Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PECTION

Permit Number: 060939

This is to certify thatALLEN GAYLE H & ROB	F ALLEN ITS/Bradford Po	
has permission to add stairs for attic		PERMIT ISSUED
AT _101 RIVERS EDGE DR		B049001
provided that the person or persons	s rm or a large dion a septing	this permit shall comply with a
of the provisions of the Statutes of		of the City of Portland regulation
the construction, maintenance and this department.	of buildings and secture	s, and of the @PMi@atRORATA AND
Apply to Public Works for street line and grade if nature of work requires such information.	fication of inspersion muses a part of and we en permit on procust the rethin of light of the process of the pr	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept.		1/24/06
Health Dept.		1.
Appeal Board	_	
Other		Director - Building & Inspection Services
	ALTY FOR REMOVING THIS CA	RD

City of Portland, Maine	- Building or Use	Permit Application	Permit No: Issue Date:	CBL:			
389 Congress Street, 04101	Tel: (207) 874-8703	3, Fax: (207) 874-8716	06-0939	217 B049001			
101 RIVERS EDGE DR	ALLEN GAY	LE H & ROBERT F PO	O BOX 4813	- 1			
Business Name:	Contractor Name		ontractor Address:	C accephone			
	Bradford Post	20	ontractor Address: 0 Emerson St. Portland	6 200b ₂₀₇ 619424			
lessee/Buyer's Name	Phone:		rmit Type: Amendan	Zone:			
			Alterations - Dwe hingy OF p	ORTIAND C-8			
Past Use:	Proposed Use:	Pe	ermit Fee: Cost of Work:	CEO DISTRICT: R-32			
Single Family Home	Single Family	Home/ add stairs for	\$57.00 \$3.500.0	<u> </u>			
	attic	FI	RE DEFT: Approved IN	SPECTION:			
-		1	7 Denied U	se Group: R-3 Type: 5B TRC 1203			
Amendment to or	usural house 1	Dermit	11/1	TRC 2003			
Instruct Description	1		$\mathcal{N}//$	-11			
'roposed Project Description: add stairs for attic	# 05-	1126	and turns	mature			
add stairs for attic			Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
		i					
		A	Action: Approved Approved w/Conditions Dehied				
	_	Si	gnature:	Date.			
			Zoning Approval				
'ermit Taken By:	Date Applied For:		Zoning Approval				
'ermit Taken By: ldobson	Date Applied For: 06/23/2006			The state of the s			
·		Special Zone or Reviews	Zoning Approval Zoning Appeal	Historic Preservation			
ldobson		Special Zone or Reviews Shoreland		Historic Preservation Not in District or Landmark			
ldobson 1.		l	Zoning Appeal				
ldobson		Shoreland	Zoning Appeal Variance	Not in District or Landmark			
ldobson 1.		Shoreland	Zoning Appeal Variance	Not in District or Landmark			
ldobson 1. 2.		☐ Shoreland ☐ Wetland	Zoning Appeal Variance Miscellaneous	Not in District or Landmark Does Not Require Review			
ldobson 1. 2.		☐ Shoreland ☐ Wetland ☐ Flood Zone	Zoning Appeal Variance Miscellaneous Conditional Use	Not in District or Landmark Does Not Require Review Requires Review			
ldobson 1. 2.		☐ Shoreland ☐ Wetland ☐ Flood Zone ☐ Subdivision	Zoning Appeal Variance Miscellaneous Conditional Use Interpretation	Not in District or Landmark Does Not Require Review Requires Review Approved			
ldobson 1. 2.		☐ Shoreland ☐ Wetland ☐ Flood Zone ☐ Subdivision ☐ Site Plan	Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved	Not in District or Landmark Does Not Require Review Requires Review Approved Approved			
ldobson 1. 2.		☐ Shoreland ☐ Wetland ☐ Flood Zone ☐ Subdivision ☐ Site Plan	Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved	Not in District or Landmark Does Not Require Review Requires Review Approved Approved w/Conditions Denied			
ldobson 1. 2.		☐ Shoreland ☐ Wetland ☐ Flood Zone ☐ Subdivision ☐ Site Plan	Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved	Not in District or Landmark Does Not Require Review Requires Review Approved Approved w/Conditions Denied			

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			Permit No:	Date Applied For:	CBL:	
389 Congress Street, 0	4101 Tel: (207) 874-8703, Fax: ((207) 874-8716	6 06-0939	06/23/2006	217 B049001	
Location of Construction:	Owner Name:		Owner Address:	Phone:		
101 RIVERS EDGE DR	ALLEN GAYLE H &	ALLEN GAYLE H & ROBERT F A		PO BOX 4813		
Business Name:	Contractor Name:	Contractor Name:		Contractor Address:		
	Bradford Post	Bradford Post		20 Emerson St. Portland		
Lessee/Buyer's Name	Phone:		Permit Type:			
			Amendment to Si	ngle Family		
'roposed Use:		Propose	d Project Description:			
⁻			airs for attic			
Dept: Zoning	Status: Approved with Condition	ns Reviewer:	Marge Schmuck	al Approval I	Date: 06/29/2006	
Note:	**		<u> </u>	••	Ok to Issue:	
1) It is understood that	there is no change in the exterior of t	he building.				
· · · · · · · · · · · · · · · · · · ·	approved on the basis of plans submit l conditions are still in force.	itted. Any devia	tions shall require a	a separate approval l	pefore starting that	
Dept: Building	Status: Approved with Condition	ns Reviewer:	Tammy Munson	Approval I	Date: 07/24/2006	
Note:					Okto Issue:	

1) The attice space is NOT approved as habitable living space.

Note:

PERMIT ISSUED JUL 2 6 2006 CITY OF PORTLAND

A MENDMENT General 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: 0	PIVER'S EDGE DR					
Total Square Footage of Proposed Structure	Square Footage of Lot					
+ see previous permit	application >					
Tax Assessor's Chart, Block & Lot	Owner:	Telephone:				
Chart# Block# Lot#	Cayle & Bob Allen	774-4000				
217 B 49	Cayle & LOC FILES	114-4000				
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	cost Of Work: \$ 3500.				
	Mark Songelmann	Work: \$ 900;				
	Mark Songelmann 43 Dearing St	Fee: \$ 5]				
	761-9500	C of O Fee: \$				
	-					
	1.					
	atti	~ ~ d				
		05-1122				
	ngu	05 1177				
		05-1166				
Contractor's name, address & telephone:	le Allen 774 1000					
Contractor's name, address & telephone: 6 ay 6 Allen 774 - 4000						
Who should we contact when the permit is rea	dy:					
Mailing address:	Phone:					
Brad Post 657-7525						
- , , , - ,						
Place submit all of the information out	tlined in the Commercial Application (`hacklist				

Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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:	Mark lingel	DEDT	OF DUM DIA	Da	te: 6	123	106	
	0 0	C.	ITY OF PORT	rland, M	iE 			
This is not	a permit; you may not co	mmenc	e ANN 2 03	lk <u>90019</u> t	he pen	mit is	issued.	
			DEOE	W/FD				
			KEUEI	VED				