

187-C-006
City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 75 Craigie St		Owner: Palais, Alan		Phone:		Permit No: 950213			
Owner Address:		Leasee/Buyer's Name:		Phone:		BusinessName:			
Contractor Name: BRC Carpentry RFD 1 Box 465		Address: Hebron, ME 04238 966-3686		Phone:		PERMIT ISSUED Permit Issued: MAR 10 1995 CITY OF PORTLAND			
Past Use: 1-fam		Proposed Use: 1-fam w/int reno		COST OF WORK: \$ 500.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature:				PERMIT FEE: \$ 25.00 INSPECTION: Use Group: RB Type: 5B <i>20093</i> Signature:	
Proposed Project Description: Make Interior Renovations as per plans				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____				Zone: <i>2-3</i> CBL: 187-C-006 Zoning Approval: 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"/>	
Permit Taken By: Mary Gresik		Date Applied For: 09 March 1995						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	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

No debris removal necessary

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 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 provisions of the code(s) applicable to such permit

9 Mar 95

SIGNATURE OF APPLICANT *Benjamin Clough* ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

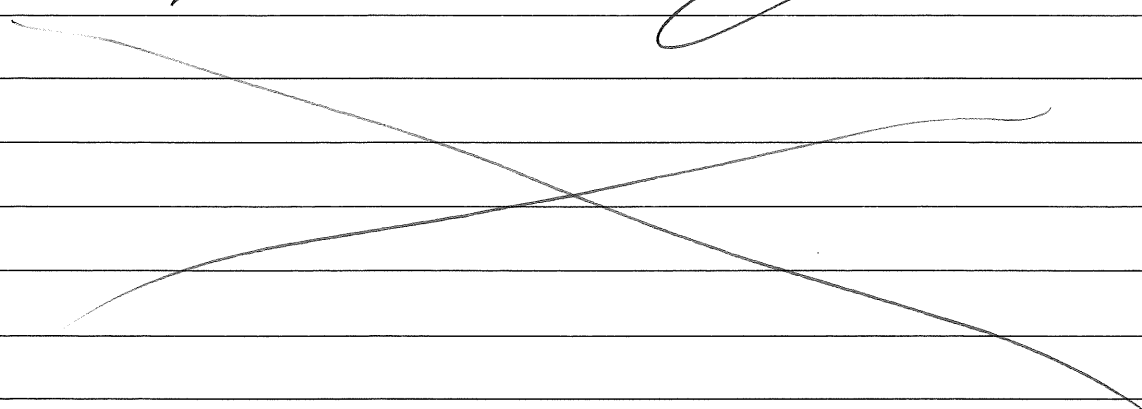
CEO DISTRICT

5

M. W. W. W.

COMMENTS

Checked walls removed in kitchen
Close in. Inspected 3-24-95
Completed mulling



Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

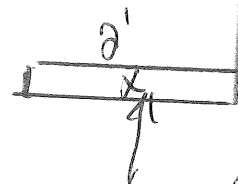
Office - Study

Kitch

Dinning Room

Remove this wall

12'



Remove this wall