Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU

Permit Number: 091376

This is to certify that\_ SNYDER CAROLYN J LIFE I has permission to \_\_\_\_ replace damaged decking in exi g footp AT \_100 COLUMBIA RD\_ 181 D027001 pting this permit shall comply dvith all or cd anon ge

provided that the person or persons, fi of the provisions of the Statutes of Mane and of the care are so of the City of Portland regulating the construction, maintenance and use of buildings and structure. this department.

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

ation o spectid Not must b give nd writt permissi procured befd this bui ng or p hereof is lath or oth sed-in. 2 HO NOTICE IS REQUIRED.

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

res, and of the application on file in

OTHER REQUIRED APPROVALS

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:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit. X Final inspection required at completion of work. Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection. If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES. CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.  $\frac{12-03-09}{\text{Date}}$ Signature of Applicant/Designee

CBL: 181 D027001 Building Permit #: 09-1376

Signature of Inspections Official

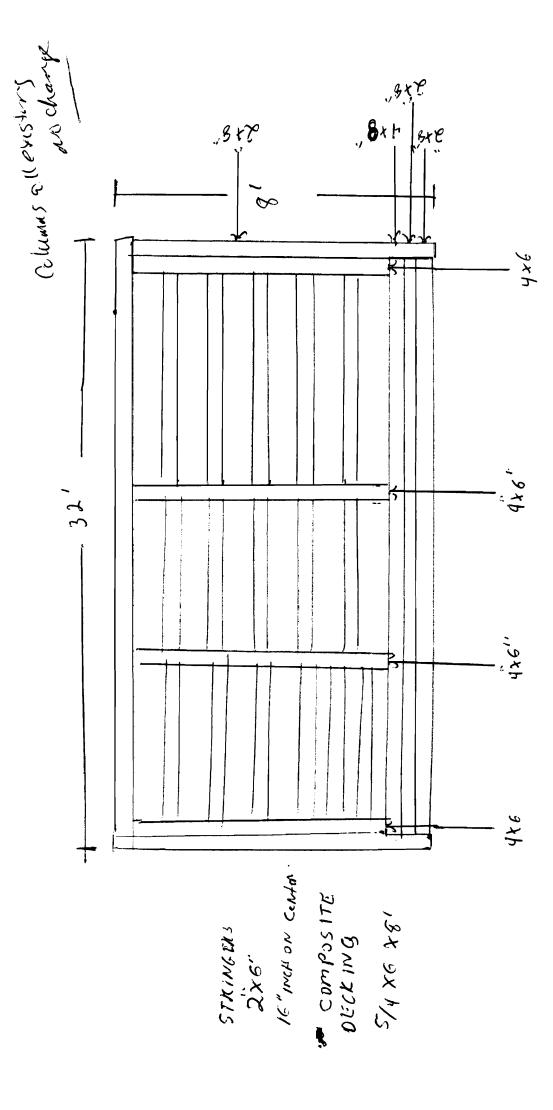
City of Portland, M	laine - Buil	ding or Use	Permi	t Application	1 Permit No	0:	Issue Date	,	CBL:	
389 Congress Street, (		0			ı	-1376			181 D0	27001
Location of Construction:		Owner Name:			Owner Addr	ress:			Phone:	
100 COLUMBIA RD		SNYDER CA	ROLYN	I J LIFE ESTA	528 STRC	DUDW <i>A</i>	ATER ST			
Business Name:		Contractor Name	:		Contractor A	Address:			Phone	
		J & L Associa	tes/ Jose	eph Cormier	7 Hubbard	d St Sac	0		20759077	<b>'</b> 51
Lessee/Buyer's Name		Phone:		Ī	Permit Type	::			I	Zone:
					Alteration	ns - Dup	olex			L5
Past Use:		Proposed Use:	_	<u>,                                      </u>	Permit Fee:		Cost of Wor	k:	CEO District:	<u> </u>
2 unit residential		2 unit resident	ial - ren	lace damaged		20.00	\$10,00		5	
		decking in exi		-	FIRE DEPT				CTION:	
			Ü	•			Approved			Type: 3
							Denied		,,05	حد
									oup: <i>R3</i> DCC 2	S(0)
Proposed Project Descriptio	n:								,3400	
replace damaged deckir	 19 in existing f	footprint (a.f.	le the	fact)	Signature:			Signatu	ire.	
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										<b>.</b>
					Action:	Approv	ved App	proved w/	Conditions	Denied
					Signature:				Date:	
Permit Taken By:	Date Ar	pplied For:			7	oning	Approva			
Ldobson	12/03	3/2009			2	ZOHIHE	Approve	<b>.</b>		
1. This permit applica	tion does not	nraaluda tha	Spe	cial Zone or Revie	ws	Zoni	ng Appeal		Historic Pres	ervation
1. This permit applicate Applicant(s) from the		•				Varianc	_		Not in Distric	et on Landman
Federal Rules.	neeting appire	able State and		noreland		varianc	e		Not in Distric	t or Landmar
						Miscella			Dans Not Do	auia Danian
2. Building permits do septic or electrical	-	olumbing,		etland		Miscella	aneous		Does Not Rec	quire Review
•				ood Zone		المسطنية	onal Use		Dogwing Day	
3. Building permits ar within six (6) mont				ood Zone		Condition	oliai OSC		Requires Rev	iew
False information n				ıbdivision		Interpre	tation		Approved	
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				ie rian		Арргом	cu		Approved w/	Conditions
PERM	IT 1001	IFD	   Maj [	☐ Minor ☐ MM	$\neg \mid \neg$	Denied			Denied	
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I hereby certify that I am I have been authorized b										
jurisdiction. In addition										
shall have the authority t										
such permit.										
SIGNATURE OF APPLICAN	JT			ADDRES	2		T) A TIP		DITO	ME
SIGNATURE OF APPLICAT	41			ADDKES!	<b>.</b>		DATE		РНО	INE
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE					DATE		PHO	NE

# General Building Permit Application

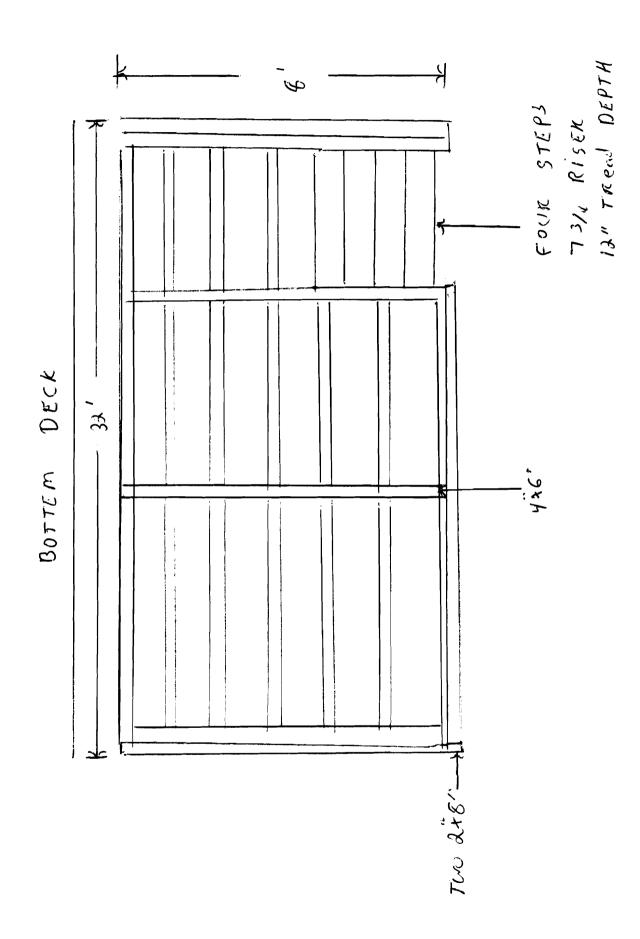
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

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 ws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's atthorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the covisions of the codes applicable to this permit.	Location/Address of Construction:	100	Colombia.	
Name CAROLIN SNYCLEN   Address 5 2 8 STROUT WATER	Total Square Footage of Proposed Structure/A	Area	Square Footage of Lot	Number of Stories
Current legal use (i.e. single family)  Current legal use (i.e. single family)  If vacant, what was the previous use?  Proposed Specific use:  Is property part of a subdivision?  Project description:  Contractor's name:  Telephone:  Telephone:  Special M.  City, State & Zip  Current legal use (i.e. single family)  If yes, please name  Project description:  Contractor's name:  Telephone:  Telephone:  Special M.  City, State & Zip  Mailing address:  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 has request additional information prior to the issuance of a permit. For further information or to download copies of sis form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections invision office, room 315 City Hall or call 874-8703.  thereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and at I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable was of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's thorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the ovisions of the codes applicable to this permit.	Chart# Block# Lot#	Name CAR	JLYN SNYden 28 STROUTWATER	ı
If yeacht, what was the previous use?	Lessee/DBA (If Applicable)	Owner (if dif Name Address	ferent from Applicant)	Cost Of Work: \$ 10,000  C of O Fee: \$
Address: The best of the contact when the permit is ready: Second the permit is ready: Second the permit is ready: Second the permit is ready: Telephone: Second the permit is ready: Second the permit is ready: Telephone: Second the permit is ready: Second the permit is ready: Telephone: Second the permit is ready: Second the permit is r	I If vacant what was the previous use?			
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n 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.  Thereby 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 was of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's atthorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the covisions of the codes applicable to this permit.	Please submit all of the information	outlined on	the applicable Checklis	st. Failure to
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This is not a permit; you may not commence ANY work until the permit is issue	ignature: Josh Jew			

City of Portland, M	aine - Bui	lding or Use Permit	t		Permit No:	Date Applied For:	CBT:	
389 Congress Street, 0	4101 Tel: (	(207) 874-8703, Fax: (	(207) 874	-8716	09-1376	12/03/2009	181	D027001
Location of Construction:		Owner Name:		C	Owner Address:		Phone:	
100 COLUMBIA RD		SNYDER CAROLYN	I J LIFE E	STA :	528 STROUDWA	TER ST		
Business Name:		Contractor Name:		(	Contractor Address:		Phone	
		J & L Associates/ Jose	ph Cormi	er /	7 Hubbard St Saco		(207)	590-7751
Lessee/Buyer's Name		Phone:		P	ermit Type:			
					Alterations - Duple	ex		
Proposed Use:		·	F	Proposed	Project Description:			
2 unit residential - repla	ce damaged o	lecking in existing footp	rint	replace	damaged decking	in existing footprint		
Dept: Zoning	Status: A	Approved with Condition	ns <b>Rev</b>	iewer:	Tom Markley	Approval Da	ate:	12/03/2009
Note:							Ok to !	Issue: 🗹
1 '		dditional dwelling unit. s, microwaves, refrigera			•		t includ	ing, but
Dept: Building	Status: A	Approved with Condition	ns <b>Rev</b>	iewer:	Tom Markley	Approval Da	ate:	12/03/2009
Note:							Ok to !	Issue: 🗹
Application approva and approrval prior	-	information provided by	y applican	t. Any o	deviation from appr	roved plans requires	separate	e review



Resils 36" HIGH SPINDLES 3" APart.





## (R) CHARL RESIDENCE ZONE APPLICATION FOR PERMIT

Permit No. 1521

Class of Building or Type of Structure Third Class

JUL 34 1930

Portland, Maine, Jane 27, 1930

To	the	INSPECTOR	OF	BUILDINGS.	PORTLAND.	ME.

any, submitted herewith			
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			mbia Road Telephone 8871 M
			Telephone
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Other buildings on same			
		Present Building to b	
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Infr. I wim H. Manson

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Building or Use Permit Appli