

Notes, If Any,
Attached

Permit Number: 071349

This is to certify that BROOKLAWN MEMORIAL PARK / Olin Irish

has permission to New Maintenance building

at 2002 CONGRESS ST Permit No. 211 A001001

provided that the person or persons in charge of the work accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission procedure before this building or part thereof is started or service is closed-in. 4 HOUR NOTIFICATION REQUIRED.

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

OTHER REQUIRED APPROVALS

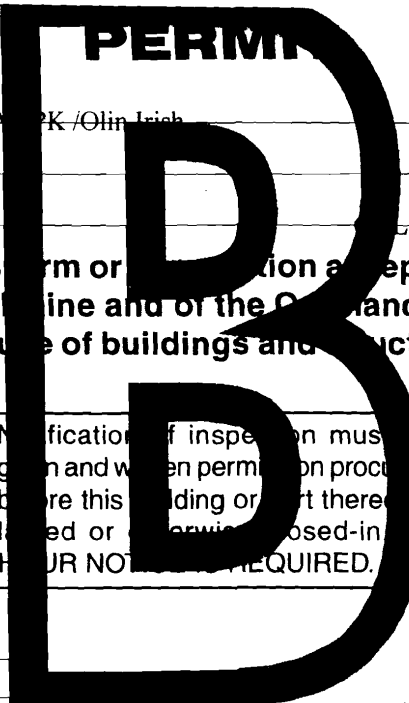
Fire Dept. Craig Cress

Health Dept. _____

Appeal Board _____

Other _____

Department Name



EXPIRED

PENALTY FOR REMOVING THIS CARD

[Signature]
Director - Building & Inspection Services
5/21/08

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 07-1349	Issue Date:	CBL: 211 A001001
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Location of Construction: 2002 CONGRESS ST	Owner Name: <i>DAVID MORGAN</i> BROOKLAWN MEMORIAL PK	Owner Address: 2002 CONGRESS ST	Phone: <i>773-7679</i>
Business Name:	Contractor Name: Olin Irish	Contractor Address: Wilson Road Gorham	Phone: 2078922153
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone: <i>R-1</i>

Past Use: Brooklawn Memorial Park	Proposed Use: Brooklawn Memorial Park - New Maintenance building <i>60 x 20</i>	Permit Fee: \$2,195.00	Cost of Work: \$210,000.00	CEO District: 3
Proposed Project Description: New Maintenance building		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Conditions</i>	INSPECTION: Use Group: <i>51</i> Type: <i>5B</i> <i>5/31/08</i>	
		Signature: <i>Gregory C...</i>	Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 10/25/2007	Zoning Approval		
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <i>NA</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan <i>applying for</i> Maj <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM <input type="checkbox"/> <i>ok with conditions</i> Date: <i>12/12/07</i>	<p>Zoning Appeal</p> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input checked="" type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input checked="" type="checkbox"/> Approved <i>6-0</i> <input type="checkbox"/> Denied Date: <i>12/6/07</i>	<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>9</i>
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EXPIRED

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