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

ification of inspersion must end and with an permit on proceed or the process of the process of

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

OTHER REQUIRED APPROVALS

Department Name

Fire Dept.

Health Dept.

Appeal Board

Other

PENALTY FOR REMOVING THIS CARD

City of Portland, M	Iaine - Buil	ding or Use	Permi	t Application	Per	rmit No:	Issue Date	:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-87							11.	11/08/2005		179 D011001	
		Owner Name:	Name:		Owner Address:			Phone:			
26 Hale St Albert Lou		Albert Louis E	E		P.o.box 721						
Business Name:		Contractor Name:			Contractor Address:				Phone		
		Joe Daniels			Portland						
Lessee/Buyer's Name		Phone:			Permi	t Type:				Zone:	
					Add	litions - Dwe	llings			183	
Past Use: Pr		Proposed Use:			Permit Fee: Cost of Work:			k:	CEO District:		
Single Family		Single Family w/kitchen remodel, 10' x 22' sunroom & 10' x 12' deck			\$561.00 \$60,000			00.00	0.00 5		
	Apploved				INSPE	NSPECTION:					
						Denied	Use Group: 5 Type: 5				
						L.,	_ Demed		* , *		
									TK-20	53	
Proposed Project Description:						7			Nac ulala-		
Kitchen remodel, 10' x	2 10' x 12' deck			Signature:			Signature: 11/8/65				
					PEDESTRIAN ACTIVITIES DIST			TRICT (I	RICT (P.A.D.)		
				Action:			etion: Approved Approved w/Conditions Denied				
										,	
				Signature:			Date:				
Permit Taken By:	I -	Applied For:			Zoning Approval						
jmb 11/08/2005			Special Zone or Reviews Zoning Appeal					Historic Preservation			
1. This permit application does not preclude Applicant(s) from meeting applicable State			e ·								
Applicant(s) from Federal Rules.	able State and	∏ Sh	Shoreland Variance			e	Not in District or Landma				
								/	/		
2. Building permits do not include plumbing,			□ w	etland	Miscellaneous		Does Not Require Review				
septic or electrical work.			[] 5.	1.7							
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			[_ F10	ood Zone	Conditional Use				Requires Review Approved		
				Ibdivision ()							
permit and stop all	•			JY	~4.7 <u>*</u>	Jan.	tation				
			☐ Sit	te Plan	TXIN	Approve	ed		Approved w	//Conditions	
				Aller's "	ı		va			Conditions	
PERMIT ISSUED				☐ Minor ☐ MM	Denied			Denied			
p11	-1/14111 199	UED		i					\sim π		
		II	Date	11 K/16/16/16	05	Date:		D	ate: MN		
	NOV - 8 20	005		11	•	<u>l</u>			-++		
1 1			1.7			((-)	ce A		./		
CIT	/ OF DODT	1 4 1 1 2					5 CP (,				
<u> </u>	OF PORT	LAND									
			C	CERTIFICATION	NC						
I hereby certify that I an											
I have been authorized b											
jurisdiction. In addition shall have the authority											
such permit.	io emer an are	as covered by st	ien bern	ini ai any reason	iauie n	iour to emore	te me provi	21011 01	me code(s) a	ppiicable to	
L											
SIGNATURE OF APPLICANT			_		S DATE						
				ADDRESS					PHONE		
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE					DATE		PHO	ONE	

12-905 Wh to Buckfill pury 2-3 06 - Close M. OK YM 5/5/10- Frank K. Han Flere S/Sumom adocki O'Atleto all OK- Declars OK & Rother Surroom al OK- he issues seen-excellent workness; fr-OK to class out permit; I for M CBL 179-D-11 permt # 05-1632

14/25 July 12 doing - 1/2