

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED
 Permit Number: 051252
AUG 31 2005
CITY OF PORTLAND

This is to certify that Qazi Shafaat /Robert Mason

has permission to Amend permit # 05-1003 to change stair window due to height

AT 74 Phipps Rd City of Portland, Oregon 183A B007001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Oregon 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 written permission procured before this building or part thereof is altered 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 _____
DepartmentName

Jeanne Bouke 8/31/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

PERMIT ISSUED

Permit No: 05-1252	Issue Date: AUG 31 2005	CBL: 183A B007001
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Location of Construction: 74 Phipps Rd	Owner Name: Qazi Shafaat	Owner Address: 74 Phipps Rd	Phone:
Business Name:	Contractor Name: Robert Mason	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:		Zone: R3

CITY OF PORTLAND

Past Use: Single Family	Proposed Use: Single Family w/amendment to # 05-1003 to change stairs to winders	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 5
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group R3 Type SB IRC-2003	

Proposed Project Description:
Amend permit # 05-1003 to change stairs to winders due to headroom

Signature: _____ Date: _____

Action: Approved Approved w/Conditions Denied

Permit Taken By: jmb	Date Applied For: 0813 112005	Zoning Approval
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<p>Special Zone or Reviews</p> <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"/> Date: <i>JMB 8/31/05</i>	<p>Zoning Appeal</p> <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 Date: _____	<p>Historic Preservation</p> <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: <i>JMB</i>
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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

City of Portland, Maine - Building or Use Permit

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

Permit No: 05-1252	Date Applied For: 08/31/2005	CBL: 183AB007001
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Location of Construction: 74 Phipps Rd	Owner Name: Qazi Shafaat	Owner Address: 74 Phipps Rd	Phone:
Business Name:	Contractor Name: Robert Mason	Contractor Address: 196 Ilman Rd Buxton	Phone (207) 929-6606
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Single Family	

Single Family w/amendment to # 05-1003 to change stairs to winders	Amend permit # 05-1003 to change stairs to winders due to headroom
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Dept: Zoning **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 08/31/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 08/31/2005
Note: **Ok to Issue:**

1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.

All Purpose 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.

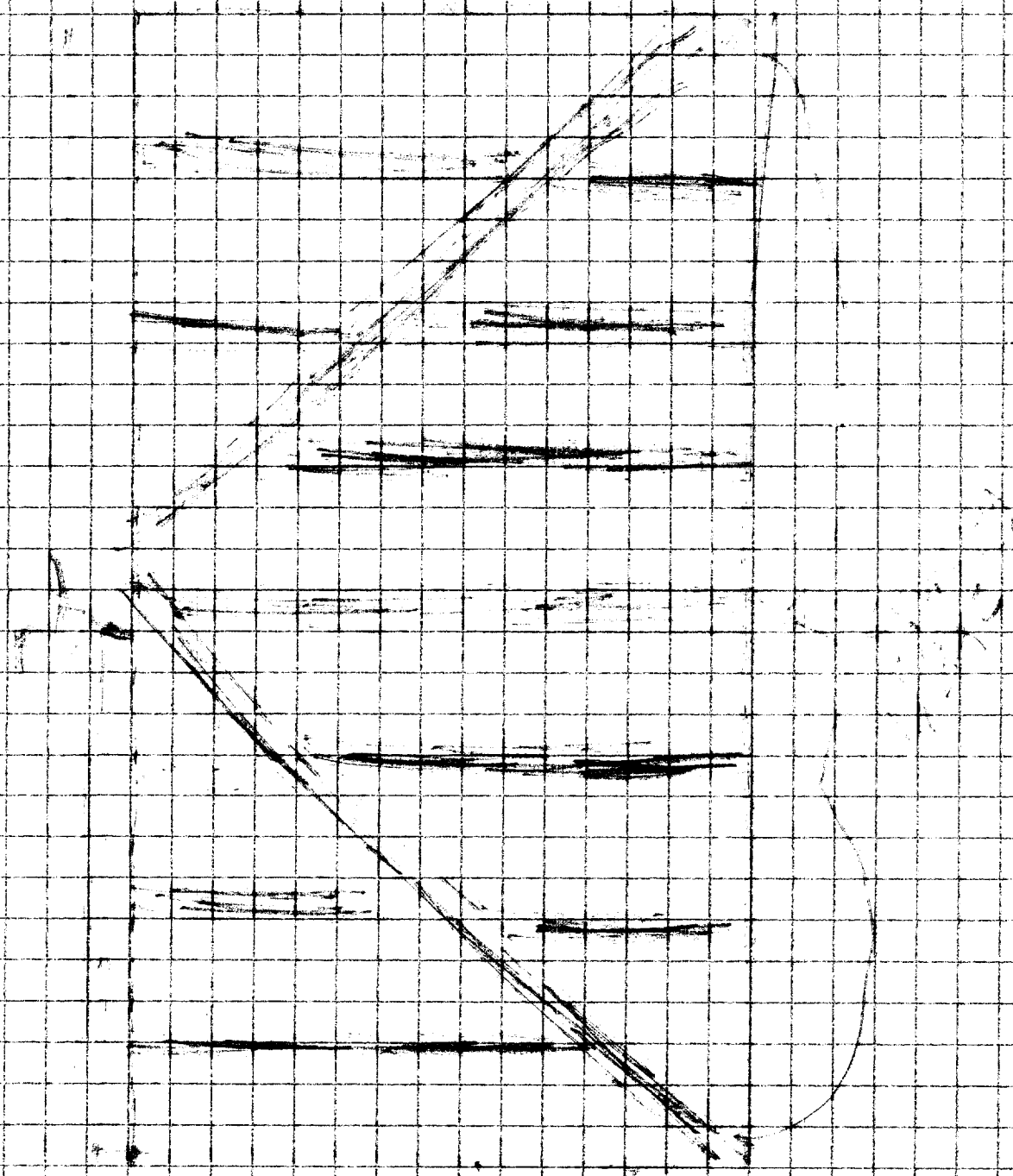
Location/Address of Construction: <u>74 PINEAPPLE</u>		
Total Square Footage of Proposed Structure <u>NO</u>	Square Footage of Lot <u>13168</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>183</u> Block# <u>AB</u> Lot# <u>007</u>	Owner: <u>QALI</u>	Telephone: <u>929 6606</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: & <u>ROBERT MASON</u> <u>9 GILMAN RD</u> <u>BURTON MS</u>	cost Of Work \$ <u>—</u> Fee: \$ <u>30.00</u>
<p>Approximately how long has it been vacant: _____</p> <p>Proposed use: <u>ADD STAIRS - DECK</u></p> <p>Project description: _____</p>		
Contractor's name, address & telephone: <u>ROBERT MASON</u>		
Who should we contact when the permit is ready: <u>929 6606</u>		
Mailing address: _____		
<p>We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: _____</p>		

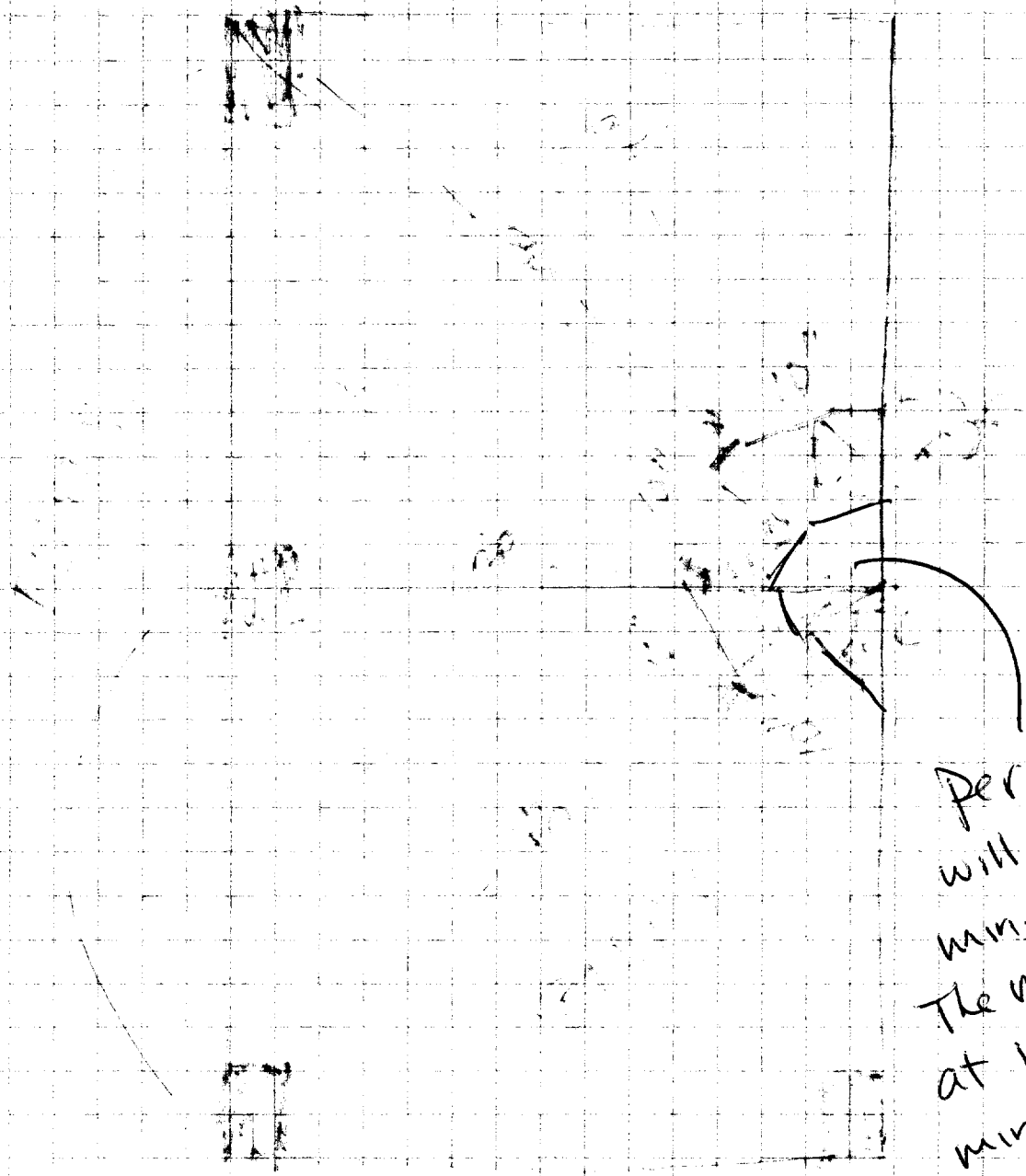
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I 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 laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>8-31-05</u>
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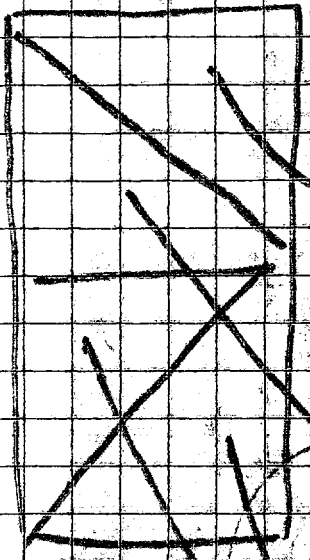
This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall





Per contractor
will be a
min. 6" at
The narrow end
at 12" in
min of 10"

JMB
8/31/05



2x8 PT
TRIMMING

2x8 PT
BOX

2x8 PT
TRIMMING
BOX

2x8 PT
BOX

2x8 PT
BOX

6" POST

Handwritten notes and scribbles on the left side of the page, including the word "TRIMMING" and other illegible markings.

Handwritten notes on the right side of the page, including "2x10 PT" and "6" POST".

