

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application  
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0072	Issue Date: JAN 25 2008	CBL: 213 A004001
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Location of Construction: 9 COBB AVE	Owner Name: CRAWFORD TIFFANY A	Owner Address: 9 COBB AVE	Phone: 332-6218
Business Name:	Contractor Name: Brian Gagne	Contractor Address: 78 Brigham Street So Portland	Phone: 2078294179
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone: R-2

Past Use: Single Family Home	Proposed Use: Single Family Home minor renovation due to water damage in bathroom	Permit Fee: \$40.00	Cost of Work: \$1,265.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>NA</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i>	

Proposed Project Description:  
Replace and reinforce water damaged areas in bathroom

Signature: *[Signature]*

Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: lmd	Date Applied For: 01/25/2008	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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>1/25/08</i>	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <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>1/25/08</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**

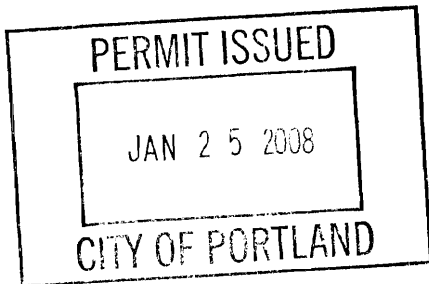
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 08-0072	<b>Date Applied For:</b> 01/25/2008	<b>CBL:</b> 213 A004001
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<b>Location of Construction:</b> 9 COBB AVE	<b>Owner Name:</b> CRAWFORD TIFFANY A	<b>Owner Address:</b> 9 COBB AVE	<b>Phone:</b> ( ) 232-6218
<b>Business Name:</b>	<b>Contractor Name:</b> Brian Gagne	<b>Contractor Address:</b> 78 Brigham Street So Portland	<b>Phone:</b> (207) 829-4179
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	

<b>Proposed Use:</b> Single Family Home minor renovation due to water damage in bathroom	<b>Proposed Project Description:</b> Replace and reinforce water damaged areas in bathroom
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 01/25/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 01/25/2008
<b>Note:</b> Printed out overlay map of historic district from the GIS system - Not in district			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.			
2) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.			



# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

## BUILDING INSPECTION PERMIT

Permit Number: 080072

This is to certify that CRAWFORD TIFFANY A. Gagne  
has permission to Replace and reinforce water damaged area in bathroom  
AT 9 COBB AVE 213 A004001

provided that the person or persons who perform or supervise the work in 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 is procured before this building or part thereof is occupied or services are provided. 24 HOUR NOTICE REQUIRED.

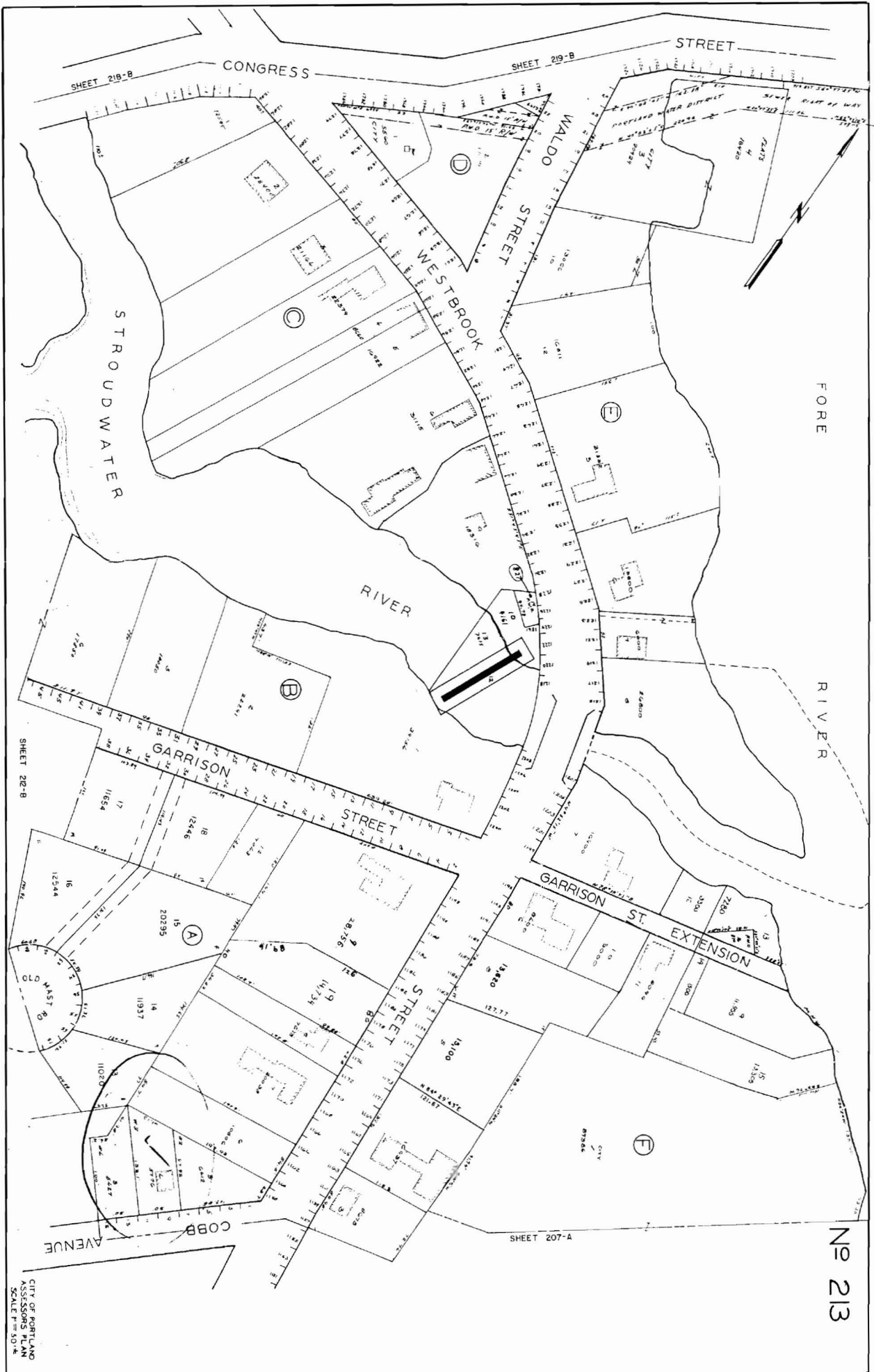
A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

PERMIT ISSUED  
JAN 25 2008

OTHER REQUIRED APPROVALS  
Fire Dept. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
CITY OF PORTLAND  
Department Name

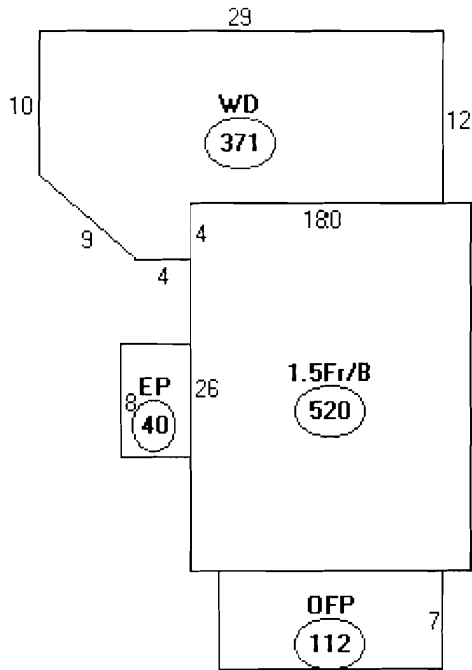
*[Signature]*  
1/25/08  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**



CITY OF PORTLAND  
 ASSESSORS PLAN  
 SCALE 1" = 50'

No 213



Descriptor/Area  
A: 1.5Fr/B  
520 sqft  
B: EP  
40 sqft  
C: OFP  
112 sqft  
D: WD  
371 sqft





This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information

<b>Card Number</b>	1 of 1
<b>Parcel ID</b>	213 A004001
<b>Location</b>	9 COBB AVE
<b>Land Use</b>	SINGLE FAMILY
<b>Owner Address</b>	CRAWFORD TIFFANY A 9 COBB AVE PORTLAND ME 04102
<b>Book/Page</b>	21716/280
<b>Legal</b>	213-A-4 COBB AVE 9-11  5776 SF

Current Assessed Valuation

<b>Land</b>	<b>Building</b>	<b>Total</b>
\$74,800	\$78,800	\$153,600

Property Information

<b>Year Built</b> 1927	<b>Style</b> Old Style	<b>Story Height</b> 1.5	<b>Sq. Ft.</b> 910	<b>Total Acres</b> 0.133		
<b>Bedrooms</b> 2	<b>Full Baths</b> 1	<b>Half Baths</b>	<b>Total Rooms</b> 5	<b>Attic</b> None	<b>Basement</b> Full	

Outbuildings

<b>Type</b>	<b>Quantity</b>	<b>Year Built</b>	<b>Size</b>	<b>Grade</b>	<b>Condition</b>
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Sales Information

<b>Date</b>	<b>Type</b>	<b>Price</b>	<b>Book/Page</b>
08/27/2004	LAND + BLDING	\$185,500	21716-280
06/01/2003	LAND + BLDING	\$160,000	19597-188
08/01/2002	LAND + BLDING	\$129,500	17995-294
12/01/1999	LAND + BLDING	\$97,000	15199-332
06/18/1996	LAND + BLDING		12567-225

Picture and Sketch

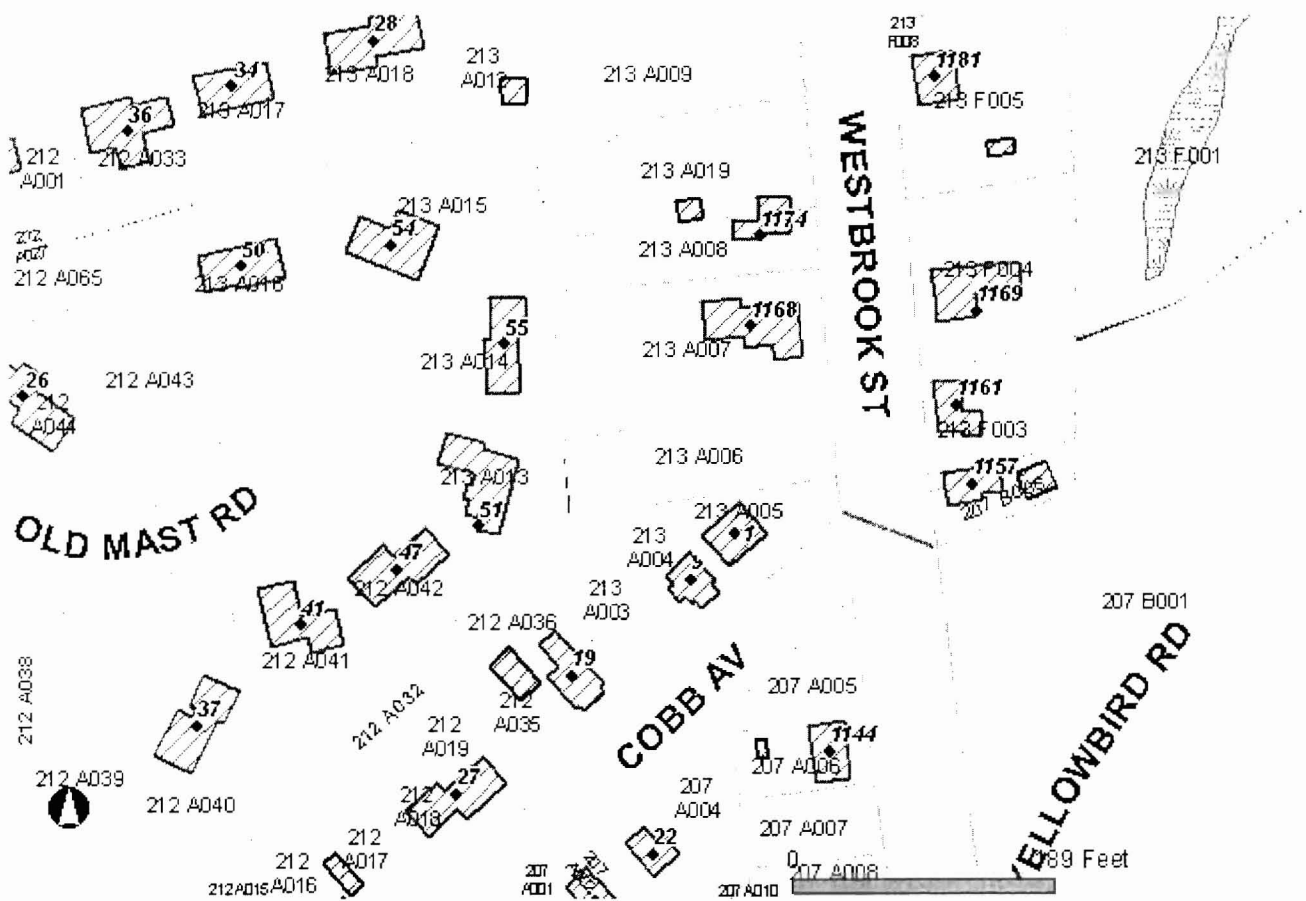
<a href="#">Picture</a>	<a href="#">Sketch</a>	<a href="#">Tax Map</a>
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[Click here to view Tax Roll Information.](#)

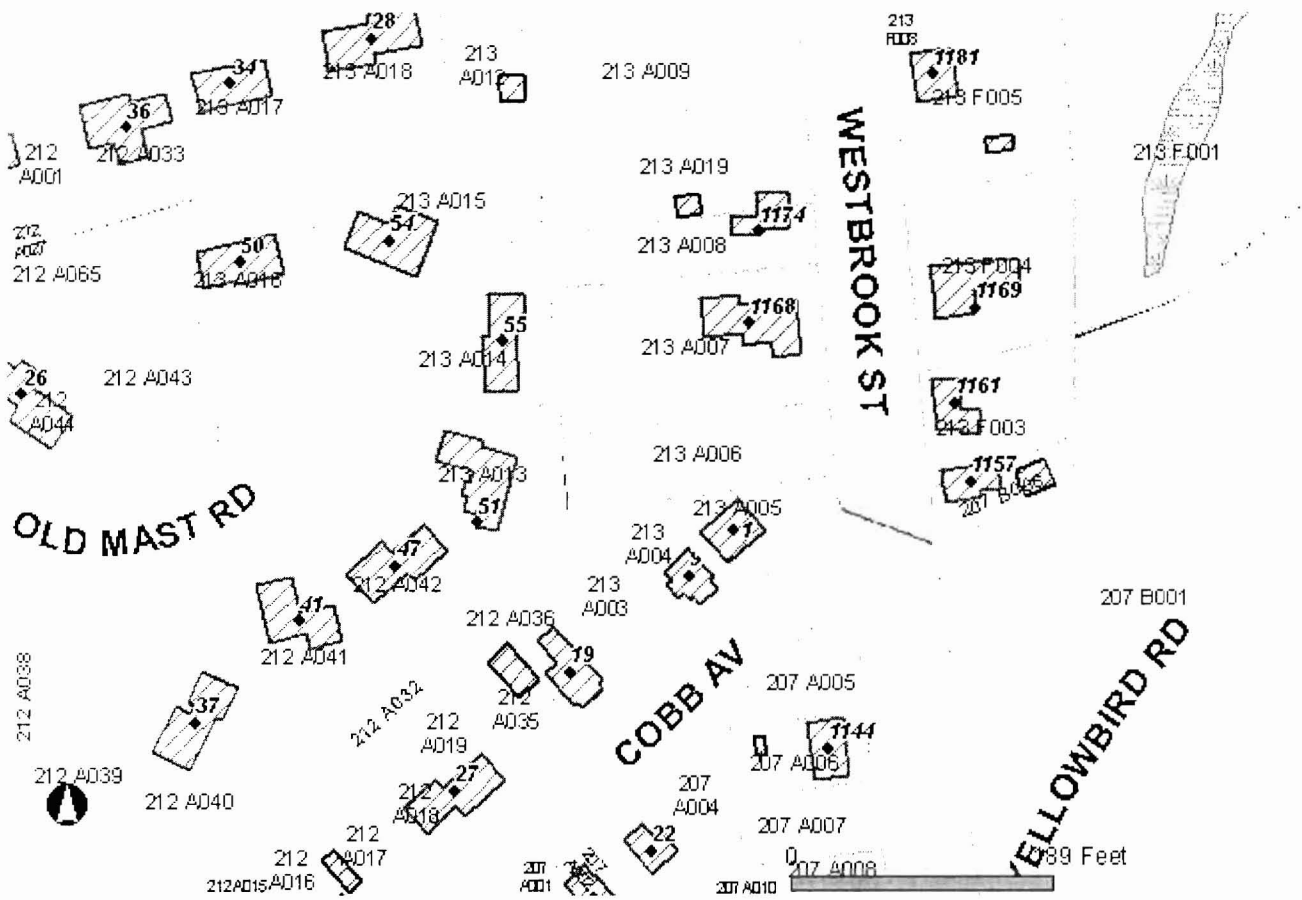
Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed.

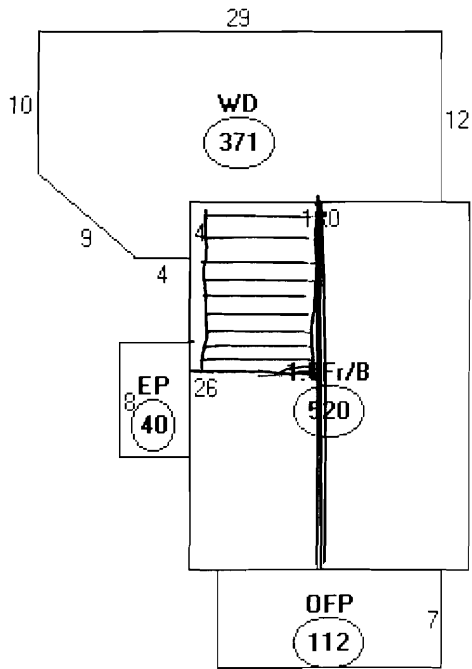
**New Search!**











Descriptor/Area	
A:	1.5Fr/B 520 sqft
B:	EP 40 sqft
C:	OFF 112 sqft
D:	WD 371 sqft

2"x6"s - 16"oc

Replacing damaged 2"x's rough cut with same 2"x's rough cut  
 Replacing 1"x's with 3/4"x4'x8' Sheeting  
 matching ceda shacks and shingles with matching mat.