

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

<b>Permit No:</b> 09-0706	<b>Issue Date:</b>	<b>CBL:</b> 225 C024001
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<b>Location of Construction:</b> 93 WINDING WAY	<b>Owner Name:</b> ROTHENBERG DEBRA A & RICHARD	<b>Owner Address:</b> 93 WINDING WAY	<b>Phone:</b> 207-774-0733
<b>Business Name:</b>	<b>Contractor Name:</b> property owner	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Additions - Dwellings	<b>Zone:</b>

<b>Past Use:</b> Single Family Home	<b>Proposed Use:</b> Single Family Home - Installation of 400 sqft Attached Deck	<b>Permit Fee:</b> \$50.00	<b>Cost of Work:</b> \$3,000.00	<b>CEO District:</b> 3
<b>Proposed Project Description:</b> Installation of 400 sqft Attached Deck		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type	
		Signature:	Signature:	
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature: Date:				

<b>Permit Taken By:</b> lmd	<b>Date Applied For:</b> 07/08/2009	<b>Zoning Approval</b>		
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Condition
Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date:	Date:	Date:

**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	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHO

<b>Location of Construction:</b> 93 WINDING WAY	<b>Owner Name:</b> ROTHENBERG DEBRA A & RICHA	<b>Owner Address:</b> 93 WINDING WAY	<b>Phone:</b> 207-774-0733
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<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Additions - Dwellings	<b>Zone:</b>

<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 07/08/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 07/08/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) The doors entering the pool area must be alarmed or must meet section AG105 of the IRC2003			
2) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.			
3) Frost protection must be installed per the enclosed detail as discussed w/owner/contractor.			
4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			

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SIGNATURE OF APPLICAN

ADDRESS

DATE

PHO

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO