN DAVID C	& JANA W J	171 STEVENS A	VE	207-871-7278
Bus	iness Name:	Contractor Name:		Contractor Address:	-	Phone
Less	see/Buyer's Name	Phone:		Permit Type: Alterations - Dwe	llings	
Pro	posed Use:		Propos	ed Project Description:		
Sir	ngle Family Home - Alterations a	nd Relocation of Interior \	Walls Altera	ations and Relocation	on of Interior Walls	
	ept: Zoning Status: ote:	Approved with Condition	ns Reviewer	: Tom Markley	Approval I	Oate: 06/23/2008 Ok to Issue: ✓
1)	This is NOT an approval for an not limited to items such as stow	•		•		nt including, but
2)	This property shall remain a sing approval.	gle family dwelling. Any o	change of use sh	nall require a separa	te permit application	n for review and
3)	This permit is being approved o work.	n the basis of plans submi	tted. Any devia	ations shall require a	a separate approval l	pefore starting that
D	ept: Building Status:	Approved with Condition	s Reviewer	: Tom Markley	Approval D	Date: 06/23/2008
N	ote:					Ok to Issue: 🗹
1)	Separate permits are required for	, , ,				
	Separate plans may need to be s	ubmitted for approval as a	a part of this pro	cess.		