City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						Permit No: 07-1156	Issue Dat	e:	CBL: 181 F013	3001
Location of Construction:Owner Name:66 ROSEMONT AVEGARRY SUSA			NC		Owner Address: 66 ROSEMONT AVE			Phone:	Phone:	
Business Name: Contractor Nam Peter Tierney-					Contractor Address: 34 Leonard Street Portland			Phone 2074095840		
Lessee/Buyer's Name Phone:		Phone:			Permit Type: Alterations - Dwellings				Zone:	
	Use: gle Family Home		Single Family Home - Add closet to			ermit Fee: \$40.00	Cost of Wo \$1,3	30.00	CEO District: 3]
			master bedroom, add handrail and ballaster at opening at stairs		Approved			SPECTION: se Group Type		
Proposed Project Description: Add closet to master bedroom, add handrail and balla stairs				opening at	PEDESTRIAN ACTIVITIES DISTRIC					
					Signature:			Date:		
Permit Taken By:Date Applied For:ldobson09/19/2007			Zoning Approval							
1.	. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		S Zoning Appeal			Historic Preservation		
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellaneou			Does Not Require Revie		
 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 			Flood Zon		Conditional Us			Requires Review		
			Subdivision		Interpretati			Approved		
			🗌 Si	te Plan		Approv	red		Approved w/	Condition
			Ma	Mino M		Denied			Denied	
			Date:			Date:		D	ate:	

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	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО

66 ROSEMONT AVE 0 Business Name: 0		Owner Name: GARRY SUSAN C Contractor Name: Peter Tierney-Fife		Owner Address: 66 ROSEMONT AVE Contractor Address: 34 Leonard Street Portland		Phone:
						Phone 2074095840
Lessee/Buyer's Name	P)	hone:		Permit Type: Alterations - Dwellin	ngs	Zone:
Dept: Zoning	Status: App	proved	Reviewer:	Tom Markley	Approval Date	_
Note:					()k to Issue: ⊻

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