Cit	y of Portland, Maine	- Building or Use	Permit Application	P	Permit No:	Issue Date:	<del>UE</del>	CBL:	
389	Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-8716	5 L	04-1458	I ICI 22	700/	228 C0	07001
Loca	tion of Construction:	Owner Name:		Own	er Address:	1	711(14	Phone:	
24 Partridge Cir Claiborn James		s M &		Partridge Cir	arve pa	TTI AN EN			
Busi	ness Name:	Contractor Name	:	Con	tractor Address:		4+ (5-4) -E	Phone	
		Stephen Brann	ı	39	South Freeport	Road Freeport		20732909	910
Less	ec/Buyer's Name	Phone:		Реги	nit Type:				Zone:
				Sin	ngle Family				P-2
Past	Use:	Proposed Use:		Per	mit Fee:	Cust of Work:	CE	O District:	
Sin	gle Family Home	Single Family	Home / Kitchen		\$336.00 \$35,000.00			3	
Renovation, N		ew deek, new dormer	FIR	DE DEPT		SPECTI c Group	2-3 20 2	Туре:5Е	
-	osed Project Description: chen Renovation, New dec	l do			1	40	0	1	/
KIII	then Renovation, New dec.	k, new donner			Signature: Sign PEDESTRIAN A CTIVITIES DISTRICT		nature:		
					ion: Approve	ed Approve	d w/Cor Da		Denied
	nit Taken By:	Date Applied For:			Zoning	Approval			
ldo	bson	09/29/2004				320	_		_
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Review Shoreland Well Wetland			g Appeal		Not in Distri		
2.	Building permits do not in septic or electrical work.	nclude plumbing,	Wetland beyond	th.	Miscellar Miscellar	neous		Does Not Re	quire Review
3.	Building permits are void within six (6) months of the	Flood Zone Pune 12	-	Condition	nal Use		Requires Re	view	
False information may invalidate a building permit and stop all work		Subdivision 2001	X	Interpreta	ation		Approved		
			Site Plan		Approved	1		Approved wa	Conditions
			Maj Minor MM		☐ Denicd			Denied /	/
			Date: 10/21/04		Date:		Date:	10/21	104
			/ /					4 *	

#### 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

2/16/05 - Checked framing felectrial + plumbing for Close-in. No new plumbing only for new fixtures - electrical of problems seen - OIC to Close-in. Jank



## CITY OF PORTLAND, MAINE

Department of Building Inspections

9.27 2001
Received from Care Clairott
Location of Work 24 Partisides Circle
Cost of Construction \$  Permit Fee \$
Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)
Other
CBL: 228 C 007
Check #: 1/8 Total Collected \$336 60

# THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy



# All Purpose Building Permit Application

If you or the property owner owes real estate or personal property faxes 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: 24	PARTRIDGE CIRC	LE					
Total Square Footage of Proposed Structure; HOT E	_	age of Lot > SF _ ( O.	635 AC.)				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 228 C 007	Owner: JAMES M. CLAIBO	+ CAROLYNU. 2N	Telephone: 207.849.1240				
Lessee/Buyer's Name (If Applicable)	Applicant name, address telephone: ACEUT: AUDY FILMORE THINGS THINGS TO THE PROPERTY PLANNING TO THE PURE P.D., N.	+ OBJGH Fee	ost Of ork: \$ 35,000 e: \$ 336.00				
Current use: Single Tamily  If the location is currently vacant, what was prior use:							
Approximately how long has it been vacant:  Proposed use: KITCHEN RENOVATION + NEW REAR DECK + NEW DORMER IN KITCHESH Project description:							
Contractor's name, address & telephone;	STEPHEN BRAWI FREEPORT ME.	1,39 South	FREEPORT RD.				
Who should we contact when the permit is ready: ANDY FILLMORE @ 926-3939  Malling address:  400 INTERVALE RD.  NEW CLAXESTER, ME. CH 260							
Ve will contact you by phone when the permit is ready. You must come in and pick up the permit and eview the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up.  PHONE: 926 - 3939							
*							

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

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 canform to all applicable laws of this fursidiction. 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:	P.A.	nmar	Date: 9/27/04	

This is NOT a permit, you may not commence ANY work until the permit is issued.

If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



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

## **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

# PERMIT

Permit Number: 041458

This is to certify that	Claiborn James M & /Stephe	rann
. –		

provided that the person or persons,

of the provisions of the Statutes of N

the construction, maintenance and u

has permission to Kitchen Renovation, New demonstration

ACT 2 2 2004

The D.

AT 24 Partridge Cir

this department.

m or expectation septing this permit shall comply with all ne and of the sences of the City of Portland regulating of buildings and shaltures, and of the application on file in

228 C007001

Apply to Public Works for street line and grade if nature of work requires such information.

N ication inspect must git and with a permission procuble this to ding or at thereodal and or a closed-in.

H R NOTICE IS REQUIRED.

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

#### OTHER REQUIRED APPROVALS

Fire Dept.

Health Dept.

Appeal Board

Other

Department Name

Director - Building a Inspection Services

PENALTY FOR REMOVING THIS CARD



City of Portland, Ma	ine - Bu	ilding or Use Permit			Permit No:	Date Applied For:	CBL:	
389 Congress Street, 04	101 Tel:	(207) 874-8703, Fax: (	207) 874-87.	16	04-1458	09/29/2004	228	C007001
Location of Construction:		Owner Name:		O.	wner Address:		Phone:	
24 Partridge Cir		Claiborn James M &		2	4 Partridge Cir			
Business Name:		Contractor Name: Co		Contractor Address:				
		Stephen Brann		3	9 South Freeport	Road Freeport	(207)	329-0910
Lessee/Buyer's Name		Phone:		Pe	ernút Type:			
					Single Family			
Proposed Use:			Propo	sed	Project Description:			
Dept: Zoning	Status:	Approved	Reviewe	er:	Tammy Munson	Approval I		10/21/2004
Note:  Dept: Building Note:	Status:	Approved with Condition	s <b>Reviewe</b>	er;	Tammy Munson	Approval I	Date:	10/21/2004 Issue: 🗹
	d on the p	lans submitted and reviewe	ed w/owner/co	ontra	actor, with addition	onal information as a		

2) Separate permits are required for any electrical, plumbing, or heating.

