

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

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| Permit No: 09-1119 | Issue Date: | CBL: 015 F019001 |
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|-----------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------|----------------------------|
| Location of Construction: 71 MELBOURNE ST | Owner Name: MCCLOY SEAN F & GRETCHEN E | Owner Address: 71 MELBOURNE ST | Phone: |
| Business Name: | Contractor Name: Pollard Builders / Ben Pollard | Contractor Address: 386 Fore Street, Suite 303 Portland | Phone 2077738450 |
| Lessee/Buyer's Name | Phone: | Permit Type: Additions - Duplex | Zone: |

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|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|---------------------------------------|---------------------------|
| Past Use: 2 unit Residential | Proposed Use: 2 unit Residential - Demolish closet & bulkhead Replace w/ a 8' x 12' addition for storage | Permit Fee: \$120.00 | Cost of Work: \$10,000.00 | CEO District: 1 |
| Proposed Project Description: Demolish closet & bulkhead Replace w/ a 8' x 12' addition for storage | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: Type | |
| | | Signature: | Signature: | |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | | | | |
| Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied | | | | |
| Signature: Date: | | | | |

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| Permit Taken By: Ldobson | Date Applied For: 10/07/2009 | Zoning Approval | | |
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

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| Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/> Date: | Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: | Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date: |
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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 |
| RESPONSIBLE PERSON IN CHARGE OF WORK, TIT | | DATE | PHO |

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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 10/09/2009
Note: **Ok to Issue:**

- 1) The existing rear stairs shall not be extended or enlarged.
- 2) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 3) This property shall remain a two (2) family dwelling. Any change of use shall require a separate permit application for review and approval.
- 4) 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:** Pending **Reviewer:** Residential Plan Revie **Approval Date:**
Note: **Ok to Issue:**

Comments:

10/7/2009-mes: I am not understanding the submittal - It will probably help to go by and figure out what is there. There are no rear elevations to guide me. Are the rear stairs really existing, or reconfigured or what?

10/9/2009-mes: I did a site visit to understand - using 14-382(d) to approve

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SIGNATURE OF APPLICAN

ADDRESS

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO