City of Portland,		_			2013-00428	Issue Date	:	186	D008001	
389 Congress Street,	04101 161: (Owner Name:	, Fax. (207) 6/4-0		r Address:			Phone:	2000001	
Location of Construction: 43 BOLTON ST		ON	43 BOLTON ST PORTLAND, M 04102		ME	(207) 504-6434				
Business Name:	nme: Contractor Name self		:		Contractor Address: 43 Bolton St Portland ME 04102			Phone (207) 504-6434		
Lessee/Buyer's Name		Phone:			it Type: erations - Multi F	amily		Zone:		
Past Use: Three Family Dwelling		Proposed Use: Same: Three Family Dwelling		Permit Fee: Cost of Work: \$40.00 \$2,000.			k: 2,000.00	CEO District:		
				FIRE	E DEPT:	Approved Denied N/A	INSPECTI Use Group		Туре:	
Proposed Project Descript	lon:			-						
After the fact remodel		r 1st floor DU		Signa	iture:		Signature:			
and and another state and and another state and another stat				PEDESTRIAN ACTIVITIES DISTRICT (I						
					action: Approv	ed App	proved w/Con		Denied	
Permit Taken By:	Date Ap	oplied For:		S	Signature: Zoning Approval			ite:		
bjs	03/04	/2013								
 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 Shoreland			Zoning Appeal Variance		Historic Preservation Not in District or Landmark		
			☐ Wetland ☐ Flood Zone ☐ Subdivision		Miscella	Miscellaneous		Does Not Require Review		
					Conditional Use			Requires Review		
					Interpretation			Approved		
			Site Plan		Approve	d		Approve	ed w/Conditions	
			Maj Minor Minor	mode	Denied Denied			Denied	9	
			Date: 3	14-1	Date:		Date:		/	
			CERTIFICA	ATION	N					
I hereby certify that I a I have been authorized jurisdiction. In additio shall have the authority such permit.	by the owner to	make this appl r work describe	ication as his author d in the application	ized a	gent and I agree ted, I certify that t	to conform the code of	to all appl ficial's autl	icable la norized	aws of this representative	
SIGNATURE OF APPLICA	ANT		ADDI	RESS		DATE			PHONE	
RESPONSIBLE PERSON	IN CHARGE OF W	ORK, TITLE				DATE			PHONE	

General Building Permit Application

f 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: 43	Bolton St. Apt. 1	
Total Square Footage of Proposed Structure/Arc	I C F CI	GOO Approx.
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant *must be owner, Lessee or Buyer* Name Breton Hines Address 43 Bolton St. City, State & Zip Portland, ME 0412	(207) 504 - 6434
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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: Applying for after the fact per Replaced Cabinets and island	If yes, please name ermit small re-model job and structure. Re-floored	
Contractor's name: Breton Hine Address: 43 Bolton St. City, State & Zip Portland, ME Who should we contact when the permit is rea Mailing address: 43 Bolton St.	04101 ady: Breton Hines	Telephone:
Please submit all of the information do so will result in the norder to be sure the City fully understands the may request additional information prior to the issuis form and other applications visit the Inspection office, room 315 City Hall or call 874-8703.	full scope of the project, the Planning and I suance of a permit. For further information ons Division on-line at www.portlandmaine.	MAD 14 2013 Metopment Department or to downloant copies of
hereby certify that I am the Owner of record of the na- nat I have been authorized by the owner to make this as we of this jurisdiction. In addition, if a permit for work athorized representative shall have the authority to ente- rovisions of the codes applicable to this permit.	med property, or that the owner of record author pplication as his/her authorized agent. I agree to k described in this application is issued, I certify the er all areas covered by this permit at any reasonab	izes the proposed work and conform to all applicable nat the Code Official's
Signature: This is not a permit; you may n	Date: 3-4-13 not commence ANY work until the permi	t is issue

Scope of work dones out all old cubinets. Old cubinets were located in Same Place. Demoid old island. Old Island had the same dimensions 3) Reinstatled all appliances, including Sink. Replaced all under-sink plumbing. Made no Changes. 4) Polled up vinyl Hooring 5) Renoved mop board and window trim tor sanding and painting. 6) installed sub-floor and Respainted walls. 8) installed concrete tops.