

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

Please Read Application And Notes, If Any, Attached

This is to certify that Henson Michael C & /Shed Builders

has permission to install a 8 x 12 shed w/ ramp

AT Alden Cir

Permit Number: 051222

PERMIT ISSUED

SEP 15 2005

182A A02100

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and work on permit must be completed before this building or part thereof is occupied or closed-in. 24 HOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept.
Health Dept.
Appeal Board
Other

Handwritten signature and date 9/14/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Handwritten note: ok to City 9/14/05

9/19/65

Setbacks/Construction
as per plans on the Change
D

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 051222	Issue Date: SEP 7 5 2005	CBL: 182A A021001
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Location of Construction: 84 Alden Cir	Owner Name: Henson Michael C &	Owner Address: 84 Alden Cir	Phone: 1078923636
Business Name:	Contractor Name: Shed Happens	Contractor Address: 1042 Chadborne Rd, Standish	Phone: 1078923636
Lessee/Buyer's Name	Phone:	Permit Type: Sheds	Zone: R-3

Past Use: Single Family Home	Proposed Use: Single Family Home/ install a 8 x 12 shed w/ ramp	Permit Fee: \$39.00	Cost of Work: \$1,950.00	CEO District: 5
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Proposed Project Description: install a 8 x 12 shed w/ ramp	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>	INSPECTION: Use Group R-3 Type: SB Signature: <i>[Signature]</i>
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Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 08/22/2005	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..

Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> late: 9/14/05

Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied late: _____

Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 9/14/05
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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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE